



## **CHILD PROTECTION AND SAFEGUARDING POLICY**

**This policy should be read in conjunction with the following t+centres policies:**

- Allegations Against Staff Policy
- Anti-bullying Policy
- Behaviour Policy
- Child Sexual Exploitation Policy
- Complaints & Concerns Policy
- Conflict Resolution Policy (Resolving Professional Difficulties) (appendix 6)
- Curriculum Policy
- Missing Pupil Policy
- Online Safety Policy
- Outreach & Outdoor Ed Policy
- PSHE Policy
- Prevent Policy
- Restrictive Physical Intervention (RPI) Policy
- Safe Touch Policy
- Safer Recruitment and Selection Policy
- Staff Handbook (Code of Conduct)
- Extremism & Radicalisation Policy
- Whistleblowing Policy

Further Information on safeguarding and child protection policies and procedures can be accessed through:

**Cornwall & Isles Of Scilly** safeguarding partners - <http://www.safechildren-cios.co.uk/health-and-social-care/childrens-services/cornwall-and-isles-of-scilly-safeguarding-children-partnership/>

**Children Missing Education** - Statutory guidance for local authorities: <https://bit.ly/2wACHXi>  
**South West Child Protection Procedures** - <http://www.proceduresonline.com/swcpp/>

## **t+centres points of contact**

### **Designated Safeguarding Lead (DSL) at Taliesin Education Ltd (t+centres)**

DSL	Carlee Ridpath	01579 342520
Deputy DSL	Barry Coppins	
Deputy DSL	Wes Bell	

### **Single point of contact for all matters relating to the Prevent Agenda:**

First point of contact:	Carlee Ridpath	01579 342520
If not available:	Barry Coppins	

### **Designated Teacher for Children in Care is:**

Barry Coppins	01579 342520
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### **Child Sexual Exploitation Lead is:**

Carlee Ridpath	01579 342520
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### **Named Safeguarding Governor is:**

Alice Morris	07840047096
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Further advice on safeguarding matters in Cornwall and the Isles of Scilly can be obtained from: [www.cornwall.gov.uk/health-and-social-care/childrens-services/child-protection-and-safeguarding](http://www.cornwall.gov.uk/health-and-social-care/childrens-services/child-protection-and-safeguarding)

**First Response Team including LADO advice: 01872 326536**

**Emergency Duty Team: 0333 2401727**  
**(for out of office hours referrals for children and vulnerable adults)**

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## 1. Policy Statement

**1.1** Taliesin Education Ltd (t+centres) is fully committed to safeguarding the welfare of all children and young people. The term 'children' refers to everyone under the age of 18. It recognises its responsibility to take all reasonable steps to promote safe practice and to protect and prevent children from harm, abuse, exploitation and discrimination.

t+centres acknowledges its duty to act appropriately to any allegations, reports or suspicions of abuse or harm.

All t+centres staff and volunteers will endeavour to work together through our policies, practices and procedures to encourage the development of an ethos which embraces difference and diversity and respects the rights of children, young people and adults in its care.

n.b. the term 'must' is used when a person is legally required to do something and 'should' is used when the advice should be followed unless there is a good reason not to.

**1.2** To fulfil their commitment to safeguard and promote the welfare of children and young people, t+centres must have:

- Clear priorities for safeguarding and promoting the welfare of children and young people, explicitly stated in strategic policy documents.
- Arrangements in place to effectively implement the Prevent Strategy and Duty.
- Arrangements in place to comply with statutory and mandatory requirements.
- A clear commitment by senior leadership to the importance of safeguarding and promoting children and young people's welfare.
- A clear line of accountability within the organisation for work on safeguarding and promoting the welfare of children and young people.
- Recruitment and human resources management procedures that take account of the need to safeguard and promote the welfare of children and young people, including arrangements for appropriate checks on all staff and volunteers.
- Procedures for dealing with allegations of abuse against members of staff and volunteers.

**Arrangements to ensure that all staff undertake appropriate training to equip them to carry out their responsibilities effectively, and to keep this up-to-date by refresher training at regular intervals.**

- Procedures to ensure that all staff, including temporary staff, governors and volunteers who work with children and young people, are made aware of the establishment's arrangements for safeguarding and promoting the welfare of children and young people.
- Policies for safeguarding and promoting the welfare of children and young people and procedures that are in accordance with guidance and locally agreed inter-agency procedures.

- Arrangements to work effectively with other organisations to safeguard and promote the welfare of children and young people, including arrangements for sharing information.
- A clear commitment to develop and implement systems that enable children and young people to use online and mobile technology safely and reduce the risks of potentially harmful behaviours.
- A clear commitment to ensure each child or young person is treated fairly, protected and free from discrimination on the grounds of race, religion, gender, age, disability and sexual orientation.
- All staff have a responsibility to provide a safe environment in which children can learn.
- A culture of listening to and engaging in dialogue with children and young people – seeking their views in ways that are appropriate to their age and understanding, and taking account of those views in individual decisions and in the establishment or development of services.
- Definitive whistle-blowing procedures, and a culture that enables issues about safeguarding and promoting the welfare of children and young people to be addressed.

**13** The principles upon which the Safeguarding Policy is based are:

- The welfare of a child or young person will always be paramount.
- The welfare of families will be promoted.
- The rights, wishes and feelings of children, young people and their families will be respected and listened to.
- Keeping children and young people safe from harm requires people who work with children and young people to share information.
- Those people in positions of responsibility within the organisation will work in accordance with the interests of children and young people and follow the policy outlined below.

**14 Contextual safeguarding:** This means assessments of children should consider the wider environmental factors affecting the child's life that may pose a threat to their safety and/or welfare. Schools are encouraged to provide as much contextual information as possible as part of the referral process. See Keeping Children Safe in Education (Sept 2021) for more information.

\*All staff should be aware that safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside of these environments. All staff, but especially the designated safeguarding lead (and deputies) should consider whether children are at risk of abuse or exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation and serious youth violence. Indicators of abuse and neglect (Sept 2021)

**15** This document is written in accordance with Local Safeguarding Children Partnerships' Policies, Safeguarding Vulnerable Groups (2006), Working Together to Safeguard Children

## 2. Introduction

**2.1** t+centres staff fully recognises its primary responsibilities are to protect and safeguard the welfare of children and young people. The school recognises its legal duty under s175 Education Act 2002 (section 157 in relation to independent schools and academies) and the 1989 Children Act and takes seriously its responsibilities to protect and safeguard the interests of all children and young people. This organisation recognises that effective child protection work requires sound procedures, good inter-agency co-operation and a workforce that is competent and confident in reporting and responding to child protection situations.

t+centres recognises and accepts that the school and its staff form part of a wider safeguarding system for children, and that promoting the welfare of children is everyone's responsibility. Everyone who comes into contact with children and their families and carers has a role to play in safeguarding children. In order to fulfil this responsibility effectively, schools and their staff should make sure their approach is child centred, this means that they should consider, at all times, what is in the BEST INTERESTS of the child.

t+centres and its staff do not always have a full picture of a child's needs and circumstances, therefore they have a role and responsibility identifying concerns, sharing information and taking prompt action to provide support and help to children and families at the right time.

**2.2** t+centres adopts the definition of safeguarding used in the Children Act 2004 and in the Department for Education guidance, Keeping Children Safe in Education (Sept 2021) which have a focus on safeguarding and promoting children and young people's welfare. This can be summarised as:

- Protecting children and young people from maltreatment.
- Preventing impairment of children's and young people's mental and physical health or development.
- Ensuring that children and young people are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

This document has regard to the statutory guidance Keeping Children Safe in Education (Sept 2021). The Policy is in keeping with Cornwall & Isles of Scilly Safeguarding Children Partnership's framework and policies, Procedures and Training Strategy and reflects what Cornwall Safeguarding Children's Partnership considers to be safe and professional practice in this context. Child Protection has to be considered within professionals' wider "safeguarding" responsibilities that include a duty to co-operate under the Children Act 2004 and takes account of the need for children to 'be healthy' and 'stay safe'.

**2.3** It is a statutory requirement for all schools to have a safeguarding policy which is published on the relevant website and is made available to parents and carers on request. Parents and carers are made aware through the admission process that the Safeguarding Policy is referenced in the school prospectus.

**24** This Safeguarding Policy applies to t+centres and supports the provision of caring and safe environments in which all children and young people can develop socially, emotionally, physically and educationally and in which all children, young people and staff feel safe, secure and valued. The principles and characteristics of The Equality Act 2010 underpin t+centres' policies, procedures and practices.

**25** Children and young people with special educational needs and disabilities (SEND), can face additional safeguarding challenges. t+centres and its staff should ensure the child protection policy reflects the fact that additional barriers can exist when recognising abuse and neglect in this group of children. t+centres and its staff have responsibility to protect and safeguard the welfare of vulnerable children and young people who, because of their needs, are more at risk of abuse than non-disabled children and young people. Many of the children and young people we educate and care for have lifelong developmental disabilities, complex learning needs and autism. Some will be able to manage everyday activities while others will require a lifetime care and specialist support. To protect and safeguard the welfare of children and young people in our care we need to understand their needs:

The commonly used definition from Department of Health (2001), states that a learning disability meets three criteria:

- a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with;
- a reduced ability to cope independently (impaired social functioning)
- which started before adulthood, with a lasting effect on development.

As mentioned above, autism is another area of difficulty for our children and young people. There are three main areas of difficulty that children and young people with autism share which are sometimes known as the 'triad of impairments', they are:

- Social interaction; difficulty recognising or understanding other people's emotions and feelings and expressing their own, which may make it difficult for them to fit in socially. They may spend time alone, not seeking the company of others and appear to behave inappropriately, as it is not always easy for them to express feelings, emotions or needs.
- Social communication; difficulty with verbal and non-verbal language. Many have a very literal understanding of language, and think people always mean what they say. They find it difficult to use or understand facial expressions or tone of voice, jokes and sarcasm, or common phrases and saying.
- Social imagination; difficulty in understanding and interpreting other people's thoughts and feelings, predict what will happen next, understand the concept of danger, engage in imaginative play and activities or prepare and cope with change.

We therefore have challenges, given the range and complexity of need within our school population, with how we recognise the signs, symptoms and indicators of all aspects of abuse and how we can best protect children and young people's welfare. Children and young people with autism or a learning disability experience communication difficulties, therefore have significant issues expressing their feelings, including disclosures of abuse. We also need to develop a range of strategies that identify the indicators of abuse within our complex population, and support disclosure of abuse.

t+centres and its staff are aware of the potential indicators of abuse, although there is a

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potential risk of staff becoming over familiar with the behaviours a child or young person with autism and learning disabilities presents. This means they may be at risk of failing to recognise a change in behaviour, either new or extension of existing behaviours, and concerns.

Barriers that exist when recognising abuse and neglect in these groups of children and young people include:

- Assumptions that indicators of possible abuse, such as behaviour, mood and injury relate to the child's disability, without further exploration.
- The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying including cyber bullying, without outwardly showing any signs.
- Children and young people with limited communication present challenges and barriers to disclosure.

Strategies to enable disclosure of abuse with children and young people with autism and learning disabilities:

- Staff should be familiar with the child or young person's preferred communication methods and the way their autism and/or learning disability presents, e.g. signs, symbols, social stories and pictorial representation.
- Regular communication with parents/carers to be alert to any changes in behavioural presentation and health concerns.
- Discussions with other key professionals around changes in behaviour and presentation.

**26** This policy shall meet the requirements of the Independent School Standards (Amended) 2019.

## **27 Underpinning Values**

Where there is a safeguarding issue, t+centres will work in accordance with the principles set out in this policy and those outlined in the Cornwall and Isles of Scilly Safeguarding Children Partnership Inter-agency Child Protection procedures:

- A child's welfare is paramount. Each child has a right to be protected from harm and exploitation and to have their welfare safeguarded.
- Each child is unique. Action taken by schools and their staff should always act in the child's BEST interest and should be child-centred, taking account of a child's cultural, ethnic and religious background, their gender, their sexual orientation, their individual ability and any special needs.
- Children, parents and other carers should be made aware of their responsibilities and their rights, together with advice about the power of professionals to intervene in their family circumstances.
- Individual family members must be involved in decisions affecting them. They must be treated with courtesy and respect and with due regard given to working with them in a spirit of partnership in safeguarding children's welfare. However, it may not be appropriate to advise parents/carers immediately about a referral depending on circumstances and the advice given by Children's Social Care. The welfare of the child is paramount in such situations.
- Each child has a right to be consulted about actions taken by others on his/her behalf in

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an age appropriate way. The concerns of children and their families should be listened to and due consideration given to their understanding, wishes and feelings. However, it may not always be possible to respect a child/carer's request for confidentiality. If a child may be at risk of significant harm, there is a duty on the school to share information about the event or incident with the relevant Children's Social Care. If the incident or event has taken place within Cornwall, then Cornwall and the Isles of Scilly safeguarding partners and the pupil's home local authority children's services need to be informed. If the concern relates to a member of school staff, governor or volunteer, Cornwall Local Authority Designated Officer (LADO) needs to be notified. This will be explained to the child or family member and appropriate reassurance given.

- Personal information is usually confidential. It should only be shared with the permission of the individual concerned (and/or those with parental responsibility) unless the disclosure of confidential personal information is necessary in order to protect a child or promote their welfare. In all circumstances, information must be confined to those people directly involved in the professional network of each individual child and on a strict "need to know" basis.
- Professionals should be aware of the effects of outside intervention upon children, upon family life and the impact and implications of what they say and do.
- Explanations by professionals to children, their families and other carers should be plainly stated and jargon-free. Unavoidable technical and professional terminology should be explained in simple terms.
- Sound professional practice is based upon positive inter-agency collaboration, evidence-based research and effective supervision and evaluation.
- Early help assessment and intervention is an overriding principle in providing support for children and young people at risk of abuse. Support services will utilise the Common Assessment Framework Process and if necessary an assessment under Section 17 of the Children Act (1989). This is an important principle of practice in inter-agency arrangements for safeguarding the welfare of children and young people.

### 3. Roles and Responsibilities

**3.1** All staff working at t+centres have a statutory duty and shared responsibility to safeguard and protect the welfare of children and young people.

**3.2 The Principal of Taliesin Education Ltd** (Alice Morris), has responsibility for:

- Ensuring t+centres operates and practices in line with the organisation's safeguarding policies and procedures that comply with Cornwall and Isles of Scilly safeguarding partners arrangements.
- Providing the necessary support and resources to ensure t+centres keeps children and young people safe, through at least good standards of care and education.
- Reporting on a monthly basis an overview of safeguarding concerns and issues, actions taken and any potential implications for future practice.
- Organising an annual safeguarding audit (next: **April 2022**), with the Designated

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Safeguarding Lead (DSL) and Deputies, and ensuring recommendations have been effectively implemented through monthly monitoring visits.

