

# Child Protection and Safeguarding Policy (including allegations against staff and low-level concerns)

MK Christian Foundation



<b>Approved by:</b>	Board of Trustees	<b>Date:</b> September 2023
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## Important contacts

ROLE/ORGANISATION	NAME	CONTACT DETAILS
Designated Safeguarding (DSL) Lead	Debbie Brooks	safeguarding@mkchristianfoundation.co.uk
Deputy DSL	Steve Johnstone	safeguarding@mkchristianfoundation.co.uk
Additional DSL's	Laura Geering – Head of Learning  Simon Rudiger – Director	safeguarding@mkchristianfoundation.co.uk
Local authority designated officer (LADO)	Jo Clifford	01908 254307 LADO@milton-keynes.gov.uk
Chair of trustees	Jenny Mills	
Trustee safeguarding representative	Graham Ghaleb	graham.ghaleb@mkchristianfoundation.co.uk
Channel helpline	n/a	020 7340 7264

## 1. Aims

MK Christian Foundation aims to ensure that:

- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- All staff are aware of their statutory responsibilities with respect to safeguarding
- Staff are properly trained in recognising and reporting safeguarding issues

## 2. Legislation and statutory guidance

This policy is based on the Department for Education's (DfE's) statutory guidance [Keeping Children Safe in Education \(2023\)](#) and [Working Together to Safeguard Children \(2018\)](#), and the [Governance Handbook](#). We comply with this guidance and the arrangements agreed and published by our 3 local safeguarding partners (see section 3).

This policy is also based on the following legislation:

- › Section 175 of the [Education Act 2002](#), which places a duty on organisations and local authorities to safeguard and promote the welfare of trainees
- › [The School Staffing \(England\) Regulations 2009](#), which set out what must be recorded on the single central record and the requirement for at least 1 person conducting an interview 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

- › [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 organisations' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- › [The Human Rights Act 1998](#), which explains that being subjected to harassment, violence and/or abuse, including that of a sexual nature, may breach any or all of the rights which apply to individuals under the [European Convention on Human Rights](#) (ECHR)
- › [The Equality Act 2010](#), which makes it unlawful to discriminate against people regarding particular protected characteristics (including disability, sex, sexual orientation, gender reassignment and race). This means our Board of Trustees, Head of Learning and Director should carefully consider how they are supporting their trainees with regard to these characteristics. The Act allows our organisation to take positive action to deal with particular disadvantages affecting trainees (where we can show it's proportionate). This includes making reasonable adjustments for disabled trainees. For example, it could include taking positive action to support girls where there's evidence that they're being disproportionately subjected to sexual violence or harassment
- › [The Public Sector Equality Duty \(PSED\)](#), which explains that we must have due regard to eliminating unlawful discrimination, harassment and victimisation. The PSED helps us to focus on key issues of concern and how to improve trainee outcomes. Some trainees may be more at risk of harm from issues such as sexual violence; homophobic, biphobic or transphobic bullying; or racial discrimination

### 3. Definitions

**Safeguarding and promoting the welfare of children** means:

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

**Child protection** is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.

**Abuse** is a form of maltreatment of a child, and may involve inflicting harm or failing to act to prevent harm. Appendix 1 explains the different types of abuse.

**Neglect** is a form of abuse and 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. Appendix 1 defines neglect in more detail.

**Sharing of nudes and semi-nudes** (also known as sexting or youth-produced sexual imagery) is where children share nude or semi-nude images, videos or live streams.

**Children** includes everyone under the age of 18.

The following 3 **safeguarding partners** are identified in Keeping Children Safe in Education (and defined in the Children Act 2004, as amended by chapter 2 of the Children and Social Work Act 2017). They will make arrangements to work together to safeguard and promote the welfare of local children, including identifying and responding to their needs:

- › The local authority (LA)
- › Integrated care boards (previously known as clinical commissioning groups) for an area within the LA

- › The chief officer of police for a police area in the LA area

**Victim** is a widely understood and recognised term, but we understand that not everyone who has been subjected to abuse considers themselves a victim, or would want to be described that way. When managing an incident, we will be prepared to use any term that the child involved feels most comfortable with.

**Alleged perpetrator(s)** and **perpetrator(s)** are widely used and recognised terms. However, we will think carefully about what terminology we use (especially in front of children) as, in some cases, abusive behaviour can be harmful to the perpetrator too. We will decide what's appropriate and which terms to use on a case-by-case basis.

## 4. Equality statement

Some children have an increased risk of abuse, both online and offline, 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 and/or disabilities (SEND) or health conditions (see section 10)
- › Are young carers
- › May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- › Have English as an additional language
- › Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- › Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- › Are asylum seekers
- › Are at risk due to either their own or a family member's mental health needs
- › Are looked after or previously looked after
- › Are missing or absent from education for prolonged periods and/or repeat occasions
- › Whose parent/carer has expressed an intention to remove them from organisation to be home educated

## 5. Roles and responsibilities

Safeguarding and child protection is **everyone's** responsibility. This policy applies to all staff, volunteers and trustees in the organisation and is consistent with the procedures of the 3 safeguarding partners. Our policy and procedures also apply to extended and off-site activities.

MK Christian Foundation plays a crucial role in preventative education. This is in the context of a whole-organisation approach to preparing children for life in modern Britain, and a culture of zero tolerance of sexism, misogyny/misandry, homophobia, biphobia, transphobia and sexual violence/harassment. This will be underpinned by our:

- › Behaviour policy
- › Pastoral support system
- › Planned programme of personal and social development as delivered through our EEP curriculum. 5.1 All staff

All staff who work directly or indirectly with children are expected to read at least part 1 and annex B of Keeping Children Safe in Education (KCSIE).

All staff will:

- › Read and understand part 1 and annex B of the Department for Education’s statutory safeguarding guidance, [Keeping Children Safe in Education](#), and review this guidance at least annually
- › Sign a declaration at the beginning of each academic year to say that they have reviewed the guidance
- › Provide a safe space for trainees who are LGBTQ+ to speak out and share their concerns
- › Attend safeguarding training sessions

All staff will be aware of:

- › Our systems which support safeguarding, including this child protection and safeguarding policy, the staff code of conduct, the role and identity of the designated safeguarding lead (DSL) and deputies, the trainee behaviour policy, online safety and the safeguarding response to children who go missing from education
- › The early help assessment process (sometimes known as the common assessment framework) and their role in it, including identifying emerging problems, liaising with the DSL, and sharing information with other professionals to support early identification and assessment
- › The process for making referrals to local authority children’s social care and for statutory assessments that may follow a referral, including the role they might be expected to play
- › What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals
- › The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child-on-child abuse, child sexual exploitation (CSE), child criminal exploitation (CCE), indicators of being at risk from or involved with serious violent crime, FGM, radicalisation and serious violence (including that linked to county lines)
- › The importance of reassuring victims that they are being taken seriously and that they will be supported and kept safe
- › The fact that children can be at risk of harm inside and outside of their home, in education and online
- › The fact that children who are (or who are perceived to be) lesbian, gay, bi or trans (LGBTQ+) can be targeted by other children
- › What to look for to identify children who need help or protection

Section 15 and appendix 3 of this policy outline in more detail how staff are supported to do this.

## 5.2 The designated safeguarding lead (DSL)

The DSL is a member of the leadership team. Our DSL is Debbie Brooks. The DSL takes lead responsibility for child protection and wider safeguarding in the organisation. This includes online safety, and understanding our filtering and monitoring processes on organisational devices and networks to keep children safe online.

During opening times, the DSL will be available during work hours for staff to discuss any safeguarding concerns.

Outside of hours, the DSL can be contacted via email at [safeguarding@mkchristianfoundation.co.uk](mailto:safeguarding@mkchristianfoundation.co.uk).

When the DSL is absent, the deputy – Steve Johnstone – will act as cover.

If the DSL and deputy are not available, the additional DSL’s will act as cover.

The DSL will be given the time, funding, training, resources and support to:

- › Provide advice and support to other staff on child welfare and child protection matters
- › Take part in strategy discussions and inter-agency meetings and/or support other staff to do so
- › Contribute to the assessment of children
- › Refer suspected cases, as appropriate, to the relevant body (local authority children’s social care, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly

- › Have a good understanding of harmful sexual behaviour
- › Have a good understanding of the filtering and monitoring systems and processes in place at our organisation

The DSL will also:

- › Keep the Head of Learning and Director informed of any issues
- › Liaise with local authority case managers and designated officers for child protection concerns as appropriate
- › Discuss the local response to sexual violence and sexual harassment with police and local authority children's social care colleagues to prepare the organisation's policies
- › Be confident that they know what local specialist support is available to support all children involved (including victims and alleged perpetrators) in sexual violence and sexual harassment, and be confident as to how to access this support
- › Be aware that children must have an 'appropriate adult' to support and help them in the case of a police investigation or search

The full responsibilities of the DSL and deputies are set out in their job description.

