Child Protection & Safeguarding Policy & Procedures

3 September 2020 – September 2021

Reviewed by: Howard Payne and Emma Hibberd

Agreed by (Governor):

Next review date: September 2021

Contents

Child Protection Statement

Medina Primary recognises its moral and statutory responsibility to safeguard and promote the welfare of all children. We make every effort to provide a safe and welcoming environment underpinned by a culture of openness where both children and adults feel secure, able to talk and believe that they are being listened to. We maintain an attitude of "it could happen here" where safeguarding is concerned. The purpose of this policy is to provide staff, volunteers and governors with the framework they need in order to keep children safe and secure in our academies and to inform parents and guardians how we will safeguard their children whilst they are in our care. Specific guidance is available to staff within the procedure documents contained in this policy.

All staff, children, parents and visitors are required to act safely and to co-operate in meeting these obligations. Medina believes that child protection is the responsibility of all adults. The school will encourage employees to take an active role in ensuring that the highest standard of child protection is extended to all our children.

This policy will be reviewed annually by the Designated Safeguarding Lead and the associated Governor and shared with the Governors in Summer Term or Autumn Term at the latest.

We will educate and encourage children to keep safe through the content of the curriculum (including Relationship Education statutory from 2020) and an ethos which helps children to feel safe and able to talk freely about their concerns, secure in the knowledge that they will be listened to and valued.

This Policy must be read alongside HR Policies relating to Safeguarding and Child Protection, specifically the requirement to ensure the following procedures are in place:

- Employment checks must be carried out in compliance with regulation as outlined in HR Manual.

- Temporary and supply staff must be fully briefed about the school's safeguarding procedures. A sample briefing document is included in Annex 14.

- All visitors must me briefed on arrival about what to do if they see or hear anything which concerns them. Visitors whose DBS has not been recorded in the school's single central record must be issued with a red lanyard and accompanied at all times. Visitors whose DBS has been recorded in the school's single central record or are school support professionals, such as Local Authority Professionals/Supply Teachers, must be issued with a green lanyard alongside their professional identification badge and are not required to be supervised.

The legal framework within which this policy stands

This policy is based on the Department for Education's statutory guidance Keeping Children Safe in Education (2020) and Working Together to Safeguard Children(2015/2018), and the Governance Handbook. We comply with this guidance and the procedures set out by our local safeguarding children board.

This policy is also based on the following legislation:

- Section 175 of the Education Act 2002, which places a duty on schools and ladorities to safeguard and promote the welfare of children

- The School Staffing (England) Regulations 2009, which set out what must be recorded on the single central record and the requirement for at least one person on a school interview/appointment panel to be trained in safer recruitment techniques

- The Children Act 1989 (and 2004 amendment), 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 Serious Crime Act 2015,

- Statutory guidance on FGM, which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM

- The Rehabilitation of Offenders Act 1974, which outlines when people with criminal convictions can work with children

- Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, which defines what 'regulated activity' is in relation to children

- Statutory guidance on the Prevent duty, 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 Childcare (Disqualification) Regulations 2009 (and 2018 amendment) and Childcare Act 2006, which set out who is disqualified from working with children

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

This policy is in line with locally agreed inter-agency procedures that have been put in place by the Portsmouth Safeguarding Children Board (PSCB). The PSCB is governed by and adheres to different policies and procedures, developed in accordance with the 'Working Together to Safeguard Children' National Guidance.

The 4LSCB Policies and procedures provide standards for agencies and a framework to promote children's welfare and protect them from abuse and neglect. See http://4lscb.proceduresonline.com/

Local Safeguarding Children Board protocols and guidance can be found using this link:

Portsmouth Safeguarding Children Board protocols and guidance

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.

We give special consideration to children who:

- Have special educational needs 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 privately fostered

2. Definitions

Child Protection is an aspect of safeguarding, but is focused on how we respond to children who have been significantly harmed or are at risk of significant harm.

The term **Staff** applies to all those working for or on behalf of the Primary, full time or part time, in either a paid or voluntary capacity. This also includes parents and governors.

Child refers to all young people who have not yet reached their 18 birthday. On the whole, this will apply to children in our school; however, the policy will extend to visiting children and students from other establishments

Parent refers to birth parents and other adults in a parenting role for example adoptive parents, step parents, guardians and foster carers.

Abuse could mean neglect, physical, emotional or sexual abuse or any combination of these. Parents, carers and other people can harm children either by direct acts and / or failure to provide proper care.

A full outline of types of abuse can be found in Annex 9.

3. The Policy

3.1 Aims, principles and values

- To provide staff with the framework to promote and safeguard the wellbeing of children and in so doing ensure they meet their statutory responsibilities.

- To demonstrate our commitment to protecting children.

Principles and Values

- Children have a right to feel secure and cannot learn effectively unless they do so.

- All children regardless of age, gender including transgender, race, disability, sexuality, religion and non-religion, culture or language have a right to be protected from harm.

- All staff have a key role in prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a child is at risk of harm, either in the school or in the community.

- We acknowledge that working in partnership with other agencies protects children and reduces risk and so we will engage in partnership working throughout the child protection process to safeguard children.

- Whilst the school will work openly with parents as far as possible, we have the responsibility and the right to contact children's social care or the police, without notifying parents if this is believed to be in the child's best interests.

3.2 Leadership and management

We recognise that staff anxiety around child protection can undermine good practice and so have established clear lines of accountability, training and advice to support the process and individual staff within that process.

In this school any individual can contact the designated safeguarding lead (DSL) if they have concerns about a young person. There is a nominated safeguarding governor, who will take leadership responsibility for safeguarding. The Chair of Governors will receive reports of allegations against the headteacher.

In this Primary roles are allocated as follows:

Role	Name	Contact
Designated Safeguarding Lead:	Howard Payne	02392 375475 hpayne@medina.portsmouth.sch.uk
Deputy Designated Safeguarding Lead(s):	Ros Hammerton Emma Hibberd	02392 375475 rhammerton@medina.portsmouth.sch.uk ehibberd@medina.portsmouth.sch.uk
Safeguarding Governor	Dave Byng	davebyng@yahoo.co.uk
Chair of Governors	Jacqueline Coonie	jcoonie@me.com

Detailed descriptions of the roles and responsibilities of leadership are set out in Annex 1.

DSL should ensure that all staff are in receipt of:

- Keeping Children Safe in Education (2019) Part one:
- Child protection policy
- Behaviour Policy
- Staff code of conduct policy
- Safeguarding response to children who go missing in education

3.3 Training

All staff at Medina are expected to be aware of the signs and symptoms of abuse and must be able to respond appropriately.

As a minimum, the school aims to provide:

- annual training in the form of a briefing for all staff, every year;
- the same training as part of induction for staff joining mid-year;
- relevant training to ensure staff appointed to specific roles can undertake that role effectively
- timely updates to all relevant staff on changes to local or national policy or practice.

Training was updated in September 2020 to reference new and current legislation of Keeping Children Safe in Education (September 2020) and includes new content on:

- County Lines
- Peer on Peer abuse - Sexual violence and Sexual harassment
- GDPR in relation to Safeguarding
- Additional content on "Early Help Process"
- Overall update to reflect changes in terminology, policies and links to guidance

All staff received Prevent training in Autumn 2019

The head teacher, admin manager and relevant Governors have attended Safer Recruitment Training. This will be updated in line with published guidance.

4. Child Protection Procedure

The following procedures apply to all staff and will be covered by training to enable staff to understand their role and responsibility. The prime concern at all stages must be the interests and safety of the child. Where there is a conflict of interest between the child and an adult, the interests of the child must be paramount.

All staff are aware that children with disabilities, special needs or with language delay may communicate concerns with behaviours rather than words. Additionally, staff will question the cause of knocks and bumps in children who have limited mobility.

Consideration should be given to the context within which behaviours and/or incidents occur. Assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare. This is 'contextual safeguarding'.

The flowchart in Annex 2 summarises this procedure.

4.1 Communicating concerns

The aim of our procedures is to provide a robust framework which enables staff to take appropriate action when they are worried a child is being abused or at risk of harm.

If a member of staff suspects abuse, spots signs or indicators of abuse or is concerned that a child is being radicalised and at risk of being drawn into terrorism, or they have a disclosure of abuse made to them they must:

1.   Make an initial record of the information

2.   Report it to the DSL or Deputy DSL / headteacher immediately

3.   The DSL or headteacher will consider if there is a requirement for immediate medical intervention, however urgent medical attention should not be delayed if DSL or headteacher are not immediately available (see 4.2 below)

4.   Make an accurate record as soon as possible of all that has happened using CPOMs, including details of:

- Dates and times of their observations
- Dates and times of any discussions they were involved in.

- Any injuries (use body maps in Annex 3)
- Explanations given by the child / adult
- What action was taken
- Any actual words or phrases used by the child

The records must be signed and dated by the author.

4.2 Following-up concerns

Following any concerns raised by staff, the DSL will assess the information and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm, or risk of significant harm has been reached; or they are not clear if the threshold is met, then the DSL will contact children's social care through the relevant procedure or the police if appropriate. If the DSL is not available or there are immediate concerns, the staff member will refer directly to children's social care. Remember that anyone can make referrals to the Multi Agency Safeguarding Hub if they consider a child is at immediate or significant harm and the DSL is not available.

Contact for Portsmouth MASH:

During Office Hours (Monday to Friday): 0845 671 0271/02392 688793

Out of Office Hours: 0300 555 1373

MASH guidance, Inter Agency Contact Form and the PSCB Threshold Document can be found at the following webpage:

https://www.portsmouthscb.org.uk/worried-about-a-child-suffering-from-harm/

Generally, the DSL will inform the parents prior to making a referral however there are situations where this may not be possible or appropriate particularly when informing parents/carers may place the child at further risk.

N.B. *The exception to this process will be in those cases of known FGM where there is a mandatory requirement for the teacher to report directly to the police, although the DSL should also be made aware.*

Detailed guidance for responding to disclosures is contained in Annex 4

Detailed guidance for DSLs in how to follow-up a concern is contained Annex 5

5.   Confidentiality

- "The Data Protection Act 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe" (KCSiE 2020). This includes sharing information without consent if doing so prevents the child being at further risk of harm.

- We maintain that all matters relating to child protection are to be treated as confidential and only shared as per the 'working together' guidance.

- There is a lawful basis for child protection concerns to be shared with agencies who have a statutory duty for child protection.

- All staff are aware that they cannot promise a child to keep a disclosure confidential.

- Parents will be made aware of the requirements to maintain confidentiality about any allegations against staff whilst investigations are ongoing as set out in section 141F of the Education Act 2002.

