

Safeguarding and Child Protection Policy and Procedures

"Safeguarding and promoting the welfare of children is **everyone's** responsibility. **Everyone** who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all practitioners 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". **(Keeping Children Safe in Education – DfE, September 2023)**

Approved by the Governing Body on 2 September 2023

To be reviewed by the Governing Body in Autumn 2024 or earlier if required by legislation/guidance

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Named staff with specific child protection responsibilities

Key local contacts

Harrow Children's Social Care & Multi-agency	'Golden Number': 020 8901 2690			
Safeguarding Hub (MASH)	Emergency Duty Team: weekends, bank holidays			
	and between 5pm-9am during the week:			
	020 8424 0999			
Police	101 or for immediate emergency: 999			
FGM - Mandatory reporting	Police on 101			
Local Authority Designated Officer for Allegations	Initial referrals via MASH/Golden Number above.			
against staff (LADO)	(For on-going cases: 020 8736 6435)			
Children and Young People with Disabilities 0-25	020 8966 6481			
years				
Local multi-agency procedures (& links to Pan	www.harrowlscb.co.uk			
London procedures), guidance and Training:				
Harrow Safeguarding Children Board				
NSPCC	0800 800 5000			
Childline	0800 1111			
Government's Whistleblowing Service via NSPCC	0800 028 0285			
Report Line				
Forced Marriage Unit	Tel: 020 7008 0151			
	From overseas: +44 (0)20 7008 0151			
	(Mon – Fri 9am-5pm)			
	Out of hours: 020 7008 1500 (ask for the Global			
	Response Centre)			
	Email: <u>fmu@fco.gov.uk</u>			
Support and Advice about Extremism DfE helpline	Tel: 020 7340 7264			
(non-emergency advice for staff and governors)	counterextremism@education.gsi.gov.uk			
Disclosure and Barring Service	Tel: 03000 200 190			
	Email: <u>customerservices@dbs.gov.uk</u>			
Teaching Regulation Authority	Tel: 020 7593 5393			
	Email: misconduct.teacher@eduction.gov.uk			

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1. POLICY STATEMENT AND AIMS

At Hillview Nursery School we recognise our moral and statutory responsibility to safeguard and promote the welfare of children in accordance with Section 175 of Education Act 2002.

This Safeguarding and Child Protection Policy sets out how we discharge our statutory responsibilities. It forms part of a suite of policies and procedures developed and operated by the school with a view to safeguarding and promoting welfare of children in the broadest meaning, namely:

- protecting children from maltreatment,
- preventing impairment of health and/or development
- ensuring that children grow up in the provision of safe and effective care, and
- taking action to enable all children to have the best life chances.

Therefore, this policy should be read in conjunction with the Safe Recruitment Policy, Code of Conduct/Staff Behaviour Policy, Health and Safety Policy, Behaviour and Anti-Bullying Policy, Special Educational Needs and Disabilities Policy, British Values Policy, Whistleblowing Policy, ICT Acceptable Usage Policy, Mobile Phone policy.

This policy aims to ensure that:

- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- Staff, parents, volunteers and governors are aware about our responsibilities for safeguarding children
- Staff are properly trained in recognising and reporting safeguarding

We are committed to keep children safe regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity through a child-centred and coordinated approach. This means that we have adopted a culture of vigilance and maintain an attitude of '**it could happen here**' while considering, at all times, what is in the best interests of a child and acknowledging a child's diverse circumstances.

We make every effort to keep children safe by creating an atmosphere of trust, where both children and adults feel secure. The **Key Person approach** means we already know our key children well and so we will notice any changes in behaviour, demeanour or personality quickly and we will act accordingly. We are aware that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful.

We understand the importance of listening to children and taking account their needs, wishes and feelings, monitoring behaviour and sharing information at school level, with Harrow Children's Social Care & Multi Agency Safeguarding Hub (hereinafter MASH) and the police on a need-to-know basis. We also aim to teach children how to be safe at home, in the street or when using the Internet. We will block unsuitable Internet sites and maintain a 'safe use of the Internet' agreement with children and parents.

We will:

- provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child;
- ensure that all staff and volunteers are recruited using robust 'Safer Recruitment' processes (See our Safer Recruitment Procedures);

- aim to identify concerns early and prevent concerns from escalating. This includes identifying emerging problems, liaising with the Designated Safeguarding Lead (DSL), sharing information with other professionals to support early identification and assessment and, in some cases, providing the lead professional in undertaking an early help assessment. See Harrow's Early Support Offer;
- establish and maintain an environment where children feel respected, safe, and are encouraged to talk and be listened to when they have a worry or concern;
- require any member of staff who has a concern about a child's welfare to follow the referral process set out in this document;
- where there is a safeguarding concern, take the child's wishes and feelings into account at all stages of the process of intervention;
- ensure that children who have been abused or neglected will be supported in line with a child protection plan;
- work with parents/carers to build a supportive relationship and be clear about our Safeguarding and Child Protection Procedures and in particular when we may need to refer concerns to other agencies;
- include opportunities across the curriculum for children to be taught about safeguarding and to develop the skills they need to recognise danger and know where to seek help; we also aim to teach children how to be safe at home, in the street or when using the Internet.

It is important for children to **receive the right help at the right time** to address risks and prevent issues escalating. Research and serious case review have repeatedly shown the dangers of failing to take effective action. Examples of poor practice include:

- failing to act on and refer the early signs of abuse and neglect;
- poor record keeping;
- failing to listen to the views of the child;
- ailing to re-assess concerns when situations do not improve;
- not sharing information or sharing information too slowly;
- lack of challenge to those who appear not to be taking action.

Contextual Safeguarding

We believe that safeguarding and promoting the welfare is **everyone's** responsibility. **Everyone** who comes into contact with children and their families and carers has a role to play in identifying concerns, sharing information and taking prompt action.

We recognise that some safeguarding incidents or behaviours are associated with wider environmental factors which relate to children and young peoples' neighbourhoods and/or online communications. **Contextual Safeguarding** expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts. For further information see <u>University of Bedfordshire's Contextual Safeguarding Network</u>.

Our policy applies to all staff; this term refers to all those working for or on behalf of the school, temporary or permanent, in either paid or voluntary capacity, including governors. Concerned parents/carers may also contact the school and its governors. Parents are asked to report any injuries that happen to their child outside the school.

This policy is available publicly either via the school website or upon request.

2. STATUTORY FRAMEWORK

This policy is based on the Department for Education's statutory guidance <u>Keeping Children Safe in</u> <u>Education (KCSiE)</u> and <u>Working Together to Safeguard Children</u>, as well as on departmental advice <u>What to Do if You Are Worried a Child is Being Abused - Advice for Practitioners, Mental health and</u> <u>behaviour in Schools</u> and the <u>Governance Handbook</u>. We comply with this guidance and the arrangements agreed and published by our 3 local safeguarding partners (Harrow Council, Police and integrated Care Board).

This policy is also based on the following legislation:

- Section 175 of the <u>Education Act 2002</u>, which places a duty on schools and local authorities to safeguard and promote the welfare of pupils
- <u>The school Staffing (England) Regulations 2009</u>, which set out what must be recorded on the single central record and the requirement for at least one person conducting an interview to be trained in safer recruitment techniques
- <u>The Children Act 1989</u> (and <u>2004 amendment</u>), which provides a framework for the care and protection of children
- Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the <u>Serious Crime Act 2015</u>, which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18
- <u>Statutory guidance on FGM</u>, which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM
- <u>The Rehabilitation of Offenders Act 1974</u>, which outlines when people with criminal convictions can work with children
- Schedule 4 of the <u>Safeguarding Vulnerable Groups Act 2006</u>, which defines what 'regulated activity' is in relation to children
- <u>Statutory guidance on the Prevent duty</u>, which explains schools' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- The <u>Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended</u> <u>Entitlement) (Amendment) Regulations 2018</u> (referred to in this policy as the "2018 Childcare Disqualification Regulations") and <u>Childcare Act 2006</u>, which set out who is disqualified from working with children
- Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (July 2018)
- <u>Human Rights Act 1998</u>, which can be breached in case of harassment, violence or abuse
- <u>Equality Act 2010</u>, under which schools should carefully consider how they are supporting their pupils and students with regard to particular protected characteristics including disability, sex, sexual orientation, gender reassignment and race.

This policy also meets requirements relating to safeguarding and welfare in the <u>statutory framework</u> for the Early Years Foundation Stage.

We require that all staff will have read and understood this child protection and safeguarding policy and their responsibility to implement it. We require that staff have read at least Part 1 of the statutory guidance "Keeping Children Safe in Education" (KCSiE) and Annex B and we make sure they understand their role and responsibilities. We ensure that governors and senior leaders have read and understood Parts One and Two of KCSiE, and that those staff who do not work directly with children have read either part One or Annex A of KSCiE together with Annex B.

We are aware of our duty to "have due regard to the need to prevent people being drawn into terrorism", under the Counter-Terrorism and Security Act, 2015.

We are also aware that there is a mandatory reporting duty with regard to known cases of female genital mutilation (FGM) under section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious crime Act).

Children and Social Work Act 2017 brought about a new partnership arrangement to safeguard children. Harrow Safeguarding Partnership Arrangement oversees a collaborative approach by Harrow Safeguarding Children Board and Harrow Safeguarding Adults Board in order to promote a 'Think Whole Family' approach to safeguarding. As a relevant agency, Hillview Nursery School is committed to fulfilling its statutory duty to engage with these arrangements and will follow the current procedures as set out in the Harrow Strategic Safeguarding Partnership (HSSP) - http://www.harrowscb.co.uk, and in compliance with the London Child Protection Procedures, http://www.londoncp.co.uk/.

3. EQUALITY STATEMENT

Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face. However, we give special consideration to children who:

- Have special educational needs (SEN) or disabilities
- Are young carers
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- Have English as an additional language
- Are known to be living in difficult situations for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Are asylum seekers
- Are at risk due to either their own or a family member's mental health needs
- Are looked after or previously looked after.

4. ROLES AND RESPONSIBILITIES

Safeguarding and child protection is everyone's responsibility. T

This policy applies to all staff, volunteers and governors in the school and is consistent with the procedures of the 3 safeguarding partners.