### 5.3 The board of trustees

The board of trustees will:

- › Facilitate a whole-organisation approach to safeguarding, ensuring that safeguarding and child protection are at the forefront of, and underpin, all relevant aspects of process and policy development
- › Evaluate and approve this policy at each review, ensuring it complies with the law, and hold the Head of Learning and Director to account for its implementation
- › Be aware of its obligations under the Human Rights Act 1998, the Equality Act 2010 (including the Public Sector Equality Duty), and our organisation's local multi-agency safeguarding arrangements
- › Appoint a senior board representative to monitor the effectiveness of this policy in conjunction with the full board of trustees. This is always a different person from the DSL
- › Ensure all staff undergo safeguarding and child protection training, including online safety, and that such training is regularly updated and is in line with advice from the safeguarding partners
- › Ensure that the organisation has appropriate filtering and monitoring systems in place, and review their effectiveness. This includes:
  - Making sure that the leadership team and staff are aware of the provisions in place, and that they understand their expectations, roles and responsibilities around filtering and monitoring as part of safeguarding training
  - Reviewing the [DfE's filtering and monitoring standards](#), and discussing with IT staff and service providers what needs to be done to support the organisation in meeting these standards
- › Make sure:
  - The DSL has the appropriate status and authority to carry out their job, including additional time, funding, training, resources and support
  - Online safety is a running and interrelated theme within the whole-organisational approach to safeguarding and related policies
  - The DSL has lead authority for safeguarding, including online safety and understanding the filtering and monitoring systems and processes in place
  - The organisation has procedures to manage any safeguarding concerns (no matter how small) or allegations that do not meet the harm threshold (low-level concerns) about staff members (including supply staff, volunteers and contractors). Appendix 2 of this policy covers this procedure

- That this policy reflects that children with SEND, or certain medical or physical health conditions, can face additional barriers to any abuse or neglect being recognised
- › Where another body is providing services or activities or are hiring the site (regardless of whether or not the children who attend these services/activities are children on the organisation roll):
  - Seek assurance that the other body has appropriate safeguarding and child protection policies/procedures in place, and inspect them if needed
  - Make sure there are arrangements for the body to liaise with the organisation about safeguarding arrangements, where appropriate
  - Make sure that safeguarding requirements are a condition of using the premises, and that any agreement to use the premises would be terminated if the other body fails to comply

The chair of the board will act as the 'case manager' in the event that an allegation of abuse is made against the Director, where appropriate (see appendix 2).

All members of the board of trustees will read Keeping Children Safe in Education in its entirety.

## 5.4 The Head of Learning and Director

The Head of Learning and Director is responsible for the implementation of this policy, including:

- › Ensuring that staff (including temporary staff) and volunteers:
  - Are informed of our systems which support safeguarding, including this policy, as part of their induction
  - Understand and follow the procedures included in this policy, particularly those concerning referrals of cases of suspected abuse and neglect
- › Communicating this policy to parents/carers when their child joins the organisation and via the organisation website
- › Ensuring that the DSL has appropriate time, funding, training and resources, and that there is always adequate cover if the DSL is absent
- › Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate (see appendix 2)
- › Making decisions regarding all low-level concerns, though they may wish to collaborate with the DSL on this

## 5.5 Virtual school heads

Virtual school heads have a non-statutory responsibility for the strategic oversight of the educational attendance, attainment and progress of trainees with a social worker.

They should also identify and engage with key professionals, e.g. DSLs, special educational needs co-ordinators (SENCOs), social workers, mental health leads and others.

## 6. Confidentiality

Confidentiality is an issue which needs to be discussed and fully understood by all those working with children, particularly in the context of child protection. All staff are made aware of the following in relation to confidentiality when dealing with issues relating to child protection:

- › Timely information sharing is essential to effective safeguarding
- › Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children
- › The Data Protection Act (DPA) 2018 and UK GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe
- › If staff need to share 'special category personal data', the DPA 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information without



consent if: it is not possible to gain consent; it cannot be reasonably expected that a practitioner gains consent; or if to gain consent would place a child at risk

- › Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the child's best interests
- › If a victim asks the organisation not to tell anyone about the sexual violence or sexual harassment:
  - There's no definitive answer, because even if a victim doesn't consent to sharing information, staff may still lawfully share it if there's another legal basis under the UK GDPR that applies
  - The DSL will have to balance the victim's wishes against their duty to protect the victim and other children
  - The DSL should consider that:
    - Parents or carers should normally be informed (unless this would put the victim at greater risk)
    - The basic safeguarding principle is: if a child is at risk of harm, is in immediate danger, or has been harmed, a referral should be made to local authority children's social care
    - Rape, assault by penetration and sexual assault are crimes. Where a report of rape, assault by penetration or sexual assault is made, this should be referred to the police. While the age of criminal responsibility is 10, if the alleged perpetrator is under 10, the starting principle of referring to the police remains
- › Regarding anonymity, all staff will:
  - Be aware of anonymity, witness support and the criminal process in general where an allegation of sexual violence or sexual harassment is progressing through the criminal justice system
  - Do all they reasonably can to protect the anonymity of any children involved in any report of sexual violence or sexual harassment, for example, carefully considering which staff should know about the report, and any support for children involved
  - Consider the potential impact of social media in facilitating the spreading of rumours and exposing victims' identities
- › The government's [information sharing advice for safeguarding practitioners](#) includes 7 'golden rules' for sharing information, and will support staff who have to make decisions about sharing information
- › If staff are in any doubt about sharing information, they should speak to the DSL (or deputy)
- › Confidentiality is also addressed in this policy with respect to record-keeping in section 14, and allegations of abuse against staff in appendix 2

## 7. Recognising abuse and taking action

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

Please note – in this and subsequent sections, you should take any references to the DSL to mean “the DSL (or deputy DSL)”.

### 7.1 If a child is suffering or likely to suffer harm, or in immediate danger

Make a referral to children's social care and/or the police **immediately** if you believe a child is suffering or likely to suffer from harm, or is in immediate danger. **Anyone can make a referral.**

Tell the DSL (see section 5.2) as soon as possible if you make a referral directly.

To refer a concern to Children's Social Care you can telephone the duty team at MK Council on 01908 253169. You can access a MARF (multi-agency referral form) on the MK Council website.

### 7.2 If a child makes a disclosure to you

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

- › Listen to and believe them. Allow them time to talk freely and do not ask leading questions
- › Stay calm and do not show that you are shocked or upset
- › Tell the child they have done the right thing in telling you. Do not tell them they should have told you sooner
- › Explain what will happen next and that you will have to pass this information on. Do not promise to keep it a secret
- › Write up your conversation as soon as possible in the child's own words. Stick to the facts, and do not put your own judgement on it
- › Email your write up to [safeguarding@mkchristainfoundation.co.uk](mailto:safeguarding@mkchristainfoundation.co.uk). Alternatively, if appropriate, make a referral to children's social care and/or the police directly (see 7.1), and tell the DSL as soon as possible that you have done so. Aside from these people, do not disclose the information to anyone else unless told to do so by a relevant authority involved in the safeguarding process

Bear in mind that some children may:

- › Not feel ready, or know how to tell someone that they are being abused, exploited or neglected
- › Not recognise their experiences as harmful
- › Feel embarrassed, humiliated or threatened. This could be due to their vulnerability, disability, sexual orientation and/or language barriers

None of this should stop you from having a 'professional curiosity' and speaking to the DSL if you have concerns about a child.

### 7.3 If you discover that FGM has taken place or a trainee is at risk of FGM

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

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

Possible indicators that a trainee has already been subjected to FGM, and factors that suggest a trainee may be at risk, are set out in appendix 4 of this policy.

**Any staff member** who either:

- Is informed by a girl under 18 that an act of FGM has been carried out on her; or
- Observes physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth

Must immediately report this to the police, personally. This is a mandatory statutory duty, and staff will face disciplinary sanctions for failing to meet it.

Unless they have been specifically told not to disclose, they should also discuss the case with the DSL and involve children's social care as appropriate.

**Any other member of staff** who discovers that an act of FGM appears to have been carried out on a **child under 18** must speak to the DSL and follow our local safeguarding procedures.

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

**Any member of staff** who suspects a trainee is *at risk* of FGM or suspects that FGM has been carried out or discovers that a trainee **aged 18 or over** appears to have been a victim of FGM should speak to the DSL and follow our local safeguarding procedures.

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

Figure 1 below, before section 7.7, illustrates the procedure to follow if you have any concerns about a child's welfare.

Where possible, speak to the DSL first to agree a course of action.