6.   Dealing with allegations against staff

This procedure should be used in all cases in which it is alleged a member of staff, supply or volunteer in a school, or another adult who works with children has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children
- Has been involved in an incident that may make them unsuitable to work with children e.g. domestic violent

In dealing with allegations or concerns against an adult, staff must:

- Report any concerns about the conduct of any member of staff, supply or volunteer to the Headteacher or the DSL as soon as possible

- If an allegation is made against the Headteacher, the concerns need to be raised with the Chair of Governors as soon as possible

- There may be situation when the Headteacher will want to involve the police immediately if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

    Once an allegation has been received by the Headteacher they will, if the threshold is met, contact the Local Authority Designated Officer (LADO) as soon as possible and before carrying out any investigation into the allegation other than preliminary enquiries.

    o   Portsmouth LADO: 02392 882500

- Inform the parents of the allegation unless there is a good reason not to

In liaison with the LADO, the school will determine how to proceed and if necessary the LADO will refer the matter to children's social care and/or the police.

School will not cease to employ a supply teacher or a volunteer until all facts have been sought and in liaison with LADO.

Medina primary will act to minimise the stress inherent with the allegations process. The individuals will be kept in form of the progress of the concerns including explanation of the likely course of action. All parties will be offered access to welfare counselling.

Whistle-blowing

The school adheres to Portsmouth City Council's Whistle-blowing policy. A copy is available on request from the front office.

The school's Early Years supports the requirements set out in paragraph 3.75 of the statutory framework for the Early Years Foundation Stage.

Mobile phones and cameras

Staff are allowed to bring their personal phones to school for their own use, but will limit such use to non-contact time when pupils are not present. Staff members' personal phones will remain in their bags or cupboards during contact time with pupils.

The Headteacher, Deputy and the site staff will carry their mobiles with them so that they can be contacted in case of emergency.

Staff will not take pictures or recordings of pupils on their personal phones or cameras.

We will follow the General Data Protection Regulation and Data Protection Act 2018 when taking and storing photos and recordings for use in the school.

Children in upper Key Stage 2 are allowed to bring their mobile phone to school. They must hand this into the school office in the morning. The children are given their phones back at the end of the school day. All safeguarding issues that arise through the use of mobile technology in school and at home are reported to the DSL who will notify parents as necessary. The children are taught about online safety through the curriculum.

7.   **Dealing with allegations against children including peer-on-peer abuse**

Medina Primary believes that all children have a right to attend school and learn in a safe environment. We recognise that children are capable of abusing their peers. In most instances, the conduct of children towards each other will be covered by the behaviour policy. Some allegations may be of such a serious nature that they may raise safeguarding concerns and these will be dealt with under this policy and in line with Keeping Children Safe in Education (2020). These allegations are most likely to include physical abuse, emotional abuse, sexual abuse and sexual exploitation. It is also likely that incidents dealt with under this policy will involve older students and their behaviour towards younger students or those who are vulnerable. If one or more of these factors is alleged, then it is to be dealt with using this procedure:

The allegation:

- is made against an older child and refers to their behaviour towards a younger child or a more vulnerable children
- is of a serious nature, possibly including a criminal offence;
- raises risk factors for other children in the school;
- indicates that other children may have been affected by this student and/or
- indicates that young people outside the school may be affected by this student.

Examples of safeguarding issues against a student could include:

Physical Abuse

- Violence, particularly pre-planned
- Forcing others to use drugs or alcohol

Emotional Abuse
- Blackmail or extortion
- Threats and intimidation

Sexual Abuse

- Indecent exposure, indecent touching or serious sexual assaults
- Forcing others to watch pornography or take part in sexting (specific advice about how to approach incidents of sexting is contained in Annex 11)
- other behaviours outlined in the Brook traffic light tool (Annex 6)

Sexual Exploitation

- Encouraging other children to engage in inappropriate sexual behaviour (For example - having an older boyfriend/girlfriend, associating with unknown adults or other sexually exploited children, staying out overnight)
- Photographing or videoing other children performing indecent acts

7.1 The procedure

When an allegation is made by a child against another child, members of staff should consider whether the complaint raises a safeguarding concern. If there is a safeguarding concern, a factual record of the allegation should be made, but no attempt at this stage should be made to investigate the circumstances. The designated safeguarding lead (DSL) should be informed and the procedure in Annex 8 should be followed.

7. 2 The safeguarding implications of sexual activity between children

The intervention of child protection agencies in situations involving sexual activity between children can require difficult professional judgments. Some situations are statutorily clear – for example, a child under the age of 13 cannot consent to sexual activity. But it will not necessarily be appropriate to initiate safeguarding procedures where sexual activity involving children and young people below the age of legal consent (16 years) comes to notice. It is important to distinguish between consensual sexual activity between children of a similar age (where at least one is below the age of consent), and sexual activity involving a power imbalance, or some form of coercion or exploitation. It may also be difficult to be sure that what has or has been alleged to have taken place definitely does have a sexual component.

As usual, important decisions should be made on a case by case basis, on the basis of an assessment of the children's best interests. Referral under safeguarding arrangements may be necessary, guided by an assessment of the extent to which a child is suffering, or is likely to suffer, significant harm.

Key specific considerations will include:

- The age, maturity and understanding of the children;
- Any disability or special needs of the children;
- Their social and family circumstance;

- Any evidence in the behaviour or presentation of the children that might suggest they have been harmed;
- Any evidence of pressure to engage in sexual activity;
- Any indication of sexual exploitation;

There are also contextual factors. Gender, sexuality, race and levels of sexual knowledge can all be used to exert power. A perpetrator of sexual abuse may sometimes be a woman or girl and the victim a boy. The Brook traffic light tool (Annex 6) can be useful in making these considerations.

A risk assessment should be completed and kept electronically. This should consider:

- The victim, especially their protection and support
- The alleged perpetrator: and
- All the other children (and, if appropriate, adult students and staff) at the school, especially any actions that are appropriate to protect them.

7.3   Minimising the risk of peer on peer abuse

We will minimise the risk of peer-on-peer abuse by:

- taking a whole school approach to safeguarding and child protection
- providing training for staff;
- providing a clear set of values and standards, underpinned by the behaviour policy and pastoral support system and by planned programme of evidence-based content delivered through the curriculum and
- engaging with specialist support and interventions.

Annual review

This policy is to be reviewed at least annually in line with DfE, Portsmouth Safeguarding Children Board and other relevant statutory guidance.

Last Review	31st August 2020
Reviewed by	Howard Payne Emma Hibberd
Review Date	Sept 2021

Roles and responsibilities within Medina Primary

Staff responsibilities

All staff have a key role to play in identifying concerns early and in providing help for children. To achieve this they will:

- Establish and maintain an environment where children feel secure, are encouraged to talk and are listened to.

- Ensure children know that there are adults in school whom they can approach if they are worried about any problems.

- Plan opportunities within the curriculum for children to develop the skills they need to assess and manage risk appropriately and keep themselves safe. Ensuring that they are able to recognise when they are at risk and how to get help.

- Attend training in order to be aware of and alert to the signs of abuse.

- Maintain an attitude of "it could happen here" with regards to safeguarding.

- Record their concerns if they are worried that a child is being abused and report these to the relevant person as soon as practical that day.

- Be prepared to refer directly to social care, and the police if appropriate, if there is a risk of significant harm and the DSL or their Deputy is not available.

- If the disclosure is an allegation against a member of staff, they report this to the DSL or if the allegation is against the DSL or headteacher, to the Chair of Governors.

- Follow the procedures set out by the Portsmouth Safeguarding Children Board and take account of guidance issued by the DfE.

- Support children in line with their child protection plan.

- Treat information with confidentiality but never promising to "keep a secret".

- Notify DSL of any child on a child protection plan who has unexplained absence.

- Have an understanding of early help and be prepared to notify colleagues and/or parents of any concerns about their child(ren), and provide them with, or signpost them to, opportunities to change the situation.

- Liaise with other agencies that support children and provide early help.

- Ensure they know who the designated safeguarding lead (DSL) and deputy DSL are and know how to contact them.

- Have an awareness of this Child Protection Policy, the Behaviour Policy, the staff Code of Conduct, procedures relating to the safeguarding response for children who go missing from education and the role of the DSL.

Senior leadership team responsibilities:

- Contribute to inter-agency working in line with guidance (Working Together 2018)

- Provide a co-ordinated offer of early help when additional needs of children are identified

- Ensure staff are alert to the various factors that can increase the need for early help.

- Working with children's social care, support their assessment and planning processes including the schools attendance at conference and core group meetings

- Carry out tasks delegated by the governing body such as training of staff; safer recruitment; maintaining a single central record and complying with the visitor management procedure.

- Complete a Section 11 Compact Audit and submit to PCSB every two years.

  - o Portsmouth audit tool (excel) – 'self-assessment audit' at bottom of page

- Provide support and advice on all matters pertaining to safeguarding and child protection to all staff regardless of their position within the school.

- Treat any information shared by staff or children with respect and follow Portsmouth Local Safeguarding Children Board procedures.

- Ensure that allegations or concerns against staff are dealt with in accordance with guidance from department for education (DfE) in accordance with school policy and procedures.

Governing body responsibilities

- The school has effective safeguarding policies & procedures including this child protection policy, the staff code of conduct, Behaviour Policy and a response to children who go missing from education.

- The school undertakes a Section 11 Compact Audit as outlined above, is shared with the PCSB as outlined above.

- Recruitment, selection and induction follows PCC processes including safer recruitment practice and all appropriate checks.

- Allegations against staff are dealt with by the headteacher. Allegations against the headteacher are dealt with by the Chair of Governors.

- A member of the senior leadership team is designated as designated safeguarding lead (DSL) and have this recorded in their job profile.

- The DSL must work within the requirements as detailed in Annex B of Keeping Children Safe in Education (2020).