Our policy and procedures also apply to extended school and off-site activities.

However, there are identified key adults in schools and in the Local Authority who have specific responsibilities under child protection procedures.

The names of those in our school with these specific responsibilities are shown on the front cover sheet of this policy.

4.1 Role of the Governing Body

The Governing Body has a strategic leadership responsibility for the school's safeguarding arrangements and must ensure that they comply with their duties under legislation.

The Governing Body has a legal responsibility to make sure that there are appropriate policies and procedures in place, which have regard to statutory guidance, in order for appropriate action to be taken in a timely manner to safeguard and promote children and young people's welfare. They will have regard to their obligations under the Human Rights Act 1998 and the Equality Act 2010 (including the Public Sector Equality Duty).¹

The Governing Body will facilitate a whole-school approach to safeguarding. This means involving everyone in the school and ensuring safeguarding and child protection are at the forefront and underpin all relevant aspects of process and policy development, and that all systems, processes and policies are transparent, clear and easy to understand and operate with the best interests of the child at their heart.

In particular, this whole-school approach will be fully inclusive and developed with specific reference to the developmental needs of children under 5., and will tackle (in age-appropriate stages) issues such as:

- Healthy and respectful relationships
- Boundaries and consent
- Stereotyping, prejudice and equality
- Body confidence and self-esteem
- How to recognise and abusive relationship, including coercive and controlling behaviour
- The concepts of, and laws relating to sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, so called honour-based violence such as forced marriage and FGM, and how to access support, and
- What constitutes sexual harassment and sexual violence and why these are always unacceptable.

The school will ensure that there are appropriate filters and monitoring systems in place to safeguard children and young people from potentially harmful and inappropriate online material.

The Governing Body will also ensure that:

a. The Safeguarding and Child Protection Policy and procedures are in place and embedded, and the policy is made available to parents on the school website (<u>www.hillviewnurseryschool.co.uk</u>). The Governing Body will approve this policy at each review, ensure it complies with the law and hold the Headteacher to account for its implementation.

b. The school contributes to multi-agency working in line with statutory guidance "Working Together to Safeguard Children" and that the school's safeguarding arrangements consider the procedures and practice of the locally agreed multi-agency safeguarding arrangements in place.

c. The school operates safe recruitment practices, including appropriate use of references and checks on new staff and volunteers (see the school's "Safer Recruitment" policy for further information) and that there are procedures for dealing with **any** safeguarding allegation made against, or low-level

¹ Set out in paragraphs 83-93 of KCSiE

concern (see Appendix 2) involving. members of staff, volunteers or other adults who are in contact with children in the school.

d. There is a member of the school's senior management team who is designated to take **lead responsibility** for dealing with child protection (the Designated Safeguarding Lead - DSL), which should not be delegated.

e. The DSL undertakes training, in addition to basic child protection (including online safety, which amongst other things includes an understanding of the filtering and monitoring systems in place), to Level III in multi-agency working that is provided by Harrow Strategic Safeguarding Partnership (http://www.harrowscb.co.uk/) and has refresher training annually as well as knowledge and skills updates (for example via e-bulletins, meeting other designated safeguarding leads, or taking time to read and digest safeguarding developments), at regular intervals, but at least annually, to keep up with any developments relevant to the role.

f. All other staff working with the children undertake appropriate safeguarding and child protection training, including online safety (to the standards agreed by HSCB) which is kept up-to-date by refresher training at a minimum of two yearly intervals, and receive current safeguarding information, at regular intervals, but at least annually.

Temporary staff and volunteers who work with the children are made aware of the school's arrangements for child protection and their responsibilities. New staff joining the school will receive child protection training as part of their induction programme.

g. Staff understand the process and principles for sharing information, including the Data Protection Act and GDPR 2018.

h. All governors will read "Keeping Children Safe in Education" and receive appropriate safeguarding and child protection training regularly.

i. Any deficiencies or weaknesses brought to the attention of the Governing Body are addressed without delay and rectified.

j. The Chair of Governors (or, in absence of the Chair, the Vice Chair) deals with any allegations of abuse made against the Headteacher/DSL, in liaison with the Local Authority.

k. Children are taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum.

I. There is a **designated Looked After Children LAC teacher** and staff have awareness of this group and their needs including contact arrangements.

m. There is a lead governor for child protection and safeguarding who will oversee the school's policy and practice and champion safeguarding issues. This governor will meet termly with the Designated Safeguarding Lead.

4.2 Role of the Headteacher/Designated Safeguarding Lead (DSL)

The Designated Safeguarding Lead (DSL) will take lead responsibility for safeguarding and child protection (including online safety and understanding the filtering and monitoring systems and processes in place) and will ensure that:

a. The school's policies and procedures for Safeguarding and Child Protection are fully implemented and followed by all staff. In particular, the DSL will ensure all staff have read and understood at least Part One of KCSiE and relevant changes; relevant staffing ratios are met each child in the Early Years Foundation Stage is assigned a key person. b. Sufficient resources and time are allocated to enable the DSL and other staff to discharge their responsibilities, including taking part in strategy discussions and other inter-agency meetings.

c. All staff and volunteers feel able to raise concerns about poor and unsafe practices in regard to children, and act as the 'case manager' in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate.

d. All staff are made aware of the DSL.

e. He/she receives refresher training at two-yearly intervals to keep his/her knowledge and skills up to date.

f. All staff who work with children undertake appropriate training to equip them to carry out their responsibilities for safeguarding children effectively which is kept up to date by refresher training every two years, and receive current safeguarding information at regular intervals, but at least annually.

g. New staff receive a Safeguarding Children induction within 7 working days of commencement of their contract.

h. Temporary staff and volunteers are made aware of the school's arrangements for safeguarding children within 7 working days of their commencement of work.

i. The school operates within the legislative framework and recommended guidance.

j. All staff and volunteers are aware of the Harrow Multi-Agency safeguarding procedures and any other relevant local guidance.

k. Effective working relationships are developed with other agencies and services.

I. The most appropriate course of action is given and whether the concerns should be referred to MASH – refer to <u>Harrow Thresholds Guidance</u>. If it is decided to make a referral to MASH a parent will be informed, unless to do so would place the child at further risk or undermine the collection of evidence e.g. obtaining forensic evidence. All concerns, discussion and decisions will be recorded in writing.

The DSL will provide guidance on the appropriate action. Options will include:

- Managing any support for the child internally via the school's own pastoral support processes;
- An early help assessment; or
- A referral for statutory services e.g. the child might be in need, is in need or suffering or likely to suffer harm.

m. Accurate safeguarding records relating to individual children are kept separate from the academic file in a secure place, marked 'Strictly Confidential' and are passed securely, should the child transfer to a new provision.

n. The school attends Child Protection Conferences and contributes to the decision making and delivery of actions planned to safeguard the child.

o. The school effectively monitors children about whom there are safeguarding concerns, as we recognise concerns tend to grow and may be apparent before someone makes an allegation (KSIE). The school will notify MASH when there is an unexplained absence of more than two days for a child who is the subject of a child protection plan.

p. Guidance is provided to parents, children and staff about obtaining suitable support.

q. Parents are aware of the safeguarding procedures used and relevant policies.

4.3 Role of the staff

All staff at Hillview School will be aware of:

a. The school's systems which support safeguarding, including this Safeguarding and Child Protection Policy and Procedures, the staff code of conduct, the role and identity of the designated safeguarding lead (DSL) and the deputy, the behaviour policy, and the safeguarding response to children who go missing from education.

b. The Early Help process and their role within it for all services, at both Local Authority and school level, including identifying emerging problems, liaising with the Designated Senior Lead, and sharing information with other professionals in order to support early identification and assessment, focussing on providing interventions to avoid escalation of worries and needs (see Section 5: School Procedures-Early Help). In some cases, staff may be asked to act as the lead professional in undertaking an early help assessment.

c. The process for making referrals to MASH and for statutory assessments under the Children Act 1989 that may follow a referral, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) including the role they might be expected to play in such assessments.

d. What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals.

e. The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), FGM and radicalisation.

f. Children's mental health and wellbeing during Covid 19 and support through nurture intervention groups.

Section 5 of this policy outlines in more detail how staff are supported to do this.

5. SCHOOL PROCEDURES

Staff, volunteers and governors must follow the procedures set out below in the event of a safeguarding issue.

We recognise that high self-esteem, confidence, supportive friends and good lines of communication with a trusted adult help to protect children. Our Safeguarding culture in school depends upon every member of staff being proactive in recognising opportunities to promote and support the development of these protective factors.

This includes the use of appropriate forms of online communication directly from staff to parents, in order to contact parents. We use Zoom and WhatsApp for these purposes. Staff must not use social media (Facebook, Twitter etc) to make contact with individual parents or families.

5.1 If a child is suffering or likely to suffer from harm, or in immediate danger

If a child is in immediate danger or is at risk of harm, the MASH Golden Number must immediately be called and then the MASH Referral <u>MASH-referral-2022.docx (live.com</u>) must be made and/or the police immediately. Anybody can make a referral. If anyone other than the DSL makes the referral, they should inform the DSL as soon as possible.

If a member of staff disagrees about the level of concern and feels that a child has not been protected,

any member of staff can make a direct referral to MASH – refer to <u>HSCB Guidance on Multi Agency</u> <u>Resolution of Professional Disagreements.</u>

Within one working day of a referral being made, MASH should acknowledge receipt to the referrer and make a decision about the next steps and the type of response that is required. The referrer should follow up if this information is not forthcoming. If social workers decide to carry out a statutory assessment, staff should do everything they can to support that assessment (supported by the DSL as required).

If, after a referral, the child's situation does not appear to be improving, the referrer should consider following the <u>HSCB Guidance on Multi Agency Resolution of Professional Disagreements</u>. to ensure that their concerns are addressed and, most importantly, that the child's situation improves.