- Providing support and resources to the staff involved in managing safeguarding issues, as the organisation acknowledges how stressful safeguarding situations are e.g. providing additional staffing or therapy if required.
- Reviewing the organisation's Safeguarding Policy annually, next review date **April 2022**.
- The DSL has designated Deputy DSLs, who is a member of the Senior Leadership Team.
- Within the Governance process, there are procedures that monitor the school's systems to safeguard children who go missing from school on a repeated basis and those at risk of abuse and sexual exploitation. Governors monitor these issues, and ensure t+centres takes appropriate action, on a regular basis.
- To ensure school policy and procedures comply with The New Common Inspection Framework September 2015 and the Independent School Standards 2014.

**33** If there is a concern or allegation against the Head Teacher, the staff should inform Alice Morris – (Safeguarding Governor). If there is a concern or allegation against Alice Morris the concern should be raised with DSL Carlee Ridpath, DDSL Barry Coppins, DDSL Wesley Bell, or Local Authority Designated Officer (LADO).

**34** The Principal and Head of Centre have responsibility for ensuring:

- The organisation's safeguarding policies and procedures are effectively embedded in the culture of the school and are compliant with Cornwall and the Isles of Scilly safeguarding partners procedures and relevant legislation e.g. Working Together to Safeguard Children (August 2018) and Keeping Children Safe in Education (Sept 2021).
- The school delivers a curriculum which promotes the prevention of and protection from child abuse or harm, for example ensuring children are taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum. This may include covering relevant issues through PSHE and through sex and relationship education (SRE).
- Policies and procedures are in place to protect children from harm on work experience placements.
- There is a Designated Safeguarding Lead on the Senior Leadership Team, with the appropriate training and time and support to fulfil their role and responsibilities.
- There is at least two trained Deputy DSL.
- All staff and volunteers are trained, and receive regular updates in the definitions and signs of abuse, and are conversant with their safeguarding duties, and have sound knowledge of the referral process and always act in the BEST INTERESTS of the child.
- There is a designated manager of allegations against staff, normally a member of the Senior Leadership Team and that they implement the procedures within the Allegations against Staff Policy.
- Confidentiality protocols are respected and that information is shared with the relevant agencies and personnel.
- Safeguarding practices and procedures, prevent, protect and support children and young people from the risks of harm and potential abuse.

- Any child or young person who has been subject to harm or abuse receives the support required, including hospital treatment.
- The staff, including agency staff and volunteers, are aware of who the Local Authority Designated Officer (LADO) is.

**3.5 The Designated Safeguarding Lead (DSL)** is responsible for:

*(The DSL should be a member of the senior leadership team, and should take lead responsibility for safeguarding.)*

- Ensuring that they, or a Deputy, is always be available to staff during school hours in term time.
- Ensuring that Deputy DSLs are trained to the same level as the DSL and the role should be explicit in their job description.
- Ensuring that the DSL retains overall responsibility for safeguarding even when the activities associated with the role are delegated to Deputies.
- Ensuring that the LADO for Cornwall and the Isles of Scilly safeguarding partners is informed of any allegations about staff members or other persons in a professional role at the earliest opportunity. Cornwall and the Isles of Scilly are contactable on 01872 326536, or by email: Justine Hosking Principal LADO ([jhosking@cornwall.gov.uk](mailto:jhosking@cornwall.gov.uk)) and Kate Evan- Hughes- Service Director- Education ([kate.Evan-Hughes@cornwall.gov.uk](mailto:kate.Evan-Hughes@cornwall.gov.uk))
- Ensuring that children and young people who are at risk of harm or who have been potentially abused are immediately protected and safe from harm or abuse (DSL to reinforce with all staff the difference between a concern and immediate danger or risk of harm).
- Ensuring they have details of the child's social worker and the name of the virtual school head in the authority that looks after the child.
- Referring cases of suspected abuse to the relevant local Children's Services team.
- Referring allegations against professional staff and volunteers to the LADO.
- Referring cases to the Channel programme where there is a radicalisation concern.
- Referring cases where a person is dismissed or has left due to risk/harm to a child to the Disclosure and Barring Service as required; and refer cases where a crime may have been committed to the Police as required.
- Contacting the relevant local Children's Services team if the concerns or alleged abuse relate to the child or young person's home life. At the point of referral, the DSL should seek advice with regards contacting parents/carers.
- Ensuring the school does not take any further action without first consulting the relevant Children's Services team.
- Providing a full written record of the referral and accurate chronology (Appendix 2, Chronology and Record of Events Form) outlining communication and actions taken to the local area Children's Services team within 24 hours.
- Ensuring all records are maintained confidentially, securely and separately from other children and young person's records. Access to the confidential records is restricted to the DSL/DDSLs.
- Providing support and guidance to staff on safeguarding issues.

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- Ensuring the DSL or a Deputy DSL attends case conferences, CORE groups or other multi-agency planning meetings, contributes to assessments and provides a report that has been shared with the parents.
- Liaising with other agencies and professionals.
  - **Cornwall & Isles of Scilly Safeguarding Children Partnership - Multi-agency Referral Unit (MARU): 0300 123 1116**  
**Out of Hours Service: 01208 251300**

For further information and guidance on the role of DSL please refer to Annex B in Keeping Children Safe in Education (Sept 2021).

The DSL and Deputies are most likely to have a complete safeguarding picture and will be the most appropriate individuals to advise on any safeguarding concerns.

### **3.6 All Staff** at t+centres are responsible for:

- Supporting and delivering a curriculum which promotes the prevention of and protection from child abuse or harm.
- Supporting the school in providing an atmosphere and ethos in which pupils feel secure and are encouraged to talk and be listened to.
- Listening to any child who approaches them wishing to share worries and concerns and to act in their best interests.
- Being prepared to identify children who may benefit from early help, this means providing support as soon as a problem emerges.
- Being able to support other professionals in an early help assessment and interventions.
- Being supportive of children and young people, while helping them understand that they cannot guarantee absolute confidentiality.
- Being alert to any signs of abuse or harm in the children and young people they have contact with.
  - **Immediately reporting any nagging doubts both orally and in writing (see Appendix 1a, Nagging Doubt) to the lead DSL Carlee Ridpath or in her absence the Deputy DSL Barry Coppins, or Deputy DSL Wesley Bell.**
  - **Serious concerns should immediately be reported both orally and in writing to the lead DSL Carlee Ridpath, in her absence DDSL Barry Coppins or DDSL Wesley Bell, or direct to Cornwall & Isles of Scilly Safeguarding Children Partnership 0300 123 1116 (see Appendix 1b, Serious Concerns).**
- Understanding that individual staff with concerns may refer to the local children's services directly.
- Taking part in safeguarding training provided by the school on child protection and specific safeguarding issues identified in Keeping Children Safe in Education (Sept 2021).
- Understanding and practising the school's safeguarding procedures.
- Having an awareness of safeguarding issues – some of which are listed below. Staff should be aware that behaviours linked to the likes of drug taking, alcohol abuse, absconding and sexting put children in danger.
- Being aware that safeguarding issues can manifest themselves via peer-on-peer abuse. This is most likely to include, but not limited to: bullying (including cyber bullying), gender based violence, sexual assaults/violence, sexual harassment, and sexting. Staff should be clear as to t+centres' policy and procedures re peer-on-peer abuse.

**3.7** Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example, information for schools can be found on the TES, MindEd and the NSPCC websites. Staff can access government guidance as required on the issues; see Annex A of Keeping Children Safe in Education (Sept 2021).

**For further safeguarding information and guidance for staff please refer to Part One in Keeping Children Safe in Education (Sept 2021).**

## **4. Definitions and Signs of Abuse**

### **4.1 What is child abuse?**

Child abuse is a form of maltreatment of a child or young person. Somebody may abuse or neglect a child or young person by inflicting harm or by failing to act to prevent harm. Children or young people may be abused in a family or institutional or community setting by those known to them, or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

There are four broad categories of child abuse (Appendix 3, Signs of Abuse).

1. Physical abuse
2. Emotional abuse
3. Sexual abuse
4. Neglect

All school staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases multiple issues will overlap with one another.

#### **\*Domestic abuse:**

t+centres and their staff recognise that domestic abuse in any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to; psychological, physical; sexual; financial and emotional.

t+centres and their staff recognise that, all children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Exposure to domestic abuse and/or violence can have a serious, long lasting emotional a psychological impact on children. In some cases a child may blame themselves for the abuse or may have had to leave the family home.

### **4.2 General signs of abuse:**

Abused children may be afraid to tell anybody about the abuse. They may struggle with feelings of guilt, shame or confusion – particularly if the abuser is a parent, caregiver or other close family member or friend. Anyone working with children or young people needs to be vigilant to the signs listed below.

**Whilst these signs do not necessarily mean that a child is being abused, they probably indicate that the child or family is having some problems which should be investigated.**

- Regularly experiencing nightmares or sleeping problems
- Changes in personality
- Outbursts of anger
- Changes in eating habits
- Showing an inexplicable fear of particular places or making excuses to avoid particular people
- Self-harming (includes head banging, scratching, cutting)
- Not receiving adequate medical attention after injuries
- Showing violence to animals, toys, peers or adults
- Knowledge of "adult issues" e.g. alcohol, drugs, sexual behaviour
- Lacking in confidence or often wary/anxious
- Regressing to the behaviour of younger children
- Regular flinching in response to sudden but harmless actions, e.g. someone raising a hand quickly

**4.3. Physical abuse:** a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

**Signs and symptoms of physical abuse:** It is normal for children to have cuts and bruises on their bodies caused by accidents which happen whilst they are moving about and/or playing. These are marks that have an acceptable and reasonable explanation.

Marks or injuries which do not have an acceptable explanation may indicate that a child has been abused. This may include:

Bruising:

- Bruises on the cheeks, ears, palms, arms and feet
- Bruises on the back, buttocks, tummy, hips and backs of legs
- Multiple bruises in clusters, usually on the upper arms or outer thighs
- Bruising which looks like it has been caused by fingers, a hand, or an object i.e. belt, shoe
- Large oval shaped bite marks

Burns or scalds:

- Any burns which have a clear shape of an object, e.g. cigarette burns
- Burns to the backs of hands, feet, legs, genitals, or buttocks

Other signs of physical abuse include multiple injuries (i.e. bruising, fractures) inflicted at different times. It is particularly concerning if parents/carers are unable to explain these injuries and it is not clear whether they took the child to receive medical treatment at the time of the injury.

Be vigilant to possible abuse if a child is frequently described as ill by their parent but does not have any symptoms which are obvious to others. In addition, the parent will be unable to provide details of a medical diagnosis for the child's apparent condition.

**44 Emotional abuse:** the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying\*), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

\*cyberbullying is a growing problem and includes:

- Sending threatening or disturbing text messages
- Homophobia, racism or sexism
- Making silent, hoax or abusive calls
- Creating and sharing embarrassing images or videos
- 'Trolling', the sending of menacing or upsetting messages on social networks, chat rooms or online games
- Excluding children from online games, activities or friendship groups
- Setting up hate sites or groups about a particular child
- Encouraging young people to self-harm
- Voting for someone in an abusive poll
- Hijacking or stealing online identities to embarrass a young person or cause trouble using their name
- Sending 'sexts' to pressure a child into sending images or other activity
- \*'upskirting' – which is now a criminal offence. ( The Voyeurism (Offences) Act came into force on 12<sup>th</sup> April 2019. 'upskirting' is where someone takes a picture under a persons clothing (not necessarily a skirt) without their permission or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress or alarm. It is a criminal offence. Anyone can be a victim.

**Signs and symptoms of emotional abuse:** It is important to remember that some children are naturally open and affectionate whilst others are quieter and more self-contained. Children also develop at different rates from one another and some may be slightly more or less advanced than other children in their age group. Mood swings and challenging behaviour are also a normal part of growing up for teenagers and children going through puberty. Be alert to behaviours which appear to be out of character for the individual child.

The following signs may indicate emotional abuse:

- Inappropriate knowledge of 'adult' matters such as sex, alcohol and drugs
- Extreme emotional outbursts
- Very low self-esteem, often with an inability to accept praise or to trust
- Lack of any sense of fun, over-serious or apathetic
- Excessive clingy or attention seeking behaviour
- Over-anxiety, either watchful and constantly checking or over-anxious to please

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- Developmental delay, especially in speech
- Substantial failure to reach potential in learning, linked with lack of confidence, poor concentration and lack of pride in achievement
- Self-harming, compulsive rituals, stereotypic repetitive behaviour
- Unusual pattern of response to others showing emotions

**45 Sexual abuse:** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

**Signs and symptoms of sexual abuse:** Sexual abuse often presents itself in a veiled way. Although some child victims have obvious genital injuries, a sexually transmitted disease or are pregnant, relatively few show such obvious signs.

Recognition of sexual abuse generally follows either a direct statement from the child (or very occasionally from the abuser), or more often, suspicion based on the child's circumstances, behaviour, or physical symptoms or signs.

The following list of commonly observed indicators is not exhaustive and there may be situations where none of them is present, even though a child is known to have been abused sexually. Equally, even if some are present it may also not be definitive of sexual abuse. These physical signs should alert professionals to the possibility of abuse. Suspicion increases where several features are present together.

### **Physical manifestations:**

- Sexually transmitted diseases
- Pregnancy (especially in younger girls or when identity of father is uncertain)
- Genital lacerations or bruising
- Vaginal bleeding in prepubescent girls
- Abnormal dilation of vagina, anus or urethra
- Additional physical signs

Although these signs are not on their own indicative of sexual abuse, they include:

- Itching, redness, soreness
- Unexplained bleeding from vagina or anus
- Daytime wetting
- Faecal soiling or retention

### **Emotional and behavioural manifestations**

Behaviour with sexual overtones (depending on age and understanding):

- Explicit or frequent sexual preoccupation in talk and play
- Sexual relationships with adults or other children
- Hinting at sexual activity or secrets through words, play or drawings

**Children may also behave in the following ways:**

- Withdrawn, fearful or aggressive behaviour to peers or adults
- Running away from home
- Suicide attempts and self-mutilation
- Child psychiatric problems, including behaviour problems, withdrawal from social contact, onset of wetting or soiling when previously dry and clean, severe sleep disturbances, arson (fire setting)
- Learning problems which do not match intellectual ability, or poor concentration (NB: for some sexually abused children, school may be a haven – they will arrive early, are reluctant to leave and perform well)
- Marked reluctance to participate in physical activity or to change clothes for PE, etc.

**Neglect:** the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

**Signs and symptoms of neglect:** It is important to remember that some children are very picky eaters whilst others may refuse to wear a coat regardless of how cold it is outside. A child may also appear to be underweight, but is, in fact, naturally thin.

