SAFEGUARDING & CHILD PROTECTION POLICY – IPSWICH HOSPITAL SCHOOL



RATIFIED BY THE TRUST BOARD IN: OCTOBER 2021

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# **SAFEGUARDING & CHILD PROTECTION POLICY**

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Policy author:	Angela Ransby
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Trust Board Signature:	Alan Whittaker

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# **Key Personnel**

# **Ipswich Hospital School**

Role:	Name and contact details:
Designated Safeguarding Lead (DSL)	Kate Kingsford 01473 702067
	kkingsford@raedwaldtrust.org
Deputy DSL	Nichole Phillips 01473 702067
	nphillips@raedwaldtrust.org
	Lizzie Vincent 01473 702067
	<u>lvincent@raedwaldtrust.org</u>
PREVENT Lead	Kate Kingsford (see details above)
Head Teacher	Carey Fish 01473 251329
Named Safeguarding Governor	Anna Hennell James 01473 550472
	ahennelljames@raedwaldtrust.org
Chair of Trustees	Alan Whittaker 01473 550472
	awhittaker@raedwaldtrust.org

The CEO is: Angela Ransby 01473 550472, <a href="mailto:aransby@raedwaldtrust.org">aransby@raedwaldtrust.org</a>

#### **Aims**

Safeguarding children is the first priority of the Raedwald Trust and its academies. Through a strong and vigilant culture of collaboration, transparency and a relentless focus on improvements, we are driven to deliver excellence with, for and on behalf of our children.

At Ipswich Hospital School we are committed to safeguarding children and young people and we expect everyone who works in our school to share this commitment. Adults in our school take all welfare concerns seriously and encourage children and young people to talk to us about anything that worries them. We will always act in the best interest of the child. Safeguarding and child protection are at the forefront and underpin all the work we do within our school settings – it is a whole school approach, ensuring the best interests of the child are at the heart of all we do.

# **Reporting a Concern**

On the Raedwald Trust website Home Page there is a 'Report a concern button', located in the top right hand corner in bright red.

This is designed for all pupils across the Trust to use in order to report a concern regarding anything that is worrying them or if they are worried about their family or friends. The report will be sent to Trust Safeguarding Leads who will respond and pass on to the relevant DSL.

#### PART 1

# Raedwald Trust Safeguarding Procedures for Staff

# **Disclosure / Concern Raised**

All staff must follow the published Academy flow chart.

# **Record Keeping**

All documents relating to safeguarding or child protection will be stored electronically on SchoolPod with visibility restricted to the safeguarding team. Raedwald Trust attendance to all 'safeguarding' meetings (including FNM, CiN, and CP) will be by, or directed by, the DSL in consultation with the Head Teacher.

In all academies, pupil's individual Risk Assessment will serve as the information sharing document for all staff.

All RT staff remain responsible for requesting access to DSL actions at any time, in order they can activate the Whistleblowing Policy as they deem necessary.

All staff must strictly adhere to academy based attendance procedures as part of their safeguarding responsibilities.

# **Pupil Level Risk Assessments**

All pupil level risk assessments to be drawn up through Heads of School, checked and signed off by the DSL.

# **Safeguarding Training**

All staff are responsible for ensuring they comply with, and are engaged in, the mandatory training requirements published by the RT. A live breakdown of your progression through these training requirements can be accessed at by contacting your Head of School.

# Raedwald Trust Safeguarding Flow Chart - What to do if I am worried about a child

Always attempt to contact the DSL or one of the DDSLs. However, if you cannot, or to spend time doing so would put a child in danger, you should call the police or MASH team directly.

If a child is in immediate danger or is at risk of harm call the police on 999:

If there is an immediate safeguarding concern, call the MASH team on 0808 800 4005.

If you do this, contact the DSL as soon as possible the same day.

#### Report concerns / disclosure to a member of the Raedwald Trust Safeguarding team

For concerns that need immediate action, please call one of the safeguarding team. Completing a record of concern on SchoolPod will send a text and email to the DSL and DDSLs.