5.2 If a child makes a disclosure

If a child discloses a safeguarding issue to you, you should:

- Listen to and believe them. Allow them time to talk freely and do not ask leading questions but open-ended: if the case comes to court, the court will need to be convinced that the evidence has not been contaminated by someone putting words/suggestions into the child's mind. Interventions need to be along the lines of: "Tell me how it happened..."/"Would you like to tell me anything more?"/"Go on... "Well done, you're doing well"
- Stay calm and do not show that you are shocked or upset
- Tell the child they have done the right thing in telling you. Do not tell them they should have told you sooner
- Explain what will happen next and that you will have to pass this information on. Do not promise to keep it a secret
- Write up your conversation as soon as possible in the child's own words. Stick to the facts, and do not put your own judgement on it
- Sign and date the write-up and pass it on to the DSL. Alternatively, if appropriate, make a referral to MASH and/or the police directly (see 5.1), and tell the DSL as soon as possible that you have done so.
- Acknowledge your own feelings and if you feel it necessary, seek help in dealing with your own stress and discuss this with the DSL.

5.3 If you discover that FGM has taken place or a pupil is at risk of FGM

The Department for Education's Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".

FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.

Possible indicators that a pupil has already been subjected to FGM, and factors that suggest a pupil may be at risk, are set out in Appendix 1.

Any teacher who discovers (either through disclosure by the victim or visual evidence) that an act of FGM appears to have been carried out on a **child** must immediately report this to the police, personally. This is a statutory duty, and teachers will face disciplinary sanctions for failing to meet it.

Unless they have good reason not to, they should also discuss the case with the DSL and involve MASH as appropriate.

Any other member of staff who discovers that an act of FGM appears to have been carried out on a child must speak to the DSL and follow our local safeguarding procedures.

The duty for teachers mentioned above does not apply in cases where a pupil is *at risk* of FGM or FGM is suspected but is not known to have been carried out. Staff should not examine pupils.

Any member of staff who suspects a child is *at risk* of FGM or suspects that FGM has been carried out must speak to the DSL and follow our local safeguarding procedures.

5.4 If you have concerns about a child (as opposed to believing a child is suffering or likely to suffer from harm, or in immediate danger)

Where possible, speak to the DSL first to agree a course of action. If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken. Speak to a member of the senior leadership team and/or take advice from MASH. You can also seek advice at any time from the NSPCC helpline on 0808 800 5000.

Make a referral to MASH directly, if appropriate (see 'Referral' below). Share any action taken with the DSL as soon as possible.

Early Help

Where a safeguarding concern does not meet the threshold for completion of a MASH Referral, the DSL should record how this decision has been reached and should consider whether additional needs of the child have been identified that might be met by a coordinated offer of early help.

Hillview Nursery School strongly believes that early intervention is key when supporting children and families. Any child may benefit from early help, but all school and college staff should be particularly alert to the potential need for early help for a child who:

- is disabled or has certain health conditions and has specific additional needs
- has special educational needs (SEN) (whether or not they have a statutory Education, Health and Care Plan)
- has a mental health need
- is a privately fostered child (see section 5.9)
- is a young carer (see section 5.10)
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines
- is frequently missing/goes missing from care or from home
- is at risk of modern slavery, trafficking or sexual or criminal exploitation
- is at risk of being radicalised or exploited
- has a family member in prison, or is affected by parental offending
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues or domestic abuse
- is misusing alcohol and other drugs themselves
- has returned home to their family from care
- is at risk of 'honour'-based abuse such as Female Genital Mutilation (FGM) or forced marriage
- is persistently absent from education, including persistent absences for part of the school day

At Hillview Nursery School parent coffee events are organised in order to build parent partnerships and build trust and supports child development.

Parents of children with special educational needs (SEN) are introduced to representatives from Harrow Parent Forum and SENDIAS in order to access support needed.

For children who need support with communication, social interactions and emotional support, intervention groups are in place within the school 3 days a week in order to develop skills.

If Early Help is appropriate, the DSL will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate.

Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner.

The DSL will keep the case under constant review and the school will consider a referral to MASH if the situation does not seem to be improving. Timelines of interventions will be monitored and reviewed.

Referral

If it is appropriate to refer the case to MASH or the police, the DSL will make the referral or support you to do so.

If you make a referral directly (see section 5.1), you must tell the DSL as soon as possible.

MASH will make a decision within 1 working day of a referral about what course of action to take and will let the person who made the referral know the outcome. The DSL or person who made the referral must follow up with MASH if this information is not made available, and ensure outcomes are properly recorded. If the child's situation does not seem to be improving after the referral, the DSL or person who made the referral must follow local escalation procedures to ensure their concerns have been addressed and that the child's situation improves.

5.5 If you have concerns about extremism

If a child is not suffering or likely to suffer from harm, or in immediate danger, where possible speak to the DSL - who is also the Prevent Single Point of Contact (SPOC) - to agree a course of action. If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken.

Speak to a member of the senior leadership team and/or seek advice from MASH. Make a referral to MASH directly, if appropriate (see 'Referral' above). Where there is a concern, the DSL will consider the level of risk and decide which agency to make a referral to. This could include <u>Channel</u>, the government's programme for identifying and supporting individuals at risk of being drawn into terrorism, or the MASH team.

The Department for Education also has a dedicated telephone helpline, 020 7340 7264, which school staff and governors can call to raise concerns about extremism with respect to a pupil. You can also email <u>counter.extremism@education.gov.uk</u>. Note that this is not for use in emergency situations.

In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you think someone is in immediate danger or may be planning to travel to join an extremist group or see/hear something that may be terrorist-related.

If staff members have a concern about another staff member, they should follow the procedures in the Whistleblowing Policy and speak to the Prevent Lead.

5.6 Concerns about a staff member or volunteer

If you have concerns about a member of staff or volunteer, or an allegation is made about a member of staff or volunteer posing a risk of harm to children, speak to the Headteacher. If the concerns/allegations are about the Headteacher, speak to the Chair of Governors. See full details at section 12. The Headteacher/Chair of Governors will then follow the procedures set out in section 12, if appropriate.

Where appropriate, the school will inform Ofsted of the allegation and actions taken, within the necessary timescale.

5.8 Whistleblowing

All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the school's safeguarding regime and know that such concerns will be taken seriously by the senior leadership team.

Whistleblowing is defined as 'making a disclosure in the public interest' and occurs when a worker (or member of the wider school community) raises a concern about danger or illegality that affects others, for example pupils in the school or members of the public.

All staff must be aware of their duty to raise concerns about the attitude or actions of colleagues in line with the school's Code of Conduct/Whistleblowing policy. The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally.

See page 2 for contact numbers.

5.9 Private Fostering

Children in foster care fall into two main groups; those looked after by the Local Authority or independent fostering agencies, and those fostered privately.

Private fostering is different from Local Authority fostering where carers are approved as foster carers. Private fostering occurs when a child or young person under 16 (under 18 years if disabled), is cared for, and provided with accommodation for 28 days or more, by an adult who is not a relative, by private arrangement between the parent and carer.

The Children Act 1989 defines 'relative' in relation to a child as a grandparent, brother, sister, uncle or aunt. They could be a full or half relation, and could be related by marriage. The term also includes a step-parent. A cohabitee of the mother or father would not qualify as a relative; neither would extended family such as a great aunt/uncle or parent's cousin. Common examples of private fostering arrangements:

• Children and young people who are sent to this country for education or health care by their birth parents from overseas

- Children or young people whose parents work or study long and/or antisocial hours
- Children or young people who are living with a friend's family as a result of parental separation, divorce or difficulties at home

• A teenager living with the family of a boyfriend or girlfriend

Legal requirements that professionals must do:

Private foster carers are legally required to notify their Local Authority but many do not, usually because they do not know that they have to. This means that Children's Services are unable to check whether the child is being properly cared for.

Ideally, notification should come from the parent or carer, however, education, health; other social care professionals can also play an important role, as they are often the people who become aware of private fostering situations.

If Hillview Nursery School is made aware of private fostering we must notify the Local Authority.

5.10 Young Carers

If Hillview Nursery School is made aware that a child is a young carer of a parent or sibling, or one of their siblings is a young carer, then as part of our wider community commitment, we would signpost the family to Harrow Carers who provide support, advice and training. They can be contacted on 020 8868 5224.

If a child is 17 or under and looks after someone with a physical or mental health problem, they are usually classed as a young carer. There is a whole community of young people facing the same day-today issues and Harrow Carers are there to support the carer and family if they live in Harrow.

6. WHEN TO BE CONCERNED

Hillview Nursery School understands that child abuse involves all ways in which a child's development and health are damaged by the actions or inactions of others. Usually, this means by the actions of adults, but sometimes it may be the actions of other children.

All staff are made aware of how to identify and respond to the four main categories of child abuse - physical abuse, emotional abuse, sexual abuse and neglect – and to specific safeguarding issues (Child Sexual Exploitation, Child Criminal Exploitation, Honour Based Abuse and FGM, Breast Flattening, Infant Oral Mutilation, Radicalisation and Terrorism, Children Missing from Education).

We are aware that children can be at risk of harm inside and outside of school, inside and outside of home, face to face as well as online. Staff should exercise **professional curiosity** and know what to look for as this is vital for the early identification of abuse or neglect.

We recognise that often the different categories of abuse overlap and many children suffer the effects of a range of destructive behaviours. In such cases, we understand that it is important to note clusters of signs as these may assume more significance than one indicator in isolation. (Refer to Appendix 1).

We are aware that some children may have an increased risk of abuse because of prejudice and discrimination, isolation, social exclusion, communication issues and/or reluctance on the part of some adults to accept that abuse can occur.

We are also aware that children might be at risk of abuse of exploitation in situations outside their families – children can be vulnerable to multiple harms including sexual abuse (including harassment and exploitation), domestic abuse in their own intimate relationships (teenage relationship abuse), criminal exploitation, serious youth violence, county lines and radicalisation.

We recognise that children with SEN and disabilities can be disproportionally impacted by behaviours such as bullying without outwardly showing any signs. We acknowledge that additional barriers can exist when recognising abuse and neglect in this group of children.

Therefore, we expect staff to take extra care to be alert for any apparent signs of abuse or neglect and not to assume that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration.

The key question which we always ask ourselves when deciding whether or not a child is a victim of abuse is "Is the child suffering or likely to suffer significant harm?"