Some of the most obvious signs of neglect (e.g. children being thin, dirty or not wearing a coat) are not in themselves indicators of abuse. However, if, over time, it is clear that a child is not receiving an adequate level of care and supervision appropriate to their age, it may indicate that the child is being neglected. The following are general and age-specific signs of neglect:

Further Signs of Neglect: **Hygiene:** Poor hygiene, frequently smelly or dirty and regularly have dirty and unwashed clothing

### **Health**

- Untreated health and dental problems
- Poor muscle tone and prominent joints
- Poor skin; sores, rashes, flea bites, scabies and ringworm
- Thin swollen tummy
- Injuries caused by accidents, e.g. cuts or burns becoming infected
- Anaemia
- Incontinence
- Faltering growth and not reaching developmental milestones. Recurring illness or infections

### **Nutrition**

- Often hungry
- No breakfast

### **Development**

- Being tired
- Withdrawn and unhappy
- Anxious and avoiding people
- Difficulty making friends
- Poor language and communication skills
- Poor social skills
- Missing school

### **\*4.7 Definition of Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE):**

Centres and their staff acknowledge and understand that:

Both CSE and CCE are forms of abuse and occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status and access to economic or other resources. In some cases, the abuse will be in exchange for something the victim needs or wants and/or will be to the financial benefit or other advantage (such as increased status) of the perpetrator or facilitator. The abuse can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse. It can involve force and/or enticement-based methods of compliance and may, or may not be accompanied by violence or threats of violence. Victims can be exploited even when activity appears consensual and it should be noted exploitation as well as being physical can be facilitated and/or take place on line.

**\*Child Criminal Exploitation(CCE)** – is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity :

- a. In exchange for something the victim needs or wants and/or
- b. For financial or other advantage of the perpetrator or facilitator and/or
- c. Through violence or the threat of violence.

The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can occur through the use of technology. CCE can include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country (County lines) forced to shoplift or pickpocket, or to threaten other young people.

### **Indicators of CCE:**

- Children who appear with unexplained gifts or new possessions
- Children who associate with other young people involved in exploitation
- Children who suffer from changes in emotional well-being
- Children who misuse drugs and alcohol
- Children who go missing for periods of time or regularly come home late

- Children who regularly miss school or education or do not take part in education.

### **\*Child Sexual Exploitation (CSE)**

CSE occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity:

- a. In exchange for something the victim needs or wants, and/or
  - b. For financial advantage or increased status of the perpetrator or facilitator.
- The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology. CSE can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person's immediate knowledge (e.g. through others copying videos or images they have created and posed on social media)

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships, where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts money) as a result of them performing, and/or another or others performing on them sexual activities. Child exploitation can occur through the use of technology without the child's immediate recognition; for example, being persuaded to post sexual images on the internet/mobile phone without immediate payment or gain. In all cases, those exploiting the child/young person will have more power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the children and young person's limited availability of choice resulting from their social/economic and/or emotion vulnerability.'

Further information and guidance please refer to Child Sexual Exploitation (2016) and Child Sexual Exploitation: Definition and Guidance for Practitioners (DfE Feb 2017).

**Signs and symptoms of Child Sexual Exploitation:** Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber bullying and grooming. It is important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse and some do not recognise that they are being exploited. However, there are a number of tell-tale signs that the child may be being groomed for sexual exploitation.

These include:

- Going missing for periods of time or regularly returning home late
- Regularly missing school or not taking part in education
- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Having older boyfriends or girlfriends
- Suffering from sexually transmitted infection or become pregnant
- Mood swings or changes in emotional well-being
- Drug and alcohol misuse
- Displaying inappropriate sexualised behaviour

**\*t+centres and their staff acknowledge and understand that CCE indicators can also be indicators of CSE, as can**

- **Children who have older boyfriends or girlfriends; and**
- **Children who suffer from sexually transmitted infections or become pregnant.**

**\*County Lines:**

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs (primarily crack cocaine and heroin) into one or more importing areas (within the UK), using dedicated mobile phone lines or other form of “deal line”.

Exploitation is an integral part of the county lines offending model with children and vulnerable adults exploited to move (and store) drugs and money. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including schools, pupil referral units, special educational needs schools, children’s homes and care homes. Children are often recruited to move drugs and money between locations and are known to be exposed to techniques such as “plugging”, where drugs are concealed internally to avoid detection. Children can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

One of the ways of identifying potential involvement in county lines are missing episodes (both from home and school), when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism should be considered. If a child is suspected to be at risk of or involved in county lines, a safeguarding referral should be considered alongside consideration of availability of local services/third sector providers who offer support to victims of county lines exploitation.

**Child victims of trafficking**

Trafficking of children is a form of human trafficking which means the recruitment, transportation, transfer, harbouring, and/or receipt of a child by means of a threat or use of force or other forms of coercion for the purposes of exploitation.

Trafficking specifically targets the child as an object of exploitation; the child may be unaware of their fate:

Reasons for trafficking children:

- Sexual exploitation
- Domestic servitude
- Sweatshop, restaurant and other catering work
- Agricultural labour, including tending plants in illegal cannabis farms
- Benefit fraud
- Involvement in petty criminal activity
- Organ harvesting
- Drug mules, drug dealing or decoys for adult drug traffickers
- Illegal inter-country adoption

It is possible that unaccompanied asylum seeking children (UASC) may have been trafficked into the UK and are likely to remain under the influence of their traffickers, even whilst they are looked after.

Any child who has been a victim of trafficking will have a risk assessment setting out how the child will be protected from any trafficker, to minimise any risk of traffickers being able to re-involve a child in exploitative activities. This plan should include contingency plans to be followed if the young person goes missing.

**Signs that a child may be trafficked include:**

- Is withdrawn and refuses to talk or appears afraid to talk to a person in authority
- Does not appear to have money but does have a mobile phone
- Possession of large amounts of money or expensive belongings with no plausible explanation
- Receives unexplained/unidentified phone calls whilst in placement
- Has a history with missing links and unexplained moves

**Grooming**

Grooming can happen in person, online and in gangs or groups.

Once they have established trust, groomers will exploit the relationship by isolating the child from friends or family and making the child feel dependent on them. They will use any means of power or control to make a child believe they have no choice but to do what they want.

Groomers may introduce 'secrets' as a way to control or frighten the child. Sometimes they will blackmail the child, or make them feel ashamed or guilty, to stop them telling anyone about the abuse.

Groomers can use social media sites, instant messaging apps including teen dating apps, or online gaming platforms to connect with a young person or child.

They can spend time learning about a young person's interests from their online profiles and then use this knowledge to help them build up a relationship.

It's easy for groomers to hide their identity online - they may pretend to be a child and then chat and become 'friends' with children they are targeting.

Groomers may look for:

- usernames or comments that are flirtatious or have a sexual meaning
- public comments that suggest a child has low self-esteem or is vulnerable

Groomers don't always target a particular child. Sometimes they will send messages to hundreds of young people and wait to see who responds.

Groomers no longer need to meet children in real life to abuse them. Increasingly, groomers are sexually exploiting their victims by persuading them to take part in online sexual activity.

Groomers may be male or female. They could be any age.

Many children and young people don't understand that they have been groomed, or that what has happened is abuse.

Grooming can be more than just one single person, it can happen in gangs or groups of people who are of both the same, and different, age, ethnicity, religion and social backgrounds.

For further guidance please refer to [www.nspcc.org.uk](http://www.nspcc.org.uk)

#### **4.8 Honour Based abuse including Female Genital Mutilation and Forced Marriage**

So-called 'honour-based' violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt, staff should speak to the Designated Safeguarding Lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

Female genital mutilation (FGM) is the partial or total removal of external female genitalia or other injury to the female genital organs for non-medical reasons. It's also known as female circumcision, cutting or Sunna.

Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and has been a criminal offence in the UK since 1985. In 2003, it also became a criminal offence for UK nationals or permanent UK residents to take their child abroad to have female genital mutilation. Anyone found guilty of the offence faces a maximum penalty of 14 years in prison.

There are no medical reasons to carry out FGM. It doesn't enhance fertility and it doesn't make childbirth safer. It is used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health.

FGM is a hidden crime, so we don't know exactly how common it is. Even partial removal or 'nipping' can risk serious health problems for girls and women.

FGM is usually performed by someone with no medical training. Girls are given no anaesthetic, no antiseptic treatment and are often forcibly restrained. The cutting is made using instruments such as a knife, pair of scissors, scalpel, glass or razor blade.

Girls are more at risk if FGM has been carried out on their mother, sister or a member of their extended family.

A girl at immediate risk of FGM may not know what's going to happen. But she might talk about:

- being taken 'home' to visit family
- a special occasion to 'become a woman'
- an older female relative visiting the UK

She may ask a teacher or another adult for help if she suspects FGM is going to happen or she may run away from home or miss school.

A girl or woman who has had FGM may:

- have difficulty walking, sitting or standing

- spend longer than normal in the bathroom or toilet
- have unusual behaviour after an absence from school or college
- be particularly reluctant to undergo normal medical examinations
- ask for help, but may not be explicit about the problem due to embarrassment or fear

FGM can be extremely painful and dangerous. It can cause:

- severe pain
- shock
- bleeding
- infection such as tetanus, HIV and hepatitis B and C
- organ damage
- blood loss and infections that can cause death in some cases

### **Long-term effects**

Girls and women who have had FGM may have problems that continue through adulthood, including:

- difficulties urinating or incontinence
- frequent or chronic vaginal, pelvic or urinary infections
- menstrual problems
- kidney damage and possible failure
- cysts and abscesses
- pain when having sex
- infertility
- complications during pregnancy and childbirth
- emotional and mental health problems

FGM helpline – 0808 028 3550

- t+centres is an 'open environment', where children and young people feel able to discuss issues that they may be facing;
- The Designated Safeguarding Leads are aware of the issues surrounding FGM and Forced Marriage.
- Advice and signposting is available for accessing additional help, e.g. the NSPCC's helpline, ChildLine services, Forced Marriage Unit;
- Awareness raising about FGM is incorporated in the school's safeguarding training.

Staff with teaching responsibilities have **a specific legal duty to act** with regards to concerns about female genital mutilation (FGM), but all staff should speak to the DSL where there are concerns. Staff are advised:

- To alert the Designated Safeguarding Lead to their concerns. This member of staff will then refer concerns to children's social care, who will inform the police. If a pupil has disclosed that they are at risk in this way, the case will still be referred to social care even if it is against the pupil's wishes. Where a staff member discovers that an act of FGM appears to have been carried out on a girl who is aged under 18, there will be a statutory duty for it to be reported to the police.
- Not to consult or discuss with the pupil's parents or family, or others within the community.

Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of girls being at risk from FGM, or already having suffered from FGM.

There is a range of potential indicators that a girl may be at risk of FGM. Warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 16-17 of the Multi-Agency Practice Guidelines and chapter 9 of those guidelines (p42-44) focuses on the role of schools and colleges.

Section 5C of the Female Genital Mutilation Act 2003 (as inserted by section 75 of the Serious Crime Act 2015) gives Government powers to issue statutory guidance on FGM to relevant persons.

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) will place statutory duty upon staff, along with social workers and healthcare professionals, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions.

If a teacher, in the course of their work in the profession, discovers that an act of FGM appears to have been carried out on a girl under the age of 18 the teacher must report this to the police.

For further information, see Annex A in Keeping Children Safe in Education (Sept 2020).

#### **4.9 Vulnerable to extremism and radicalisation**

Extremism and radicalisation is another part of safeguarding children and young people. As with any concern, the risk of harm and abuse is raised when young people are vulnerable and is often noticed when children and young people change their behaviour, clothing or attitudes. One aspect of safeguarding children and young people from radicalisation is set out in 'Promoting fundamental British values as part of SMSC in schools'. This guidance sets out British values as:

- Democracy
- The rule of law
- Individual liberty
- Mutual respect
- The tolerance of those with different faiths and values

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and which specific needs for which an extremist or terrorist group may appear to provide and answer. The internet and the use of social media in particular has become a major factor in the radicalisation of young people.

As with managing other safeguarding risks, staff should be alert to changes in children's behaviours which could indicate that they may be in need of help or protection. Staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately, which may include making a referral to the Channel programme.

**Channel** is a voluntary, confidential support programme which focuses on providing support and an early stage to people who are identified as being vulnerable to being drawn into terrorism. Prevent referrals can be passed to a multi-agency Channel panel, which will discuss the individual referred to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support required. t+centres and their staff recognises that an individual's engagement with the programme is entirely voluntary at all stages.

More guidance is available at:

[Channel guidance](#)

[prevent duty](#)

[Prevent awareness e-learning](#)

[Prevent referrals e-learning](#)

[Channel awareness e-learning](#)

[Educate Against Hate](#)

The Government Prevent Strategy is the approach to reducing the risk of terrorism, this is called 'CONTEST' and has four parts:

- **Protect;** to strengthen protection against a terrorist attack
- **Prepare;** to mitigate the impact of an attack
- **Pursue;** to stop terrorist attacks
- **Prevent;** to stop people becoming terrorists or supporting terrorism

#### **Definition of terrorism:**

Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. Calls for the death of members of the British armed forces are also included in this definition.

From July 1 2015, specified authorities, including all schools, are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, in the exercise of their functions, to have "due regard" to the need to prevent people from being drawn into terrorism. This duty is known as the Prevent duty. It applies to a wide range of public-facing bodies. Bodies to which the duty applies **MUST HAVE REGARD TO STATUTORY GUIDANCE ISSUES UNDER SECTION 29 OF THE CTSA 2015** (the Prevent guidance) Paragraphs 57-76 of the Prevent guidance are concerned specifically with schools.

Extremism takes many forms and all ideologies are included in this area of safeguarding:

- Islamic extremism
- Left wing extremism
- Right wing extremism
- Animal rights extremism

The statutory Prevent guidance summarises the requirements on schools in terms of four general themes: risk assessment, working in partnership, staff training and IT policies.

- t+centres is expected to assess the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. This means being able to demonstrate both a general understanding of the risks affecting children and young

## Safeguarding Policy

people in the area and a specific understanding of how to identify individual children who may be at risk of radicalisation. These procedures may be set out in existing safeguarding policies on implementing the Prevent duty.

- The Prevent duty builds on existing local partnership arrangements. For example, governing bodies and proprietors of all schools should ensure that their safeguarding arrangements take into account the policies and procedures of Local Safeguarding Children Partnership (safeguarding partners).
- The Prevent guidance refers to the importance of Prevent awareness training to equip staff to identify children at risk of being drawn into terrorism and to challenge extremist ideas. Individual schools are best to assess the training needs of staff in the light of their assessment of the risk to pupils at the school of being drawn into terrorism. As a minimum however, schools should ensure that the DSL undertakes Prevent awareness training and is able to provide advice and support to other members of staff on protecting children from the risk of radicalisation.
- t+centres must ensure that children are safe from terrorist and extremist material when accessing the internet in schools. Schools should ensure that suitable filtering is in place. It is also important that schools teach pupils about online safety more generally.

The Department for Education has also published advice for schools on the Prevent duty. The advice is intended to complement the Prevent Guidance and signposts other sources of advice and support.

Staff should understand when it is appropriate to make a referral to the Channel Programme. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

Section 36 of the CTSA 2015 places duty on local authorities to ensure Channel panels are in place. The panel must be chaired by the local authority and include the police for the relevant local authority area. Following a referral, the panel will assess the extent to which identified individuals are vulnerable to being drawn into terrorism, and, where considered appropriate and necessary, consent is obtained, arrange for support to be provided to those individuals. Section 38 of the CTSA 2015 requires partners of Channel panels to co-operate with the panel in the carrying out of its functions and with the police in providing information about a referred individual. Schools and colleges which are required to have regard to Keeping Children Safe in Education (Sept 2020) are listed in the Counter-Terrorism and Security Act 2015 as partners to co-operate with local Channel panels.