Designated Safeguarding Leads
Alderwood Academy – Tom Baker
Outreach (incl CiC) – Alice Crozier-Green
First Base Bury St Edmunds – Sonia Myhill
First Base Ipswich – Stacey Laws
Hospital School – Kate Kingsford-Bere
Parkside Academy KS4 School – Nick Stevens
Parkside Academy KS3 School – Sian Sherman
St Christopher's Academy – Cath Sparrow
Westbridge Academy – Carey Fish

Kester Hawkins Louise Chapman, Pippa Harding & Jo Perry

Sophie Hickmott Tanya Gray

**Deputy DSLs** 

Nicole Phillips & Lizzie Vincent
Fe Dunachie & Emma Osborne
Alicia Mann & Nic Shaw
Alicia Mann & Charlotte Orvis

David Adum-Yeboah & Kayleigh Southgate

You may also be able to contact the above at 01473 550472.

Don't forget to record your concerns on School Pod or on the academy based paper recording system.



# The DSL will consider further actions required, including;

- 4. Consultation with MASH 0808 800 4005 or the Police if a child is in immediate danger or at risk of significant harm.
- 5. For inpatients, discuss with the hospital safeguarding team
- Discussion with the main school DSL/DDSL

# Recording

- Make a record of your concern / child's disclosure, using www.schoolpod.co.uk
- Remember to record the date, time, your name and role and keep your record as factual as possible.
- Use the child's own words where applicable.
- If there are marks on a child record these on a body map within the School Pod form.

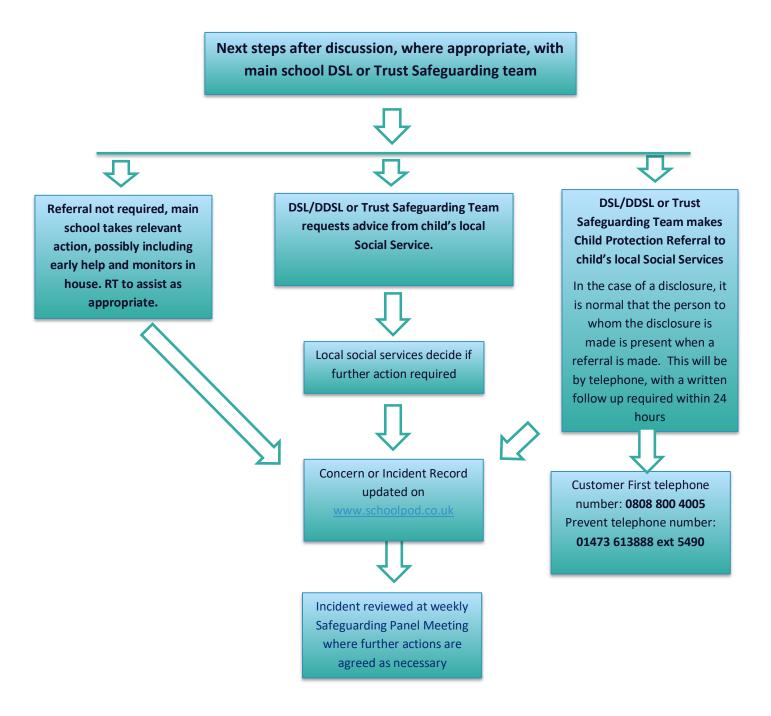
# **Informing Carers/Parents**

- Carers & parents should be informed of all concerns and referrals unless this may cause harm to the child.
- Typically, the main school (or hospital) are best placed to take up this responsibility, however, when necessary, RT staff will be required to fulfil this duty.

# Reflect

- Ask yourself if you have done everything you can within your role.
- Refer any remaining concerns to the DSL/DDSL.
- Dealing with disclosures can be difficult and disturbing; seek support for yourself, but be aware of principles of confidentiality.