7. CONFIDENTIALITY

Confidentiality is an issue that needs to be discussed and fully understood by all those working with children, particularly in the context of child protection. A member of staff must never guarantee confidentiality to anyone about a safeguarding concern (including parents/carers or pupils) or promise to keep a secret. In accordance with statutory requirements, where there is a child protection concern, this must be reported to the DSL or deputy and may require further referral and subsequent investigation by appropriate authorities.

Information on individual child protection cases may be shared by the DSL or deputy with other relevant staff members. This will be on a 'need to know' basis only and where it is in the child's best interests to do so.

All staff must be aware that they have a responsibility to share relevant information about the protection of children with other agencies. They should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision.

DFE's advice "Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers" supports staff who have to make decisions about sharing information. If staff are in any doubt about sharing information, they should speak to the DSL, or deputy.

8. RECORDS AND INFORMATION SHARING

Well-kept records (see Appendix 4 and 5) are essential to good child protection practice. Our school is clear about the need to record any concern held about a child or children within our school, the status of such records and when these records should be shared with other agencies.

Any member of staff receiving a disclosure of abuse or noticing signs or indicators of abuse, will record it as soon as possible, noting what was said or seen, if appropriate, using a body map to record, with the date, time and location. All records will be dated and signed, with the name printed and will include the action taken. This is then presented to DSL or deputy, who will decide on the appropriate action and record it accordingly.

Any records related to child protection are kept in an individual child protection file for that child. All child protection records are stored securely and confidentially and will be retained for 25 years after the pupil's date of birth, or until they transfer to another school or educational setting.

Where there are concerns about the safety of a child, the sharing of information in a timely and effective manner between organisations can reduce the risk of harm (see <u>NSCPP Child protection</u> records retention and storage guidelines)

Information sharing

As part of meeting a child's needs, the school understands that it is critical to recognise the importance of information sharing between professionals and local agencies and will contribute to multi-agency working (see section 9) in line with <u>Working Together to Safeguard Children</u>.

Where there are concerns about the safety of a child, the sharing of information in a timely and effective manner between organisations can reduce the risk of harm.

Whilst the Data Protection Act 2018 and the General Data Protection Regulations (GDPR) place duties on organisations and individuals to process personal information fairly and lawfully, and to keep the information they hold safe and secure, they are not a barrier to sharing information. Similarly, human rights concerns, such as respecting the right to a private and family life would not prevent sharing where there are real safeguarding concerns.

Staff should not assume a colleague or another professional will take action and share information that might be critical in keeping children safe.

Our school is confident of the processing conditions that allow us to store and share information for safeguarding purposes. This allows us to share information without consent, if it is not possible to gain consent or if to gain consent would place a child at risk.

Staff will have regard to the Government guidance: <u>Information sharing</u>: <u>advice for practitioners</u> <u>providing safeguarding services to children</u>, <u>young people</u>, <u>parents and carers</u> which supports staff who have to make decisions about sharing information.

This document includes the seven golden rules to information sharing:

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.

2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.

3. Seek advice from other practitioners, or your information governance lead, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.

4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.

5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.

6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see principles).

7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

All staff should be proactive in sharing information as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to MASH.

As well as allowing for information sharing, in circumstances where it is warranted because it would put a child at risk of serious harm, the DPA 2018 and the GDPR allow schools to withhold information. This may be particularly relevant where a child is affected by domestic abuse perpetuated by a parent or carer, is in a refuge or another form of emergency accommodation, and the serious harm tests is met.

Ordinarily, the school will always undertake to share its intention to refer a child to Social Care with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. It would be legitimate to share information without consent where: it is not possible to gain consent; it cannot reasonably be expected that a practitioner gains consent; and, if to gain consent would put a child at risk. If in doubt, staff will consult with the MASH Professional Consultation Line on this point.

The school will have regard to the HSCB Guidance on the Transfer of a Child Protection /or Safeguarding File to another Education Setting. Where a child leaves the school, the DSL will ensure their child protection file is transferred to the new school as soon as possible (within 5 days for an inyear transfer or within the first 5 days of the start of a new term). These will be marked 'Confidential' and for the attention of the receiving school's DSL with a return address on the envelope so it can be returned to us if it goes astray. We will obtain evidence that the paperwork has been received by the new school and then destroy any copies held in our school.

Where a pupil joins our school, we will request all child protection records from the previous educational establishment if none are received.

9. MULTI-AGENCY WORK

Schools often hold crucial information and as such our school is an essential partner in strategy discussions, child protection conferences and core groups. Our school will be pro-active and prioritise inter-agency working to contribute to safeguarding children. It is the responsibility of the DSL to ensure that the school is represented at and a report is submitted to any child protection conference for children on the school roll or previously known to them. Where possible and appropriate, any report will be shared in advance with the parents/carers. Whoever represents the school will be fully briefed on any issues or concerns the school has and will be prepared to contribute to the discussions at the meetings.

If a child is subject to a child protection or a child in need plan, the DSL will ensure the child is monitored regarding their school attendance, emotional well-being, academic progress, welfare and presentation. The DSL will ensure the school prioritises attendance at core group meetings and provide appropriate information to contribute to the plan at these meetings. Any concerns about the child protection plan and/or the child's welfare will be discussed and recorded at the child protection conference meeting, unless to do so would place the child at further risk of significant harm. In this case, the DSL will inform the child's key worker immediately and then record that they have done so and the actions agreed.

When we become aware that a child or young person who is being, or is going to be, privately fostered our school has a duty under Section 10 of the Children Act 2004 to inform the Local Authority to ensure the appropriate safeguards are in place. The DSL will make appropriate referrals using the Harrow Referral pathways.

10. COMMUNICATIONS WITH PARENTS AND CARERS

Where appropriate, we will discuss any concerns about a child with the child's parents. The DSL will normally do this in the event of a suspicion or disclosure.

Other staff will only talk to parents about any such concerns following consultation with the DSL.

If we believe that notifying the parents would increase the risk to the child, we will discuss this with the MASH team before doing so.

In the case of allegations of abuse made against other children, we will normally notify the parents of all the children involved.

11. SAFER RECRUITMENT

We ensure safer recruitment practices are always followed. DBS checks and checks of identity, background, qualifications, references, medical fitness, overseas checks and permission to work in UK will be made. We ensure that every recruitment panel has at least one member on it who has completed the safer recruitment course and has an up-to-date certificate to that effect.

12. ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS

The school will follow the HSCB <u>Managing allegations against staff and volunteers</u> if a safeguarding concern or allegation is raised against an adult in a position of trust.

An allegation that may meet the harm threshold is any information that indicates that a member of staff/volunteer may have:

- behaved in a way that has or may have harmed a child.
- possibly committed a criminal offence against/related to a child.
- behaved towards a child or children in a way that indicates s/he would pose a risk of harm if they work regularly or closely with children; and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

This applies to any child with whom the member of staff/volunteer has contact, within their personal, professional or community life.

To reduce the risk of allegations, all staff must be aware of safer working practice and must be familiar with the guidance contained in the school code of conduct or document <u>Guidance for safer working</u> <u>practice for those working with children and young people in education settings</u> (Safer Recruitment Consortium, February 2022). If the concerns are about the Headteacher, then the Co-Chairs of Governors, Gemma Williams (<u>gewillia@googlemail.com</u>) and/or Claudia Calogero (<u>callas65@gmail.com</u>) should be contacted.

In the absence of the Co-Chairs of Governors, the Vice Chair should be contacted. The Vice Chair is Dipa Nandha (<u>Dipa.Nandha@harrow.gov.uk</u>).

Our school will also ensure that any member of staff facing an allegation will be provided with support, including a named contact if they are suspended. We will work effectively to help ensure that the matter is dealt with as quickly, fairly and consistently as possible in the interests of all concerned.

The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification. Confidentiality should not be promised and information should be shared on a 'need to know' basis only.

An immediate written record of the allegations should be made, including time, date and place where the alleged incident took place, with brief details of what was said to have happened. This record should be signed and immediately passed on to the Headteacher (or Chair of Governors if the allegation is made against the Headteacher).

Whilst recognising our duty to support staff, the welfare of our pupils remains our paramount consideration.

The recipient of an allegation must not unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.

The Headteacher will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Designated Officer (previously LADO) via MASH.

If the allegation meets any of the four criteria set out at the start of this section, contact should always be made with the Designated Officer (previously LADO) without delay. The Headteacher should, as soon as possible, following briefing from the Designated Officer (previously LADO), inform the subject of the allegation.

If it is decided that the allegation meets the threshold for safeguarding, this will take place in accordance with the Harrow Safeguarding Children Board Multi-Agency procedures.

If it is decided that the allegation does not meet the threshold for safeguarding, it will be dealt with in accordance with the school's policy for managing low-level concerns (see Appendix 2).

Our school will ensure that any disciplinary proceedings against staff relating to child protection matters are concluded in full even when the member of staff is no longer employed at the school. We recognise our legal duty to refer to the Disclosure Barring Service (DBS) and any other relevant professional body details of anyone who has harmed or poses a risk of harm to a child.

13. USE OF SCHOOL PREMISES FOR NON-SCHOOL ACTIVITIES

The governing body will ensure that where school facilities/premises are hired or rented out to organisations or individuals, sports associations or service providers to run community or extracurricular activities appropriate arrangements are in place to keep children safe.

The governing body/proprietor will seek assurance that the body concerned has appropriate child protection and safeguarding policies and procedures in place, including inspecting these as needed, in line with Keeping children safe in out-of-school settings Arrangements will also be put in place for the body hiring or renting the school facilities or premises to liaise with the school on these matters where appropriate.

These arrangements will apply regardless of whether or not the children who attend any of these services or activities are children on the school roll.

Where a lease or hire agreement is entered into the governing body will ensure safeguarding requirements are included as a condition of use and occupation of the premises; this will make clear that any failure to comply would lead to termination of the agreement.

APPENDIX 1

RECOGNISING THE SIGNS

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. Children may be abused in a family or in an 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 by another child or children.

One or more of the following signs do not necessarily indicate that a child has been abused, but they may alert you to the fact that something is wrong.

1. PHYSICAL ABUSE

Physical abuse 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.