### **Indicators of vulnerability (signs and symptoms) include:**

#### **Identity**

- Children and young people distanced from their cultural/religious heritage and experiences
- Discomfort about their place in society
- Personal crises; the children and young people may be experiencing family tensions
- A sense of isolation
- Low self-esteem
- They may be disassociated from their existing friendship group and become involved with a new and different group of friends

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- They may be searching for answers to questions about their identity, faith and belonging

#### Personal Circumstances

- Migration
- Local community tensions and events affecting the child/young person's country of origin may contribute to a sense of grievance that is triggered by a personal experience of racism or discrimination or aspects of Government policy

#### Unmet Aspirations

- children and young people may have perceptions of injustice
- A feeling of failure
- Rejection of civic life

#### Experiences of Criminality

- Involvement with criminal groups
- Imprisonment and poor resettlement/reintegration on release

#### Special Educational Needs

- Social interaction
- Empathy with others
- Understanding the consequences of their actions; and awareness of the motivation of others

#### More critical risk factors could include:

- Being in contact with extremist recruiters
- Accessing violent extremist websites, especially those with a social networking element
- Possessing or accessing violent extremist literature
- Using extremist narratives and a global ideology to explain personal disadvantage
- Justifying the use of violence to solve societal issues
- Joining or seeking to join extremist organisations
- Significant changes to appearance and/or behaviour
- Experiencing a high level of social isolation, resulting in issues of identity crises and/or personal crises

#### De-radicalisation

- All-inclusive ethos
- Create doubt or disillusionment
- Question ideas
- Safe discussions
- Range of views

4.10 **Bullying** (including cyber-bullying): t+centres Anti-Bullying Policy and procedures and Online Safety Policy.

Bullying occurs when a person or group of people behave in ways which are designed to cause distress or to hurt a person or group of people. Bullying can be overt and plain for all to see or can be subtle and insidious. It can take many forms, but the three main types are:

- Physical – e.g. hitting, kicking, theft
- Verbal – e.g. racist or homophobic remarks, threats, name calling
- Psychological – e.g. excluding from social groups and activities, spreading hurtful rumours

#### 4.11 Child criminal exploitation

- Staff should be aware of this widespread form of harm that is a “typical feature of county lines criminal activity”. This refers to drug networks or gangs grooming and exploiting children to carry drugs and money from urban areas to suburban areas, rural areas and market and seaside towns.
- Keeping Children Safe in Education states that the key to identifying potential involvement in county lines is “missing episodes” – where the victim may have been trafficked for the purpose of transporting drugs. In such cases, a referral to the National Referral Mechanism should be considered.

#### 4.12 Allegations of abuse made by other children

- t+centres and staff should recognise that children are capable of abusing their peers. t+centres should ensure their child protection policy includes procedures to minimise the risk of peer-on-peer abuse and sets out how allegations of peer-on-peer abuse will be investigated and dealt with. The policy should reflect the different forms peer-on-peer abuse can take, make clear that abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up”. It should be clear as to how victims of peer-on-peer abuse will be supported.
- Peer-on-peer abuse can manifest itself in many ways. The UK Council for Child Internet Safety (UKCCIS) Education Group has recently published sexting advice for schools.
- t+centres and staff should be vigilant and aware of potential of peer on peer abuse both in day and residential settings. Reporting and recording of these incidents are essential in the continuing protection of all children and young people in our care.

## 5. Safeguarding Referral Procedure

**5.1** If staff have any concerns about a child’s welfare, the guidance emphasises that they should act on them **immediately**. The first steps to be taken should a member of staff have reasonable cause to suspect that a **child or young person is suffering or is likely to suffer significant harm is to ensure the immediate safety of that child or young person and others who may be judged to be at risk of abuse.**

Consultation must take place with the Designated Safeguarding Lead (or named deputy) who will be the most appropriate person to initiate any referral, or the member of staff may make a referral directly to Cornwall and the Isles of Scilly safeguarding partners First Response Team.

Staff should only involve those who need to be involved when a child tells them he/she is being abused or neglected.

- **A written record of nagging doubts should be made using the schools internal recording form. (Appendix 1a Nagging Doubt form) This should then be given to the Designated Safeguarding Lead (or a Deputy, if DSL unavailable) who will then make the decision whether a referral is needed to the Cornwall and Isles of Scilly safeguarding partners Multi Agency Referral Unit (MARU) (0300 1231 116 or out of hours: 01208 251300) or equivalent other Local Children’s Services Care team, or**

**the child's existing social worker. If the child lives in an authority outside of Cornwall, the matter will be referred by the DSL to the relevant Children's Social Care team in that area.**

- **If a member of staff has serious concerns or that a child is at significant risk of harm they must immediately inform lead DSL Carlee Ridpath, or in her absence the DDSL Barry Coppins or DDSL Wes Bell, or inform Cornwall and the Isles of Scilly safeguarding partners (0300 1231 116 or out of hours: 01208 251300) They should also complete school's Serious Concerns Form (Appendix 1b).**

**5.2 Disclosure/Allegation:** The person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred and should not conduct an investigation to establish whether the child is telling the truth. The role of the person to whom a child makes a disclosure or allegation is to act promptly on the information they have received by following identified procedure below and immediately informing the DSL. The Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information is shared appropriately.

**5.3** If a child makes a disclosure or allegation (see Appendix 4, Do's and Don'ts of Managing a Disclosure) you should:

- Stay calm and listen carefully to what is said. You do not need a 'witness'.
- Carefully explain that it is likely that the information will need to be shared with others –do not promise to keep secrets.
- Allow the child to continue at her/his own pace and do not interrupt if they are freely recalling events.
- Ask questions for clarification only, and at all times avoid asking questions that suggest a particular answer. Questions should be framed in an open manner and not 'lead' the child in any way. For example, say, "Tell me what has happened", rather than, "Did s/he do...".
- Reassure the child that s/he has done the right thing in telling you. Explain what you will do next and with whom the information will be shared.
- Do not ask the child to repeat the disclosure to anyone else in school or ask him/her to write a 'statement'.
- Contact your DSL as soon as you can or, where such contact is not possible, ensure a referral is made without delay to the local children's services team.
- Record in writing what was said, including the child's own words, as soon as possible – note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated (See Appendix 1a, Naggig Doubt form or Serious Concern Form 1b).
- Do not discuss with parents/carers.

**5.4** Guidance on Information Sharing is available, in the following document:

- 'Information Sharing: Guidance for practitioners and managers 2008/2015'

**5.5 Restrictive Physical Intervention:** A referral should always be made following a restrictive physical intervention if any of the following criteria applies:

- A child or young person is injured or makes an allegation that they have been harmed by an adult;

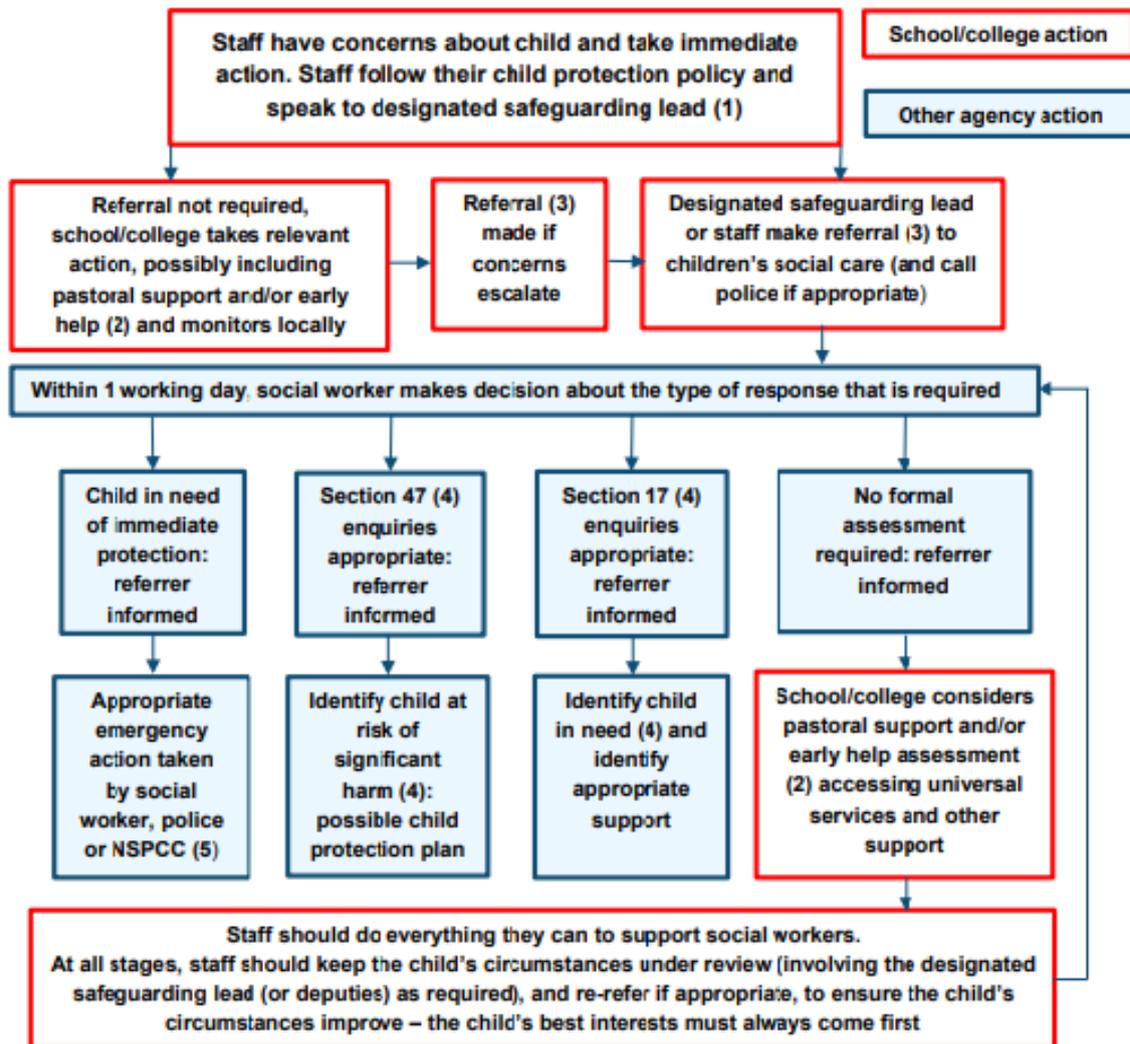
#### Safeguarding Policy

- The child or young person wishes to complain about the manner that they have been restrained;
- The parent/ carer of the child or young person makes a complaint on behalf of the child or young person about the use of the restrictive physical intervention.

The referral to the local children's services and the LADO is managed by the person responsible for managing allegations against staff within the school, initially the DSL – see the Allegations Against Staff Policy.

**5.6** This diagram illustrates what action staff, volunteers and consultants should take when there are concerns about the welfare of a child or young person. If, at any point, there is a risk of serious immediate harm to a child or young person, a referral must be made to the local Children's Services team immediately:

### Actions where there are concerns about a child



(1) In cases which also involve a concern or an allegation of abuse against a staff member, see Part Four of this guidance.

(2) Early help means providing support as soon as a problem emerges at any point in a child's life. Where a child would benefit from co-ordinated early help, an early help inter-agency assessment should be arranged. Chapter one of [Working Together to Safeguard Children](#) provides detailed guidance on the early help process.

(3) Referrals should follow the process set out in the local threshold document and local protocol for assessment. Chapter one of [Working Together to Safeguard Children](#).

(4) Under the Children Act 1989, local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17 of the Children Act 1989. Under section 47 of the Children Act 1989, where a local authority has reasonable cause to suspect that a child is suffering or likely to suffer significant harm, it has a duty to make enquiries to decide whether to take action to safeguard or promote the child's welfare. Full details are in Chapter one of [Working Together to Safeguard Children](#).

(5) This could include applying for an Emergency Protection Order (EPO).

## **Responding to concerns relating to sexual exploitation and trafficking**

If a practitioner is concerned that a child or young person is involved or likely to be involved in sexual exploitation and / or trafficking, they should immediately refer to the DSL who will make a Referral to Children's Social Care.

If the child or young person has (or is awaiting allocation of) a social worker, the duty team should send the referral to the named social worker, or, in their absence, the team manager. Sending all sexual exploitation referrals to the duty teams enables Children's Social Care to ensure a coordinated response.

t+centres recognises, at all stages, the need for urgent action that may be necessary to secure the child or young person's safety.

Should the DSL have concerns that they would like to discuss prior to a referral, they can do so by consulting with the key contact in Children's Social Care. All professionals are encouraged to seek advice if they are not sure there is sufficient 'evidence' or are not sure about the possible risk indicators.

In relation to confidentiality, where there are concerns that a child or young person is subject to sexual exploitation/trafficking, all agencies have a responsibility to report their concerns and share information. The need for a child or young person to be safeguarded overrides their right to confidentiality. Data protection should not prevent the sharing of information but ensures that relevant information is shared appropriately.

### **5.7 Thresholds for Intervention: Early Help:**

There are situations which may occur in a family's life where they may benefit from additional support that cannot be provided solely by mainstream services.

These can include when a child:

- is disabled and has specific additional needs;
- has special educational needs (whether or not they have a statutory Education, Health and Care Plan);
- is a young carer;
- is showing signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
- is frequently missing/goes missing from care or from home;
- is at risk of modern slavery, trafficking or exploitation;
- is at risk of being radicalised or exploited;
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse;
- is misusing drugs or alcohol themselves;
- has returned home to their family from care;
- is a privately fostered child.

These children are therefore more vulnerable; t+centres will identify who their vulnerable children are, ensuring ALL staff and governors know the processes to secure advice, help and support where needed. In the first instance, a discussion should take place with the DSL with a record kept of this discussion. If further advice is needed or the school wishes to make a referral, then they would contact the Early Help Hub:

<https://www.cornwall.gov.uk/earlyhelphub>

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Additional guidance can also be accessed by using the Cornwall and Isles of Scilly Safeguarding Children Board (CIOS SCB) multi-agency threshold document. This guidance is available via the following link: <https://www.safechildren-cios.co.uk>

Within Cornwall, the Early Help Hub is the first point of contact when considering additional support for children and their families.

- Support is provided: from pre-birth to the age of 18 (or 25 when the young person has additional needs) when the child, young person or family has needs that are not met solely by mainstream services.
- It is single point of access for professionals, families and young people to access Early Help Services in Cornwall.
- The triage team decides which Early Help service best meets the needs identified in the request for help. It is then allocated to the appropriate service within 48 hrs.

For any further advice regarding the completion of the Early Help process – visit the Early Help page on the Cornwall safeguarding partners website:

<https://www.cornwall.gov.uk/earlyhelphub>

### **Child in Need – Section 17 of the Children Act 1989:**

A 'Child in Need' referral should be considered where the needs of the child are unlikely to be met under an Early Help Assessment, such as a child with complex disabilities, when a social work led assessment is required.