- Staff have been trained appropriately and this is updated in line with guidance

- Any safeguarding deficiencies or weaknesses are remedied without delay

- They have identified a nominated governor for leading safeguarding

DSL responsibilities *(to be read in conjunction with DSL role description in KCSiE)*

In this school the DSL is Howard Payne
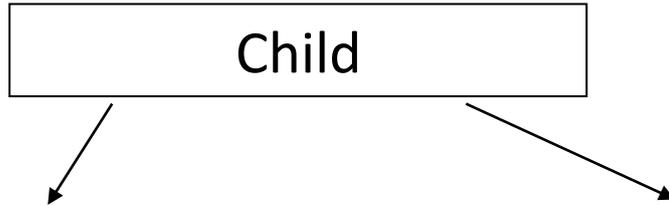
The deputy DSLs are Ros Hammerton and Emma Hibberd

In addition to the role of staff and senior management team the DSL will
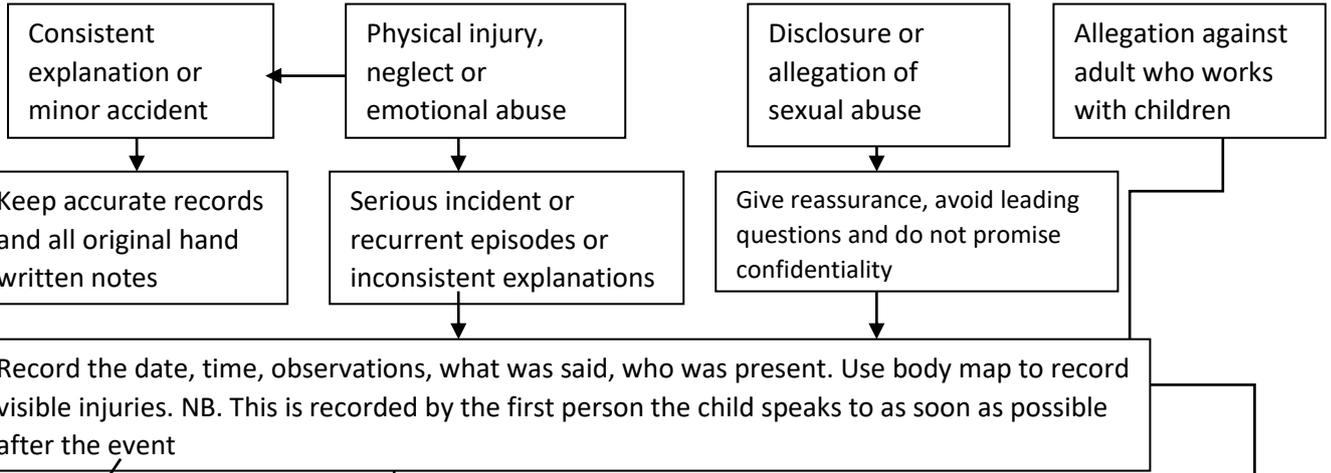
- Refer cases to social care and the police where appropriate, in a timely manner avoiding any delay that could place the child at more risk.

- Assist the governing body in fulfilling their responsibilities

- Attend initial training for the role and refresh every other year as per PCSB requirements. By attending appropriate training and demonstrating evidence of continuing professional development thereafter

- Ensure every member of staff knows who the DSL is, is aware of the DSL role and has their contact details

- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the DSL

- Ensure that whole school training occurs regularly with at least annual updates so that staff and volunteers can fulfil their responsibilities

- Ensure any members of staff joining the school outside of this training schedule receive induction prior to commencement of their duties

- Keep records of child protection concerns securely and separately from the main child file and use these records to assess the likelihood of risk

- Ensure that safeguarding records are transferred accordingly (separate from child files) when a child transfers school

- Ensure that where a child transfers school and is on a child protection plan or is a child looked after, the information is passed to the new school immediately and that the child's social worker is informed

- Link with the PSCB to make sure staff are aware of training opportunities and the latest local policies on safeguarding

- Develop, implement and review procedures in school that enable the identification and reporting of all cases, or suspected cases, of abuse

- Meet any other expectations set out for DSLs in Keeping Children Safe in Education 2020.

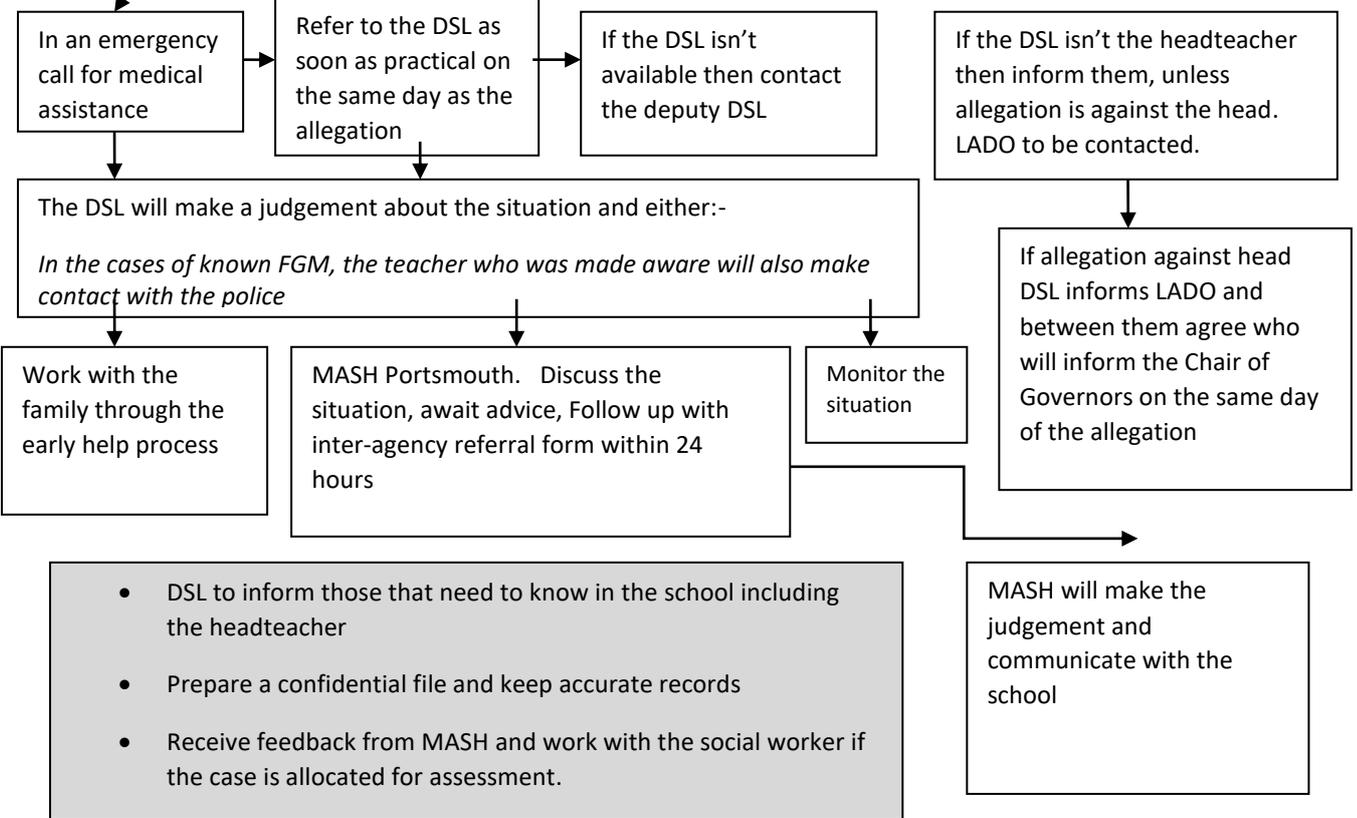**Flowchart for child protection procedures**

DSL – Designated safeguarding lead

MASH – Multi agency safeguarding hub

CP – Child protection

Child

S T A F F

| Consistent explanation or minor accident | ← | Physical injury, neglect or emotional abuse | | Disclosure or allegation of sexual abuse | | Allegation against adult who works with children |

Keep accurate records and all original hand written notes

Serious incident or recurrent episodes or inconsistent explanations

Give reassurance, avoid leading questions and do not promise confidentiality

Record the date, time, observations, what was said, who was present. Use body map to record visible injuries. NB. This is recorded by the first person the child speaks to as soon as possible after the event

D S L

In an emergency call for medical assistance → Refer to the DSL as soon as practical on the same day as the allegation → If the DSL isn't available then contact the deputy DSL

If the DSL isn't the headteacher then inform them, unless allegation is against the head. LADO to be contacted.

The DSL will make a judgement about the situation and either:-

In the cases of known FGM, the teacher who was made aware will also make contact with the police

If allegation against head DSL informs LADO and between them agree who will inform the Chair of Governors on the same day of the allegation

Work with the family through the early help process

MASH Portsmouth. Discuss the situation, await advice, Follow up with inter-agency referral form within 24 hours

Monitor the situation

- DSL to inform those that need to know in the school including the headteacher

- Prepare a confidential file and keep accurate records

- Receive feedback from MASH and work with the social worker if the case is allocated for assessment.

MASH will make the judgement and communicate with the school

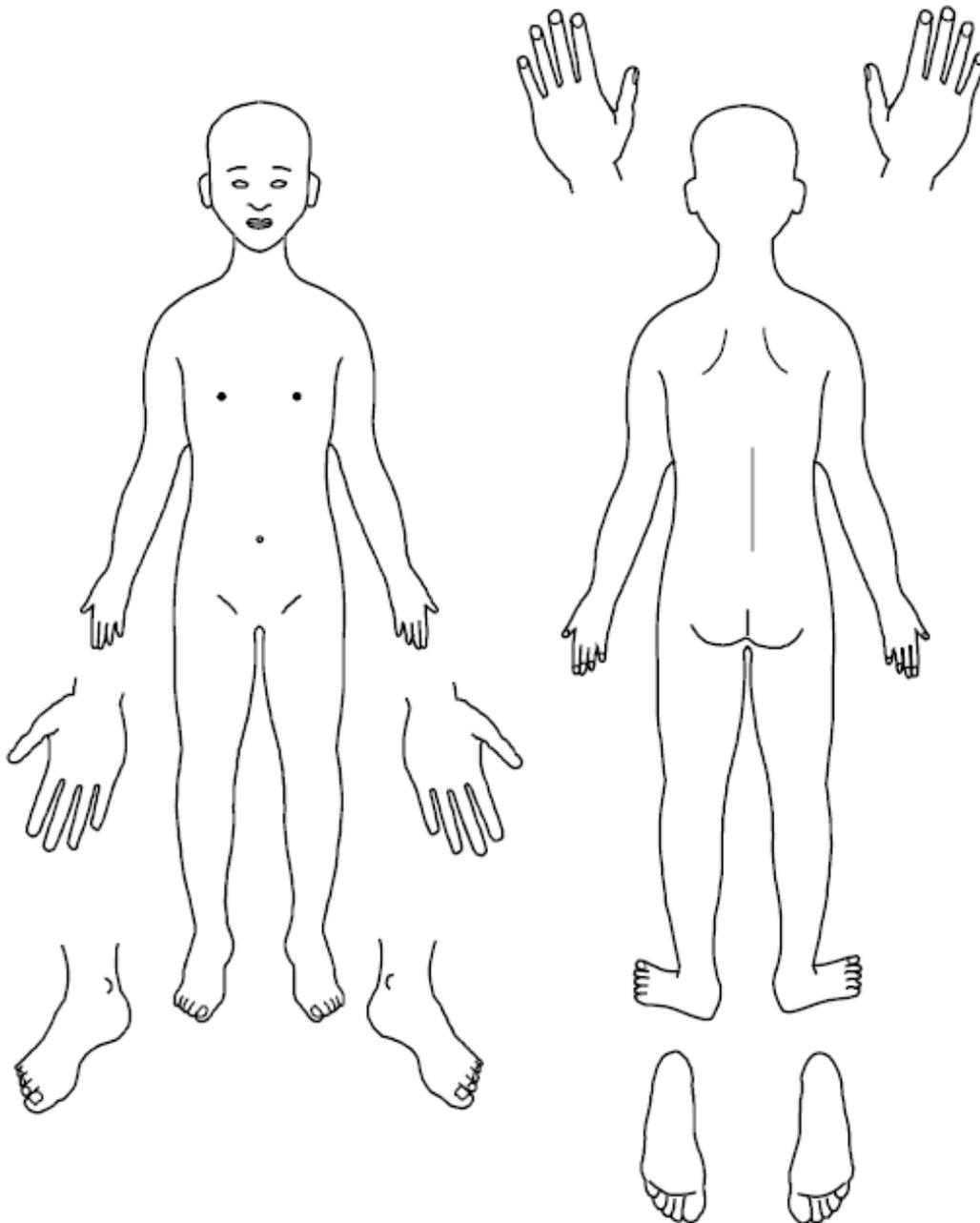**Body Map**   **Annex 3**

Name of Child: _____ Year Gp: _____

Date and time: _____

Completed by: _____

Any additional information:

Dealing with disclosures

All staff should:

A member of staff who is approached by a child should listen positively and try to reassure them. They cannot promise complete confidentiality and should explain that they may need to pass information to other professionals to help keep the child or other children safe. The degree of confidentiality should always be governed by the need to protect the child.

Additional consideration needs to be given to children with communication difficulties and for those whose first language is not English. It is important to communicate with them in a way that is appropriate to their age, understanding and preference.

All staff should know who the DSL is and who to approach if the DSL is unavailable. Ultimately, all staff have the right to make a referral to the police or social care directly and should do this if, for whatever reason, there are difficulties following the agreed protocol, e.g. they are the only adult on the school premises at the time and have concerns about sending a child home.

Guiding principles, the seven R's

Receive

- Listen to what is being said, without displaying shock or disbelief
- Accept what is said and take it seriously
- Make a note of what has been said as soon as practicable but not in front of the child

Reassure

- Reassure the child, but only so far as is honest and reliable
- Don't make promises you may not be able to keep e.g. 'I'll stay with you' or 'everything will be alright now' or 'I'll keep this confidential'
- Do reassure e.g. you could say: 'I believe you', 'I am glad you came to me', 'I am sorry this has happened', 'We are going to do something together to get help'

Respond

- Respond to the child only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details
- Do not ask 'leading' questions i.e. 'did he touch your private parts?' or 'did she hurt you?' Such questions may invalidate your evidence (and the child's) in any later prosecution in court
- Do not ask the child why something has happened.
- Do not criticise the alleged perpetrator; the child may care about him/her, and reconciliation may be possible
- Do not ask the child to repeat it all for another member of staff. Explain what you have to do next and whom you have to talk to. Reassure the child that it will be a senior member of staff

Report

- Share concerns with the designated safeguarding lead (DSL) as soon as possible
- If you are not able to contact the DSL, and the child is at risk of immediate harm, contact the children's social services directly
- If you are dissatisfied with the level of response you receive following your concerns, you should press for re-consideration

Record

- If possible make some very brief notes at the time, and log on CPOMS as soon as possible
- Keep your original notes in the child protection file in the DSL office
- Record the date, time, place, persons present and noticeable nonverbal behaviour, and the exact words used by the child. If the child uses sexual 'pet' words, record the actual words used, rather than translating them into 'proper' words
- Complete a body map to indicate the position of any noticeable injury
- Record facts and observable things, rather than your 'interpretations' or 'assumptions'

Remember

- Support the child: listen, reassure, and be available
- Complete confidentiality is essential. Share your knowledge only with appropriate professional colleagues
- Try to get some support for yourself if you need it

Review (led by DSL)
- Has the action taken provided good outcomes for the child?
- Did the procedure work?
- Were any deficiencies or weaknesses are identified in the procedure? Have these been remedied?
- Is further training required?

What happens next?

It is important that concerns are followed up and it is everyone's responsibility to ensure that they are. The member of staff should be informed by the DSL what has happened following the report being made. If they do not receive this information they should be proactive in seeking it out.

If they have concerns that the disclosure has not been acted upon appropriately they might inform the safeguarding governor of the school and/or may ultimately contact the children's services department.

Receiving a disclosure can be upsetting for the member of staff and schools should have a procedure for supporting them after the disclosure. This might include reassurance that they have followed procedure correctly and that their swift actions will enable the allegations to be handled appropriately.

In some cases, additional counselling might be needed and they should be encouraged to recognise that disclosures can have an impact on their own emotions.

Procedure for DSLs receiving concern

Following a report of concerns from a member of staff, the DSL must:

1.   Decide whether or not there are sufficient grounds for suspecting significant harm in which case a referral must be made to children's social care or the police if appropriate.

2.   Normally the school should try to discuss any concerns about a child's welfare with the family and where possible to seek their agreement before making a referral to children's social care. However, in accordance with DfE guidance, this should only be done when it will not place the child at increased risk or could impact a police investigation. The child's views should also be taken into account.

3.   If there are grounds to suspect a child is suffering, or is likely to suffer, significant harm they must contact children's social care via the MASH and make a clear statement of:

   - the known facts
   - any suspicions or allegations
   - whether or not there has been any contact with the child's family

If the DSL feels unsure about whether a referral is necessary, they can phone MASH to discuss concerns

4.   If there is not a risk of significant harm, then the DSL will either actively monitor the situation or consider the early help process

5.   The DSL must confirm any referrals in writing to children's social care, within 24 hours, including the actions that have been taken. The written referral must be made using the Inter-agency Referral Form which will provide children's social care with the supplementary information required about the child and family's circumstances.

6.   If a child is in immediate danger and urgent protective action is required, the police must be called. The DSL must also notify children's social care of the occurrence and what action has been taken

7.   Where there are doubts or reservations about involving the child's family, the DSL should clarify with children's social care or the police whether, the parents should be told about the referral and, if so, when and by whom. This is important in cases where the police may need to conduct a criminal investigation.

8.   When a child is in need of *urgent* medical attention and there is suspicion of abuse the DSL or headteacher should take the child to the accident and emergency unit at the nearest hospital, having first notified children's social care. The DSL should seek advice about what action children's social care will take and about informing the parents, remembering that parents should normally be informed that a child requires urgent hospital attention.

9.   If the DSL deems MASH/Social Care involvement has been unsatisfactory, it is their responsibility to escalate this to ensure that the child is not placed in further/ongoing risk of harm.

Brook sexual behaviours traffic light tool

Behaviours: age 0 to 5

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability. They are reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours

- holding or playing with own genitals

- attempting to touch or curiosity about other children's genitals

- attempting to touch or curiosity about breasts, bottoms or genitals of adults

- games e.g. mummies and daddies, doctors and nurses

- enjoying nakedness

- interest in body parts and what they do

- curiosity about the differences between boys and girls

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to the activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours

- preoccupation with adult sexual behaviour

- pulling other children's pants down/skirts up/trousers down against their will

- talking about recruit,using adult slang

- preoccupation with touching the genitals of other people

- following others into toilets or changing rooms to look at them or touch them

- talking about sexual activities seen on TV/online

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours

- persistently touching the genitals of other children

- persistent attempts to touch the genitals of adults

- simulation of sexual activity in play

- sexual behaviour between young children involving penetration with objects

- forcing other children to engage in sexual play

Behaviours: age 5 to 9 and 9 to 13

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours 5-9

- feeling and touching own genitals
- curiosity about other children's genitals
- curiosity about sex and relationships, e.g. differences between boys and girls, how sex happens, where babies come from, same-sex relationships
- sense of privacy about bodies
- telling stories or asking questions using swear and slang words for parts of the body

Green behaviours 9-13

- solitary masturbation
- use of sexual language including swear and slang words
- having girl/boyfriends who are of the same, opposite or any gender
- interest in popular culture, e.g. fashion, music, media, online games, chatting online
- need for privacy
- consensual kissing, hugging, holding hands with peers

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to the activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours 5-9

- questions about sexual activity which persist or are repeated frequently, despite an answer having been given
- sexual bullying face to face or through texts or online messaging
- engaging in mutual masturbation
- persistent sexual images and ideas in talk, play and art
- use of adult slang language to discuss sex

Amber behaviours 9-13

- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- verbal, physical or cyber/virtual sexual bullying involving sexual aggression
- LGBT (lesbian, gay, bisexual, transgender) targeted bullying
- exhibitionism, e.g. flashing or mooning
- giving out contact details online
- viewing pornographic material
- worrying about being pregnant or having STIs

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours 5-9

- frequent masturbation in front of others
- sexual behaviour engaging significantly younger or less able children
- forcing other children to take part in
- sexual activities
- simulation of oral or penetrative sex
- sourcing pornographic material online

Red behaviours 9-13

- exposing genitals or masturbating in public
- distributing naked or sexually provocative images of self or others
- sexually explicit talk with younger
- children
- sexual harassment
- arranging to meet with an online acquaintance in secret

- genital injury to self or others
- forcing other children of same age, younger or less able to take part in sexual activities
- sexual activity e.g. oral sex or intercourse
- presence of sexually transmitted infection (STI)
- evidence of pregnancy

Procedure for DSL on receiving allegation of peer-on-peer abuse

- A factual record should be made of the allegation, but no attempt at this stage should be made to investigate the circumstances
- The DSL will make a record of the concern, the discussion and any outcome and keep a copy in the files of both children' files/ report on CPOMs.
- The DSL should follow local procedure to discuss the case with MASH
- The DSL will follow through the outcomes of the discussion and make a referral where appropriate
- If the allegation indicates that a potential criminal offence has taken place MASH will communicate that the police will become involved
- Parents, of both the student being complained about and the alleged victim, should be informed and kept updated on the progress of the referral unless this would put a child at greater risk
- It may be appropriate to exclude the child being complained about for a period of time according to the school's behaviour policy and procedures
- Where neither social services nor the police accept the complaint, a thorough school investigation should take place into the matter using the school's usual disciplinary procedures
- In situations where the school considers a safeguarding risk is present, a risk assessment should be prepared along with a preventative, supervision plan, considering:
  - The victim, especially their protection and support
  - The alleged perpetrator, their support needs and any disciplinary action
  - All other children at the school
  - Contact between the victim and the alleged perpetrator

N.B. use of Restorative Practice should be considered

- The plan should be monitored and a date set for a follow-up evaluation with everyone concerned
- Where there is a criminal investigation into a rape, assault by penetration or sexual assault, the alleged perpetrator should be removed from any classes they share with the victim.
- Where criminal investigation into a serious sexual assault (rape/penetration) leads to a conviction or caution, the school will take suitable action. In all but the most exceptional of circumstances, the assault is likely to constitute a serious breach of discipline and lead to the view that allowing the perpetrator to remain in the same school as the victim would seriously harm the education or welfare of the victim and potentially other children.
- Where a criminal investigation into sexual assault leads to a conviction or caution, the school will, if it has not already, consider any suitable sanctions in light of their behaviour policy, including consideration of permanent exclusion. Where the perpetrator is going to remain at the school, the principle should be to continue keeping the victim and perpetrator separate and consideration must be made of how best to achieve this and manage potential contact. The nature of the conviction or caution and wishes of the victim will be especially important in determining how to proceed in such cases.
- The victim, alleged perpetrator and other witnesses will receive appropriate support and safeguards on a case-by-case basis.
- The school will take any disciplinary action against the alleged perpetrator in line with their behaviour policy.
- The school recognises that taking disciplinary action and providing appropriate support are not

mutually exclusive actions and will occur at the same time if necessary.