If in exceptional circumstances the DSL or deputy is not available, this should not delay appropriate action being taken. Speak to a member of the senior leadership team and/or take advice from local authority children's social care. You can also seek advice at any time from the NSPCC helpline on 0808 800 5000. Share details of any actions you take with the DSL as soon as practically possible.

Make a referral to local authority children's social care directly, if appropriate (see 'Referral' below). Share any action taken with the DSL as soon as possible.

### **Early help assessment**

If an early help assessment is appropriate, the DSL will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner.

We will discuss and agree, with statutory safeguarding partners, levels for the different types of assessment, as part of local arrangements.

The DSL will keep the case under constant review and the organisation will consider a referral to local authority children's social care if the situation does not seem to be improving. Timelines of interventions will be monitored and reviewed.

### **Referral**

If it is appropriate to refer the case to local authority children's social care or the police, the DSL will make the referral or support you to do so.

If you make a referral directly (see section 7.1), you must tell the DSL as soon as possible.

The local authority will make a decision within 1 working day of a referral about what course of action to take and will let the person who made the referral know the outcome. The DSL or person who made the referral must follow up with the local authority if this information is not made available, and ensure outcomes are properly recorded.

If the child's situation does not seem to be improving after the referral, the DSL or person who made the referral must follow local escalation procedures to ensure their concerns have been addressed and that the child's situation improves.

## **7.5 If you have concerns about extremism**

If a child is not suffering or likely to suffer from harm, or in immediate danger, where possible speak to the DSL first to agree a course of action.

If in exceptional circumstances the DSL or deputy is not available, this should not delay appropriate action being taken. Speak to a member of the senior leadership team and/or seek advice from local authority children's social care. Make a referral to local authority children's social care directly, if appropriate (see 'Referral' above). Inform the DSL or deputy as soon as practically possible after the referral.

Where there is a concern, the DSL will consider the level of risk and decide which agency to make a referral to. This could include [Channel](#), the government's programme for identifying and supporting individuals at risk of being drawn into terrorism, or the local authority children's social care team.

The DfE also has a dedicated telephone helpline, 020 7340 7264, which organisation staff and trustees can call to raise concerns about extremism with respect to a trainee. You can also email [counter.extremism@education.gov.uk](mailto:counter.extremism@education.gov.uk). Note that this is not for use in emergency situations.

In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you:

- › Think someone is in immediate danger

- › Think someone may be planning to travel to join an extremist group
- › See or hear something that may be terrorist-related

## **7.6 If you have a concern about mental health**

Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

Staff will be alert to behavioural signs that suggest a child may be experiencing a mental health problem or be at risk of developing one.

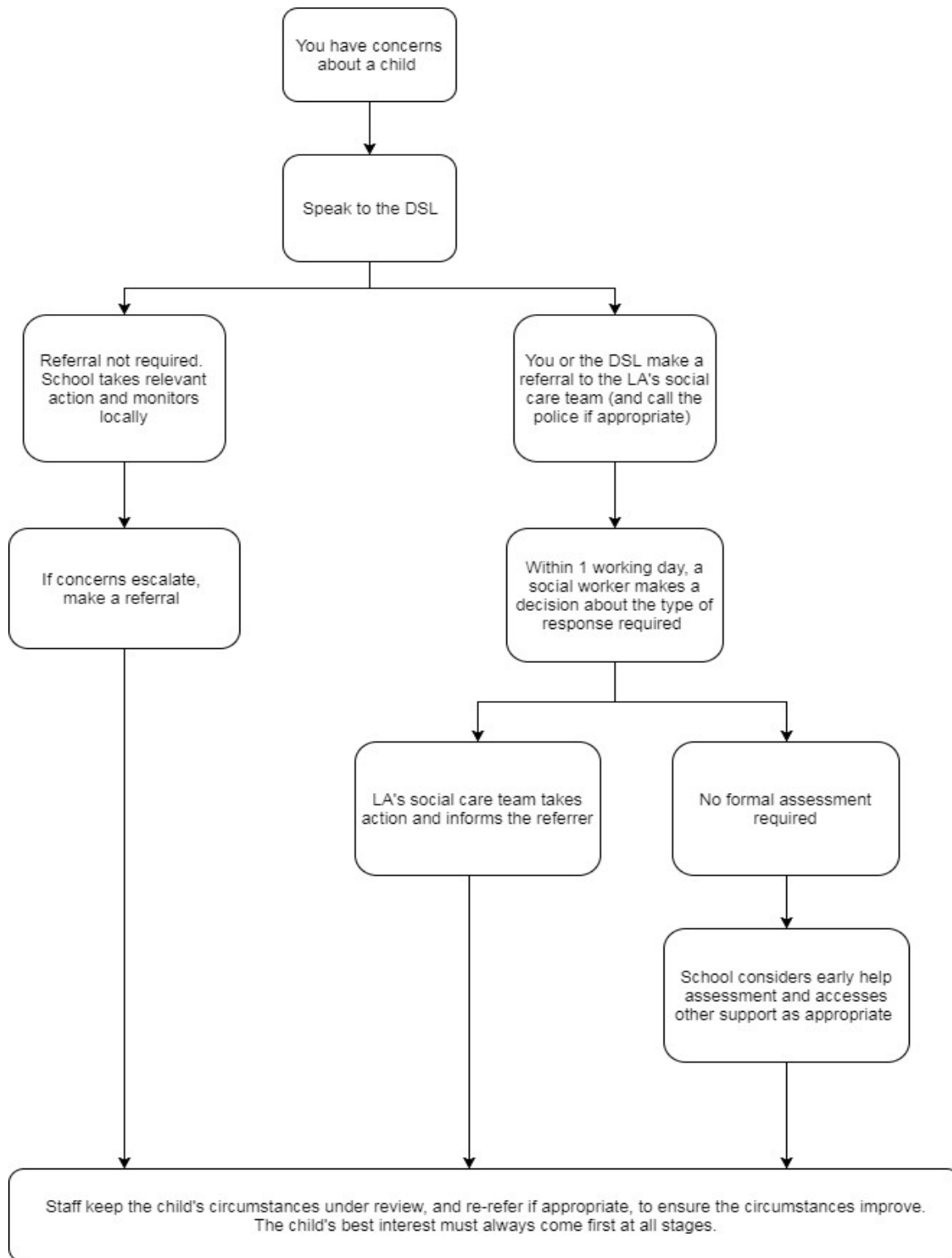
If you have a mental health concern about a child that is also a safeguarding concern, take immediate action by following the steps in section 7.4.

If you have a mental health concern that is **not** also a safeguarding concern, speak to the DSL to agree a course of action.

The DSL also acts as our Senior Mental Health Lead and has extensive training around strategies to support and external routes for referral.

**Figure 1: procedure if you have concerns about a child's welfare (as opposed to believing a child is suffering or likely to suffer from harm, or in immediate danger)**

(Note – if the DSL is unavailable, this should not delay action. See section 7.4 for what to do.)



## 7.7 Concerns about a staff member, volunteer or contractor

If you have concerns about a member of staff (including a volunteer or contractor), or an allegation is made about a member of staff (including a volunteer or contractor) posing a risk of harm to children, speak to the Director as soon as possible. If the concerns/allegations are about the Director, speak to the chair of the board of trustees.

The Director / chair of the board of trustees will then follow the procedures set out in appendix 2, if appropriate.

Where you believe there is a conflict of interest in reporting a concern or allegation about a member of staff (including a volunteer or contractor) to the Head of Learning, report it directly to the local authority designated officer (LADO).

If you receive an allegation relating to an incident where an individual or organisation was using the organisation's premises for running an activity for children, follow our organisation safeguarding policies and procedures, informing the LADO, as you would with any safeguarding allegation.

## 7.8 Allegations of abuse made against other trainees

We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up", as this can lead to a culture of unacceptable behaviours and an unsafe environment for trainees.

We also recognise the gendered nature of child-on-child abuse. However, all child-on-child abuse is unacceptable and will be taken seriously.

Most cases of trainees hurting other trainees will be dealt with under our organisation's behaviour policy, but this child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns. This might include where the alleged behaviour:

- › Is serious, and potentially a criminal offence
- › Could put trainees in the organisation at risk
- › Is violent
- › Involves trainees being forced to use drugs or alcohol
- › Involves sexual exploitation, sexual abuse or sexual harassment, such as indecent exposure, sexual assault, upskirting or sexually inappropriate pictures or videos (including the sharing of nudes and semi-nudes)

See appendix 3 for more information about child-on-child abuse.