# Raedwald Trust Safeguarding Flow Chart - Next Steps for DSL and Deputy DSLs



#### PART 2

# Introduction

This policy has been developed in accordance with the principles established by the Children Act 1989; and in line with the following:

- "Keeping Children Safe in Education" 2021
- "Working Together to Safeguard Children" 2018 (copyright 2020)
- "Framework for the Assessment of Children in Need and their Families" 2000
- "What to do if you are worried a Child is being Abused" 2015
- Sexual Violence and Sexual Harassment between Children in Schools and Colleges 2021
- Suffolk Safeguarding Children Board guidelines and the 3 safeguarding partners
- Information on School's Advice
- Inspecting Safeguarding
- GDPR

The Raedwald Trust takes seriously its responsibility under section 11 of the Children Act and duties under "working together" to safeguard and promote the welfare of children; to work together with other agencies to ensure adequate arrangements exist within our setting to identify, and support those children who are suffering harm or are likely to suffer harm.

We recognise that all staff and trustees have a full and active part to play in protecting our pupils from harm, and that the child's welfare is our paramount concern.

Our Trust should provide a safe, caring, positive and stimulating environment that promotes the social, physical and moral development of the individual child free from discrimination or bullying where children can learn and develop happily.

This policy applies to all staff, trustees, governors and volunteers working within our Trust.

This policy has been written in line with Keeping Children Safe in Education 2021. All staff will sign to confirm they have read and understood this policy.

#### Terminology

Safeguarding and promoting the welfare of children is defined as:

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

Keeping Children Safe in Education (2021)

#### Child protection is:

• Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Working Together to Safeguard Children 2018 (copyright 2020)

#### Early Help

• Early help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to the teenage years.

Keeping Children Safe in Education (2021)

Staff refers to all those working for or on behalf of the Trust, full time or part time, in either a paid or voluntary capacity.

#### A Child is:

Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years
of age, is living independently or is in further education, is a member of the armed forces, is in
hospital or in custody in the secure estate, does not change their status or entitlements to
services or protection.

Working Together to Safeguard Children 2018 (copyright 2020)

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

DSL: Designated Safeguarding Lead

DDSL: Deputy Designated Safeguarding Lead

# The role of Trust staff

Our Trust staff are particularly important as they are in a position to identify concerns early, provide help for children, and prevent concerns from escalating.

- All our staff have a responsibility to provide a safe environment in which children can learn.
- Our academies have a designated safeguarding lead who will provide support to our staff
  members to carry out their safeguarding duties and who will liaise closely with other services
  such as children's social care. The DSL (and any deputies) are most likely to have a complete
  safeguarding picture and be the most appropriate person to advise on the response to
  safeguarding concerns.
- All our staff will be equipped to identify children who may benefit from early help. Staff know
  in the first instance to discuss their concerns with the designated safeguarding lead, and
  understand they may be required to support other agencies and professionals in assessments
  for early help.
- Any of our staff members who have a concern about a child's welfare should follow the referral
  processes (detailed on page 6). Staff should expect to support Social Workers and other
  agencies following any referral.

 The Teachers' standards 2012 state that teachers, including Head Teachers, should safeguard children's wellbeing and maintain public interest in the teaching professions as part of their professional duties.

# What Trust staff need to know

- All our staff members are aware of the systems within our Trust which support safeguarding, these are explained to them as part of their induction and include:
  - This Child Protection and Safeguarding policy
  - The staff code of conduct (sometimes called staff behaviour policy)
  - The role of the DSL (including the identity of the DSL and any deputies)
  - Keeping Children Safe in Education part 1 and annexes
  - Whistleblowing Policy
  - Managing allegations about staff or volunteers
  - The safeguarding response to children who go missing from education
  - What to do if they have a concern about a child
  - Sexual Violence and Sexual Harassment 2021
- All staff members receive appropriate safeguarding and child protection training which is
  updated annually. In addition to this training all staff members receive safeguarding and child
  protection updates via the Trust Safeguarding Leads throughout the year to provide them with
  relevant skills and knowledge to be able to safeguard the children in our setting effectively.
- All staff are made aware of the early help process, and understand their role in this. This
  includes staff being able to identify emerging problems, liaising with our designated
  safeguarding lead, sharing information with other professionals to support early identification
  and assessment and, in some cases, where appropriate, acting as the lead professional in
  undertaking any early help assessment. Our <u>Early Help Offer</u> is shared with staff and parents
  (see Appendix C).
- All staff are aware of the process for making child protection referrals to children's social care
  and statutory assessments that may follow, under the Children Act 1989, especially section 17
  (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) that may
  follow a referral, along with the role that might be expected to play in such assessments.
- All staff know what to do if a child tells them he/she is being abused or neglected. Staff
  understand how to maintain an appropriate level of confidentiality. They understand that this
  means only to involve those who need to be involved such as the DSL (or a deputy) and
  children's social care.
- Staff will never promise a child that they will not tell anyone about the allegation/disclosure that the child has made, as this may ultimately not be in the best interests of the child.