Physical Abuse

• While a clear focus of peer-on-peer abuse is around sexual abuse and harassment, physical assaults, initiation violence and rituals from children to children can also be abusive.

• These are equally not tolerated and if it is believed that a crime has been committed, will be reported to the police.

• The principles from the anti-bullying policy will be applied in these cases, with recognition that any police investigation will need to take priority.

References: Keeping Children Safe in Education (2020)

Sexual Violence and Sexual Harassment between Children in Schools and Colleges (DfE 2018)

What is child abuse?

The following definitions are taken from *Working Together to Safeguard Children*. In addition to these definitions, it should be understood that children can also be abused by being sexually exploited, honour based violence, forced marriage or female genital mutilation.

Children who are particularly vulnerable are:

- Disabled/SEN
- Young carers
- Signs of being drawn into criminal behaviour (gangs/organised crime)
- Frequently going missing from home
- Misusing drugs/alcohol
- At risk of modern slavery/trafficking/exploitation
- Family circumstance – adult mental health, DV, substance abuse
- Has returned from care
- Early signs of neglect/abuse
- At risk of radicalisation or exploitation
- Privately fostered (defined as when a child under the age of 16 (under 18 if disabled) is cared for by someone who is not their parent or a 'close relative'. This is a **private** arrangement made between a parent and a carer, for 28 days or more. School have a duty to inform the local authority as soon as such arrangement has been made.

What is abuse and neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger. They may be abused by an adult(s) or another child(ren).

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.

Emotional abuse

Emotional abuse is defined as: the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as

overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse

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

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate care-givers)
- ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Female Genital Mutilation (FGM)

FGM is a form of child abuse that can lead to extreme and lifelong physical and psychological suffering to women and girls. The term FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for nonmedical reasons. In general, girls undergo female genital cutting (FGC) around the age of three years old, though the age may vary depending on the type of ritual and customs of the local village or region.

There are factors that may indicate a child may be at risk of FGM. As with all other aspects of safeguarding they may form part of a collective picture of concern. For example if:

• the family originates from a community known to practice FGM and / or information is shared of intention to travel to their country of origin;
• a parent requests permission for a child to travel oversees for an extended period during the academic year;
• a parent seeks to withdraw their child from learning about FGM in school;
• a child expresses anxiety about a special ceremony or traditional custom

• another family member is known to have previously undergone FGM.

FGM is illegal in the UK and The Serious Crime Act 2015 amended the 2003 Female Genital Mutilation Act to extend to prohibited acts done outside the UK by a UK national or a person who is resident in the UK.

From October 2015 it has been mandatory to report to the police if you know of a girl under the age of 18 who has undergone FGM. This requires the INDIVIDUAL who becomes aware of the case to make a report. Unlike other safeguarding or child welfare concerns the reporting responsibility cannot be transferred, eg to a designated named person for safeguarding.

Indicators of abuse

Neglect

The nature of neglect

Neglect is a lack of parental care but poverty and lack of information or adequate services can be contributory factors.

Far more children are registered to the category of neglect on child protection plans than to the other categories. As with abuse, the number of children experiencing neglect is likely to be much higher than the numbers on the plans.

Neglect can include parents or carers failing to:

- provide adequate food, clothing and shelter
- protect a child from physical and emotional harm or danger
- ensure adequate supervision or stimulation
- ensure access to appropriate medical care or treatment.

NSPCC has highlighted the following examples of the neglect of children under 12:

- frequently going hungry
- frequently having to go to school in dirty clothes
- regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse
- being abandoned or deserted
- living at home in dangerous physical conditions
- not being taken to the doctor when ill
- not receiving dental care.

Neglect is a difficult form of abuse to recognise and is often seen as less serious than other categories. It is, however, very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group.

Neglect is often noticed at a stage when it does not pose a risk to the child. The duty to safeguard and promote the welfare of children (*What to do if your worried a child is being abused* 2015) would suggest that an appropriate intervention or conversation at this early stage can address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm or in significant need.

Neglect is often linked to other forms of abuse, so any concerns school staff have should at least be discussed with the designated safeguarding lead.

Indicators of neglect

The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm. It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don't keep it to yourself.

Physical indicators of neglect

- Constant hunger and stealing food
- Poor personal hygiene - unkempt, dirty or smelly
- Underweight
- Dress unsuitable for weather
- Poor state of clothing
- Illness or injury untreated

Behavioural indicators of neglect

- Constant tiredness
- Frequent absence from school or lateness
- Missing medical appointments
- Isolated among peers
- Frequently unsupervised
- Stealing or scavenging, especially food
- Destructive tendencies

Emotional abuse

The nature of emotional abuse

Most harm is produced in *low warmth, high criticism* homes, not from single incidents. Emotional abuse is difficult to define, identify/recognise and/or prove. Emotional abuse is chronic and cumulative and has a long-term impact. All kinds of abuse and neglect have emotional effects although emotional abuse can occur by itself. Children can be harmed by witnessing someone harming another person – as in domestic violence.

It is sometimes possible to spot emotionally abusive behavior from parents and carers to their children, by the way that the adults are speaking to, or behaving towards children. An appropriate challenge or intervention could affect positive change and prevent more intensive work being carried out later on.

Indicators of emotional abuse

Developmental issues

- Delays in physical, mental and emotional development
- Poor school performance
- Speech disorders, particularly sudden disorders or changes.

Behaviour

- Acceptance of punishment which appears excessive
- Over-reaction to mistakes
- Continual self-deprecation (I'm stupid, ugly, worthless etc)
- Neurotic behaviour (such as rocking, hair-twisting, thumb-sucking)
- Self-mutilation
- Suicide attempts
- Drug/solvent abuse
- Running away
- Compulsive stealing, scavenging
- Acting out
- Poor trust in significant adults
- Regressive behaviour – e.g., wetting
- Eating disorders
- Destructive tendencies
- Neurotic behaviour
- Arriving early at school, leaving late

Social issues

- Withdrawal from physical contact
- Withdrawal from social interaction
- Over-compliant behaviour
- Insecure, clinging behaviour
- Poor social relationships

Emotional responses

- Extreme fear of new situations
- Inappropriate emotional responses to painful situations ("I deserve this")
- Fear of parents being contacted
- Self-disgust
- Low self-esteem
- Unusually fearful with adults
- Lack of concentration, restlessness, aimlessness
- Extremes of passivity or aggression

Physical abuse

The nature of physical abuse

Most children collect cuts and bruises quite routinely as part of the rough and tumble of daily life. Clearly, it is not necessary to be concerned about most of these minor injuries. But accidental injuries normally occur on the *bony prominences* – e.g., shins. Injuries on the *soft* areas of the body are more likely to be inflicted intentionally and should therefore make us more alert to other concerning factors that may be present.

A body map (Annex 4*)* can assist in the clear recording and reporting of physical abuse. The body map should only be used to record observed injuries and no child should be asked to remove clothing by a member of staff of the school.

Indicators of physical abuse / factors that should increase concern

- Multiple bruising or bruises and scratches (especially on the head and face)
- Clusters of bruises – e.g., fingertip bruising (caused by being grasped)
- Bruises around the neck and behind the ears – the most common abusive injuries are to the head
- Bruises on the back, chest, buttocks, or on the inside of the thighs
- Marks indicating injury by an instrument – e.g., linear bruising (stick), parallel bruising (belt), marks of a buckle
- Bite marks
- Deliberate burning may also be indicated by the pattern of an instrument or object – e.g., electric fire, cooker, cigarette
- Scalds with upward splash marks or *tide marks*
- Untreated injuries
- Recurrent injuries or burns
- Bald patches.

In the social context of the school, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:

- the explanation given does not match the injury
- uses words or phrases that do not match the vocabulary of the child (adults words)
- no explanation is forthcoming or is variable
- the child (or the parent/carer) is secretive or evasive
- the injury is accompanied by allegations of abuse or assault

You should be concerned if the child or young person:

- is reluctant to have parents/carers contacted
- runs away or shows fear of going home
- is aggressive towards themselves or others
- flinches when approached or touched
- is reluctant to undress to change clothing for sport
- wears long sleeves during hot weather
- is unnaturally compliant in the presence of parents/carers.
- has a fear of medical help or attention
- admits to a punishment that appears excessive.

SEXUAL ABUSE

The nature of sexual abuse

Sexual abuse is often perpetrated by people who are known and trusted by the child – e.g., relatives, family friends, neighbours, babysitters, people working with the child in school, faith settings, clubs or activities. Children can also be subject to child sexual exploitation.

Sexual exploitation is seen as a separate category of sexual abuse

Characteristics of child sexual abuse:

- it is often planned and systematic – people do not sexually abuse children by accident, though sexual abuse can be opportunistic
- grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent
- grooming the child's environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Most people who sexually abuse children are men, but some women sexually abuse too.