Section 17 of the Children Act says that an assessment for services should be undertaken by the Local Authority in the following circumstances:

- Children and young people are unlikely to achieve or maintain, or to have opportunity to achieve or maintain a reasonable standard of health or development, without the provision of services by a local authority.
- Their health or development is likely to be impaired, or further impaired without the provision of such services.
- They are disabled.

If the DSL considers that the welfare concerns indicate that a 'Child in Need' referral is appropriate, he/she will speak with parents / young person and obtain their consent for referral to the Multi-Agency Advice Team (MAAT) (or other appropriate Children Service Care Team) to request an assessment. If parents refuse to give consent, but the child's needs are not being met, the DSL will discuss the issues with the MAAT.

Appropriate school staff should be invited to participate in Child in Need (CIN) meetings convened by Children's Social Care when children are deemed to require section 17 services.

Some children in 'acute need' (see and follow Cornwall and the Isles of Scilly safeguarding partners guidance) may require Child in Need Section 17 support.

### **Child Protection**

Section 47 of the Children Act 1989 says the Local Authority has a statutory duty to investigate when there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm due to the actions or inactions of others. Staff from t+centres do not investigate whether a child has been abused. This is the duty of Social workers from the

Safeguarding team and the police. Education staff refer reasonable concerns which indicate that a child may be at risk of significant harm.

It is the 'significant harm' threshold that justifies statutory intervention into family life. A professional making a child protection referral under S.47 must therefore provide information which clearly outlines that a child is suffering or likely to suffer significant harm. It is not possible to rely on one absolute criterion when judging what constitutes significant harm. Consideration of the severity of ill-treatment may include the extent of the harm suffered, the context within which it occurred and its duration. Significant harm may also arise from a combination of significant events which are both acute and long standing and which may impair the child's physical, psychological and social development.

In order to both understand and evidence 'significant harm', it is necessary to consider the family context, together with the child's development within their wider social and cultural environment. It is also necessary to consider any special needs, e.g. medical condition, communication difficulties or disability that may affect the child's development and care within the family. The nature of harm, in terms of ill-treatment or failure to provide adequate care also needs consideration alongside the impact on the child's health and development and the adequacy of care provided.

**If staff have significant concerns about any child they must make them known to the DSL or a Deputy DSL without delay in accordance with reporting and recording procedures.**

## **6. Managing Allegations against Staff Duties as an employer and an employee**

**6.1** This part of the guidance is about managing cases of allegations that might indicate a person who would pose a risk of harm if they continue to work in regular or close contact with children in their present position, or in any capacity. It should be used in respect of all cases in which it is alleged that a teacher or member of staff (including supply staff and volunteers ) in a school that provides education for children under 18 years of age has:

- Behaved in a way that has harmed a child, or may have harmed a child;
- Possibly committed a criminal offence against or related to a child; or
- Behaved towards a child or children in a way that indicates he or she may pose a risk of harm if they work regularly or closely with children.
- \*Behaved or may have behaved in a way that indicates they may not be suitable to work with children (Transferrable risk)

**6.2** We are aware of the possibility of allegations being made against members of staff, supply staff or volunteers that are working with or may come into contact with children and young people at t+centres. Such allegations are usually that some kind of abuse has taken place. They can be made by children and young people or other concerned adults.

- If an allegation is made, the member of staff, supply staff or volunteers receiving the allegation will immediately inform the Principal, DSL, or Head of Centre or Safeguarding Governor, if Principal not available.
- The DSL, Head of Centre or Safeguarding Governor should on all such occasions follow the safeguarding partners Procedures, and inform the Local Authority Designated Officer (LADO) – Justine Hosking Principal LADO ([jhosking@cornwall.gov.uk](mailto:jhosking@cornwall.gov.uk)) Kate Evan- Hughes-

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Service Director- Education ([kate.Evan-Hughes@cornwall.gov.uk](mailto:kate.Evan-Hughes@cornwall.gov.uk))

Or MARU on 0300 1231 116.

- \*t+centres recognise that an allegation against an individual may not be directly employed by them, such as supply staff from an agency.
- \*t+centres will ensure allegations are dealt with properly and will liaise with the local authority designated officer (LADO) to determine a suitable outcome. Governing bodies and t+centres SMT will discuss with the agency whether it is appropriate to suspend a supply teacher or redeploy them whilst an investigation is carried out.
- \*t+centres will take the lead should a supply staff member be subject to an allegation and liaise between all parties. Supply staff, whilst at t+centres, are under the supervision, direction and control of the governing body/proprietor of t+centres. An allegations management meeting, usually arranged by the LADO will address issues such as information sharing, to ensure that any previous concerns or allegations known to the agency are taken into account by t+centres during the investigation.
- \*t+centres will inform any agency of its process for managing allegations. Any updates of information about t+centres' policies will be shared with agency human resources manager or equivalent.
- If the allegation made concerns the Principal or the Head of Centre, the allegation should be received by Alice Morris Safeguarding Governor, who will consult the LADO as above, without notifying the Head of Centre first.
- The DSL, Head of Centre or Safeguarding Governor will discuss with the LADO the nature of the allegations in order for appropriate action to be taken. This may constitute an initial evaluation meeting or strategy discussion depending on the allegation being made.

### 63 The Principal/ DSL/Head of Centre will also:

- Consider the safeguarding arrangements of the child or young person to ensure they are not in contact with the alleged abuser.
- Contact the parents or carers of the child/young person if advised to do so by the LADO.
- Consider the rights of the staff member for a fair and equal process of investigation and provide support.
- Ensure that the appropriate disciplinary procedure is followed, including whether suspending a member of staff from work until the outcome of any investigation is deemed necessary i.e. where there is cause to suspect a child or other children at the school is/are at risk of harm or the case is so serious that it might be grounds for dismissal.
- Act on any decision made in any Section 47 strategy meeting – the decision of the strategy/joint evaluation meeting could be: investigation by children's social care, police investigation if there is a criminal element to the allegation, single agency investigation completed by the school which should involve the Senior HR advisor for the School.
- Inform the Disclosure and Barring Service (DBS) where a member of staff has been disciplined or dismissed as a result of the allegations founded, or would have been if they have resigned.
- Ensure that a clear comprehensive summary of the allegation, details of how the allegation was followed up and resolved, and a note of any action taken and decisions reached, is kept on the confidential personal file of the accused and a copy provided to the person concerned.
- t+centres has a legal duty to refer to the DBS anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult; where the harm test is satisfied in respect of that

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individual; where the individual has received a caution or conviction for a relevant offence, or if there is reason to believe that individual has committed a listed relevant offence; and that individual has been removed from working (paid or unpaid) in regulated activity, or would have been removed had they not left. The DBS will consider whether to bar the person. Referrals should be made as soon as possible after the resignation or removal of the individual.

### **Protecting yourself against allegations of abuse**

Keeping Children Safe in Education (Sept 2021) says that all staff members should be aware of systems within their school which support safeguarding and these should be explained to them as part of staff induction. This includes the Behaviour Policy, the safeguarding response to Children Missing Education (see below), the identity of the Designated Safeguarding Lead and Deputies, and the Staff Handbook, which sets out the staff code of conduct (based on Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings, 2015). You should seek to keep your personal contact with children under review and seek to minimise the risk of any situation arising in which misunderstandings can occur. The following sensible precautions can be taken when working alone with children:

- Work in a room where there is a glass panel in the door or leave the door open;
- Make sure that other adults visit the room occasionally;
- Avoid working in isolation with children unless thought has been given to safeguards;
- Never give out personal mobile phone numbers or private e-mail addresses;
- Do not give pupils lifts home in your car (unless this has been specifically agreed by senior leadership);
- Do not arrange to meet pupils outside of school activities;
- Never 'befriend' or chat to children and young people on social network sites.

Under the Sexual Offences Act 2003 it is a criminal offence for anyone working in an education setting to have a sexual relationship with a children and young people even when the child and young person is over the age of consent but under 18 years of age.

## **7. Promoting Good Behaviour and Discipline**

At t+centres we aim to promote positive social, emotional and behavioural change in our children and young people through a supportive and consistent approach across education and care, based on their needs. Our positive behaviour strategy is a holistic person-centred approach to the development of our children and young people, based on effective evidence based teaching, learning and quality of care.

Many of our children and young people exhibit and display behaviours that act as barriers to learning and inclusion. An integral part of our holistic approaches is to overcome those barriers. We aim to provide a consistent, supportive and well supervised environment, where children and young people feel safe, secure and reach their potential through the promotion of positive relationships.

Many of our children and young people display a variety of challenging behaviours which are managed by a range of strategies, including the use of Restrictive Physical Interventions, in order to reduce risk. Staff is principally encouraged to adopt different methods of de-escalation via appropriate training and the promotion of positive relationships. By using a range of positive behaviour management strategies, we aim to create an environment where

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all parties are kept safe, but which also encourages children to be involved in the process of being reflective about their behaviour.

**7.1** The use of physical intervention should, wherever possible, be avoided. It should only be used to manage a child or young person's behaviour if it is necessary to prevent personal injury to the child, other children or an adult, to prevent serious damage to property or in what would reasonably be regarded as exceptional circumstances.

**7.2** When physical intervention is used, it should be undertaken in such a way that maintains the safety and dignity of all concerned. The scale and nature of any physical intervention must be proportionate to both the behaviour of the individual to be controlled and the nature of the harm they may cause.

**7.3** t+centres accepts the definition of reasonable force:  
"Reasonable force uses the minimum degree of force necessary for the shortest period of time to prevent a pupil harming him/herself, others or property".

**7.4** t+centres supports and endorses the legal position that it is unlawful to use force as a punishment and believes reasonable force should not be used as a method of compliance.

**7.5** The 1996 Education Act (Section 550A) and subsequently, Section 93 of the 2006 Education and Inspections Act (April 1st 2007), and reinforced in the DfE Guidance, The Use of reasonable Force in schools (2013) all stipulate that reasonable force may be used to prevent a pupil from doing, or continuing to do any of the following:

- Hurting themselves, or placing themselves at risk
- Hurting others
- Engaging in behaviour leading to serious damage to property
- Disturbing good order within a learning environment

**7.6** Three new paragraphs have been added to Keeping Children safe in Education (2021) address the use of reasonable force. They guide that 'reasonable' means 'using no more force than is needed' and that the use of force may involve passive physical contact or active physical contact. The guide states that 'no-contact' policies leave staff unable to protect pupils and encourages schools to adopt sensible policies that allow and support staff to make appropriate physical contact. When considering the use of reasonable force towards children with SEND or medical conditions, the risks should be carefully considered. Individual behaviour plans and other forms of proactive behaviour support can reduce the need for reasonable force.

## **8. Information Sharing and Confidentiality**

**8.1** Based upon Government guidance 'Information Sharing: Guidance for Practitioners and Managers', DfE 2008/2015, t+centres will ensure that data regarding children is correctly stored and managed in line with these principles defined in the 2008 guidance, and that we will take all appropriate action regarding the sharing of information as follows:

- Recognise that legislation (Data Protection Act) is not a barrier to sharing information about concerns.
- Be honest and open with the person (be they a child or an adult) about why, what, how and with whom information will be shared.
- Seek advice when we are in doubt, without disclosing the identity of the person (be they a child or an adult) where possible.
- Share information with consent where appropriate and respect the wishes of those who do not consent to share confidential information where possible.
- Base our information sharing decisions on considerations of safety and well being.
- Ensure the information we share is necessary, proportionate, relevant, accurate, timely and secure.
- Keep a record of our actions, decisions, and reasons.

**These records and procedures will be updated in line with GDPR.**

The DSL should consider whether it is appropriate to share any information with a new school or college in advance of a pupil leaving, in addition to the child protection file. The DfE gives the example of information that would allow the new school or college to continue supporting a victim of abuse and have the appropriate support in place for the pupil's arrival.

### **8.2 Confidentiality**

- We recognise that all matters relating to child protection are confidential.
- Confidentiality is an issue that needs to be understood by all those working with children, particularly in the context of child protection. This is a complex area and involves consideration of a number of pieces of legislation.
- Professionals can only work together to safeguard children if there is an exchange of relevant information between them. This has been recognised in principle by the courts. However, any disclosure of personal information to others, including children's social care departments, must always have regard to both common and statute law.
- Normally, personal information should only be disclosed to third parties (including other agencies) with the consent of the subject of that information (Data Protection Act 1998 European Convention on Human Rights, Article 8). Wherever possible, consent should be obtained before sharing personal information with third parties. In some circumstances, however, consent may not be possible or desirable but the safety and welfare of the child dictate that the information should be shared.
- The law requires the disclosure of confidential information necessary to safeguard a child or children. Under Section 47 of the Children Act 1989 statutory agencies have a duty to

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co-operate. Therefore, if the Police or Social Care/Services are conducting a Section 47 investigation under the 1989 Children Act, staff must share requested information relevant to the investigation. Legal advice should be sought if in doubt from the County Legal Services Department.

- When children transfer to a new school or college at any time other than key transition points (e.g. move to primary or high school), it may be necessary to inform other partners.
- The Principal/DSL will disclose personal information about a pupil to other members of staff on a need to know basis only.
- All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being, or that of another. t+centres will always undertake to share our intention to refer a child to the local children's services and with their parents/carers, unless doing so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with Cornwall and the Isles of Scilly safeguarding partners.

## 9. Power and Position of Trust

**9.1** t+centres acknowledges all adults working with children and young people are in positions of trust in relation to the children and young people in their care. A relationship of trust can be described where one party is in a position of power or influence over the other by virtue of their work or the nature of their activity. All staff must recognise the power this can give them over those they care for and the responsibility they must exercise as a consequence of this relationship. Please see 'Guidance for Safer Working Practice for Adults Who Work with Children and Young People in Education Settings', 2015.

**9.2** All staff must uphold public trust in the teaching profession and maintain high standards of ethics and behaviour, within and outside school, by:

- times observing proper boundaries appropriate to the member of staff's professional position.
- Having regard for the need to safeguard pupils' well-being, in accordance with statutory provisions.

## 10. Child Centred Approach

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/912592/Keepingt\\_children\\_safe\\_in\\_education\\_Sep\\_2020.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/912592/Keepingt_children_safe_in_education_Sep_2020.pdf)

\*t+centres and their staff recognise and understand that the terms Safeguarding and promoting the welfare of children means:

- Protecting children from maltreatment
- Preventing impairment of children's mental and physical health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

At t+centres no single practitioner will have the full picture of a child's needs and circumstances. t+centres and their staff recognise and understand that if children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.

**10.1** t+centres and their staff recognise and understand that effective safeguarding systems are child-centred. Children and young people in our school are clear what they want from an effective safeguarding system, we know this via our regular children and young people questionnaire feedback.

**10.2** All our children want to be respected, their views to be heard, to have stable relationships with professionals built on trust, and consistent support provided for their individual needs. This guides the behaviour of our staff. Anyone working with children should see and speak to the child; listen to what they say; take their views seriously; and work with them collaboratively when deciding how to support their needs. A child-centred approach is supported by:

- The Equality Act 2010 which puts a responsibility on public authorities to have due regard to the need to eliminate discrimination and promote equality of opportunity. No child or group of children must be treated any less favourably than others in being able to access effective services which meet their particular needs; and
- The United Nations Convention on the Rights of the Child (UNCRC). This is an international agreement that protects the rights of children and provides a child-centred framework for the development of services to children.