### Procedures for dealing with allegations of child-on-child abuse

If a trainee makes an allegation of abuse against another trainee:

- › You must record the allegation and tell the DSL, but do not investigate it
- › The DSL will contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence
- › The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made and any others affected) with a named person they can talk to if needed.
- › The DSL will contact the children and adolescent mental health services (CAMHS), if appropriate

If the incident is a criminal offence and there are delays in the criminal process, the DSL will work closely with the police (and other agencies as required) while protecting children and/or taking any disciplinary measures against the alleged perpetrator. We will ask the police if we have any questions about the investigation.

Ongoing welfare support will be provided to all involved. All incidents will be recorded thoroughly and in line with the trainee behaviour and, if necessary, suspension and permanent exclusion policies.

## **Creating a supportive environment in the organisation and minimising the risk of child-on-child abuse**

We recognise the importance of taking proactive action to minimise the risk of child-on-child abuse, and of creating a supportive environment where victims feel confident in reporting incidents.

To achieve this, we will:

- › Challenge any form of derogatory or sexualised language or inappropriate behaviour between peers, including requesting or sending sexual images
- › Be vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female trainees, and initiation or hazing type violence with respect to boys
- › Ensure our curriculum helps to educate trainees about appropriate behaviour and consent
- › Ensure trainees are able to easily and confidently report abuse using our reporting systems (as described in section 7.10 below)
- › Ensure staff reassure victims that they are being taken seriously
- › Be alert to reports of sexual violence and/or harassment that may point to environmental or systemic problems that could be addressed by updating policies, processes and the curriculum, or could reflect wider issues in the local area that should be shared with safeguarding partners
- › Support children who have witnessed sexual violence, especially rape or assault by penetration. We will do all we can to make sure the victim, alleged perpetrator(s) and any witnesses are not bullied or harassed
- › Consider intra-familial harms and any necessary support for siblings following a report of sexual violence and/or harassment
- › Ensure staff are trained to understand:
  - How to recognise the indicators and signs of child-on-child abuse, and know how to identify it and respond to reports
  - That even if there are no reports of child-on-child abuse in organisation, it does not mean it is not happening – staff should maintain an attitude of “it could happen here”
  - That if they have any concerns about a child’s welfare, they should act on them immediately rather than wait to be told, and that victims may not always make a direct report. For example:
    - Children can show signs or act in ways they hope adults will notice and react to
    - A friend may make a report
    - A member of staff may overhear a conversation
    - A child’s behaviour might indicate that something is wrong
  - That certain children may face additional barriers to telling someone because of their vulnerability, disability, gender, ethnicity and/or sexual orientation
  - That a trainee harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy
  - The important role they have to play in preventing child-on-child abuse and responding where they believe a child may be at risk from it
  - That they should speak to the DSL if they have any concerns
  - That social media is likely to play a role in the fall-out from any incident or alleged incident, including for potential contact between the victim, alleged perpetrator(s) and friends from either side

The DSL will take the lead role in any disciplining of the alleged perpetrator(s). We will provide support at the same time as taking any disciplinary action.

Disciplinary action can be taken while other investigations are going on, e.g. by the police. The fact that another body is investigating or has investigated an incident doesn't (in itself) prevent our organisation from coming to its own conclusion about what happened and imposing a penalty accordingly. We will consider these matters on a case-by-case basis, taking into account whether:

- › Taking action would prejudice an investigation and/or subsequent prosecution – we will liaise with the police and/or local authority children's social care to determine this
- › There are circumstances that make it unreasonable or irrational for us to reach our own view about what happened while an independent investigation is ongoing

## 7.9 Sharing of nudes and semi-nudes ('sexting')

### Your responsibilities when responding to an incident

If you are made aware of an incident involving the consensual or non-consensual sharing of nude or semi-nude images/videos (also known as 'sexting' or 'youth produced sexual imagery'), you must report it to the DSL immediately.

You must **not**:

- › View, copy, print, share, store or save the imagery yourself, or ask a trainee to share or download it (if you have already viewed the imagery by accident, you must report this to the DSL)
- › Delete the imagery or ask the trainee to delete it
- › Ask the trainee(s) who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)
- › Share information about the incident with other members of staff, the trainee(s) it involves or their, or other, parents and/or carers
- › Say or do anything to blame or shame any young people involved

You should explain that you need to report the incident, and reassure the trainee(s) that they will receive support and help from the DSL.

### Initial review meeting

Following a report of an incident, the DSL will consider the initial evidence and aim to determine:

- › Whether there is an immediate risk to trainee(s)
- › If a referral needs to be made to the police and/or children's social care
- › If it is necessary to view the image(s) in order to safeguard the young person (in most cases, images or videos should not be viewed)
- › What further information is required to decide on the best response
- › Whether the image(s) has been shared widely and via what services and/or platforms (this may be unknown)
- › Whether immediate action should be taken to delete or remove images or videos from devices or online services
- › Any relevant facts about the trainees involved which would influence risk assessment
- › If there is a need to contact another provider, college, setting or individual
- › Whether to contact parents or carers of the trainees involved (in most cases parents/carers should be involved)

The DSL will make an immediate referral to police and/or children's social care if:

- › The incident involves an adult
- › There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example, owing to SEN)



- › What the DSL knows about the images or videos suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent
- › The imagery involves sexual acts and any trainee in the images or videos is under 13
- › The DSL has reason to believe a trainee is at immediate risk of harm owing to the sharing of nudes and semi-nudes (for example, the young person is presenting as suicidal or self-harming)

If none of the above apply then the DSL, in consultation with the Head of Learning, Director and other members of staff as appropriate, may decide to respond to the incident without involving the police or children's social care. The decision will be made and recorded in line with the procedures set out in this policy.

#### **Further review by the DSL**

If at the initial review stage a decision has been made not to refer to police and/or children's social care, the DSL will conduct a further review to establish the facts and assess the risks.

They will hold interviews with the trainees involved (if appropriate).

If at any point in the process there is a concern that a trainee has been harmed or is at risk of harm, a referral will be made to children's social care and/or the police immediately.

#### **Informing parents/carers**

The DSL will inform parents/carers at an early stage and keep them involved in the process, unless there is a good reason to believe that involving them would put the trainee at risk of harm.

#### **Referring to the police**

If it is necessary to refer an incident to the police, this will be done through dialling 101

#### **Recording incidents**

All incidents of sharing of nudes and semi-nudes, and the decisions made in responding to them, will be recorded. The record-keeping arrangements set out in section 14 of this policy also apply to recording these incidents.

### **7.10 Reporting systems for our trainees**

Where there is a safeguarding concern, we will take the child's wishes and feelings into account when determining what action to take and what services to provide.

We recognise the importance of ensuring trainees feel safe and comfortable to come forward and report any concerns and/or allegations.

To achieve this, we will:

- › Put systems in place for trainees to confidently report abuse
- › Ensure our reporting systems are well promoted, easily understood and easily accessible for trainees
- › Make it clear to trainees that their concerns will be taken seriously, and that they can safely express their views and give feedback
- › We create safe spaces for our children in order to help them feel comfortable to report any concerns at any time. All staff will build professional relationships with our children based on mutual respect and children will always be treated with dignity.
- › Children are aware of our safeguarding processes and key people during their induction and this is continually reinforced during their programme.
- › Children are able to email [safeguarding@mkchristianfoundation.co.uk](mailto:safeguarding@mkchristianfoundation.co.uk) if they would prefer to disclose this way rather than face to face.
- › At each 6 weekly progress review meeting, children are asked whether they have any safeguarding concerns they have not yet reported

## **8. Online safety and the use of mobile technology**

We recognise the importance of safeguarding children from potentially harmful and inappropriate online material, and we understand that technology is a significant component in many safeguarding and wellbeing issues.

To address this, our organisation aims to:

- › Have robust processes (including filtering and monitoring systems) in place to ensure the online safety of trainees, staff, volunteers and trustees.
- › Protect and educate the whole organisation community in its safe and responsible use of technology, including mobile and smart technology (which we refer to as 'mobile phones')
- › Set clear guidelines for the use of mobile phones for the whole organisation community
- › Establish clear mechanisms to identify, intervene in and escalate any incidents or concerns, where appropriate

#### **The 4 key categories of risk**

Our approach to online safety is based on addressing the following categories of risk:

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

#### **To meet our aims and address the risks above, we will:**

- › Educate trainees about online safety as part of our curriculum. For example:
  - The safe use of social media, the internet and technology
  - Keeping personal information private
  - How to recognise unacceptable behaviour online
  - How to report any incidents of cyber-bullying, ensuring trainees are encouraged to do so, including where they're a witness rather than a victim
- › Train staff, as part of their induction, on safe internet use and online safeguarding issues including cyber-bullying, the risks of online radicalisation, and the expectations, roles and responsibilities around filtering and monitoring. All staff members will receive refresher training as required and at least once each academic year.
- › Make sure staff are aware of any restrictions placed on them with regards to the use of their mobile phone and cameras as outlined in our code of conduct for example that:
- › Explain the sanctions we will use if a child is in breach of our policies on the acceptable use of the internet and mobile phones
- › Put in place robust filtering and monitoring systems to limit children's exposure to the 4 key categories of risk (described above) from the organisation's IT systems.
- › Provide regular safeguarding and children protection updates including online safety to all staff, at least annually, in order to continue to provide them with the relevant skills and knowledge to safeguard effectively
- › Review the child protection and safeguarding policy, including online safety, annually and ensure the procedures and implementation are updated and reviewed regularly

## 9. Notifying parents or carers

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

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

If we believe that notifying the parents or carers would increase the risk to the child, we will discuss this with the local authority children's social care team before doing so.