Indicators of sexual abuse

Physical observations

- Damage to genitalia, anus or mouth
- Sexually transmitted diseases
- Unexpected pregnancy, especially in very young girls
- Soreness in genital area, anus or mouth and other medical problems such as chronic itching
- Unexplained recurrent urinary tract infections and discharges or abdominal pain

Behavioural observations

- Sexual knowledge inappropriate for age
- Sexualised behaviour or affection inappropriate for age
- Sexually provocative behaviour/promiscuity
- Hinting at sexual activity
- Inexplicable decline in school performance
- Depression or other sudden apparent changes in personality as becoming insecure or clinging
- Lack of concentration, restlessness, aimlessness
- Socially isolated or withdrawn
- Overly-compliant behaviour
- Acting out, aggressive behaviour
- Poor trust or fear concerning significant adults
- Regressive behaviour, onset of wetting, by day or night; nightmares
- Onset of insecure, clinging behaviour
- Arriving early at school, leaving late, running away from home
- Suicide attempts, self-mutilation, self-disgust
- Suddenly drawing sexually explicit pictures
- Eating disorders or sudden loss of appetite or compulsive eating
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys

- Become worried about clothing being removed
- Trying to be 'ultra-good' or perfect; overreacting to criticism.

<u>Specific safeguarding issues</u>

Children missing from education (CME)

A child going missing from education is a potential indicator of abuse or neglect, and such children are at risk of being victims of harm, exploitation or radicalisation.

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

- Are at risk of harm or neglect
- 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

The school will follow 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 informing 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 local authority children's social care team, and the police, if the child is in immediate danger or at risk of harm.

As a result of daily admissions registration, schools are particularly well placed to notice when a child has gone missing. If a member of school/educational establishment/college staff becomes aware that a child may have run away or gone missing, they should try to establish with the parents/ carers, what has happened. Parents and the school ensure that the school has at least two emergency contacts for each child.

If this is not possible, or the child is missing, the designated safeguarding lead should, together with the class teacher, assess the child's vulnerability by making reasonable enquiries, and refer any concerns about the child to Children's Services.

The school monitors attendance closely and address poor or irregular attendance. It is important that pupils' poor attendance is referred to the local authority.

In the more general circumstances of a child going missing who is not known to any other agencies, the head teacher should inform the Local Authority of any child who has not attended for 10 consecutive school days without provision of a reasonable explanation.

All schools have a safeguarding duty in respect of their pupils, and as part of this should investigate any unexplained absences. Further information about schools' safeguarding responsibilities can be found in 'Keeping Children Safe in Education' the statutory guidance.

All schools are required to notify the local authority within five days when a pupil's name is added to the admission register at a non-standard transition point. Schools will need to provide the local authority with all the information held within the admission register about the pupil.

Schools must notify the local authority when a pupil's name is to be removed from the admission register at a non-standard transition point under any of the fifteen grounds set out in the regulations, as soon as the ground for removal is met and no later than the time at which the pupil's name is removed from the register.

In line with the duty under section 10 of the Children Act 2004, the expectation is that the school and the local authority will have in place procedures designed to carry out reasonable enquiries. The type of procedures may include the appropriate person checking with relatives, neighbours, landlords - private or social housing providers - and other local stakeholders who are involved. They should also record that they have completed these procedures. If there is reason to believe a child is in immediate danger or at risk of harm, a referral should be made to children's social care (and the police if appropriate).

Child Sexual Exploitation

Child sexual exploitation (CSE) is a form of sexual abuse where children are sexually exploited for money, power or status.

This can involve violent, humiliating and degrading sexual assaults, but does not always involve physical contact and can happen online. For example, young people may be persuaded or forced to share sexually explicit images of themselves, have sexual conversations by text, or take part in sexual activities using a webcam.

Children or young people who are being sexually exploited may not understand that they are being abused. They often trust their abuser and may be tricked into believing they are in a loving, consensual relationship.

If a member of staff suspects CSE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

Indicators of sexual exploitation can include a child:

- Appearing with unexplained gifts or new possessions

- Associating with other young people involved in exploitation

- Having older boyfriends or girlfriends

- Suffering from sexually transmitted infections or becoming pregnant

- Displaying inappropriate sexualised behaviour

- Suffering from changes in emotional wellbeing

- Misusing drugs and/or alcohol

- Going missing for periods of time, or regularly coming home late

- Regularly missing school or education, or not taking part in education

The School uses the CSE assessment tool to help make judgements
www.proceduresonline.com/4lscb/portsmouth/files/risk_assess_toolkit.doc

Children with family members in Prison

These children are at risk of poor outcomes including poverty, stigma, isolation and poor mental health. DSL and pastoral leads will ensure these children receive support in school and through professional involvement where needed.

Criminal Exploitation of Children

Criminal Exploitation is typical feature of county lines criminal activity. Children are vulnerable to drug networks to exploit children to carry drugs and money from urban areas to suburban.

This can affect any child under the age of 18, can involve force or enticement accompanied by violence or threats of violence, can be perpetrated by groups or individuals, males or females, young people or adults. It is typified as a form of power imbalance.

Indicators of potential involvement are:

- Missing from school/home
- Emotional changes

Domestic Abuse

The definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can include, but is not limited to: psychological; physical; sexual; financial; and emotional.

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

Schools will work alongside police through Operation Emcompass.
https://www.operationencompass.org/

Additional advice on identifying children who are affected by domestic abuse and how they can be helped is available at:

• NSPCC- https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/domestic-abuse/signs-symptoms-effects/

• Refuge http://www.refuge.org.uk/get-help-now/what-is-domestic-violence/effects-of-domestic-violence-on-children/

• SafeLives: http://www.safelives.org.uk/knowledge-hub/spotlights/spotlight-3-young-people-and-domestic-abuse

Female Genital Mutilation

FGM is a form of child abuse and is an act of violence against women and girls. It is sometimes also known as female circumcision. Other local terms are:

- Tahoor, Absum, Halalays, Khitan, Ibi, Sunna, Gudnii, Bondo, Kutairi

The term FGM is used to refer to the removal of part or all of the female genitalia for cultural or other non-therapeutic reasons. This is extremely painful and has serious consequences for physical and mental health. It can also result in death.

It is illegal to practice FGM in the UK. It is also illegal to take a child abroad for FGM even if legal in that country.

FGM is classified into four categories:

• **Clitoridectomy**: partial or total removal of the clitoris and, in very rare cases, only the prepuce
• **Excision**: partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora
• **Infibulation**: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris
• **Other**: all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area

The age at which girls undergo FGM varies enormously according to the community. The procedure may be carried out when the girl is newborn, during childhood or adolescence, just before marriage or during the first pregnancy. However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at a higher risk.

Free on-line training in FGM awareness is available at: www.fgmelearning.co.uk

The Serious Crime Act 2015 in England and Wales introduced a requirement for all regulated health and social care professionals (registrants) to report FGM found in girls under the age of 18 years.

If you are concerned that a child may be at risk of FGM:

• In an emergency contact the Police
• Or contact MASH

All staff received training in FGM Spring 2020

Forced marriage

Forcing a person into marriage is a crime. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats, or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological.

Staff will receive training around forced marriage and the presenting symptoms. We are aware of the 'one chance' rule, i.e. we may only have one chance to speak to the potential victim and only one chance to save them.

If a member of staff suspects that a pupil is being forced into marriage, they will speak to the pupil about their concerns in a secure and private place. They will then report this to the DSL.

The DSL will:

• Speak to the pupil about the concerns in a secure and private place

• Activate the local safeguarding procedures

• Seek advice from the Forced Marriage Unit on 020 7008 0151 or fmu@fco.gov.uk

Homelessness

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The DSL (and any deputies) will be aware of contact details and referral routes in to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity.

Indicators that a family may be at risk of homelessness include household debt, rent arrears, domestic abuse and anti-social behaviour, as well as the family being asked to leave a property. A referral into children's social care should take place where a child has been harmed or is at risk of harm regardless of the progress of housing support application.

Honour- based violence

This involves incidents/crimes which have been committed to protect/defend the honour of a family/community including FGM/forced Marriage/Breast Ironing. Abuse involves a wider community and can include multiple perpetrators.

The DSL will:

- Activate local safeguarding procedures

- Involve both social care and police in line with multi-agency working in the local area

- Where FGM has taken place the duty is on all adults to report

Looked After Children and previously Looked After

Children who are LAC or previously LAC are particularly vulnerable to abuse. DSL's will ensure accurate information about the child's contact arrangements are known by key staff. That contact information for all family and LAC family involved with the child are known. The DSL will ensure they have contact details for the Social Worker and the Virtual School Head in the authority that looks after the child.

Medina Primary has a designated Teacher for LAC.

Sexual Violence and/or sexual harassment

Schools should take all reports of sexual violence/harassment seriously. Important considerations include:

- The wishes of the victims of how they want to proceed. Victims to be given as much control as possible over the investigation and support offered;
- The nature of the incident including whether a crime has been committed
- The ages of the children involved
- Developmental stages of the children involved
- Any power imbalance between the children
- If the alleged incident is a one off or sustained pattern of abuse
- Are there ongoing risks to the victim, other children, or school staff.
- Other related issues/wider context.

All adults should act in the best interests of the child. School will follow general safeguarding procedures set out in this policy. Immediate consideration will be giving as to how to best support and protect the victim and alleged perpetrator. Sexual violence and harassment should be highlighted as not acceptable and will not be tolerated. Especially important is not to pass off sexual violence/harassment as 'banter' or 'part of growing up'.

Where there has been a serious sexual assault, the alleged perpetrator should be removed from any classes they share with the victim. Including consideration as to how they travel between school and home. This is to reduce the distress for the child.

School will decide whether to manage the allegation internally (keeping written record of discussions and decisions), to refer for Early Help, refer to Social Care or report to the police depending on the severity of the incident (s). DSL's will contact MASH to discuss these options so that a joint decision is made.

Special Educational Needs and Disabilities
Children with SEND are particularly vulnerable to abuse, especially online. Therefore, it is essential that staff are given training on how to support these children by recognising this vulnerability and providing additional online safety support for the children.

Staff have an understanding that the child may find it more challenging to communicate when abuse has taken place and therefore should make particular note of non-verbal indicators of abuse previously mentioned.

Suicide and self-harm
Suicide: an act of deliberate self-harm which results in death.
Self-harm: self-poisoning or self-injury, irrespective of the apparent purpose of the act.
Suicide and self-harm links: self-harm is generally a way of coping with overwhelming emotional distress. Many young people self-harm where there is no suicidal intent. However, research shows that young people who self-harm can be at a higher risk of suicide.

Self-harm is a coping mechanism which enables a person to express difficult emotions. Young people who hurt themselves often feel that physical pain is easier to deal with than the emotional pain they are experiencing. The behaviour only provides temporary relief and fails to deal with the underlying issues that a young person is facing. For some people, self-harm may last for a short time. For others, it can become a long-term problem. Some people self-harm, stop for a while, and return to it months, even years, later, in times of distress.

Risk factors that indicate a child or young person may be at risk of taking actions to harm themselves or attempt suicide can cover a wide range of life events such as: bereavement, bullying, cyber bullying, mental health problems including eating disorders, family problems such as domestic violence, any form of abuse or conflict between the child and parents.