The UN Convention on the 'Rights of the Child' 1991 states:

"Children have the right to be protected from all forms of violence. They must be given proper care by those looking after them" and

"Children have a right not to be punished cruelly or in a way that would belittle them."

Signs and Symptoms

- Unexplained recurrent injuries or burns
- Improbable excuses or refusal to explain injuries
- Wearing clothes to cover injuries, even in hot weather
- Refusal to undress for gym
- Bald patches
- Chronic running away
- Fear of medical help or examination
- Self-destructive tendencies
- Aggression towards others
- Fear of physical contact shrinking back if touched
- Admitting they are punished, but the punishment is excessive (such as child being beaten every night to 'make him study')
- Fear of suspected abuser being contacted
- Speaking in monosyllables
- Becomes withdrawn
- Afraid to go home

2. EMOTIONAL ABUSE

Emotional abuse is 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 children 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.

There is an element of emotional abuse in all forms of abuse, but some children may be emotionally abused whilst their physical care may be good.

Key elements of active emotional abuse are:

Criticism - ridicule - withdrawal - rejection - hostility - threat - exploitation

Signs and Symptoms

- Physical, mental and emotional developmental lags
- Sudden speech disorders
- Continual self-deprecation (I'm stupid, 'ugly', 'worthless', etc.)
- Over-reaction to mistakes
- Extreme fear of any new situation
- Inappropriate response to pain ('I deserve this')
- Neurotic behaviour (rocking, hair twisting, self-mutilation)
- Extremes of passivity or aggression
- Threatened or attempted suicide
- Over adaptive behaviour: e.g. too well-mannered
- Compulsively clean or neat
- Learning difficulties
- Low self esteem
- Poor peer relationships

3. SEXUAL ABUSE

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.

Sexual abuse is the abuse of power in the relationship and the child's inability to give informed consent. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue (also known as child-on-child abuse- see section 5) in education and all staff should be aware of it and of the school's policy and procedures for dealing with it.

All sexual abuse is damaging but the trauma may be more severe if the abuse is perpetrated by someone close to the child, if violence is involved, if the abuse begins at an early age and is repeated over time and if the child is not supported by the non-abusive parent/carer.

Sexual abuse includes:

- Sexist remarks/suggestions
- Being taught indecent language
- Exposure to indecent material

- Indecent exposure
- Observing sexual activities
- Being forced to touch adults
- Indecent assault
- Digital penetration
- Group sexual activities
- Oral/anal/vaginal intercourse
- Encouraging children to behave in sexually inappropriate ways,
- Grooming a child in preparation for abuse (including via the internet).

Signs and Symptoms

- Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age
- Medical problems such as chronic itching or sexually transmitted diseases
- Other extreme reactions such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia
- Personality changes such as becoming insecure or clinging
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Sudden loss of appetite or compulsive eating
- Being isolated or withdrawn
- Inability to concentrate
- Lack of trust or fear of someone they know well, such as not wanting to be alone with a babysitter or child-minder
- Starting to wet again; day or night/nightmares
- Become worried about clothing being removed
- Suddenly drawing sexually explicit pictures
- Trying to be 'ultra good' or perfect; over-reacting to criticism
- Hints about secrets they cannot tell
- Withdrawal from peers
- Deterioration in performance at School
- Suicidal thoughts/attempts
- Anger/aggression

4. NEGLECT

Neglect is the persistent failure to meet a child's basic physical, and/or psychological and/or emotional 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

• Constant hunger

- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Untreated medical conditions
- No social relationships
- Compulsive scavenging
- Destructive tendencies
- Pale, listless
- Frequent absence from school
- Arriving very early, leaving late
- Truancy
- Dental problems, squinting at the board
- Carrying parental responsibilities (caring for siblings)

5. CHILD ON CHILD ABUSE

Our school may be the only stable, secure and safe place in the lives of children at risk of, or who have suffered harm. However, on occasions their behaviour may be challenging and defiant, or they may instead be withdrawn, or display abusive behaviours towards other children.

We are aware that child on child abuse can manifest itself in many ways. This may include bullying (including cyber bullying); on-line verbal abuse; gender-based abuse; verbal sexist abuse; unwanted, unthinking or coerced nude or semi-nude image sharing; or sexually harmful behaviour; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm.

We will consider these issues with specific reference to the developmental needs of children under 5.

We do not tolerate any bullying, abuse or harmful behaviour in school and will take swift action to intervene where this occurs.

We use the curriculum to help children understand, in an age-appropriate way, what a safe relationship is, and what abuse is. We encourage them to tell a trusted adult if someone is behaving in a way that makes them feel uncomfortable. Our school understands the different gender issues that can be prevalent when dealing with child-on-child abuse.

6. SEXUAL VIOLENCE AND HARRASSMENT

Sexual violence and harassment can occur between children of any age individually or in groups. Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing, and in all likelihood will adversely affect their educational attainment.

Our school takes all victims seriously and they will be offered the appropriate support.

Predatory behaviour or a dismissive attitude towards sexual harassment may be prevalent online or feature in the children's lived experience of home, friendship groups or society at large, but it is not indicative of respect for other pupils and therefore it is unacceptable at our school. An example of such harassment is 'Upskirting', which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual

gratification, or cause the victim humiliation, distress or alarm. Anyone of any gender can be a victim and it is a criminal offence under the Voyeurism (Offences) Act 2019.

Our school culture of safeguarding ensures that the message that abusive behaviours are unacceptable is explicit through our curriculum, our environment and our staff modelling appropriate language and respectful relationships. We do not accept that it is 'just part of growing up' or a joke.

Our school manages such incidents in the same way by considering the need to undertake an immediate risk and needs assessment, and as with any other child protection concern, we will follow the same procedures. Pupils initiating such abuse or sexualised behaviour will be subject to an AIM risk assessment/Brook Traffic Lights which will inform a safety plan for everyone involved, including themselves.

As set above, we maintain an attitude of '**it could happen here'** and we are aware of the importance of understanding intra familial harms and any necessary support for siblings following incidents.

7. CHILD SEXUAL EXPLOITATION (CSE) AND CHILD CRIMINAL EXPLOITATION (CCE) INCLUDING COUNTY LINES

Both Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE) are forms of abuse and both occur where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence.

CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation.

This can happen to children and young people from any background or community.

The abuse can be perpetrated by individuals, groups, males or females and children or adults. 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 enforcement or enticement-based methods of compliance and may or may not be accompanied by violence or threats of violence. Children can be exploited even when the activity appears consensual.

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of County Lines criminal activity; drug networks or gangs grooming and exploiting children and young people to carry drugs, weapons and money for them.

It is important to note that the experience of girls who are criminally exploited can be very different to that of boys. The indicators may not be the same, however staff should be aware that girls are at risk of criminal exploitation too. It is also important to note that both boys and girls being criminally exploited may be at higher risk of sexual exploitation.

Key to identifying potential involvement may be 'missing episodes' when the child may have been trafficked for the purpose of transporting drugs, weapons or money. In close working relationship with our local MASH a referral to the National Referral Mechanism will be considered for any such concerns.

Signs and Symptoms

There are several warning signs that can indicate a child may be groomed for sexual exploitation and behaviours that a child is being sexually exploited. Using the mnemonic "S.A.F.E.G.U.A.R.D" can help consider relevant signs and behaviours:

- Sexual health and behaviour
- Absent from School or repeatedly running away
- Familial abuse and/or problems at home
- Emotional and physical condition
- Gangs, older age groups and involvement in crime
- Use of technology and sexual bullying
- Alcohol and drug misuse
- Receipt of unexplained gifts or money
- Distrust of authority figures

8. SERIOUS VIOLENCE

There are a number of indicators, which may signal that a child is at risk from, or involved with serious violent crime. These may include increased absence from school, a change in friendships, or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or a significant change of attitude or well-being or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that a child has been approached by, or is involved with, individuals associated with criminal networks or gangs.

9. DOMESTIC ABUSE

Domestic abuse is defined as "any incident or pattern of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 and 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, coercive or controlling behaviour".

The Domestic Abuse Act 2021 introduced the first ever statutory definition of domestic abuse and recognises the impact of domestic abuse on children, as victims in their own right, if they see, hear or experience the effects of abuse. 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. Experiencing domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, children may blame themselves for the abuse or may have had to leave the family home as a result.

Young people can also experience domestic abuse within their own intimate relationships. This form of peer-on-peer abuse is sometimes referred to as 'teenage relationship abuse'. Depending on the age of the young people, this may not be recognised in law under the statutory definition of 'domestic abuse' (if one or both parties are under 16).

Our school recognises that where there is Domestic Abuse in a family, the children/young people will always be affected; the longer the violence continues, the greater the risk of significant and enduring harm, which they may carry with them into their adult life and relationships. Domestic Abuse can also affect children in their personal relationships as well as in the context of home life.

Staff will follow the procedures outlined in this policy if concerns of Domestic Abuse arise. The school will vigilantly monitor the welfare of children living in domestic abuse households, offer support to them and contribute to any Multi-Agency Risk Assessment Conference (MARAC) safety plan as required.

Operation Encompass is a key partnership between the Metropolitan Police, the LA and the schools involving the reporting to schools, prior to the start of the next school day, when a child or young

person has been exposed, or involved in, to domestic incident. Our school has joined the protocol and will use the information shared to ensure that our children are supported and kept safe.

10. HONOUR BASED VIOLENCE

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 DSL. 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.

11. FEMALE GENITAL MUTILATION (FGM)

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.

Victims of FGM are likely to come from a community that is known to practice FGM. Girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.

Signs and symptoms that FGM has taken place

There are several indications that a girl or woman has already been subjected to FGM:

- A girl or woman may have difficulty walking, sitting or standing and may even look uncomfortable.
- A girl or woman may spend longer than normal in the bathroom or toilet due to difficulties urinating. A girl may spend long periods of time away from a classroom during the day with bladder or menstrual problems.
- A girl or woman may have frequent urinary, menstrual or stomach problems.
- There may be prolonged or repeated absences from school.
- A prolonged absence from school with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return could be an indication that a girl has recently undergone FGM.
- A girl or woman may be particularly reluctant to undergo normal medical examinations.
- A girl or woman may confide in a professional.
- A girl or woman may ask for help, but may not be explicit about the problem due to embarrassment or fear.
- A girl may talk about pain or discomfort between her legs.