- At Ipswich Hospital School we recognise the possibility that adults working in the school may harm children, including governors, volunteers, supply teachers and agency staff. Any concerns about the conduct of other adults in the school should be taken to the Head Teacher without delay; any concerns about the Head Teacher should go to the Chair of Trustees who can be contacted by email at <a href="mailto:awhittaker@raedwaldtrust.org">awhittaker@raedwaldtrust.org</a>.
- The guidance in KCSIE (Part Four) should be followed where it is alleged that anyone working in the school or college that provides education for children under 18 years of age, including supply teachers and volunteers has:
  - behaved in a way that has harmed a child, or may have harmed a child;
  - possibly committed a criminal offence against or related to a child;
  - behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; or
  - behaved or may have behaved in a way that indicates they may not be suitable to work with children.

# What Trust staff should look out for

Any child may benefit from early help, but our Trust staff are particularly alert to the potential need for early help for a child who;

- Is a young carer;
- Is disabled and has specific additional needs;
- Has special educational needs (whether or not they have a statutory education, health and care plan);
- Is showing signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
- Is frequently missing/goes missing from care or from home;
- Is misusing drugs or alcohol themselves;
- Is at risk of modern slavery, trafficking or exploitation;
- Is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse;
- Has returned home to their family from care;
- Is showing early signs of abuse and/or neglect;
- Is at risk of being radicalised or exploited;
- Is a privately fostered child;
- Is LAC a Looked After Child (in care) or previously LAC.

All Trust staff members are aware of the signs of abuse and neglect so they are able to identify children who may be in need of help or protection (see part 2 of this policy for the definitions).

Departmental advice: What to do if you are worried a child is being abused- Advice for practitioners provides more information on understanding and identifying abuse and neglect. <a href="https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused-2">https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused-2</a>

Staff members at our Trust are advised to maintain an attitude at all times of "it could happen here" where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the best interests of the child.

Knowing what to look for is vital to the early identification of abuse and neglect. If staff members are unsure they should always speak to the DSL (or deputy).

# What Trust staff should do if they have concerns about a child

If our staff have any concerns about a child's welfare, they should act on them immediately. See page 6 for a flow chart setting out the process for our staff when they have concerns about a child.

If staff have a concern, they should follow this child protection policy and speak to the DSL (or deputy).

# Options will then include:

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

The DSL or a deputy should always be available to discuss safeguarding concerns. If in exceptional circumstances, the DSL (or deputy) is not available, this should not delay appropriate action being taken. Staff should consider speaking to a member of the senior leadership team and/or take advice from local children's social care. In these circumstances, any action taken should be shared with the designated safeguarding lead (or deputy) as soon as is practically possible.

Our staff should not assume a colleague or another professional will take action and share information that might be critical in keeping children safe. They should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision.

# Early help

If early help is appropriate, the DSL (or deputy) 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 professional. Any such cases should be kept under constant review and consideration given to a referral to children's social care for assessment for statutory services, if the child's situation does not appear to be improving or is getting worse.

#### **Statutory Assessments**

Where a child is suffering, or is likely to suffer from harm, it is important that a referral to children's social care (and if appropriate the police) is made immediately.

# Female Genital Mutilation mandatory reporting duty for teachers

Whilst our staff should speak to the DSL (or deputy) with regard to any concerns about female genital mutilation (FGM), there is a specific legal duty on teachers. If a teacher, in the course of their work in

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

# Record keeping

All concerns, discussions and decisions made, and the reasons for those decisions, should be recorded in writing on SchoolPod. If in doubt about recording requirements, staff should discuss with the DSL (or deputy). Records should 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.