The most common forms of self-harm are:
• cutting
• biting self
• burning, scalding, branding
• picking at skin, reopening old wounds
• breaking bones, punching
• hair pulling
• head banging
• ingesting objects or toxic substances
• overdosing with a medicine

Self-harm is usually a secretive behaviour but signs may include:
• wearing long sleeves at inappropriate times
• spending more time in the bathroom
• unexplained cuts or bruises, burns or other injuries
• unexplained smell of Dettol, TCP, etc.

• low mood - seems to be depressed or unhappy, low self-esteem, feelings of worthlessness
• any mood changes - anger, sadness
• changes in eating or sleeping patterns
• losing friendships, spending more time by themselves and becoming more private or defensive
• withdrawal from activities that used to be enjoyed
• abuse of alcohol and or drugs

Medina Primary recognises that any pupil who self-harms or expresses thoughts about self-harm and/or suicide, must be taken seriously and appropriate help and intervention will be offered at the earliest point. Any member of staff who is made aware that a pupil has self-harmed, or is contemplating self-harm or suicide will record and report the matter to the DSL as soon as possible as with any other safeguarding concern.

Up-skirting

Medina Primary will ensure that all staff and pupils are aware of the changes to the Voyeurism (Offences) Act 2019, which criminalise the act of 'up skirting'. Criminal Prosecution Service (CPS) defines 'up skirting' as: "a colloquial term referring to the action of placing equipment such as a camera or mobile phone beneath a person's clothing to take a voyeuristic photograph without their permission. It is not only confined to victims wearing skirts or dresses and equally applies when men or women are wearing kilts, cassocks shorts or trousers. It is often performed in crowded public places, for example on public transport or at music festivals, which can make it difficult to notice offenders."

Incidents of up skirting in the school will not be tolerated. Medina Primary will make decisions on a case-by-case basis, with the DSL (or a deputy) taking a leading role and using their professional judgment, supported by other agencies, such as children's social care and the police as required.

PREVENTING RADICALISATION

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. Extremism is vocal or active opposition to fundamental British values, such as democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs.

Schools have a duty to prevent children from being drawn into terrorism. The DSL will undertake Prevent awareness training and make sure that staff have access to appropriate training to equip them to identify children at risk. DLS will familiarise themselves with current guidance: https://www.gov.uk/government/publications/prevent-duty-guidance and also be aware of the Channel programme in case a referral is made through Prevent. More information on Channel available here: https://www.gov.uk/government/publications/channel-guidance

We will assess the risk of children in our school being drawn into terrorism. This assessment will be based on an understanding of the potential risk in our local area, in collaboration with our local safeguarding children board and local police force.

We will ensure that suitable internet filtering is in place, and equip our children to stay safe online at school and at home.

There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. Radicalisation can occur quickly or over a long period.

Staff will be alert to changes in children' behaviour.

The government website Educate Against Hate and charity NSPCC say that signs that a child is being radicalised can include:

- Refusal to engage with, or becoming abusive to, peers who are different from themselves
- Becoming susceptible to conspiracy theories and feelings of persecution
- Changes in friendship groups and appearance
- Rejecting activities they used to enjoy
- Converting to a new religion
- Isolating themselves from family and friends
- Talking as if from a scripted speech
- An unwillingness or inability to discuss their views
- A sudden disrespectful attitude towards others
- Increased levels of anger
- Increased secretiveness, especially around internet use
- Expressions of sympathy for extremist ideologies and groups, or justification of their actions
- Accessing extremist material online, including on Facebook or Twitter
- Possessing extremist literature
- Being in contact with extremist recruiters and joining, or seeking to join, extremist organisations

Children who are at risk of radicalisation may have low self-esteem, or be victims of bullying or discrimination. It is important to note that these signs can also be part of normal teenage behaviour – staff should have confidence in their instincts and seek advice if something feels wrong.

If staff are concerned about a child, they will follow procedures set out in section 4.1 of this policy, including discussing their concerns with the DSL.

Staff should **always** take action if they are worried.

Sexting: how to respond to an incident

This document provides a brief overview for frontline staff of how to respond to incidents involving 'sexting'.

All such incidents should be reported to the Designated Safeguarding Lead (DSL) who will lead response.

What is 'sexting'?

In the latest advice for schools and colleges (UKCCIS, 2016), sexting is defined as **the production and/or sharing of sexual photos and videos of and by young people who are under the age of 18**. It includes nude or nearly nude images and/or sexual acts. It is also referred to as 'youth produced sexual imagery'.

The DSL should be familiar with the full 2016 guidance from the UK Council for Child Internet Safety (UKCCIS), *Sexting in Schools and Colleges: Responding to Incidents and Safeguarding Young People*, and should **not** refer to this document instead of the full guidance.

'Sexting' does not include the sharing of sexual photos and videos of under-18 year olds with or by adults. This is a form of child sexual abuse and must be referred to the police.

What to do if an incident involving 'sexting' comes to your attention

Report it to your Designated Safeguarding Lead (DSL) or Deputy DSL immediately.

- **Never** view, download or share the imagery yourself, or ask a child to share or download – **this is illegal**.
- If you have already viewed the imagery by accident (e.g. if a young person has showed it to you before you could ask them not to), report this to the DSL.
- **Do not** delete the imagery or ask the young person to delete it.
- **Do not** ask the young person(s) who are involved in the incident to disclose information regarding the imagery. This is the responsibility of the DSL.
- **Do not** share information about the incident to other members of staff, the young person(s) it involves or their, or other, parents and/or carers.
- **Do not** say or do anything to blame or shame any young people involved.
- **Do** explain to them that you need to report it and reassure them that they will receive support and help from the DSL.

For further information

Download the full guidance Sexting in Schools and Colleges: Responding to Incidents and Safeguarding Young People (UKCCIS, 2016) at www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis.

STAFF AND VISITOR MANAGEMENT PROCEDURES

The issuing of identity badges to staff, governors and all visitors to the school is a vital component of the safeguarding expectations.

1. STAFF ID BADGE

All staff should be issued with an identify badge. Everyone should be issued with and wear their photo ID at all times.

2. VISITOR ID BADGE

The school has a legal duty of care for the health, safeguarding, safety, security and wellbeing of all children and staff. This duty of care incorporates the duty to "safeguard" all children from subjection to any form of harm, abuse or nuisance. The school therefore requires that ALL VISITORS (without exception) are issued with a Visitor badge.

For the purpose of this procedure a Visitor may be:

- Supply or Agency staff
- External visitors entering the school site during the school day or for after school activities (including peripatetic tutors, sports coaches, and topic related visitors e.g. authors, journalists)
- Parents
- Volunteers
- Contractors e.g. Maintenance, Grounds person
- Independent contractors who may transport children in minibuses or in taxis
- An Ofsted Inspector
- Governors

The school must ensure that an effective sign in and visitor badge process is in place, which clearly identifies whether the visitor is DBS checked and therefore able to meet with children and students without supervision when on site.

Regardless of the frequency of visit, all individuals must be issued with an appropriate ID badge. The badge should identify the DSL.

Procedure:

All visitors must report to the School Office, give their name and purpose of their visit. They should then complete their details via the electronic log in system and be issued with a badge. This badge to carry this statement: 'Safeguarding is our highest priority. If you are concerned about a child's safety, speak to the school office who will direct you to the Designated Safeguarding Lead.'

All visitors will be required to wear the ID badge which must remain visible throughout their visit.

It is expected all visitor badges are issued with **RED** or **GREEN** lanyards. **RED** if the school does not have access to a DBS check. This visitor must be accompanied while on site. The member of

staff the visitor is meeting will be responsible for that visitor whilst on site and should escort them back to the School Office at the end of the meeting. **GREEN** if the visitor has presented with a current DBS check or is Professional School support. This could include Local Authority professionals, Supply teachers or school coaches, Governors etc. These visitors should be issued with a green lanyard to be worn alongside their professional ID badge. These visitors can meet with children unsupervised.

Visitor Departure

On leaving the school, all visitors MUST leave via the School Office and log out via the electronic system.

Useful Websites

Abuse

https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2

https://www.gov.uk/domestic-violence-and-abuse

https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief

https://www.disrespectnobody.co.uk/relationship-abuse/what-is-relationship-abuse/

Bullying

https://www.gov.uk/government/publications/preventing-and-tackling-bullying

Children missing from education, home or care

https://www.gov.uk/government/publications/children-missing-education

https://www.gov.uk/government/publications/children-who-run-away-or-go-missing-from-home-or-care

https://www.gov.uk/government/publications/missing-children-and-adults-strategy

Children with family members in prison

https://www.nicco.org.uk/

Child Exploitation

https://www.gov.uk/government/publications/safeguarding-children-who-may-have-been-trafficked-practice-guidance

Drugs

https://www.gov.uk/government/publications/drugs-advice-for-schools

http://www.talktofrank.com/

http://mentor-adepis.org/

FGM

https://www.gov.uk/government/collections/female-genital-mutilation

https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation

Fostering

https://www.gov.uk/government/publications/children-act-1989-private-fostering

Health and Well-being

https://www.gov.uk/government/publications/safeguarding-children-in-whom-illness-is-fabricated-or-induced

https://www.pshe-association.org.uk/curriculum-and-resources/resources/rise-above-schools-teaching-resources

https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2

Homelessness

https://www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities

Online

https://www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis

Radicalisation

https://www.gov.uk/government/publications/prevent-duty-guidance

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

http://educateagainsthate.com/

Upskirting

https://www.gov.uk/government/news/upskirting-know-your-rights

Violence

https://www.gov.uk/government/publications/advice-to-schools-and-colleges-on-gangs-and-youth-violence

https://www.gov.uk/government/publications/strategy-to-end-violence-against-women-and-girls-2016-to-2020

https://www.gov.uk/government/publications/violence-against-women-and-girls-national-statement-of-expectations

https://www.gov.uk/government/publications/sexual-violence-and-sexual-harassment-between-children-in-schools-and-colleges

https://www.gov.uk/government/publications/serious-violence-strategy

Child protection and safeguarding: COVID-19 addendum

To be reviewed in line with Medina Primary Child Protection Policy timeline unless changes come into force before this deadline.

Contents

Important contacts

ROLE	NAME	CONTACT DETAILS
Designated safeguarding lead (DSL)	Howard Payne (Head Teacher)	02392 375475
Deputy DSL	Ros Hammerton (Depury Head) Emma Hibberd (Inclusion Manager)	02392 375475
Local authority designated officer (LADO)	Portsmouth LADO	02392 882500
Chair of governors	Jacqueline Coonie	jcoonie@me.com

1. Scope and definitions

This addendum applies during the period of phased return following school closure due to COVID-19. It reflects updated advice from Portsmouth Local Authority

It sets out changes to our normal child protection policy in light of the Department for Education's guidance Coronavirus: safeguarding in schools, colleges and other providers, and should be read in conjunction with that policy.