Signs and symptoms that FGM is imminent

- It may be possible that families will practice FGM in the UK when a female family elder is around, particularly when she is visiting from a country of origin.
- Staff may hear reference to FGM in conversation, for example a girl may tell other children about it.
- A girl may confide that she is to have a 'special procedure' or to attend a special occasion to 'become a woman'.
- A girl may request help from a teacher or another adult if she is aware or suspects that she is at immediate risk.

- Parents state that they or a relative will take the child out of the country for a prolonged period.
- A girl may talk about a long holiday to her country of origin or another country where the practice is prevalent.
- Parents seeking to withdraw their children from learning about FGM.

12. FORCED MARRIAGE

A forced marriage is one that is entered into without the full consent of one or both parties. It is a crime to carry out any conduct whose purpose is to cause a child to marry before their 18th birthday, even if violence, threats or another form of coercion are not used.

Our staff understand how to report concerns where this may be an issue.

13. BREAST FLATTENING

Breast flattening (often called breast ironing) is the pounding and massaging of a young girl's breasts, to prevent and stunt breast growth. It is usually carried out by pressing, massaging or pounding the breasts using hard or heated objects.

Breast flattening is traditional practice in parts of West Africa. It is typically arranged or performed by the girl's mother, to make the girl less attractive to males by delaying the signs that the girl is maturing into a young woman. Reasons for this include, protecting the girl from sexual harassment and rape. It also carried out to discourage pre-marital sex, unwanted pregnancy and prevent early marriage. Often one of the drivers is that the mother will want her daughter to avoid pregnancy so that they receive an education.

Health Implications

Apart from the severe pain, the practice causes:

- burning and scarring
- long term malformation or disappearance of the breasts
- abscesses
- life threatening infections
- tissue damage
- interference with breastfeeding
- mastitis
- psychological problems anxiety, fear, depression, PTSD

Whilst there is limited information available about the long-term effects of breast ironing, experts warn that it could lead to the development of cysts, skin and breast cancer.

14. WITCHCRAFT

Abuse linked to a belief in spirit possession is difficult for professionals to identify, understand and sometimes accept. It sits outside the norm and there is a danger that although the signs are there for professionals to see, they could be dismissed as superstitious nonsense, steeped in the 'dark ages'. To adopt this view could seriously hamper attempts to safeguard a child with potentially fatal consequences.

Generally, the signs will not differ from other types of abuse and will include:

- physical injuries such as marks, bruises or burns
- the child being, withdrawn, distressed, disorientated or isolated
- loss of weight, hunger/malnourishment
- poor hygiene, unkempt, dirty clothes
- irregular attendance at school

Specific indicators

Specific indicators that the abuse may be linked to spirit possession/witchcraft may be present when professionals interact with the family.

Signs to look out for include:

- does the family come from a community or religion where such beliefs are widely accepted?
- has there been a change in the family dynamic or structure. Are the family under pressure?
- does the parent/carer put a high value on preserving family honour?
- are there reasons why the child might have been made a scapegoat?
- are there comments being made about the child being 'different'?
- is the child different from other children in the family or community e.g. disabled, epileptic, suffer an illness?
- what is the relationship between the child and their carer? Are they directly related to the child?
- what is the family structure? Are they treated differently to the other children in the household?
- is the parent or carer indicating that they are blaming the child for the family's misfortune?
- is there a lack of concern or close bond between the child and the parent/carer?
- is the parent/carer afraid to be near or alone with the child?
- is the child isolated by the family i.e. kept in a room, forced to eat alone? Where do they sleep and what conditions do they live in?
- is there an unborn child expected? There may be a belief that the evil spirit will be passed onto the expected child, and this may escalate the violence against the abused child.
- is there any religious literature relating to witchcraft/possession in the house?
- are there any plans to send the child to another country (this may be for 'deliverance')?
- has the child disclosed that they are or have been accused of being 'evil', being possessed by the devil?
- does the child believe they are possessed?
- does the child talk of 'eating people' or of 'changing into an animal'?
- does the child shy away from other children, believing that he/he may infect others?
- does the parent/carer recognise their faith or community leader as all powerful? Although most faith leaders and groups will not condone the abuse or beliefs, care should be taken that the family are not being directed by powerful faith figure or involved in a place of worship that view the abuse as normal practises or are exploiting the situation or the family.
- are there concerns for the mental health of the parent/carer or substance abuse involved?
- are the family being stigmatised or shunned within their community?

The use of correct terminology will help you identify whether a child is at risk and may also assist in building a rapport with the child and carer. Terminology differs greatly between cultures and includes:

• Witch or witchcraft

- Black magic
- Evil eye
- Sorcery or child sorcerer
- Possessed by the Holy Spirit
- Kindoki and Ndoki (central Africa)
- Genies or Djinns (Arabic, Islamic)
- Demons, poltergeist (European)
- Juju and Obeah, (west Africa and Caribbean)
- High Science, voodoo (Caribbean, West Indian community)
- Dainee (Bengali)
- Dakini (in the Hindu context)

15. PREVENTION OF RADICALISATION

Radicalisation is the process by which a person comes to support terrorism and forms of extremism which lead to terrorism. Extremism is an active or vocal opposition to fundamental British values including but not confined to:

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

It is important to be aware that, whilst there is a lot of media coverage regarding Islamic extremism, there are other organisations, including extreme right-wing groups, who can damage society and present a threat to the community. Schools should at all times ensure that their approach to the threat of radicalisation is balanced, calm and proportionate.

Most children, of whatever background, will not get involved in extremist action and in many cases suspicious behaviour may be a result of other problems e.g. mental health issues, relationship, drug or alcohol problems.

The general risks affecting children and young people may vary from area to area and according to their age. We are aware that there is an increased risk of radicalisation online.

There is no single way to identify an individual who is likely to be susceptible to a terrorist ideology. We need to be alert to changes in children's behaviour, which could indicate that they may need help or protection.

It should also be remembered that outside events, such as tensions in the local community, events in the country of origin, in the case of migrants, or major world events could also disproportionately affect the feelings and actions of young people. All staff should be alert to these events and be ready to help young people understand them, and put them into context.

Signs

- Disclosures of children's exposure to the extremist actions, views or materials of others outside of school, such as in their homes or community groups, especially where pupils have not actively sought these
- Voicing opinions drawn from extremist ideologies and narratives
- Parental reports of changes in behaviour, friendship or actions and requests for assistance
- Glorifying violence, especially to other faiths or cultures
- Out of character changes in dress, behaviour and peer relationships

- Secretive behaviour
- Intolerance of difference, including faith, culture, gender, race or sexuality
- Graffiti artwork or writing that displays extremist themes
- Attempts to impose extremist views or practices on others
- Verbalising anti-Western or anti-British views
- Advocating violence towards others

16. CHILDREN WHO ARE ABSENT FROM EDUCATION

A child being absent from education, particularly repeatedly, can be a warning sign of a range of safeguarding issues. This might include abuse or neglect, such as sexual abuse or exploitation or child criminal exploitation- particularly county lines, or issues such as mental health problems, substance abuse, radicalisation, FGM or forced marriage.

There are many circumstances where a child may be absent or become missing from education, but some children are particularly at risk. These include children who:

- Are at risk of harm or neglect
- Are at risk of forced marriage or FGM
- Come from Gypsy, Roma, or Traveller families
- Come from the families of service personnel
- Go missing or run away from home or care
- Are supervised by the youth justice system
- Cease to attend a school
- Come from new migrant families

We will follow our procedures for unauthorised absence and for dealing with children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of going missing in future.

This includes when problems are first emerging but also where children are already known to LA children's social care and need a social worker (such as on a child in need or child protection plan, or as a looked after child), where absence from education may increase known safeguarding risks within the family or in the community.

We will inform the Local Authority if a child leaves the school without a new school being named, and adhering to requirements with respect to sharing information with the Local Authority, when applicable, when removing a child's name from the admission register at non-standard transition points.

Staff will be trained in signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns which may be related to being missing, such as travelling to conflict zones, FGM and forced marriage.

If a staff member suspects that a child is suffering from harm or neglect, we will follow local child protection procedures, including with respect to making reasonable enquiries. We will make an immediate referral to the MASH team, and the police, if the child is suffering or likely to suffer from harm, or in immediate danger.

17. ELECTIVE HOME EDUCATION

Many home education children have an overwhelmingly positive learning experience. We would expect the parents' decision to home educate to be made with their child's best education at the heart

of the decision. However, this is not the case for all, and home education can mean some children are less visible to the services that are there to keep them safe and supported in line with their needs.

Where a parent/carer has expressed their intention to remove a child from school with a view to educating at home, the school will work together with the LA and other key professionals to coordinate a meeting with parents/carers where possible.

Ideally this would be before a final decision has been made to, to ensure the parents/carers have considered what is in the best interests of each child. This is particularly important where a child has SEND, is vulnerable, and/or has a social worker. Where a child has an Education, Health and Care plan in place the LA will need to review the plan, working closely with parents and carers.

18. LOOKED AFTER CHILDREN AND PREVIOUSLY LOOKED AFTER CHILDREN

The most common reason for children becoming looked after is as a result of abuse and/or neglect. We ensure staff have the skills, knowledge and understanding to keep looked after children safe and that there are arrangements in place so that appropriate staff have the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents, or on an interim or full care order) and the child's contact arrangements with birth parents or those with parental responsibility.

Appropriate staff will also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after the child. The DSL will have the details of the child's social worker and the name of the virtual school head in the authority that looks after the child.

We are aware that a previously looked after child potentially remains vulnerable and we ensure that all staff have the skills, knowledge and understanding to keep previously looked after children safe. We recognise that when dealing with looked after children and previously looked after children, it is important that all agencies work together and prompt action is taken when necessary to safeguard these children, who are a particularly vulnerable group.

For children who are care leavers, the DSL should have details of the LA Personal Advisor appointed to guide and support the care leaver and liaise with them as necessary regarding any issues of concern.