# Why is all of this important?

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

- Failing to act on and refer the early signs of abuse and neglect
- Poor record keeping
- Failing to listen to the view of the child
- Failing to re-assess concerns when situations do not improve
- Not sharing information
- Sharing information too slow and
- A lack of challenge to those who appear not to be taking action

# What Trust staff should do if a child in in danger or at risk of harm

 If, a child is in immediate danger or is at risk of harm a referral should be made to children's social care and/or the police immediately. Anyone can make a referral. Where referrals are not made by the DSL, the DSL should be informed, as soon as possible, that a referral has been made.

# What Trust staff should do if they have concerns about another staff member who may pose a risk of harm to children

- This should be referred to the Head Teacher.
- Where there are concerns/allegations about the Head Teacher, this should be referred to the CEO.

# What Trust staff should do if they have concerns about safeguarding practices within the Trust - whistleblowing

- We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.
- All our staff should feel able to raise concerns about poor or unsafe practice and potential
  failures in the Trust's safeguarding regime and that such concerns will be taken seriously by the
  senior leadership team.

- All staff should be aware of their duty to raise concerns about the attitude or actions of
  colleagues and appropriate advice will be sought from the LADO or Safeguarding Team where
  necessary.
- See full details in our whistleblowing policy.
- Where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them:
  - General guidance can be found at <u>Advice on whistleblowing</u>
  - The NSPCC whistleblowing helpline is available as an alternative route for staff who do not feel able to raise concerns regarding child protection failures internally or have concerns about the way a concern is being handled by their school. Staff can call: 0800 028 0285 line is available from 8:00 AM to 8:00 PM, Monday to Friday and Email: <a href="mailto:help@nspcc.org.uk">help@nspcc.org.uk</a>
- A whistleblowing disclosure must be about something that affects the general public such as:
  - a criminal offence has been committed, is being committed or is likely to be committed
  - an legal obligation has been breached
  - there has been a miscarriage of justice
  - the health or safety of any individual has been endangered
  - the environment has been damaged
  - information about any of the above has been concealed.

#### Roles and responsibilities

All schools must nominate a senior member of staff to coordinate child protection arrangements and this person is named in this policy guidance. The Trust ensures that the DSL or a deputy will be available at all times that the school is open to discuss safeguarding concerns. Our school will also ensure that there are adequate and appropriate measures in place to cover out of hours/out of term activities.

#### The Trust Board

The Board of Trustees undertakes the regular review of safeguarding related policies and procedures that operate within our Trust.

The Trust Board have a crucial role in monitoring and challenging staff on the effectiveness of safeguarding arrangements.

#### Our Trust Board ensures there is:

- A DSL for safeguarding and child protection who is a member of the senior leadership team and who has undertaken the approved Suffolk Safeguarding Children Board (Suffolk Safeguarding Partnership) training in inter-agency working, in addition to basic child protection training.
- Safeguarding and Child protection policy and procedures that are consistent with Suffolk Safeguarding Partnership requirements, reviewed annually and made available to parents on request.

- Procedures for dealing with allegations of abuse made against members of staff including allegations made against the Head Teacher and CEO.
- Safer recruitment procedures that include the requirement for appropriate checks in line with national guidance.
- A training strategy that ensures all staff, including the CEO and Head Teacher, receive child
  protection training, with refresher training at three-yearly intervals. The DSL and Deputy DSLs
  should receive refresher training at two-yearly intervals. The Deputy DSLs will be trained to the
  same level as the DSL, as required by Suffolk Safeguarding Partnership.
- Regular update sessions for staff regarding safeguarding. Keeping staff up to date with any changes and ensuring that safeguarding remains a priority within the setting.
- Arrangements to ensure that all temporary staff and volunteers are made aware of the school's arrangements for safeguarding and child protection.
- The Trust Board nominates a member (normally the chair) to be responsible for liaising with the local authority and other agencies in the event of an allegation being made against the CEO. An annual report will be submitted to the local authority about how the Trust Board's duties have been carried out. Any weaknesses or areas of concern will be rectified without delay.

# The key role of the Designated Safeguarding Lead is to:

- manage referrals from school staff or any others from outside the school;
- work with external agencies and professionals on matter of safety and safeguarding;
- undertake training;
- raise awareness of safeguarding and child protection amongst the staff and parents; and
- ensure that child protection information is transferred to the pupil's new school
- be aware of pupils who have a social worker
- help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues with teachers and school and college leadership staff.