**10.3** At t+centres, we ensure that a broad and balanced Personal, Social, Health and Citizenship Education (PSHCE) curriculum is taught. This includes enabling children and young people to develop self-awareness, positive self-esteem and confidence, encouraging them to:

- Keep themselves and others safe
- Stay as healthy as possible
- Have worthwhile and fulfilling relationships
- Respect the differences between people
- Develop independence and responsibility
- Play an active role as members of a democratic society
- Make the most of their own abilities and those of others
- Behave in a socially and morally acceptable way, including towards authority and each other
- Become involved in the life of their community
- Know about democracy and how to be an active citizen
- Know about economic wellbeing

Please refer to the school's Curriculum Statement. Our PHSE provision fulfils the requirements of compulsory Relationships Education for primary pupils and Relationships and Sex Education (RSE) for secondary pupils and Health Education for all pupils, which comes into effect from September 2020.

Further RHSE Statutory guidance can be found in:

DfE advice for schools: [teaching online safety in schools](#)

## **11. Whistleblowing**

**11.1** Whistle blowing is the mechanism by which adults can voice their concerns, made in good faith, without fear of repercussion. t+centres has a clear and accessible Whistle Blowing Policy that meets the terms of the Public Interest Disclosure Act 1998. Adults who use whistleblowing procedure are made aware that their employment rights are protected.

**11.2** Staff must acknowledge their individual responsibility to bring matters of concern to the attention of senior leadership and/or relevant agencies. Although this can be difficult this is particularly important where the welfare of children may be at risk.

**11.3** All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in t+centres' safeguarding regime and confident that such concerns will be taken seriously by the senior leadership team.

**11.4** Through our staff induction process we provide procedures on how staff can implement the Whistleblowing Policy. Staff members are aware of their duty to raise concerns about the attitude and actions of colleagues where these are inappropriate or unsuitable. Staff members are required to approach their immediate manager in the first instance, if necessary the member of staff should speak to the DSL or a Deputy DSL.

**11.5** Staff will be protected from harassment or victimisation, and no action will be taken against staff if the concern proves to be unfounded and was raised in good faith. Malicious allegations may be considered as a disciplinary offence.

**11.6** The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk).

## **12. Induction and Training**

**12.1** When new staff, volunteers or regular visitors join our school they will be informed of the safeguarding arrangements in place. They will be given a copy of t+centres' Safeguarding Policy and told who the Designated Safeguarding Lead and Deputy DSLs are. They will also be provided with the safeguarding recording form, given information on how to complete it and who to pass it to.

**12.2** Every new member of staff or volunteer will have an induction period that will include essential safeguarding information. This programme will include basic safeguarding information relating to signs and symptoms of abuse, how to manage a disclosure from a

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child, how to record any issues of confidentiality. After the induction, all staff will have a clear understanding of the definition of emotional, physical, sexual and neglectful child abuse and the risks of child sexual exploitation. New staff will be made aware of the Cornwall and Isles of Scilly Safeguarding Children Partnership procedures.

**123** New staff that have not had any Child Protection/Safeguarding training will be provided with safeguarding awareness training through the induction process. Staff will be provided with Level 2 training and will be updated every two years and recorded. The Designated and Deputy Designated Safeguarding Leads will attend approved DSL Courses at Level 3 and above at least every two years in order to maintain continuous professional development and comply with statutory guidance.

**124** All regular visitors and volunteers to t+centres will be given a set of our safeguarding procedures; they will be informed of whom our DSL and Deputy DSLs are. Recording and reporting procedures will also be explained.

**125** t+centres will also undertake appropriate training to ensure they are able to carry out their duty to safeguard all of the children at our schools and homes.

**126** We actively encourage all staff at t+centres to keep up to date with the most recent local and national safeguarding advice and guidance. All staff will receive safeguarding updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. These can be provided via, for example, staff meetings and email.

**127** The knowledge and skills of the DSL and Deputies will be updated at regular intervals, to ensure they keep up with developments relevant to the role (via, for example, e-bulletins, meeting other DSLs, or taking time to read about recent safeguarding developments).

## 13. Safer Recruitment

**131** We will ensure that the Principal/ Head of Centre and at least one other member of staff have completed appropriate safer recruitment training, recognised by the DfE. At all times, the Head of Centre will ensure that safer recruitment practices and procedures are followed in accordance with the requirements of Keeping Children Safe in Education (Sept 2021). We will ensure that at least one member of any interview panel is appropriately trained in safer recruitment.

**132** t+centres will use the recruitment and selection process to deter and reject unsuitable candidates. We require evidence of original academic certificates. We do not accept testimonials and insist on taking up references prior to interview and verify the references accordingly. We will question the contents of application form e.g. breaks in employment history (including overseas), if we are unclear about them. We will undertake enhanced Disclosure and Barring Service checks and use any other means of ensuring we are recruiting and selecting the most suitable people to work with our children. Under no

## Safeguarding Policy

circumstances will we consider offering employment to anyone who is barred from working in schools under Section 128 of the Education and Skills Act 2008, including proprietors, governors, all professional/voluntary staff working with children in a regulated activity. This will be kept under regular review. Identity checks will include evidence of right to work in the UK and teachers will be subject to prohibition from teaching checks.

**13.3** We will maintain a Single Central Register of all safer recruitment checks carried out in line with statutory requirements, which will be signed off on a termly basis by the Principal and/or DSL.

**13.4** Any staff member, volunteer or governor who becomes the subject of a police investigation in relation to physical or sexual offences against adults or children, or are charged with such a criminal offence, must inform the Principal or Head of Centre. Staff must disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children whether received before, or during their employment at t+centres. The Principal, Head of Centre, DSL or DDSLs will discuss any potential safeguarding matters with the LADO and any required action will be agreed.

**13.5** Any staff member, volunteer or governor whose own children become subject to child protection investigations must inform the Principal or Head of Centre. The Principal, Head of Centre, DSL or DDSLs will discuss with the Local Authority Designated Officer (LADO) procedures for dealing with allegations against persons who work in a position of trust with children. Appropriate action will be agreed.

**13.6** t+centres has a legal duty to refer to the DBS anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult; where the harm test is satisfied in respect of that individual; where the individual has received a caution or conviction for a relevant offence, or if there is reason to believe that individual has committed a listed relevant offence; and that individual has been removed from working (paid or unpaid) in regulated activity, or would have been removed had they not left. The DBS will consider whether to bar the person. Referrals should be made as soon as possible after the resignation or removal of the individual.

**13.7** t+centres should ensure that any contractor, or any employee of the contractor, who is to work at the school, has been subject to the appropriate level of DBS check. Contractors engaging in regulated activity will require an enhanced DBS certificate (including barred list information). For all other contractors who are not engaging in regulated activity, but whose work provides them with an opportunity for regular contact with children, an enhanced DBS check (not including barred list information) will be required. In considering whether the contact is regular, it is irrelevant whether the contractor works on a single site or across a number of sites.

**13.8** Under no circumstances should a contractor in respect of whom no checks have been obtained be allowed to work unsupervised, or engage in regulated activity. Schools are responsible for determining the appropriate level of supervision depending on the circumstances.

**13.9** t+centres will ensure that individuals who have lived or worked outside the UK

Safeguarding Policy

undergo the same checks as all other staff in the school. In addition, t+centres must make any further checks they think appropriate so that any relevant events that occurred outside the UK can be considered. These further checks should include a check for information about any teacher sanction or restriction that an EEA professional regulating authority has imposed, using the NCTL Teacher Services' system.

For further information regarding Safer Recruitment, see Taliesin Education Ltd and Education Safer Recruitment Policy.

#### **Appendix 5 (flowchart of Disclosure and Barring Service criminal record checks and barred list checks**

Please refer to the t+centres Safer Recruitment and Selection Policy.

## **14. Missing Children**

**14.1** t+centres recognises that safeguarding and promoting the welfare of children is a key duty and requires effective joint working between agencies and professionals. When a child goes missing or runs away they are at risk. Safeguarding children therefore includes protecting them from this risk.

**14.2** t+centres refers to the definitions set out by the police force in April 2013. These are:

- Missing: anyone whose whereabouts cannot be established and where the circumstances are out of character, or the context suggests the person may be the subject of crime or at risk of harm to themselves or another; and
- Absent: a person not at a place where they are expected or required to be.

**14.3** The police classification of a person as 'missing' or 'absent' will be based on on-going risk assessment. Note that 'absent' within this definition would not include those defined as "away from placement without authorisation" above: a child whose whereabouts are known would not be treated as either 'missing' or 'absent' under the police definitions.

**14.4** t+centres has procedures for managing children who are missing, preventative strategies, risk assessments, debriefing with children and young people when issues occur.

Please refer to **Children Missing Education - Statutory guidance for local authorities (September 2016)** See link below.

### **14.5 Attendance**

All children, regardless of their circumstances, are entitled to a full time education which is suitable to their age, ability, aptitude and any educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area.

A child going missing from education / care is a potential indicator of abuse or neglect. Staff should follow the procedures for dealing with children that go missing from education or home, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of their going missing in future.

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t+centres safeguarding policies and procedures are in place for children who go missing from education and care, particularly on repeat occasions. It is essential that all staff are alert to signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns such as travelling to conflict zones, FGM and forced marriage.

The Law requires all schools to have an admission register and an attendance register. All pupils must be placed on both registers.

t+centres will inform their local authority of any pupil who is going to be deleted from the admission register where they:

- Have been taken out of school by their parents and are being educated outside the school systems e.g. home education.
- Have ceased to attend school and no longer live within reasonable distance of the school which they are registered.
- Have been certified by the school medical officer as unlikely to be in a fit state of health to attend school before ceasing to be of compulsory school age, and neither he or she nor his or her parent has indicated the intention to continue to attend the school after ceasing to be of compulsory school age.
- Are in custody for a period of more than four months due to a final court order and the proprietor does not reasonably believe they will be returning to the school at the end of that period.
- Have been permanently excluded.

Please refer to Education (Pupil Registration) (England) Regulations 2006 for more information regarding attendance.

The local authority must be notified when a school is to delete a pupil from its register under the above circumstances. This should be done as soon as the grounds for deletion are met, but no later than deleting the pupil's name from the register. It is essential that schools comply with this duty, so that the authorities can, as part of their duty to identify children of compulsory school age who are missing education, follow up with any child who might be in danger of not receiving an education and who might be at risk of abuse or neglect.

t+centres will/must inform the local authority of any pupil who fails to attend school regularly, or has been absent without the school's permission for a continuous period of 10 school days or more, at such intervals as are agreed between the school and the local authority (or in default of such agreement, at intervals determined by the Secretary of State).

## 15. Bullying

**15.1** t+centres acknowledges and recognises that under the Children Act 1989 bullying incidents should be addressed as a child protection concern when there is 'reasonable cause to suspect that a child is suffering or likely to suffer significant harm'. Where this is the case, staff should report their concerns to the relevant local authority Children's Services team. Even where safeguarding is not considered to be an issue, we may need to draw on a range of external services to support the child or young person who is experiencing bullying, or to tackle any underlying issue which has contributed to a child or young person engaging in bullying, (DfE 'Preventing and Tackling Bullying', July 2017).

## Safeguarding Policy

**152** Bullying can have a profound impact on emotional and mental health. We have an Anti-Bullying Policy setting out the respective rights and responsibilities of the young people and our staff in preventing and dealing with bullying.

**153** t+centres and its staff raise awareness of bullying through developing a culture in which respect and consideration for others is fundamental. We encourage young people to report bullying in the knowledge that it will be taken seriously.

**154** Staff is trained in conflict management techniques to help them boost a young person's self-esteem and create a positive environment, both of which we recognise as important factors in preventing young people from being bullied or becoming bullies.

**155** School staff should apply intervention or disciplinary measures to children and young people to show clearly that their behaviour is wrong. Intervention or disciplinary measures should be applied fairly, consistently and reasonably taking into account any special educational needs or disabilities that the children or young people may have and taking into account the needs of vulnerable children and young people. It is important that the school considers the motivations behind the bullying and whether it reveals any concerns for the safety of the perpetrator.

Please also see Anti-Bullying Policy.

## 16. Protection of Vulnerable Adults

**161** A vulnerable adult is a person who is or may be in need of community care services by reason of mental or other disability, age or illness, and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

**162** This could include:

- People with learning disabilities
- People with mental health problems
- Older people
- People with a physical disability or impairment

**163** The need for additional support to protect themselves may be increased when it is complicated by additional factors such as:

- Physical frailty or chronic illness
- Sensory impairment
- Challenging behaviour
- Drug or alcohol problems
- Social or emotional problems
- Poverty or homelessness

**164** It is every adult's right to live free from abuse in accordance with the principles of respect, dignity, autonomy, privacy and equity. Anyone who is concerned about a vulnerable

person should contact social care and placing authority.

**165** Deprivation of Liberty Safeguards – when a Young Person or Adult over the age of 16 lacks mental capacity to consent to care or treatment. It is sometimes necessary to deprive them of their liberty in their BEST INTERESTS, to protect them from harm. If DOLS is considered to be required, then the relevant Local Authority would be contacted and an assessment would be requested.

## 17. Online Safety

**17.1** The growth of different electronic media in everyday life and an ever-developing variety of devices including PCs, tablets, laptops, smart TVs, mobile phones, webcams etc. place an additional risk on our children.

**17.2** Internet chat rooms, discussion forums or social networks can all be used as a means of contacting children and young people with a view to grooming them for inappropriate or abusive relationships. The anonymity of the internet allows adults, often pretending to be children, to have conversations with children and in some cases arrange to meet them. Access to abusive images is not a 'victimless' act as it has already involved the abuse of children. The internet has become a significant tool in the distribution of indecent photographs of children and should be a concern to all those working with pupils at this school.

Pupils can engage in or be a target of cyber-bullying using a range of methods including text and instant messaging to reach their target. Mobile phones are also used to capture violent assaults of other children for circulation (happy slapping), or distributing indecent images of children (e.g. sexting).

\*The use of technology has become a significant component of many safeguarding issues. Child sexual exploitation; radicalisation; sexual predation; technology often provides the platform that facilitates harm. An effective approach to online safety empowers t+centres to protect and educate the whole school community in their use of technology and establishes mechanisms to identify, intervene in, and escalate any incident where appropriate.

t+centres recognises that, although the breadth of issues within online safety is considerable, it can be categorised into three areas of risk:

- **Content:** being exposed to illegal, inappropriate or harmful material such as pornography, fake news, racist or radical and extremist views
- **Contact:** being subjected to harmful online interaction with other users; for example commercial advertising as well as adults posing as children or young adults, and
- **Conduct:** Personal online behaviour that increases the likelihood of, or causes, harm; for example making, sending and receiving explicit images, or online bullying.