Unless covered here, our normal child protection policy continues to apply.

The Department for Education's definition of 'vulnerable children' includes those who:

- Are assessed as being in need, including children:
    - With a child protection plan
    - With a child in need plan
    - Looked after by the local authority
- Have an education, health and care (EHC) plan
- Have been assessed as otherwise vulnerable by educational providers or LAs, for example those who are:
- On the edge of receiving support from children's social care services
- Adopted
- At risk of becoming NEET ('not in employment, education or training')
- Living in temporary accommodation
- Young carers
- Considered vulnerable at the provider and LA's discretion

2. Core safeguarding principles

We will **still** have regard to the statutory safeguarding guidance, Keeping Children Safe in Education.

Although we are operating in a different way to normal, we are still following these important safeguarding principles:

- The best interests of children must come first
- If anyone has a safeguarding concern about any child, they should continue to act on it immediately
- A designated safeguarding lead (DSL) or deputy should be available at all times (see section 4 for details of our arrangements)
- It is essential that unsuitable people do not enter the school workforce or gain access to children
- Children should continue to be protected when they are online

3. Reporting concerns

All staff and volunteers must continue to act on any concerns they have about a child immediately. It is still vitally important to do this, both for children continuing to attend or returning to school and those at home.

Staff should follow usual reporting procedures.

As a reminder, all staff should continue to work with and support children's social workers, where they have one, to help protect vulnerable children.

4. DSL (and deputy) arrangements

We aim to have a trained DSL or deputy DSL on site wherever possible.

We will keep all school staff and volunteers informed by email as to who will be the DSL (or deputy) on any given day, and how to contact them.

We will ensure that DSLs (and deputies), wherever their location, know who the most vulnerable children in our school are.

On occasions where there is no DSL or deputy on site, a senior leader will take responsibility for co-ordinating safeguarding. This will be Helen Reeder (KS2 Lead) or Laura Cudlip (KS1 Lead).

The senior leader will be responsible for liaising with the off-site DSL (or deputy) to make sure they (the senior leader) can:

- Identify the most vulnerable children in school

- Update and manage access to child protection files, where necessary

- Liaise with children's social workers where they need access to children in need and/or to carry out statutory assessments

5. Working with other agencies

We will continue to work with children's social care and with virtual school heads for looked-after and previously looked-after children.

We will continue to update this addendum where necessary, to reflect any updated guidance from Portsmouth Local Authority about children with education, health and care (EHC) plans, the local authority designated officer (LADO) and children's social care, reporting mechanisms, referral thresholds and children in need.

6. Monitoring attendance

We will resume taking our attendance register. We will also continue to submit the Department for Education's daily online attendance form, until no longer asked to do so.

Where any child we expect to attend school does not attend, or stops attending, we will:

- Follow up on their absence with their parents or carers;

- Notify their social worker, where they have one

We will make arrangements with parents and carers to make sure we have up-to-date emergency contact details, and additional contact details where possible.

7. Peer-on-peer abuse

We will continue to follow the principles set out in part 5 of Keeping Children Safe in Education when managing reports and supporting victims of peer-on-peer abuse.

Staff should continue to act on any concerns they have immediately – about both children attending school and those at home.

8. Concerns about a staff member or volunteer

We will continue to follow the principles set out in part 4 of Keeping Children Safe in Education.

Staff should continue to act on any concerns they have immediately – whether those concerns are about staff/volunteers working on site or remotely.

We will continue to refer adults who have harmed or pose a risk of harm to a child or vulnerable adult to the Disclosure and Barring Service (DBS).

We will continue to refer potential cases of teacher misconduct to the Teaching Regulation Agency. We will do this using the email address Misconduct.Teacher@education.gov.uk for the duration of the COVID-19 period, in line with government guidance.

9. Contact plans

We have contact plans for children with a social worker, and other children who we have safeguarding concerns about, for circumstances where:

- They won't be attending school (for example where the school, parent/carer and social worker, if relevant, have decided together that this wouldn't be in the child's best interests); or
- They would usually attend but have to self-isolate

Each child has an individual risk assessment, which sets out

- How often the school will make contact – this will be at least once a week
- Which staff member(s) will make contact – as far as possible, this will be staff who know the family well
- How staff will make contact – this will be over the phone, doorstep visits, or a combination of both
- How School are supporting the child's learning at home

We have agreed these plans with children's social care where relevant, and will review them during weekly conversations with Local Authority Rep: Sarah Jetten, Link Coordinator Team

If we can't make contact, we will contact Social Care via MASH

10. Safeguarding all children

Staff and volunteers are aware that this difficult time potentially puts all children at greater risk.

Staff and volunteers will continue to be alert to any signs of abuse, or effects on pupils' mental health that are also safeguarding concerns, and act on concerns immediately in line with the schools reporting procedures set out above

10.1 Children returning to school

The DSL (or deputy) will do all they reasonably can to find out from parents and carers whether there have been any changes regarding welfare, health and wellbeing that they should be aware of before the child returns.

The DSL (and deputy) will be given more time to support staff and children regarding new concerns (and referrals as appropriate) as more children return to school.

Staff and volunteers will be alert to any new safeguarding concerns as they see pupils in person.

10.2 Children at home

The school will maintain contact with children who are not yet returning to school. Staff will try to speak directly to children at home to help identify any concerns. They will use school phones and devices to make calls home. Or, if necessary they will use personal phones but they will withhold their personal number.

Staff and volunteers will look out for signs like:

- Not completing assigned work or logging on to school systems (such as mathletics)

- No contact from children or families

- Seeming more withdrawn during any calls

11. Online safety

11.1 In school

We will continue to have appropriate filtering and monitoring systems in place in school.

11.2 Outside school

Where staff are interacting with children online, they will continue to follow our existing IT acceptable use policy.

All emails between home and teaching staff are monitored by SLT/DSLs. Telephone calls between parents and teaching staff should take place in school where possible. If calls are made outside of the school, the teacher keeps a record of who was spoken to, date and brief outline of discussion. Teaching staff also must withhold their number when using their personal phone.

Staff will continue to be alert to signs that a child may be at risk of harm online, and act on any concerns immediately, following our reporting procedures as set out above.

We will make sure children know how to report any concerns they have back to our school and signpost them to other sources of support too, such as https://www.ceop.police.uk/safety-centre/ .

GoogleTeach is to be used across the school. Teachers will monitor chat facilities and report any concerns as per usual procedures.

11.3 Working with parents and carers

We will make sure parents and carers:

- Are aware of the potential risks to children online and the importance of staying safe online

- Know what our school is asking children to do online, including what sites they will be using and who they will be interacting with from our school

- Are aware that they should only use reputable online companies or tutors if they wish to supplement the remote teaching and resources our school provides

- Know where else they can go for support to keep their children safe online

12. Mental health

12.1 Children returning to school

Staff and volunteers will be aware of the possible effects that this period may have had on pupils' mental health. They will look out for behavioural signs, including pupils being fearful, withdrawn, aggressive, oppositional or excessively clingy, to help identify where support may be needed.

Medina Primary has 2 ELSA's on staff. Teachers and other support staff can make a referral for Pastoral Support for the child to work 1:1 or in a small group. Advice can also be given to staff without a pupil referral. The Portsmouth Educational Psychology Service and Portsmouth CAMHS both offer advice over the telephone.

12.2 Children at home

Where possible, we will continue to offer our current support for pupil mental health for all pupils. ELSAs will contact families by phone and send resources where needed. This is usually initiated via the teacher conferencing every other week.

We will also signpost all pupils, parents/carers and staff to other resources to support good mental health at this time.

When setting expectations for pupils learning remotely and not attending school, teachers will bear in mind the potential impact of the current situation on both children's and adults' mental health.

13. Staff recruitment

13.1 Recruiting new staff and volunteers

We continue to recognise the importance of robust safer recruitment procedures, so that adults and volunteers who work in our school are safe to work with children.

We will continue to follow our safer recruitment procedures, and part 3 of Keeping Children Safe in Education.

In urgent cases, when validating proof of identity documents to apply for a DBS check, we will initially accept verification of scanned documents via online video link, rather than being in physical possession of the original documents. This approach is in line with revised guidance from the DBS. New staff must still present the original documents when they first attend work at school.

Similarly, temporary measures allow right to work checks to be carried out by verifying scanned documents on a video call. If we need to take this approach, we will follow Home Office and Immigration Enforcement guidance.

We will continue to do our usual checks on new volunteers, and do risk assessments to decide whether volunteers who are not in regulated activity should have an enhanced DBS check, in accordance with paragraphs 167-172 of Keeping Children Safe in Education.

14. Safeguarding induction and training

We will make sure staff and volunteers are aware of changes to our procedures and local arrangements.

14.1 New staff induction

New staff and volunteers will continue to receive:

- A safeguarding induction
- A copy of our children protection policy (and this addendum)
- Keeping Children Safe in Education part 1

14.2 DSL training

The DSL (and deputy) may not be able to take part in training during this period. If this is the case, the DSL (and deputy) will continue to be considered as a trained DSL (or deputy) even if they miss their refresher training.

The DSL (and deputy) will do what they reasonably can to keep up to date with safeguarding developments, such as via safeguarding partners, newsletters and professional advice groups.

15. Keeping records of who is on site

We will keep a record of which staff and volunteers are on site each day, and that appropriate checks have been carried out for them.

We will continue to keep our single central record up to date.

We will use the single central record to log everyone working or volunteering in our school each day.

16. Children attending other settings

Where children are temporarily required to attend another setting, we will make sure the receiving school is provided with any relevant welfare and child protection information.

Wherever possible, our DSL (or deputy) and/or special educational needs co-ordinator (SENCO) will share, as applicable:

- The reason(s) why the child is considered vulnerable and any arrangements in place to support them
- The child's EHC plan, child in need plan, child protection plan or personal education plan
- Details of the child's social worker
- Details of the virtual school head

Where the DSL, deputy or SENCO cannot share this information, the senior leader(s) identified in section 4 will do this.

We will share this information before the child arrives as far as is possible, and otherwise as soon as possible afterwards.

17. Monitoring arrangements

This policy will be reviewed as guidance from the LA or Department for Education is updated, and as a minimum every 4 weeks by Howard Payne and/or Ros Hammerton and/or Emma Hibberd.

18. Links with other policies

This policy links to the following policies and procedures:

Child protection policy

Staff code of conduct

IT acceptable use policy
Health and safety policy
Behaviour Policy
Inclusion Policy