# The Head Teacher:

- Ensures that the safeguarding and child protection policy and procedures are implemented and followed by all staff.
- Allocates sufficient time and resources to enable the DSL and deputy to carry out their roles
  effectively, including the assessment of pupils and attendance at strategy discussions and other
  necessary meetings.
- Ensures that all staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the school's whistle blowing procedures.

• Ensures that child's safety and welfare is addressed through the curriculum.

#### DSL:

- Will attend DSL Safeguarding training every two years and keep up to date with changes.
- Acts as a source of support and expertise to the school community.
- Has an understanding of SuffolkSCB procedures.
- Notifies children's social care if a child with a child protection plan is absent for more than two days without explanation.
- Ensures that when a child leaves the school, their safeguarding information is passed to their new school and if the child has a social worker then they are informed.
- Attends and/or contributes to child protection conferences in accordance with local procedure and guidance.
- Coordinates the school's contribution to child protection plans.
- Develops effective links with relevant statutory and voluntary agencies.
- Ensures that all staff sign to indicate that they have read and understood this policy.
- Ensures that this safeguarding and child protection policy is updated annually.
- Liaises with the nominated governor and Head Teacher as appropriate.
- Keeps a record of staff attendance at safeguarding and child protection training.
- Provides an annual safeguarding report to governors which is sent to the LADO/Safeguarding team at County Hall no later than the December of the academic year, following the academic year to which the report applies.
- Makes this policy available to parents via the Trust website and as a hard copy on request.

#### Record Keeping

- Keeps written records of all concerns when noted and reported by staff or when disclosed by a child, ensuring that such records are stored securely and confidentially but kept separately from the child's general file.
- Sends records to the relevant people, in particular, to the DSL at the pupil's main school for dual registered pupils.

- The records will be a coherent factual record of the concerns that are stored on individual children in a clear chronological order.
- Follow SSCB guidance on record keeping.

#### Referrals to Social Services

• Refers cases of suspected neglect and/or abuse to children's social care or police in accordance with the guidance below.

# The relationship with students' main schools for dual registered students

- At times, the Raedwald Trust works with schools to support them to support students. Sometimes Raedwald Trust does not have a school roll of its own, such as in the case of pupils on specifically commissioned pathways. In these cases, all students remain on the roll of their main school. Main schools hold the complete safeguarding picture for their students. The Raedwald Trust recognise that all adults working with young people have a responsibility to safeguard them.
- All safeguarding concerns from Raedwald Trust staff will be reported to the Raedwald Trust DSL or one of the Deputy DSLs who will record the concern and inform the DSL or other person with safeguarding responsibilities at the main school.
- If any member of staff believes that pupil is in immediate danger and cannot make contact with a Raedwald Trust DSL they can make an immediate referral to the MASH team.
- For pupils where there is a non-emergency concern, the Raedwald Trust DSL will contact the
  main school DSL and discuss the concern. If a referral to social services, or contact with the
  locality social worker is agreed as the way forward then the main school will do this. Raedwald
  Trust staff will be made available to talk to the main school DSL or directly with social care as
  necessary to facilitate this.

# **Deputy DSLs:**

Is appropriately trained to the same level as the DSL and, in the absence of the DSL, carries out
those functions necessary to ensure the ongoing safety and protection of children. In the event
of the long-term absence of the DSL, one of the Deputy DSLs will assume all of the functions
above.

# All staff will:

Follow the Suffolk Safeguarding Children Board Procedures/Local Authority guidance in all cases of abuse, or suspected abuse (these can be found at <a href="http://www.suffolkscb.org.uk">http://www.suffolkscb.org.uk</a>).

#### We will therefore:

• Implement and follow part 1 and 2 of this guidance.