**17.3** The best protection is to make pupils aware of the dangers through curriculum teaching particularly PSHCE and sex and relationship education. The government has recently published new guidance on teaching children and young people about online safety and appropriate online behaviour. The guidance is non-statutory and applies to all local authority-

## Safeguarding Policy

maintained schools, academies and free schools. The guidance covers fundamental knowledge and behaviours for pupils, including how to evaluate what they see online, how to identify risks, and how and when to seek support. It is not intended to create additional content or teaching requirements; topics can be incorporated into other curriculum areas, including the new compulsory Relationships (Sex Education) and Health Education in place from September 2020. (Keeping Children Safe in Education (Sept 2021))

### Protection is Prevention

- Software is in place to minimise access and to highlight anyone accessing inappropriate sites or information.
- Pupils will be encouraged to discuss openly their use of technology and anything which makes them feel uncomfortable. (If this results in child protection concerns the school's DSL should be informed immediately.)
- Pupils should not give out their personal details, phone numbers, schools, home address, computer passwords etc.
- Pupils should adhere to the t+centres Online Safety Policy.

The police will be involved if there is any criminal element to misuse of the internet, phones or any other form of electronic media.

**174** t+centres will consider the age range of pupils, the number of pupils, how often IT systems are accessed and the costs versus the risks when deciding on the filters and monitoring systems that are needed to prevent access to materials in line with their Prevent duty.

**175** As schools increasingly work online, it is essential that children are safeguarded from potentially harmful and inappropriate online material. As such, governing bodies and proprietors should ensure appropriate filters and appropriate monitoring systems are in place.

## 18. Radicalisation/Prevent

**181** t+centres will ensure ALL staff, including governors, adhere to their duties in the Prevent guidance 2015 to prevent radicalisation :

<https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>

**182** The Head of Centre, Principal and Governors will:

- Establish or use existing mechanisms for understanding the risk of extremism
- Ensure staff understand the risk and build capabilities to deal with issues arising
- Communicate the importance of the duty
- Ensure All Staff and Governors implement the duty
- Ensure the risks of radicalisation are referred to within all relevant policies including Anti-bullying and Online Safety

**183** t+centres will respond to any concern about Radicalisation/Prevent as a Safeguarding

## Safeguarding Policy

concern and will report in the usual way using local safeguarding procedures. We will seek to work in partnership, undertaking risk assessments where appropriate and proportionate to risk, building our children's resilience to radicalisation.

When reviewing our Prevent duties we would consider the guidance contained on the safer Cornwall website (link below).

<http://safercornwall.co.uk/preventing-crime/preventing-violent-extremism/>

**184** What can we do to help our children understand these issues and help protect them?

- Provide a safe space for them to debate controversial issues.
- Help them to build resilience and the critical thinking they need to be able to challenge extremist arguments.
- Give them confidence to explore different perspectives, question, and challenge.

The school is committed to providing effective filtering systems and this will include monitoring the activities of children when online in the school. We follow the guidance set out in Annex C (KCSIE September 2021) Please refer to t+centres Online Safety Policy.

All staff in the first instance should contact the Single Point of Contact (SPOC) within the school, Head of Centre Barry Coppins, with any concerns.

**185 Additional contact details:**

- **Concerns can be discussed with the Prevent Lead for Cornwall: Steve Rowell email: [prevent@cornwall.gov.uk](mailto:prevent@cornwall.gov.uk)**
- **MARU can also be contacted for advice: 0300 1231 116**
- **Emergency Out of Hours: Tel No: 01208 251300**
- **If immediate and serious concerns call the police on 999**

## 19. Risk Assessments

**191** t+centres will ensure risk assessments are in place and regularly updated for children, specific activities and visits. t+centres will maintain a risk register in respect of known safeguarding risks both site specific and child specific and the control measures in place to control these risks.

**192** t+centres and staff will ensure we are doing everything possible to assess, control, and reduce the risks to acceptable levels, thus promoting a safe, positive environment and promoting and protecting children from known and unnecessary risks.

**193** t+centres will ensure staff are regularly briefed and informed of changes to risk assessments to effectively manage the risks.

**194** \*t+centres recognise that children who have/need a social worker are potentially at greater risk of harm, in that they may need help due to abuse, neglect and complex family circumstances. t+centres recognise that a child's experiences of adversity and trauma can leave them vulnerable to further harm as well as educationally disadvantages in facing

barriers to attendance, learning, behaviour and mental health.

**195** \*The DSL (Carlee Ridpath) will hold and use information shared with Local authorities, so that decisions can be made in the best interests of the child's safety, welfare and educational outcomes.

**196** \*The DSL and t+centres Senior Management Team recognise that where children need a social worker, this will inform decisions about safeguarding and promoting welfare.

## **20. \*Children requiring mental health support.**

**Mental Health: t+centres and all staff recognise the important role they play in supporting the mental health and wellbeing of their pupils.**

- There are clear systems and processes in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems.
- All staff should also be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.
- Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Staff however, are well placed to observe children and young people day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one.
- Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that staff are aware of how these children's experiences, can impact on their mental health, behaviour and education.
- If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following their child protection policy and speaking to the designated safeguarding lead or a deputy.

**\*Further guidance can be found in the [mental health and behaviour in schools guidance](#) and [Rise Above](#), which gives guidance and support to secondary school teachers to promote positive health, wellbeing and resilience among young people.**

## **21. Recording and Reporting**

Learning from Safeguarding practice reviews continues to identify the need for improved record keeping and information sharing, both within and between agencies.

All concerns, discussions and decisions made, and the reasons for these decisions, should be recorded in writing. If in doubt about recording requirements, staff should discuss with the DSL.

**t+centres recognises that accurate and up-to-date record keeping is essential for a number of reasons:**

- It helps the school identify causes for concern at an early stage. Often it is only when a

## Safeguarding Policy

number of seemingly minor issues are taken as a whole that a safeguarding or child protection concern becomes clear.

- It helps the school to monitor and manage its safeguarding practices.
- It helps to evidence robust and effective safeguarding practice in inspections and audits.
- Accurate and specific records are important where there are child protection and safeguarding concerns e.g. a chronology of information gathered and action taken.
- t+centres has clear procedures for reporting and recording child protection concerns (please refer to the Child Protection Record Keeping Procedures). This should be read in conjunction with:
- Keeping Children Safe in Education (Sept 2021)
- Information Sharing: Guidance for practitioners and Managers (DfE 2015)

The Child Protection procedures give clear guidance on:

- Recording reports
- Storing child protection (CP) files
- Who has access to CP files and information sharing
- Transferring CP Files
- Retention of CP files
- Auditing of CP file

Well-kept records are essential in situations where it is suspected or believed that a child may be at risk from harm.

Records should:

- State who was present, time, date and place
- Use the child's words wherever possible
- Be factual/state exactly what was said
- Differentiate clearly between fact, opinion, interpretation, observation and/or allegation
- Be written in ink and signed by the recorder

Records about child protection or pertaining to welfare concerns or issues, including CAF paperwork, will be retained securely and separately to the curriculum records of the child. A clear 'sign post' will indicate in a young person's main file that a confidential report is held in a separate Child Protection file. If the child moves to another school or education setting, these records will be suitably redacted in regard to the identification of other children or adults and sent in a timely and secure manner to the DSL of the receiving school.

## **'Nagging Doubt' and Serious Concern Forms**

These forms are completed by staff when there is a concern or 'nagging doubt' about any aspect of a child's general welfare. (Examples may include changes in a child's behaviour, a comment overheard in a conversation, initial concerns around attendance or changes in eating habits). The doubt may or may not be related to a Child Protection or Safeguarding issue. These forms (**Appendix 1a and 1b**) are completed by a member of staff and then returned to the DSL or a Deputy DSL. The DSL/DDSLs will review the form to decide what action is to be taken i.e. to be managed internally or to take other action including making a referral to the MARU or the relevant Children's Services Team.

## **Attendance at Child Protection Conferences**

## Safeguarding Policy

The DSL or Deputy DSLs will be expected to attend the initial Child Protection Conference and Reviews, and provide a written report. A suggested template for this report is available on Cornwall and Isles of Scilly Education Safeguarding Advice website:

[www.cornwall.gov.uk/education](http://www.cornwall.gov.uk/education)

Parents should be informed of what is in the report as there should be no surprises about the information shared at Conference.

If a child is made subject to a Child Protection Plan it may be more relevant for Head of Centre to attend the subsequent core group meetings and they will be given appropriate support around safeguarding issues by the DSL.

If a child is made subject to a Child Protection Plan this will be clearly signposted in his/her main file but confidential records will not be kept in the main file; these will be securely stored separately.

## **22. Evaluation and Monitoring**

**221** t+centres will monitor and evaluate policies, practices and procedures in relation to safeguarding with the school on a regular basis to ensure it keeps current with the most modern guidance and legislation.

**222** t+centres requires safeguarding to be a regular item on the agenda of Senior Leadership Team meetings, therefore being at the forefront of senior managers thinking. In these meetings, safeguarding training, the risk assessment and risk register should be reviewed and updated where necessary.

**223** t+centres undertook a Safeguarding Audit in **April 2019** by the Designated Safeguarding Lead. t+centres will respond and act within set time-lines to any recommendations.

**224** This Policy Framework is reviewed and evaluated on annual basis by the Governors and our Senior Leadership Team.

## Key Safeguarding Information

### Key documents referred to and underpinning this policy are:

- Keeping Children Safe in Education (2021)
- Working Together to Safeguard Children (2020)
- Cornwall and the Isles of Scilly Local Safeguarding Children Partnership Procedures
- SEND Code of Practice 2014
- Equality Act 2010
- Preventing and tackling bullying (July 2017)
- Safeguarding Vulnerable Groups 2006
- The Children Act 1989 and 2004
- Education Acts 1996 and 2002
- The Education and Skills Act 2008
- Education (Pupil Registration) (England) Regulations 2006
- Information Sharing: Guidance for Practitioners and Managers, DfE 2008/2015
- Guidance for Safer Working Practice with Adults who work with Children and Young People in Education Settings 2015
- Section 93 of the 2006 Education and Inspections Act (April 1st 2007)
- The 1996 Education Act (Section 55OA)
- The Use of reasonable Force in schools (2013)
- Safeguarding Children with Disabilities (2009)
- Independent School Standards (Amended) 2014

**t+centres**  
**'Nagging Doubt' Form**  
To be passed to Designated Safeguarding Lead or a Deputy DSL

**CONFIDENTIAL**  
*Not to be kept with curriculum records*

**Name of Child** \_\_\_\_\_

**Date of 'Nagging Doubt'** \_\_\_\_\_

**Time** \_\_\_\_\_

**Nature of concern or 'Nagging Doubt'**

(Log here the 'nagging doubt' that you have about a child/young person that MAY or MAY NOT indicate a Safeguarding/Child Protection issue.)

**Member of Staff raising concern**

**Action by School**

<p>t+centres</p> <p><b>Serious Concern Report Form</b></p> <p>To be passed IMMEDIATELY to Designated Safeguarding Lead or a Deputy DSL</p>
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**To be completed by ALL workers logging a concern/ disclosure about a child's safety and welfare.**

<b>Child's Name</b>	<b>Date of Birth</b>
<b>Date</b>	<b>Time</b>
<b>Name (Printed) of person raising the concern</b>	<b>Signature</b>
<b>Position/role</b>	
<b>Reason(s) for recording the incident/ concern</b>	
<b>Record the following factually:</b>	<b>Who?</b>
	<b>What?</b>
	<b>Where?</b>
	<b>When?</b>
<b>Offer an opinion, where relevant (how and why might this have happened?). Please ensure that you substantiate your opinion.</b>	
<b>Note action taken, including names of anyone to whom your information was passed.</b>	

t+centres  
Chronology and Record of Events Form

<b>Child's Name</b>		<b>Date of Birth</b>	
<b>Date</b>	<b>Nature of Event/Incident</b>		
<b>Name of person recording incident</b>		<b>Role of person recording incident</b>	
<b>Action taken</b>			
<b>Outcome</b>			
<b>Additional Information</b>			
<b>Documents</b>			

## Signs of Abuse

Physical Signs	Changes in Behaviour
<b>Physical Abuse</b>	
<ul style="list-style-type: none"> <li>• unexplained bruising, marks or injuries on any part of the body</li> <li>• multiple bruises- in clusters, often on the upper arm, outside of the thigh</li> <li>• cigarette burns</li> <li>• human bite marks</li> <li>• broken bones</li> <li>• scalds, with upward splash marks,</li> <li>• multiple burns with a clearly demarcated edge</li> </ul>	<ul style="list-style-type: none"> <li>• fear of parents being approached for an explanation</li> <li>• aggressive behaviour or severe temper outbursts</li> <li>• flinching when approached or touched</li> <li>• reluctance to get changed, for example in hot weather</li> <li>• depression</li> <li>• withdrawn behaviour</li> <li>• running away from home</li> </ul>
<b>Emotional</b>	
<ul style="list-style-type: none"> <li>• Speech disorders</li> <li>• Delayed physical development</li> <li>• Substance abuse</li> <li>• Ulcers, severe allergies</li> <li>• Failure to thrive</li> <li>• Self-harm</li> </ul>	<ul style="list-style-type: none"> <li>• neurotic behaviour e.g. sulking, hair twisting, rocking</li> <li>• being unable to play</li> <li>• fear of making mistakes</li> <li>• sudden speech disorders</li> <li>• self-harm</li> <li>• fear of parent being approached regarding their behaviour</li> <li>• developmental delay in terms of emotional progress</li> </ul>
<b>Sexual</b>	
<ul style="list-style-type: none"> <li>• pain or itching in the genital area</li> <li>• bruising or bleeding near genital area</li> <li>• sexually transmitted disease</li> <li>• vaginal discharge or infection</li> <li>• stomach pains</li> <li>• discomfort when walking or sitting down</li> <li>• pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>• sudden or unexplained changes in behaviour e.g. becoming aggressive or withdrawn</li> <li>• fear of being left with a specific person or group of people</li> <li>• having nightmares</li> <li>• running away from home</li> <li>• sexual knowledge which is beyond their age, or developmental level</li> <li>• sexual drawings or language</li> <li>• bedwetting</li> <li>• eating problems such as overeating</li> </ul>

	<p>or anorexia</p> <ul style="list-style-type: none"> <li>• self-harm or mutilation, sometimes leading to suicide attempts</li> <li>• saying they have secrets they cannot tell anyone about</li> <li>• substance or drug abuse</li> <li>• suddenly having unexplained sources of money</li> <li>• not allowed to have friends (particularly in adolescence)</li> <li>• acting in a sexually explicit way towards adults</li> </ul>
<b>Neglect</b>	
<ul style="list-style-type: none"> <li>• constant hunger, sometimes stealing food from other children</li> <li>• constantly dirty or 'smelly'</li> <li>• loss of weight, or being constantly underweight</li> <li>• inappropriate clothing for the conditions</li> </ul>	<ul style="list-style-type: none"> <li>• complaining of being tired all the time</li> <li>• not requesting medical assistance and/or failing to attend appointments</li> <li>• having few friends</li> <li>• mentioning being left alone or unsupervised</li> </ul>