19. CHILDREN WITH SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND)

We understand that children with special educational needs and disabilities (SEND) can face additional safeguarding challenges. Our school recognises that additional barriers can exist when recognising abuse and neglect in this group of children.

These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability, without further exploration;
- Being more prone to peer group isolation than other children;
- Instances of child-on-child sexual abuse where the perpetrators are children will always require safeguarding support and a significant subgroup of these children will have SEND;
- Children with SEND and/or protected characteristics are statistically more likely to be identified as targets for bullying or sexual abuse by their peers;
- Communication barriers that make telling an adult difficult;

- Cognitive understanding, for example, whether they are able to understand the difference between fact and fiction in online content and the consequences of repeating the content/behaviours in school
- The requirement of personal or intimate care.

Our school takes into consideration these additional vulnerabilities and challenges, and staff are proactive in safeguarding all our vulnerable children and are aware that any reports of abuse involving children with SEND will require close liaison with the DSL and SENCO.

20. MENTAL HEALTH AND WELLBEING

All staff are aware that in some cases mental health can be an indicator that a child has or is suffering from or at risk or abuse. Staff are able to observe children day-to-day and identify those whose behaviour suggests they may be experiencing a mental health problem. Where there are mental health concerns about a child that is also a safeguarding concern, immediate action will be taken following the child protection policy and the senior Mental Health Lead will be informed.

Our school works to protect the emotional wellbeing and resilience of all pupils and staff, as well as provide specific support for those with additional needs.

We understand that there are risk factors which increase a child's vulnerability and protective factors that can promote or strengthen resiliency. The more risk factors present in a child's life, the more protective factors or supportive interventions are required to promote further growth and resilience. It is recognised that some children in our school may be suffering from mental ill-health and are at risk of self-harm or suicide but may present in school as making good progress and achieving well.

It is therefore vital that we work in partnership with parents and carers to support the mental health and well-being of our children. It is equally important that parents share any concerns about the wellbeing of their child with school, so that appropriate support and interventions can be identified and implemented in partnership.

Where there are concerns that a child may be self- harming, it will be taken seriously as this may indicate an increased risk of suicide either intentionally or by accident. If a child discloses self-harm or found to be self-harming the DSL or Mental Health Lead will take the time to establish any underlying concerns. The child will be supported to access services using the appropriate Harrow referral pathways.

19. INFANT ORAL MUTILATION

Infant oral mutilation (IOM) is a primitive traditional practice involving the 'gouging out' of an infant's healthy primary tooth germs. This can lead to transmission of blood-borne diseases such as HIV/ AIDS, septicaemia and death. Other complications include eradication and/ or malformation of the child's permanent dentition. IOM is usually performed by village healers in low-income countries as an accepted remedy for common childhood illness. The gingival swelling of the unerupted teeth is mistakenly thought to indicate the presence of 'tooth worms'. Crude methods to remove these are employed using unsterile tools. IOM has been reported in many African countries.

LOW-LEVEL CONCERNS

Hillview Nursery School strives to embed a culture of openness and transparency in which the school's values and expected behaviour, as set out in the Code of Conduct for Staff, are constantly reinforced by all staff.

All staff should feel enabled to share any concerns about their own or another member of staff's behaviour, with the appropriate member of staff as set out below.

The distinction between an allegation and a low-level concern

The term 'allegation' (in this context) means that it is alleged that an adult who works with children has:

- behaved in a way that has harmed a child, or may have harmed a child and/or;
- possibly committed a criminal offence against or related to a child and/or;
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children (this includes behaviour that may have happened outside of school that might make an individual unsuitable to work with children)

A low-level concern is any concern about an adult's behaviour towards a child that does not meet the allegation threshold set out above, or is not otherwise serious enough to consider a referral to the Designated Officer (previously LADO).

A low-level concern is any concern, no matter how small, and even if no more than a 'nagging doubt' that an adult may have acted in a manner which:

- is not consistent with the Code of Conduct for Staff, and/or
- relates to their conduct outside of work which, even if not linked to a particular act or omission, has caused a sense of unease about that adult's suitability to work with children.

Examples of such behaviour could include, but are not limited to, being over friendly with children, having favourites, taking photographs of children on their personal devices, engaging with a child on a one-to-one basis in a secluded area or behind a closed door, using inappropriate sexualised, intimidating or offensive language etc.

Staff are not expected to determine whether their concern is a low-level concern, serious enough to consider a referral to the Designated Officer (previously LADO), or meets the threshold of an allegation. Once staff share what they believe to be a low-level concern, that determination will be made by the Headteacher.

How to share low-level concerns

It is important that low-level concerns are shared with the Headteacher as soon as reasonably possible

and, in any event, within 24 hours of becoming aware of the concern and relevant incident(s).

Concerns can be shared verbally in the first instance, or in writing. The context in which the low-level concern arose and details which are chronological, precise and accurate as possible of the concern and relevant incident(s) must be provided.

Where details of the low-level concern are provided verbally, the Headteacher will make an appropriate record of the conversation, either contemporaneously or immediately following the discussion. The Headteacher will check the accuracy of the record with the member of staff who raised the concern.

Low-level concerns will be treated in confidence as far as possible, but the school may in certain circumstances be subject to legal reporting requirements or other legal obligations to share information with appropriate persons, including legal claims and formal investigations.

Self-reporting

Staff who find themselves in a situation which could be misinterpreted, might appear compromising to others, have behaved in a manner which on reflection they consider falls below the standard set out in the Code of Conduct for Staff are encouraged to self-report. Self-reporting can be positive for several reasons: it is self-protective in that it enables a potentially difficult issue to be addressed at the earliest opportunity; it demonstrates awareness of the expected behavioural standards and self-awareness of the individual's own actions or how they could be perceived; and is an important means of maintaining a culture where all staff aspire to the highest standards of conduct and behaviour.

Recording and reviewing low-level concerns

All low-level concerns will be recorded in writing by the Headteacher. The record will include details of the context in which the concern arose and the action taken. The name of the member of staff sharing the concern will be noted; however, where the member of staff wishes to remain anonymous this will be respected as far as possible.

Records will be reviewed at regular intervals to identify potential patterns of concerning, problematic or inappropriate behaviour.

Where a pattern of such behaviour is identified, the school will decide on a course of action, either through its disciplinary procedures or where a pattern of behaviour moves from a low-level concern to meeting the harm threshold, in which case it will be referred to the LADO. Consideration will also be given to whether there are wider cultural issues within the school that enabled the behaviour to occur and we wil act accordingly.

Retention of records

Records will be kept confidential, held securely and in compliance with the Data Protection Act 2018 and UK GDPR.

When the member of staff leaves and/or takes up new employment the records will be reviewed to ensure it still has value either as a safeguarding measure or because of its possible relevance to future

claims and is therefore necessary to retain, or whether it can be securely destroyed.

References

Low-level concerns will not be included in references unless they relate to issues which would normally be included in a reference, e.g., misconduct or poor performance. Low-level concerns which relate exclusively to safeguarding (and not to misconduct or poor performance) will not be referred to in a reference. Where a low-level concern has met the threshold for referral to the Designated Officer (previously LADO). and found to be substantiated will be included in a reference.

On-line Safety Policy Statement

The use of technology has become a significant component of many safeguarding issues such as child sexual exploitation, radicalisation and sexual predation and technology often provides the platform that facilitates such harm.

The governing body has had due regard to the additional information and support set out in KCSiE and ensures that the school has a whole school approach to online safety, and has a clear policy on use of communications technology in school. Online safety will be a running and interrelated theme when devising and implementing policies and procedures. This will include considering how online safety is reflected in all relevant policies and whilst planning the curriculum, any teacher training, the role of the DSL and any parental engagement.

It is essential that children are safeguarded from potentially harmful and inappropriate online material. The school adopts a whole school approach to online safety to protect and educate pupils and staff in their use of technology, and establishes mechanisms to identify, intervene in, and escalate any concerns as appropriate.

Online safety issues can be categorised into four areas of risk:

- Content: being exposed to illegal, inappropriate or harmful content, for example, pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, Islamophobia, or radicalisation or extremism;
- Contact: being subjected to harmful online interaction with other users, for example, peer to peer
 pressure, commercial advertising, and adults posing as children or young adults with the intention
 to groom or exploit them for sexual, criminal, financial or other purposes;
- Conduct: online behaviour that increases the likelihood of, or causes, harm, for example, making, sending and receiving explicit images (e.g. consensual and non-consensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images, and online bullying); and
- Commerce: risks such as online gambling, inappropriate advertising, phishing and/or financial scams.

The purpose of this policy statement is to:

- ensure the safety and wellbeing of children and young people is paramount when adults, young people or children are using the internet, social media or mobile devices
- provide staff and volunteers with the overarching principles that guide our approach to online safety, including our filtering and monitoring systems
- ensure that, as an organisation, we operate in line with our values and within the law in terms of how we use online devices.

We believe that:

- children and young people should never experience abuse of any kind
- children should be able to use the internet for education and personal development, but safeguards need to be in place to ensure they are always kept safe.

We recognise that:

- the online world provides everyone with many opportunities; however it can also present risks and challenges
- we have a duty to ensure that all children, young people and adults involved in our organisation are protected from potential harm online
- we have a responsibility to help keep children and young people safe online, whether or not they are using Hillview Nursery School's network and devices
- working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare and in helping young people to be responsible in their approach to online safety
- all children, regardless of age, disability, gender reassignment, race, religion or belief, sex or sexual orientation, have the right to equal protection from all types of harm or abuse.

We will seek to keep children and young people safe by:

- appointing an online safety coordinator to manage filtering and monitoring systems
- ensuring that internet systems are robust and appropriate for use
- providing clear and specific directions to staff and volunteers on how to behave online through our behaviour code for adults
- supporting and encouraging the young people using our service to use the internet, social media and mobile phones in a way that keeps them safe and shows respect for others
- supporting and encouraging parents and carers to do what they can to keep their children safe online
- developing an online safety agreement for use with young people and their parents or carers
- developing clear and robust procedures to enable us to respond appropriately to any incidents of inappropriate online behaviour, whether by an adult or a child or young person
- reviewing and updating the security of our information systems, including filtering and monitoring provision, regularly
- ensuring that usernames, logins, email accounts and passwords are used effectively
- ensuring personal information about the adults and children who are involved in our organisation is held securely and shared only as appropriate
- ensuring that images of children, young people and families are used only after their written permission has been obtained, and only for the purpose for which consent has been given
- providing supervision, support and training for staff and volunteers about online safety
- examining and risk assessing any social media platforms and new technologies before they are used within the organisation.