- Understand that our responsibility to safeguard children requires that we all appropriately share any concerns that we may have about children.
- Support the child's development in ways that will foster security, confidence and resilience.
- Provide an environment in which children and young people feel safe, secure, valued and respected, feel confident and know how to approach adults if they are in difficulties.
- Provide a systematic means of monitoring children known or thought to be at risk of harm, and
  ensure we contribute to assessments of need and support plans for those children where
  appropriate.
- Ensure that detailed and accurate written records of concerns about a child are kept even if there is no need to make an immediate referral. This will be done using our electronic management information system, SchoolPod. See guidance on record keeping.

# **Training**

All staff/volunteers are expected to read at least Part 1 and Annex A of KCSIE 2021 and sign to say they have read and understood. Level 1 induction safeguard training is offered to new staff on the first day of new position by DSL/DDSL. Level 2 safeguard training is offered to new staff at regular intervals throughout the academic year and delivered by trained T4T Trainers.

New staff members are registered to attend the next available safeguard training session. Level 2 safeguard training is offered annually to all staff. Prevent training is offered to new staff at regular intervals throughout the academic year by Prevent Leads or online training.

Regular safeguard updates take place through PD days, teaching and learning meetings, weekly safeguard email to all staff, and safeguard weekly meeting between the academy's DSL/DDSL. Parents of pupils who remain on school site are offered Level 1 induction training by DSL/DDSL. New staff are directed and asked to complete home office online training for FGM and Channel PREVENT.

Induction Training – this is mandatory and should include;

- the Safeguarding & Child Protection Policy, including a module on Safeguarding and Child Protection which is submitted centrally;
- the Behaviour Policy;
- the Staff Code of Conduct Policy;
- the safeguarding response to children who go missing from education; and
- the role of the designated safeguarding lead (including the identity of the designated safeguarding lead and any deputies). (see KCSIE (2021)

All Ipswich Hospital School staff should read the following relevant documents:

• Keeping Children Safe in Education (2021) [Part One]; and school leaders and staff that work directly with children should also read Annex A

- Staff Code of Conduct
- Safeguarding and Child Protection Policy
- School's Behaviour Policy
- School Policy for Children Missing Education

DSLs – attend training every two years; and in addition to formal training, their knowledge and skills should be refreshed at regular intervals, at least annually.

All other staff – will receive regular safeguarding and child protection updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. Safer Recruitment training is available to all relevant staff and governors who are involved in the recruitment process.

The Trust Safeguarding Leads ensure that the training staff access is up to date with correct content and is delivered well and engages staff. Online training completed by staff requires a pass percentage rate obtained from answering questions on the given topic in order to gain certification. A safeguarding quiz is sent from Trust Safeguarding Leads to all staff annually to ensure understanding of the policies and procedures.

# **Temporary Staff & Visitors**

Temporary staff and visitors are directed to the safeguard board in the school's main office and are made aware of the safeguard team on site. There are Posters and leaflets around the school building offering advice and contact numbers for Customer First and whistleblowing numbers.

#### Supporting Children

- We recognise that a child who is abused, who witnesses violence or who lives in a violent environment may feel helpless and humiliated, may blame him/herself, and find it difficult to develop and maintain a sense of self-worth.
- We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

Our Trust will support all children and young people by:

- Encouraging the development of self-esteem and resilience in every aspect of life.
- Promoting a caring, safe and positive environment.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notifying Social Care as soon as there is a significant concern.
- Notifying Social Care when a child/young person attending the centre is privately fostered.

- Providing continuing support to a pupil (about whom there have been concerns) who leaves
  the school by ensuring that such concerns and school records are forwarded under confidential
  cover to the Designated Person at the pupil's new school immediately.
- Our pupils and families are aware who the safeguarding team within the school is and that they can go to them for advice and guidance. This is also promoted through admissions meetings and the induction process.
- Our pupils are aware of support agencies, both local and national, from whom they can access and gain further support from.
- Posters are displayed throughout the school building for agencies such as ChildLine and ChatHealth.
- Each setting has a safeguarding display board with information for pupils and families.
- The Raedwald Trust website has a 'Report a Concern' button accessible to pupils.
- Build trusting relationships with pupils and families to encourage them to discuss with us any concerns they have and gain extra support moving forward e.g. through our Early Help offer.