## Do's and Don'ts of Managing a Disclosure

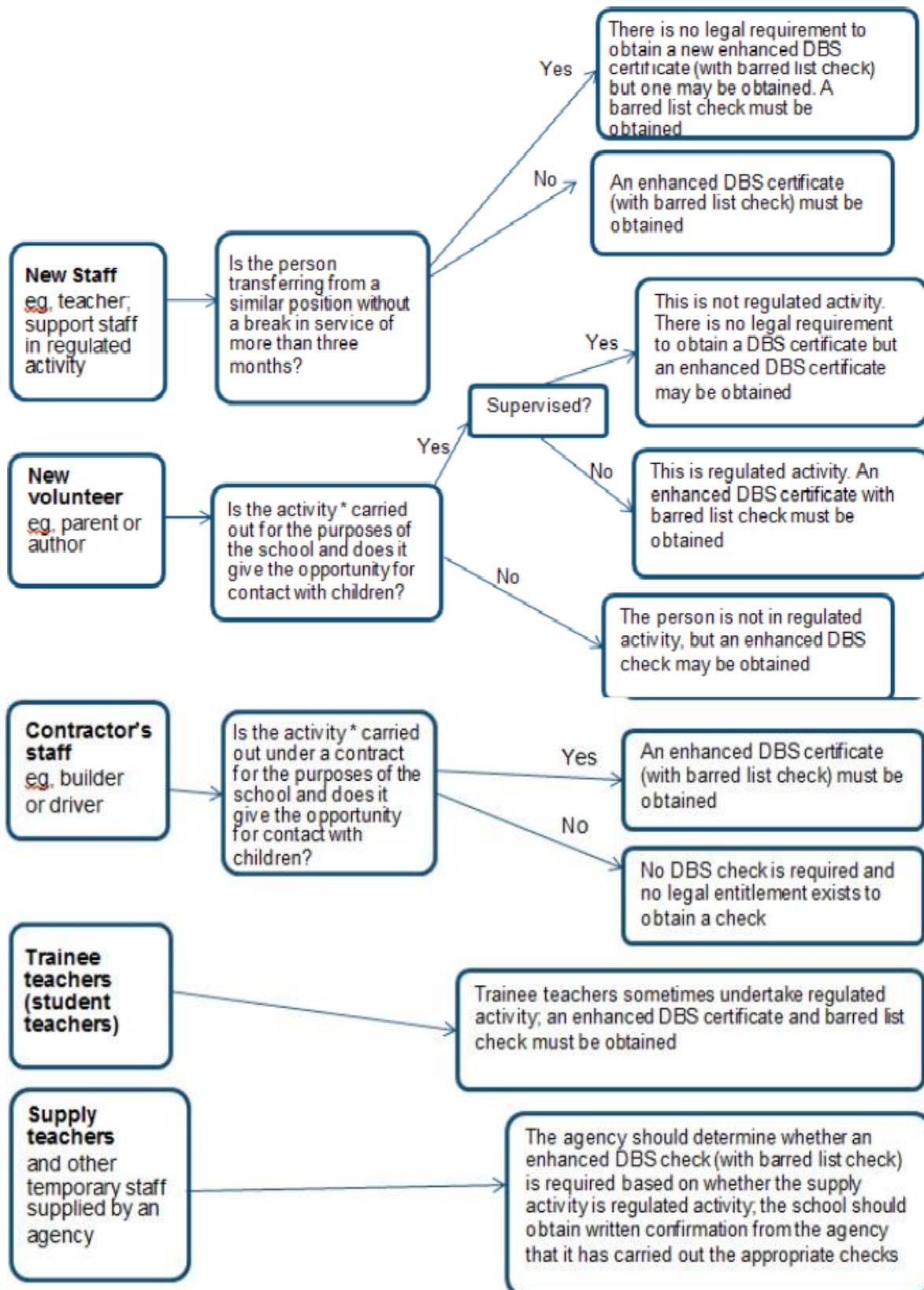
Do's	Don'ts
<ul style="list-style-type: none"> <li>• Stay calm and control expressions of panic and shock</li> <li>• State clearly that the abuse was not the child/young person's – no matter what the circumstances</li> <li>• Always accept what the child says, no matter how fanciful it may appear to you — let them know you believe them</li> <li>• Allow the child/young person to talk at their own pace, and use their own language</li> <li>• Listen attentively and only ask open-ended questions</li> <li>• Encourage the child/young person to talk about their concerns, as this can be helpful in dealing with difficult experiences</li> <li>• Tell the child/young person you are pleased they told you</li> <li>• At some point in the disclosure ensure that you inform the child or young person that you cannot offer absolute confidentiality or protection</li> <li>• Take careful notes throughout, if appropriate, or very soon after the child/young person has left</li> <li>• Keep to the facts, and use the words as they were spoken to you</li> </ul>	<ul style="list-style-type: none"> <li>• DO NOT TELL THE CHILD YOU CAN KEEP IT A SECRET.</li> <li>• Don't ask leading questions</li> <li>• Do not pressure the child/young person into telling you more than they want to.</li> <li>• Avoid going over the information time and time again; you are only gathering information</li> <li>• Do NOT try to determine for yourself if the allegation is valid or invalid</li> <li>• Do NOT use shocked or disbelieving body language while the child is talking. The child may interpret this to mean that you find the CHILD unacceptable versus the ACT perpetrated on the child</li> <li>• Do NOT gossip about the allegations to friends, relatives, or advocates</li> <li>• Do NOT ever try to talk a child out of what he/she is saying. If you are sceptical, do NOT express your doubts to the child. This is a task for investigators to sort through, and you can express your doubts to them</li> <li>• Do NOT stand over the child while he/she is talking about the abuse. This may make the child feel crowded or dominated</li> <li>• Don't deny, explain away, defend the abuser or justify the abuse. This discounts the victim</li> <li>• Don't try to find inconsistencies or question the child's motive to tell</li> <li>• Don't ask why. "Why did you go when he call?" "Why didn't you tell sooner?" "Why didn't you just do what she told you to do?" This blames the victim</li> <li>• Don't tell the child you wish s/he had not told you or that you are frightened or confused about what to</li> </ul>

do ... even when you are.

- Do not show revulsion or shock

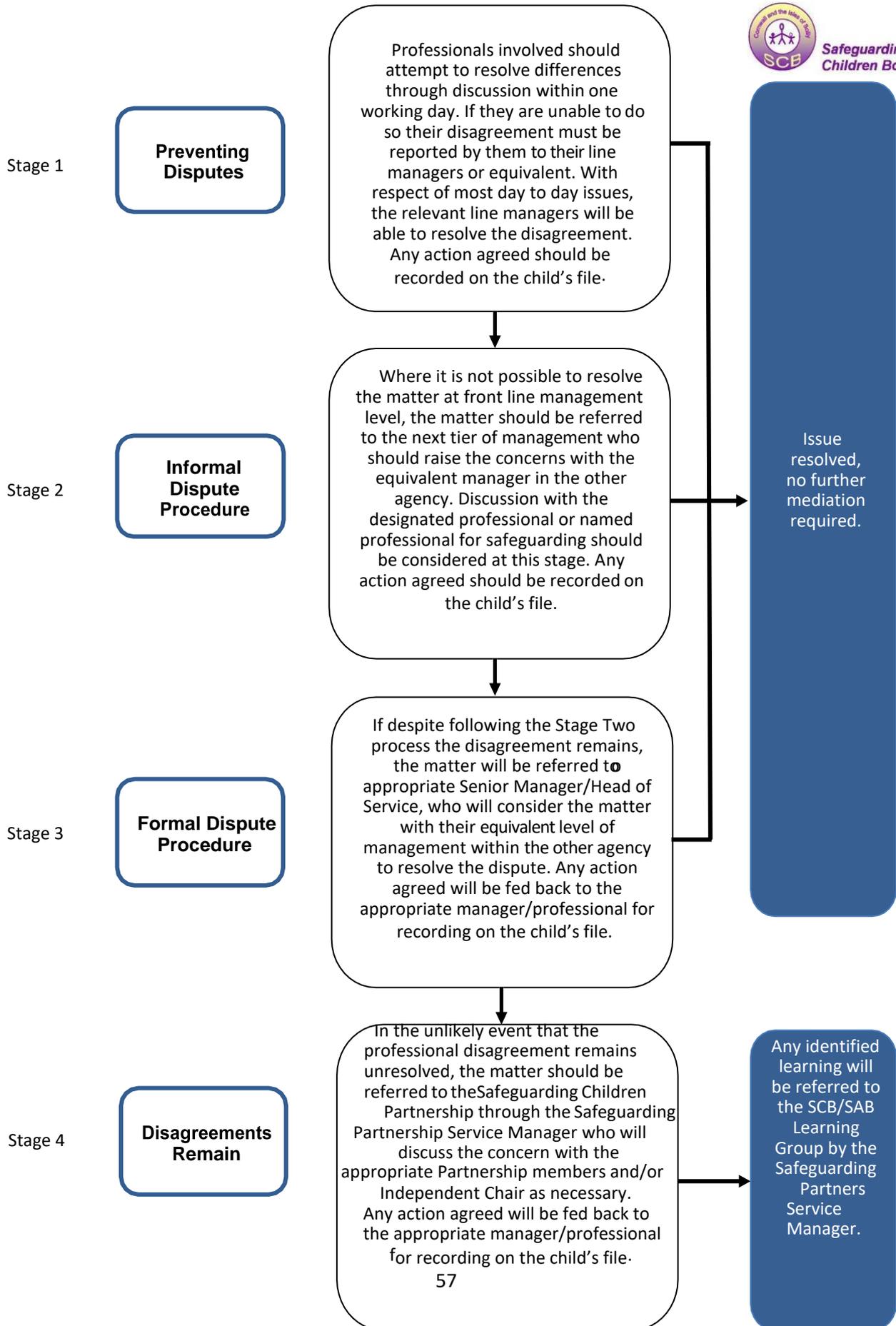
	<ul style="list-style-type: none"><li>• Don't demand details. Don't pry. This violates the child's trust in you and it is the job of the investigators</li><li>• Don't suggest things that the child could/should have done. "You should have run away." "You could have called out." This blames the victim. It is not the time to work on prevention</li><li>• Don't wait a week or so until it is mentioned again to say or do something. Don't let it drop and don't ignore your feelings</li></ul>
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## Flowchart: Disclosure and Barring Service criminal record checks and barred list checks



\* Activities listed under the guidance's definition of regulated activity and which are carried out 'frequently'

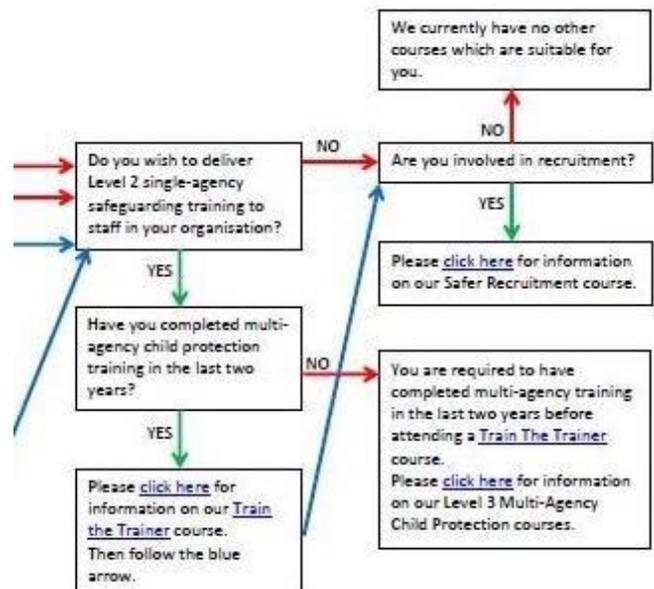
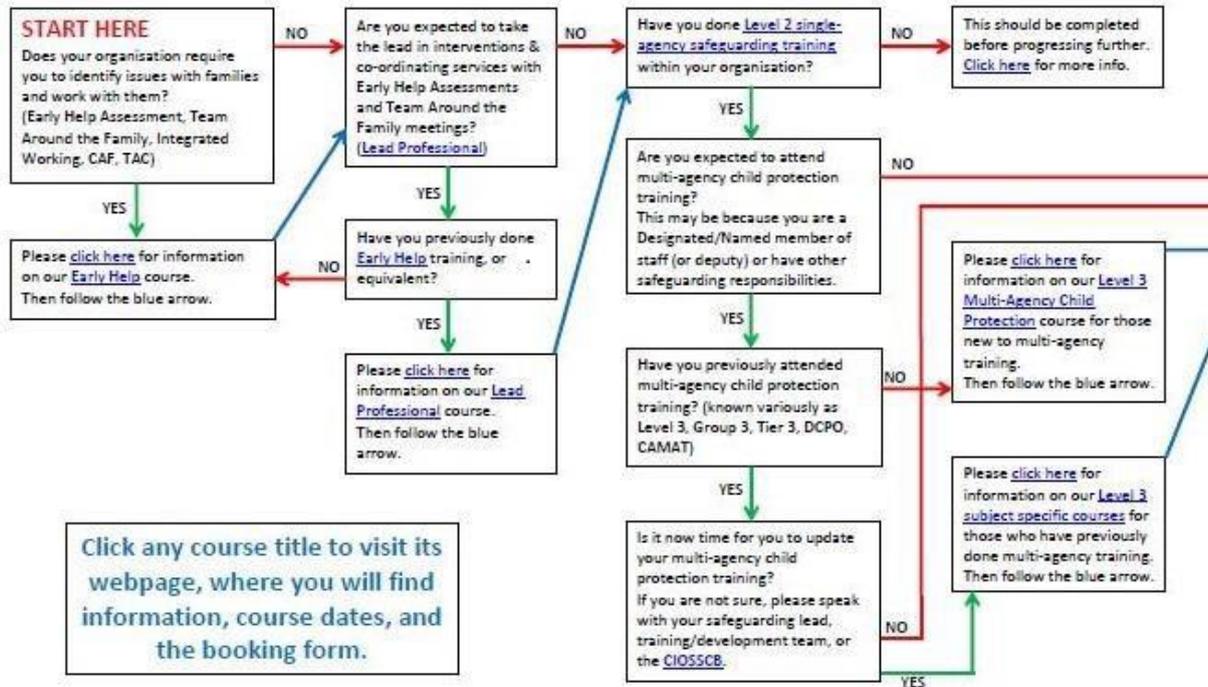
**Conflict Resolution Policy (Resolving Professional Differences)**



## Reconstruct training courses used by staff at t+centres

please refer to SWCPP website for more information:  
<http://www.online-procedures.co.uk/swcppcornwall/>

*NB\* the links below will not work directly – please visit the SWCPP website (link above) to access information about training.*



**History and implementation of this Safeguarding Policy:**

Accepted by SLT in this format: April 2018

Approved by t+centres Governors: Sept 2021

Last revised: Sept 2021

To be reviewed: Sept 2022

SLT, all staff and governors have read, discussed and contributed to this policy.

The Head of Centre will be responsible for ensuring all staff are briefed on the regulations and practice outlined in this policy.