In the case of allegations of abuse made against other children, we will normally notify the parents or carers of all the children involved. We will think carefully about what information we provide about the other child involved, and when. We will work with the police and/or local authority children's social care to make sure our approach to information sharing is consistent.

The DSL will, along with any relevant agencies (this will be decided on a case-by-case basis):

- › Meet with the victim's parents or carers, with the victim, to discuss what's being put in place to safeguard them, and understand their wishes in terms of what support they may need and how the report will be progressed
- › Meet with the alleged perpetrator's parents or carers to discuss support for them, and what's being put in place that will impact them, e.g. moving them out of classes with the victim, and the reason(s) behind any decision(s)

## 10. Trainees with special educational needs, disabilities or health issues

We recognise that trainees with SEND or certain health conditions can face additional safeguarding challenges, and are 3 times more likely to be abused than their peers. Additional barriers can exist when recognising abuse and neglect in this group, including:

- › Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration
- › Trainees being more prone to peer group isolation or bullying (including prejudice-based bullying) than other trainees
- › The potential for trainees with SEN, disabilities or certain health conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs
- › Communication barriers and difficulties in managing or reporting these challenges

We offer extra pastoral support for these trainees.

Any abuse involving trainees with SEND will require close liaison with the DSL (or deputy) and the SENCO.

## 11. Trainees with a social worker

Trainees may need a social worker due to safeguarding or welfare needs. We recognise that a child's experiences of adversity and trauma can leave them vulnerable to further harm as well as potentially creating barriers to attendance, learning, behaviour and mental health.

The DSL and all members of staff will work with and support social workers to help protect vulnerable children.

Where we are aware that a trainee has a social worker, the DSL will always consider this fact to ensure any decisions are made in the best interests of the trainee's safety, welfare and educational outcomes. For example, it will inform decisions about:

- › Responding to unauthorised absence or missing education where there are known safeguarding risks
- › The provision of pastoral and/or academic support

## 12. Looked-after and previously looked-after children

We will ensure that staff have the skills, knowledge and understanding to keep looked-after children and previously looked-after children safe. In particular, we will ensure that:

- › Appropriate staff have relevant information about children's looked after legal status, contact arrangements with birth parents or those with parental responsibility, and care arrangements
- › The DSL has details of children's social workers and relevant virtual school heads

We have appointed an appropriately trained , Laura Geering – Head of Learning, to take the lead on promoting the educational achievement of looked-after and previously looked-after children.

As part of their role, they will:

- › Work closely with the DSL to ensure that any safeguarding concerns regarding looked-after and previously looked-after children are quickly and effectively responded to
- › Work with virtual school heads to promote the educational achievement of looked-after and previously looked-after children

## 13. Complaints and concerns about organisation safeguarding policies

### 13.1 Complaints against staff

Complaints against staff that are likely to require a child protection investigation will be handled in accordance with our procedures for dealing with allegations of abuse made against staff (see appendix 2).

### 13.2 Other complaints

Any complaints which relate to other safeguarding related issues and do not relate to complaints made against staff will be handled in accordance with our Trainee and Parents Complaints Procedure.

### 13.3 Whistle-blowing

Staff should refer to our whistle-blowing policy should they wish to report concerns about workplace practices.

## 14. Record-keeping

We will hold records in line with our records retention schedule.

All safeguarding concerns, discussions, decisions made and the reasons for those decisions, must be recorded in writing. If you are in any doubt about whether to record something, discuss it with the DSL.

Records will include:

- › A clear and comprehensive summary of the concern
- › Details of how the concern was followed up and resolved
- › A note of any action taken, decisions reached and the outcome

Concerns and referrals will be kept in a separate child protection file for each child.

Any non-confidential records will be readily accessible and available. Confidential information and records will be held securely and only available to those who have a right or professional need to see them.

Safeguarding records relating to individual children will be retained for a reasonable period of time after they have left the organisation.

If a child for whom the organisation has, or has had, safeguarding concerns moves to another organisation, the DSL will ensure that their child protection file is forwarded as soon as possible, securely, and separately from the main trainee file.

To allow the new organisation/college to have support in place when the child arrives, this should be within:

- › **5 days** for an in-year transfer, or within
- › **The first 5 days** of the start of a new term

In addition, if the concerns are significant or complex, and/or social services are involved, the DSL will speak to the DSL of the receiving organisation and provide information to enable them to have time to make any necessary preparations to ensure the safety of the child.

All of the organisation's records are electronic and are accessible only by the specific staff members named in this policy.

## **15. Training**

### **15.1 All staff**

All staff members will undertake safeguarding and child protection training at induction, including on whistle-blowing procedures and online safety, to ensure they understand the organisation's safeguarding systems and their responsibilities, and can identify signs of possible abuse or neglect.

This training will be regularly updated and will:

- › Be integrated, aligned and considered as part of the whole-organisation safeguarding approach and wider staff training, and curriculum planning
- › Be in line with advice from the 3 safeguarding partners
- › Include online safety, including an understanding of the expectations, roles and responsibilities for staff around filtering and monitoring

All staff will have training on the government's anti-radicalisation strategy, Prevent, to enable them to identify children at risk of being drawn into terrorism and to challenge extremist ideas.

Staff will also receive regular safeguarding and child protection updates, including on online safety, as required but at least annually (for example, through emails, e-bulletins and staff meetings).

Volunteers will receive appropriate training, if applicable.

### **15.2 The DSL and deputies**

The DSL and deputies will undertake child protection and safeguarding training at least every 2 years.

In addition, they will update their knowledge and skills at regular intervals and at least annually (for example, through e-bulletins, meeting other DSLs, or taking time to read and digest safeguarding developments).

They will also undertake Prevent awareness training.

### **15.3 Board of trustees**

All trustees receive training about safeguarding and child protection (including online safety) at induction, which is regularly updated. This is to make sure that they:

- › Have the knowledge and information needed to perform their functions and understand their responsibilities, such as providing strategic challenge
- › Can be assured that safeguarding policies and procedures are effective and support the organisation to deliver a robust whole-organisation approach to safeguarding

As the chair of the board of trustees may be required to act as the 'case manager' in the event that an allegation of abuse is made against the Director, they receive training in managing allegations for this purpose.

### **15.4 Recruitment – interview panels**

At least 1 person conducting any interview for any post at the organisation will have undertaken safer recruitment training. This will cover, as a minimum, the contents of Keeping Children Safe in Education, and will be in line with local safeguarding procedures.

## 16. Monitoring arrangements

This policy will be reviewed **annually** by Debbie Brooks. At every review, it will be approved by the full board of trustees.

## 17. Links with other policies

This policy links to the following policies and procedures:

- › Behaviour
- › Staff Code of Conduct
- › Trainee and Parents Complaints Procedure
- › Health and safety
- › Attendance
- › Online safety
- › Equality
- › First aid
- › Curriculum
- › Privacy notices

**These appendices are based on the Department for Education's statutory guidance, Keeping Children Safe in Education.**

## Appendix 1: types of abuse

**Abuse**, including neglect, and safeguarding issues are rarely standalone events that can be covered by 1 definition or label. In most cases, multiple issues will overlap.

**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** is the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Emotional abuse 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
- › Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate
- › 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
- › Seeing or hearing the ill-treatment of another
- › Serious bullying (including cyber-bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

**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
- › 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** 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.

# **Allegations against staff (including low-level concerns) policy**





## Section 1: allegations that may meet the harm threshold

This section applies to all cases in which it is alleged that a current member of staff, volunteer or contractor, has:

- › Behaved in a way that has harmed a child, or may have harmed a child, and/or
- › Possibly committed a criminal offence against or related to a child, and/or
- › Behaved towards a child or children in a way that indicates they may pose a risk of harm to children, and/or
- › Behaved or may have behaved in a way that indicates they may not be suitable to work with children – this includes behaviour taking place both inside and outside of organisation

If we're in any doubt as to whether a concern meets the harm threshold, we will consult our local authority designated officer (LADO).