If online abuse occurs, we will respond to it by:

- having clear and robust safeguarding procedures in place for responding to abuse (including online abuse)
- providing support and training for all staff and volunteers on dealing with all forms of abuse, including bullying or cyberbullying, emotional abuse, sexting, sexual abuse and sexual exploitation
- making sure our response takes the needs of the person experiencing abuse, any bystanders and our organisation as a whole into account

• reviewing the plan developed to address online abuse at regular intervals, in order to ensure that any problems have been resolved in the long term.

Related policies and procedures

This policy statement should be read alongside our organisational policies and procedures, including:

- child protection
- procedures for responding to concerns about a child or young person's wellbeing
- dealing with allegations of abuse made against a child or young person
- managing allegations against staff and volunteers
- code of conduct for staff and volunteers
- anti-bullying policy and procedures
- photography and image sharing guidance.

Record of concern about a child's safety and welfare

Part 1 (for use by any staff – must be handwritten and legible/ or equivalent information on electronic recording system)

Pupil's name:	Date of birth:	Class/Form:
Date & time of incident:	Date & time	
	(of writing):	
Name (print):	 . Job title:	
Signature:	 	
Record the following factually:		
Nature of concern, e.g. disclosure, change in behaviour, demeanour,		
appearance, injury, witnesses etc.		
(please include as much detail in		
this section as possible. Remember – the quality of your		
information will inform the level of		
intervention initiated. Attach		
additional sheets if necessary.		
What is the pupil's perspective?		
Professional opinion, where relevant (how and why might this		
have happened?)		
Any other relevant information.		
Previous concerns etc.		
(distinguish between fact and		
opinion)		
Note actions, including names of		
anyone to whom your information was passed and when		
พลง หลวงอน ลาน พายา		

Please pass this form to your DSL without delay

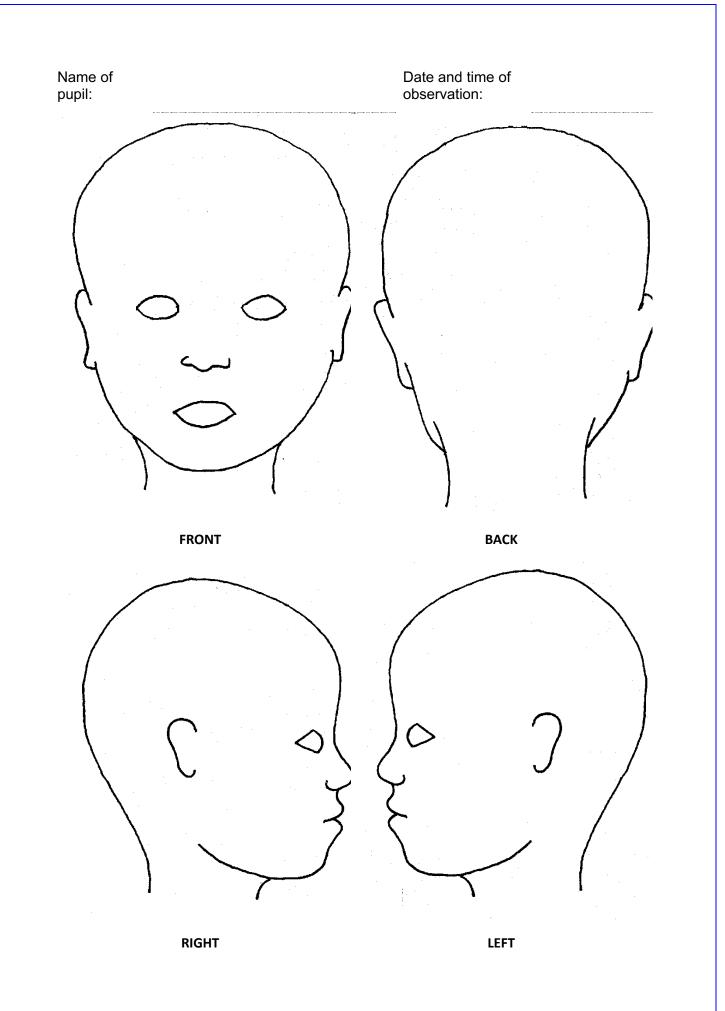
Record of concern about a child's safety and welfare

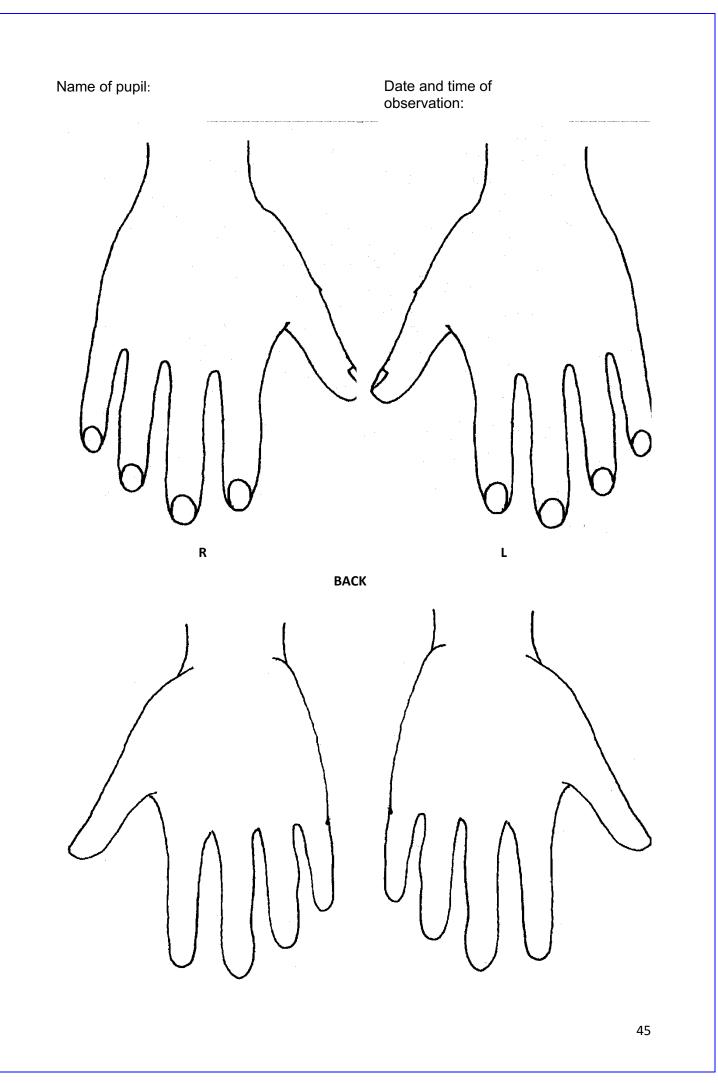
Part 2 (for use by DSL)

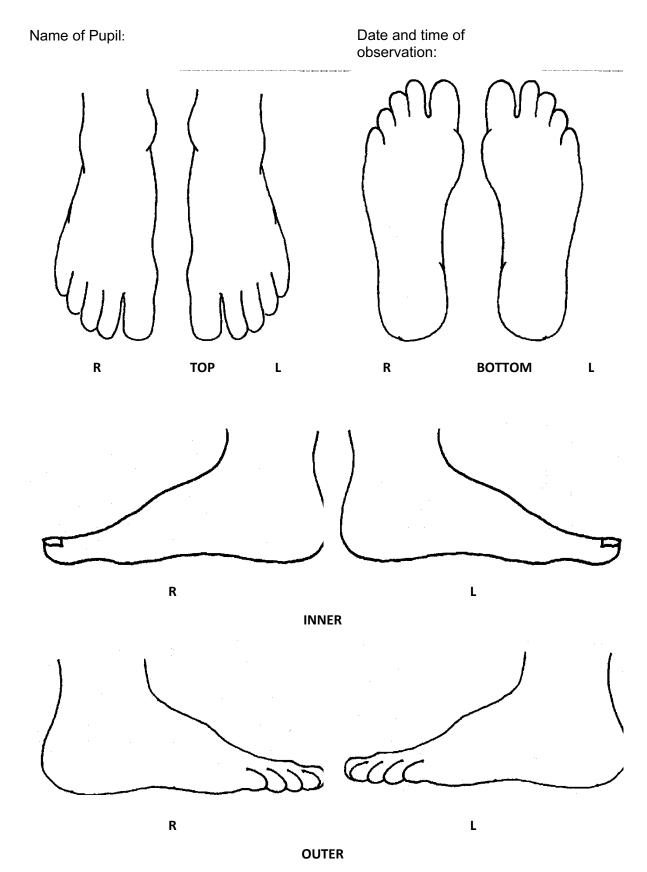
Information received by DSL:	Date:		Time cor	npleted:	Fro	om whom:	
Any advice sought , if applicable	Date:		Time completed:		Fro	From: name/organisation:	
	Advice	e received:			•		
Action taken with reasons recorded	Date:		Time completed:		Ву	By whom:	
(e.g. MASH Referral completed, monitoring advice given to appropriate staff, CAF etc)					<u> </u>		
Outcome	Date:		Time cor	npleted:	Ву	whom:	
Parent/carer informed?	Y	Who spoken t	to: Da	te:		Time:	By whom:
	N	Detail reason:	!				
Is any additional detail held, if so where?							
Prior safeguarding history	No. of previous records of concern:						
	Has the child been subject of CAF/Early Help assessment?						
	Currently on CP Plan (CPP) / Child in Need Plan (CiN)						
	Previously on CP Plan (CPP) / Child in Need Plan (CiN)						
	Is child known to other agencies? Y / N						
Name of DSL:							

APPENDIX 5

	BODYMAP
(This must be con Name of Pupil:	npleted at time of observation) Date of Birth:
Name of Staff:	Job title:
Date and time of observation:	
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Printed Name, Signature and Job Title of staff