We will deal with any allegation of abuse quickly, in a fair and consistent way that provides effective child protection while also supporting the individual who is the subject of the allegation.

A 'case manager' will lead any investigation. This will be the director, or the chair of the board of trustees where the director is the subject of the allegation. The case manager will be identified at the earliest opportunity.

Our procedures for dealing with allegations will be applied with common sense and judgement.

If we receive an allegation of an incident happening while an individual or organisation was using the organisation premises to run activities for children, we will follow our safeguarding policies and procedures and inform our LADO.

## Suspension of the accused until the case is resolved

Suspension of the accused will not be the default position, and will only be considered in cases where there is reason to suspect that a child or other children is/are at risk of harm, or the case is so serious that there might be grounds for dismissal. In such cases, we will only suspend an individual if we have considered all other options available and there is no reasonable alternative.

Based on an assessment of risk, we will consider alternatives such as:

- › Redeployment within the organisation so that the individual does not have direct contact with the child or children concerned
- › Providing an additional member of staff to be present when the individual has contact with children
- › Redeploying the individual to alternative work in the organisation so that they do not have unsupervised access to children
- › Moving the child or children to an environment where they will not come into contact with the individual, making it clear that this is not a punishment and parents/carers have been consulted

If in doubt, the case manager will seek views from the designated officer at the local authority, as well as the police and children's social care where they have been involved.

## Definitions for outcomes of allegation investigations

- › **Substantiated:** there is sufficient evidence to prove the allegation
- › **Malicious:** there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive, or to cause harm to the subject of the allegation
- › **False:** there is sufficient evidence to disprove the allegation
- › **Unsubstantiated:** there is insufficient evidence to either prove or disprove the allegation (this does not imply guilt or innocence)
- › **Unfounded:** to reflect cases where there is no evidence or proper basis which supports the allegation being made

## Procedure for dealing with allegations

In the event of an allegation that meets the criteria above, the case manager will take the following steps:

- › Conduct basic enquiries in line with local procedures to establish the facts to help determine whether there is any foundation to the allegation before carrying on with the steps below
- › Discuss the allegation with the designated officer at the local authority. This is to consider the nature, content and context of the allegation and agree a course of action, including whether further enquiries are necessary to enable a decision on how to proceed, and whether it is necessary to involve the police and/or children's social care services. (The case manager may, on occasion, consider it necessary to involve the police *before* consulting the designated officer – for example, if the accused individual is deemed to be an immediate risk to children or there is evidence of a possible criminal offence. In such cases, the case manager will notify the designated officer as soon as practicably possible after contacting the police)
- › Inform the accused individual of the concerns or allegations and likely course of action as soon as possible after speaking to the designated officer (and the police or children's social care services, where necessary). Where the police and/or children's social care services are involved, the case manager will only share such information with the individual as has been agreed with those agencies
- › Where appropriate (in the circumstances described above), carefully consider whether suspension of the individual from contact with children at the organisation is justified or whether alternative arrangements such as those outlined above can be put in place. Advice will be sought from the designated officer, police and/or children's social care services, as appropriate
- › Where the case manager is concerned about the welfare of other children in the community or the individual's family, they will discuss these concerns with the DSL and make a risk assessment of the situation. If necessary, the DSL may make a referral to children's social care
- › **If immediate suspension is considered necessary**, agree and record the rationale for this with the designated officer. The record will include information about the alternatives to suspension that have been considered, and why they were rejected. Written confirmation of the suspension will be provided to the individual facing the allegation or concern within 1 working day, and the individual will be given a named contact at the organisation and their contact details
- › **If it is decided that no further action is to be taken** in regard to the subject of the allegation or concern, record this decision and the justification for it and agree with the designated officer what information should be put in writing to the individual and by whom, as well as what action should follow both in respect of the individual and those who made the initial allegation
- › **If it is decided that further action is needed**, take steps as agreed with the designated officer to initiate the appropriate action in organisation and/or liaise with the police and/or children's social care services as appropriate
- › Provide effective support for the individual facing the allegation or concern, including appointing a named representative to keep them informed of the progress of the case and considering what other support is appropriate. All staff have access to external counselling services.
- › Inform the parents or carers of the child/children involved about the allegation as soon as possible if they do not already know (following agreement with children's social care services and/or the police, if applicable). The case manager will also inform the parents or carers of the requirement to maintain confidentiality about any allegations made against staff (where this applies) while investigations are ongoing. Any parent or carer who wishes to have the confidentiality restrictions removed in respect of a will be advised to seek legal advice
- › Keep the parents or carers of the child/children involved informed of the progress of the case (only in relation to their child – no information will be shared regarding the staff member)
- › Make a referral to the DBS where it is thought that the individual facing the allegation or concern has engaged in conduct that harmed or is likely to harm a child, or if the individual otherwise poses a risk of harm to a child

Where the police are involved, wherever possible the organisation will ask the police at the start of the investigation to obtain consent from the individuals involved to share their statements and evidence for use in the organisation's disciplinary process, should this be required at a later point.

### **Additional contracted staff**

If there are concerns or an allegation is made against someone not directly employed by the organisation, such as a contracted staff member provided by an agency, we will take the actions below in addition to our standard procedures.

- › We will not decide to stop using an individual due to safeguarding concerns without finding out the facts and liaising with our LADO to determine a suitable outcome
- › The board of trustees will discuss with the agency whether it is appropriate to suspend the individual, or redeploy them to another part of the organisation, while the organisation carries out the investigation
- › We will involve the agency fully, but the organisation will take the lead in collecting the necessary information and providing it to the LADO as required
- › We will address issues such as information sharing, to ensure any previous concerns or allegations known to the agency are taken into account (we will do this, for example, as part of the allegations management meeting or by liaising directly with the agency where necessary)

When using an agency, we will inform them of our process for managing allegations, and keep them updated about our policies as necessary, and will invite the agency's HR manager or equivalent to meetings as appropriate.

### **Timescales**

We will deal with all allegations as quickly and effectively as possible and will endeavour to comply with the following timescales, where reasonably practicable:

- › Any cases where it is clear immediately that the allegation is unsubstantiated or malicious should be resolved within 1 week
- › If the nature of an allegation does not require formal disciplinary action, appropriate action should be taken within 3 working days
- › If a disciplinary hearing is required and can be held without further investigation, this should be held within 15 working days

However, these are objectives only and where they are not met, we will endeavour to take the required action as soon as possible thereafter.

### **Specific actions**

#### **Action following a criminal investigation or prosecution**

The case manager will discuss with the local authority's designated officer whether any further action, including disciplinary action, is appropriate and, if so, how to proceed, taking into account information provided by the police and/or children's social care services.

#### **Conclusion of a case where the allegation is substantiated**

If the allegation is substantiated and the individual is dismissed or the organisation ceases to use their services, or the individual resigns or otherwise ceases to provide their services, the organisation will make a referral to the DBS for consideration of whether inclusion on the barred lists is required.

#### **Individuals returning to work after suspension**

If it is decided on the conclusion of a case that an individual who has been suspended can return to work, the case manager will consider how best to facilitate this.

The case manager will also consider how best to manage the individual's contact with the child or children who made the allegation, if they are still attending the organisation.

#### **Unsubstantiated, unfounded, false or malicious reports**

If a report is:

- › Determined to be unsubstantiated, unfounded, false or malicious, the DSL will consider the appropriate next steps. If they consider that the child and/or person who made the allegation is in need of help, or the allegation may have been a cry for help, a referral to children's social care may be appropriate
- › Shown to be deliberately invented, or malicious, the organisation will consider whether any disciplinary action is appropriate against the individual(s) who made it

### **Unsubstantiated, unfounded, false or malicious allegations**

If an allegation is:

- › Determined to be unsubstantiated, unfounded, false or malicious, the LADO and case manager will consider the appropriate next steps. If they consider that the child and/or person who made the allegation is in need of help, or the allegation may have been a cry for help, a referral to children's social care may be appropriate
- › Shown to be deliberately invented, or malicious, the organisation will consider whether any disciplinary action is appropriate against the individual(s) who made it

## **Confidentiality and information sharing**

The organisation will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

The case manager will take advice from the LADO, police and children's social care services, as appropriate, to agree:

- Who needs to know about the allegation and what information can be shared
- How to manage speculation, leaks and gossip, including how to make parents or carers of a child/children involved aware of their obligations with respect to confidentiality
- What, if any, information can be reasonably given to the wider community to reduce speculation
- How to manage press interest if, and when, it arises

## **Record-keeping**

The case manager will maintain clear records about any case where the allegation or concern meets the criteria above and store them on the individual's confidential personnel file for the duration of the case.

The records of any allegation that, following an investigation, is found to be malicious or false will be deleted from the individual's personnel file (unless the individual consents for the records to be retained on the file).

For all other allegations (which are not found to be malicious or false), the following information will be kept on the file of the individual concerned:

- A clear and comprehensive summary of the allegation
- Details of how the allegation was followed up and resolved
- Notes of any action taken, decisions reached and the outcome
- A declaration on whether the information will be referred to in any future reference

In these cases, the organisation will provide a copy to the individual, in agreement with children's social care or the police as appropriate.

We will retain all records at least until the accused individual has reached normal pension age, or for 10 years from the date of the allegation if that is longer.

## **References**

When providing employer references, we will:

- › Not refer to any allegation that has been found to be false, unfounded, unsubstantiated or malicious, or any repeated allegations which have all been found to be false, unfounded, unsubstantiated or malicious
- › Include substantiated allegations, provided that the information is factual and does not include opinions

## Learning lessons

After any cases where the allegations are *substantiated*, the case manager will review the circumstances of the case with the local authority's designated officer to determine whether there are any improvements that we can make to the organisation's procedures or practice to help prevent similar events in the future.

This will include consideration of (as applicable):

- Issues arising from the decision to suspend the member of staff
- The duration of the suspension
- Whether or not the suspension was justified
- The use of suspension when the individual is subsequently reinstated. We will consider how future investigations of a similar nature could be carried out without suspending the individual

For all other cases, the case manager will consider the facts and determine whether any improvements can be made.

## Non-recent allegations

Abuse can be reported, no matter how long ago it happened.

We will report any non-recent allegations made by a child to the LADO in line with our local authority's procedures for dealing with non-recent allegations.

Where an adult makes an allegation to the organisation that they were abused as a child, we will advise the individual to report the allegation to the police.

## Section 2: concerns that do not meet the harm threshold

This section applies to all concerns (including allegations) about members of staff, including volunteers and contractors, which do not meet the harm threshold set out in section 1 above.

Concerns may arise through, for example:

- › Suspicion
- › Complaint
- › Safeguarding concern or allegation from another member of staff
- › Disclosure made by a child, parent or other adult within or outside the organisation
- › Pre-employment vetting checks

We recognise the importance of responding to and dealing with any concerns in a timely manner to safeguard the welfare of children.

## Definition of low-level concerns

The term 'low-level' concern is any concern – no matter how small – that an adult working in or on behalf of the organisation may have acted in a way that:

- › Is inconsistent with the staff code of conduct, including inappropriate conduct outside of work, **and**
- › Does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the designated officer at the local authority

Examples of such behaviour could include, but are not limited to:

- › Being overly friendly with children

- › Having favourites
- › Taking photographs of children on their mobile phone
- › Engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- › Humiliating trainees

## Sharing low-level concerns

We recognise the importance of creating a culture of openness, trust and transparency to encourage all staff to confidentially share low-level concerns so that they can be addressed appropriately.

We will create this culture by:

- › Ensuring staff are clear about what appropriate behaviour is, and are confident in distinguishing expected and appropriate behaviour from concerning, problematic or inappropriate behaviour, in themselves and others
- › Empowering staff to share any low-level concerns as per section 7.7 of this policy
- › Empowering staff to self-refer
- › Addressing unprofessional behaviour and supporting the individual to correct it at an early stage
- › Providing a responsive, sensitive and proportionate handling of such concerns when they are raised
- › Helping to identify any weakness in the organisation's safeguarding system
- › The DSL and deputies promote a culture where safeguarding sits at the forefront of all we do

## Responding to low-level concerns

If the concern is raised via a third party, the head will collect evidence where necessary by speaking:

- › Directly to the person who raised the concern, unless it has been raised anonymously
- › To the individual involved and any witnesses

The Director will use the information collected to categorise the type of behaviour and determine any further action, in line with the organisation's code of conduct. The Director will be the ultimate decision-maker in respect of all low-level concerns, though they may wish to collaborate with the DSL.

## Record keeping

All low-level concerns will be recorded in writing. In addition to details of the concern raised, records will include the context in which the concern arose, any action taken and the rationale for decisions and action taken.

Records will be:

- › Kept confidential, held securely and comply with the DPA 2018 and UK GDPR
- › Reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified. Where a pattern of such behaviour is identified, we will decide on a course of action, either through our disciplinary procedures or, where a pattern of behaviour moves from a concern to meeting the harm threshold as described in section 1 of this appendix, we will refer it to the designated officer at the local authority
- › Retained at least until the individual leaves employment at the organisation

Where a low-level concern relates to a supply or contractor, we will notify the individual's employer, so any potential patterns of inappropriate behaviour can be identified.

## References

We will not include low-level concerns in references unless:

- › The concern (or group of concerns) has met the threshold for referral to the designated officer at the local authority and is found to be substantiated; and/or
- › The concern (or group of concerns) relates to issues which would ordinarily be included in a reference, such as misconduct or poor performance

## Appendix 3: specific safeguarding issues

### Children who are absent from education

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

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

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

We will follow our procedures for unauthorised absence and for dealing with children who are absent 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 organisation without a new provider 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 absent, 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 suffering or likely to suffer from harm, or in immediate danger.

### Child criminal exploitation

Child criminal exploitation (CCE) is a form of abuse where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into criminal activity, in exchange for something the victim needs or wants, and/or for the financial or other advantage of the perpetrator or facilitator, and/or through violence or the threat of violence.

The abuse can be perpetrated by males or females, and children or adults. It can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse.

The victim can be exploited even when the activity appears to be consensual. It does not always involve physical contact and can happen online. For example, young people may be forced to work in cannabis factories, coerced into moving drugs or money across the country (county lines), forced to shoplift or pickpocket, or to threaten other young people.

Indicators of CCE can include a child:

- › Appearing with unexplained gifts or new possessions
- › Associating with other young people involved in exploitation
- › Suffering from changes in emotional wellbeing
- › Misusing drugs and alcohol



- › Going missing for periods of time or regularly coming home late
- › Regularly missing education
- › Not taking part in education

If a member of staff suspects CCE, 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.

## **Child sexual exploitation**

Child sexual exploitation (CSE) is a form of child sexual abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity, in exchange for something the victim needs or wants and/or for the financial advantage or increased status of the perpetrator or facilitator. It may, or may not, be accompanied by violence or threats of violence.

The abuse can be perpetrated by males or females, and children or adults. It can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse.

The victim can be exploited even when the activity appears to be consensual. 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.

CSE can include both physical contact (penetrative and non-penetrative acts) and non-contact sexual activity. It can also 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. CSE may also occur without the victim's immediate knowledge, for example through others copying videos or images.

In addition to the CCE indicators above, indicators of CSE can include a child:

- › Having an older boyfriend or girlfriend
- › Suffering from sexually transmitted infections or becoming pregnant

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.

## **Child-on-child abuse**

Child-on-child abuse is when children abuse other children. This type of abuse can take place inside and outside of education. It can also take place both face-to-face and online, and can occur simultaneously between the 2.

Our organisation has a zero-tolerance approach to sexual violence and sexual harassment. We recognise that even if there are there no reports, that doesn't mean that this kind of abuse isn't happening.

Child-on-child abuse is most likely to include, but may not be limited to:

- › Bullying (including cyber-bullying, prejudice-based and discriminatory bullying)
- › Abuse in intimate personal relationships between children (this is sometimes known as 'teenage relationship abuse')
- › Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse)
- › Sexual violence, such as rape, assault by penetration and sexual assault (this may include an online element which facilitates, threatens and/or encourages sexual violence)
- › Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse
- › Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party

- › Consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery)
- › Upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm
- › Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element)

Where children abuse their peers online, this can take the form of, for example, abusive, harassing, and misogynistic messages; the non-consensual sharing of indecent images, especially around chat groups; and the sharing of abusive images and pornography, to those who don't want to receive such content.

If staff have any concerns about child-on-child abuse, or a child makes a report to them, they will follow the procedures set out in section 7 of this policy, as appropriate. In particular, section 7.8 and 7.9 set out more detail about our organisation's approach to this type of abuse.

When considering instances of harmful sexual behaviour between children, we will consider their ages and stages of development. We recognise that children displaying harmful sexual behaviour have often experienced their own abuse and trauma, and will offer them appropriate support.

## **Domestic abuse**

Children can witness and be adversely affected by domestic abuse and/or violence at home where it occurs between family members. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse (abuse in intimate personal relationships between children) and child/adolescent to parent violence and abuse. It can be physical, sexual, financial, psychological or emotional. It can also include ill treatment that isn't physical, as well as witnessing the ill treatment of others – for example, the impact of all forms of domestic abuse on children.

Anyone can be a victim of domestic abuse, regardless of gender, age, ethnicity, socioeconomic status, sexuality or background, and domestic abuse can take place inside or outside of the home. Children who witness domestic abuse are also victims.

Older children may also experience and/or be the perpetrators of domestic abuse and/or violence in their own personal relationships. This can include sexual harassment.

Exposure to domestic abuse and/or violence can have a serious, long-lasting emotional and psychological impact on children and affect their health, wellbeing, development and ability to learn.

If police are called to an incident of domestic abuse and any children in the household have experienced the incident, the police will inform the key adult in organisation (usually the designated safeguarding lead) before the child or children arrive the following day.

The DSL will provide support according to the child's needs and update records about their circumstances.

## **Homelessness**

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare.

The DSL 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 (where appropriate and in accordance with local procedures).

Where a child has been harmed or is at risk of harm, the DSL will also make a referral to children's social care.

## **So-called 'honour-based' abuse (including FGM and forced marriage)**

So-called 'honour-based' abuse (HBA) encompasses incidents or crimes committed to protect or defend the honour of the family and/or community, including FGM, forced marriage, and practices such as breast ironing.

Abuse committed in this context often involves a wider network of family or community pressure and can include multiple perpetrators.

All forms of HBA are abuse and will be handled and escalated as such. All staff will be alert to the possibility of a child being at risk of HBA or already having suffered it. If staff have a concern, they will speak to the DSL, who will activate local safeguarding procedures.

## **FGM**

The DSL will make sure that staff have access to appropriate training to equip them to be alert to children affected by FGM or at risk of FGM.

Section 7.3 of this policy sets out the procedures to be followed if a staff member discovers that an act of FGM appears to have been carried out or suspects that a trainee is at risk of FGM.

Indicators that FGM has already occurred include:

- › A trainee confiding in a professional that FGM has taken place
- › A mother/family member disclosing that FGM has been carried out
- › A family/trainee already being known to social services in relation to other safeguarding issues
- › A girl:
  - Having difficulty walking, sitting or standing, or looking uncomfortable
  - Finding it hard to sit still for long periods of time (where this was not a problem previously)
  - Spending longer than normal in the bathroom or toilet due to difficulties urinating
  - Having frequent urinary, menstrual or stomach problems
  - Avoiding physical exercise or missing PE
  - Being repeatedly absent from education, or absent for a prolonged period
  - Demonstrating increased emotional and psychological needs – for example, withdrawal or depression, or significant change in behaviour
  - Being reluctant to undergo any medical examinations
  - Asking for help, but not being explicit about the problem
  - Talking about pain or discomfort between her legs

Potential signs that a trainee may be at risk of FGM include:

- › The girl's family having a history of practising FGM (this is the biggest risk factor to consider)
- › FGM being known to be practised in the girl's community or country of origin
- › A parent or family member expressing concern that FGM may be carried out
- › A family not engaging with professionals (health, education or other) or already being known to social care in relation to other safeguarding issues
- › A girl:
  - Having a mother, older sibling or cousin who has undergone FGM
  - Having limited level of integration within UK society
  - Confiding to a professional that she is to have a "special procedure" or to attend a special occasion to "become a woman"
  - Talking about a long holiday to her country of origin or another country where the practice is prevalent, or parents/carers stating that they or a relative will take the girl out of the country for a prolonged period
  - Requesting help from a or another adult because she is aware or suspects that she is at immediate risk of FGM

- Talking about FGM in conversation – for example, a girl may tell other children about it (although it is important to take into account the context of the discussion)
- Being unexpectedly absent from education
- Having sections missing from her 'red book' (child health record) and/or attending a travel clinic or equivalent for vaccinations/anti-malarial medication

The above indicators and risk factors are not intended to be exhaustive.

### **Forced marriage**

Forcing a person into marriage is a crime. A forced marriage is one entered into without the full and free consent of 1 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.

It is also illegal to cause a child under the age of 18 to marry, even if violence, threats or coercion are not involved.

Staff will receive training around forced marriage and the presenting symptoms. We are aware of the '1 chance' rule, i.e. we may only have 1 chance to speak to the potential victim and only 1 chance to save them.

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

The DSL will:

- › Speak to the trainee about the concerns in a secure and private place
- › Activate the local safeguarding procedures and refer the case to the local authority's designated officer
- › Seek advice from the Forced Marriage Unit on 020 7008 0151 or [fmufco.gov.uk](mailto:fmufco.gov.uk)

### **Preventing radicalisation**

- › **Radicalisation** refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups
- › **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. This also includes calling for the death of members of the armed forces
- › **Terrorism** is an action that:
  - Endangers or causes serious violence to a person/people;
  - Causes serious damage to property; or
  - Seriously interferes or disrupts an electronic system

The use or threat of terrorism must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

Organisations 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.

We will assess the risk of children in our organisation 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 partners and local police force.

We will ensure that suitable internet filtering is in place, and equip our trainees to stay safe online.

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 trainees' behaviour.

The government website [Educate Against Hate](#) and charity [NSPCC](#) say that signs that a trainee 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 trainee, they will follow our procedures set out in section 7.5 of this policy, including discussing their concerns with the DSL.

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

## **Sexual violence and sexual harassment between children in education**

Sexual violence and sexual harassment can occur:

- › Between 2 children of any age and sex
- › Through a group of children sexually assaulting or sexually harassing a single child or group of children
- › Online and face to face (both physically and verbally)

Sexual violence and sexual harassment exist on a continuum and may overlap.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment and will be exacerbated if the alleged perpetrator(s) attends the same organisation.

If a victim reports an incident, it is essential that staff make sure they are reassured that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting any form of abuse or neglect. Nor should a victim ever be made to feel ashamed for making a report.

When supporting victims, staff will:

- › Reassure victims that the law on child-on-child abuse is there to protect them, not criminalise them
- › Regularly review decisions and actions, and update policies with lessons learnt
- › Look out for potential patterns of concerning, problematic or inappropriate behaviour, and decide on a course of action where we identify any patterns
- › Consider if there are wider cultural issues within the organisation that enabled inappropriate behaviour to occur and whether revising policies and/or providing extra staff training could minimise the risk of it happening again

- › Remain alert to the possible challenges of detecting signs that a child has experienced sexual violence, and show sensitivity to their needs

Some groups are potentially more at risk. Evidence shows that girls, children with SEN and/or disabilities, and lesbian, gay, bisexual and transgender (LGBT) children are at greater risk.

Staff should be aware of the importance of:

- › Challenging inappropriate behaviours
- › Making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up
- › Challenging physical behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, pulling down trousers, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them

If staff have any concerns about sexual violence or sexual harassment, or a child makes a report to them, they will follow the procedures set out in section 7 of this policy, as appropriate. In particular, section 7.8 and 7.9 set out more detail about our organisation's approach to this type of abuse.

## **Serious violence**

Indicators which may signal that a child is at risk from, or involved with, serious violent crime may include:

- › Increased absence from education
- › Change in friendships or relationships with older individuals or groups
- › Significant decline in performance
- › Signs of self-harm or a significant change in wellbeing
- › Signs of assault or unexplained injuries
- › Unexplained gifts or new possessions (this could indicate that the child has been approached by, or is involved with, individuals associated with criminal networks or gangs and may be at risk of criminal exploitation (see above))

Risk factors which increase the likelihood of involvement in serious violence include:

- › Being male
- › Having been frequently absent or permanently excluded from education
- › Having experienced child maltreatment
- › Having been involved in offending, such as theft or robbery

Staff will be aware of these indicators and risk factors. If a member of staff has a concern about a trainee being involved in, or at risk of, serious violence, they will report this to the DSL.

## **Official visitors and service users**

Our organisation is open to the public and we differentiate external visitors into two categories; service users and official visitors.

All visitors will be required to verify their identity to the satisfaction of staff.

If the visitor is unknown to the setting, we will check their credentials and reason for visiting before allowing them to enter the setting. Visitors should be ready to produce identification.

Visitors are expected to sign the visitors' book and wear a visitor's badge.

Visitors to the organisation who are visiting for a professional purpose, such as educational psychologists or SEN caseworkers will be asked to show photo ID and:

- › Will be asked to show their DBS certificate, which will be checked alongside their photo ID; or

- › The organisation sending the professional, such as the LA or educational psychology service, will provide prior written confirmation that an appropriate level of DBS check has been carried out (if this is provided, we will not ask to see the DBS certificate)

All other visitors, including visiting speakers, will be accompanied by a member of staff at all times. We will not invite into the organisation any speaker who is known to disseminate extremist views, and will carry out appropriate checks to ensure that any individual or organisation using the facilities is not seeking to disseminate extremist views or radicalise trainees or staff.

Service users will have restricted access to certain areas of the site in order to make use of the social enterprise facilities.

We have clear signage and information leaflets which indicate our safeguarding procedures.