# Confidentiality

- We recognise that all matters relating to child protection are confidential. The Raedwald Trust will ensure that information shared will be in line with the guidance document 'Information sharing: advise for practitioners providing safeguarding services' (DfE 2018).
- It is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required this is in line with 'Working Together to Safeguard Children 2018' (copyright 2020)
- The DSL or one of the Deputy DSLs will disclose personal information about a child or young person to other members of staff on a need to know basis only.
- However, all staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being or that of another.
- We will always undertake to share our intention to refer a child to Social Care with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal

investigation. If in doubt, we will consult with the Schools Safeguarding Team or Social Care on this point.

- We will take no names consultations with our local MASH team to discuss concerns we may have, but we understand that if they then ask for a name we will disclose those details and it will become a referral.
- For dual registered students, the Raedwald Trust DSL or one of the Deputy DSLs will always share safeguarding concerns with the DSL (or one of their deputies) from the pupil's main school. The main school hold the full picture of their pupils and information of a safeguarding nature that may come to light while working with Raedwald Trust staff, however small, may add to that bigger picture.
- The Data Protection Act 2018 and GDPR do not prevent the sharing of information for the purposes of keeping children safe. This includes allowing practitioners to share information without consent.
- Information sharing is vital in identifying and tackling all forms of abuse and neglect, and in promoting children's welfare, including their educational outcomes. We as a school have clear powers to share, hold and use information for these purposes.

#### **Supporting Staff**

- We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.
- We will support such staff by providing an opportunity to talk through their anxieties with the DSL and to seek further support. This could be provided by another trusted colleague, Occupational Health, and/or a representative of a professional body or trade union, as appropriate.
- In consultation with all staff, we have adopted a code of conduct for staff at our setting. This forms part of staff induction and is in the staff handbook. We understand that staff should have access to advice on the boundaries of appropriate behaviour.
- We recognise that our DSL and Deputy DSLs should have access to support and appropriate workshops, courses or meetings as organised by the LA.

#### Safer Recruitment

- Safer recruitment procedures are in line with the current legislation, Keeping Children Safe in Education 2021 part three. This is where further detail can be found.
- An enhanced DBS certificate, which includes barred list information, is required for any staff and volunteers who will be engaging in regulated activity (working unsupervised with children).

For all other staff and volunteers who have opportunity for regular contact with children, but who are not engaging in regulated activity, an enhanced DBS check, which does not include a barred list check, will be appropriate.

- There are additional requirements for Governors and trustees / proprietors see page 45 of KCSIE and refer to accordingly. They are required to have an enhanced criminal records certificate from the DBS including a section 128 check to check that they have not been prohibited from teaching.
- In addition, anyone who is appointed to carry out teaching work will require an additional check to ensure they are not prohibited from teaching.
- A single central record is kept by the school and meets the requirements as set out in chapter 3 part 3 of 'Keeping Children Safe in Education' 2021.
- We will follow guidance on Disqualification by Association for staff who come into regular and frequent contact with children of reception age.

# Allegation or concerns about an adult working in the school

At Ipswich Hospital School we recognise the possibility that adults working in the school may harm children, including governors, volunteers, supply teachers and agency staff. Any concerns about the conduct of other adults in the school should be taken to the Head Teacher without delay; any concerns about the Head Teacher should go to the Chair of Trustees who can be contacted by phone (01473 550472) or email (awhittaker@raedwaldtrust.org).

Any concerns about the conduct of a member of staff, supply teachers, volunteers or contractors should be reported to the Head Teacher.

Concerns may come from various sources, for example, a suspicion; complaint; or disclosure made by a child, parent or other adult within or outside of the organisation; or as a result of vetting checks undertaken.

The Head Teacher has to decide whether the concern is an allegation or low-level concern. The term 'low-level' concern does not mean that it is insignificant, it means that the behaviour towards a child does not meet the threshold for referral to the Local Authority Designated Officer (LADO):

- Rennie Everett
- LADO team 0300 123 2044
- o LADO@suffolk.gov.uk

# Allegations

It is an allegation if the person\* has:

- behaved in a way that has harmed a child, or may have harmed a child and/or;
- possibly committed a criminal offence against or related to a child and/or;

- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children (also includes behaviour outside the school).

(\*Person could be anyone working in the school or a college that provides education for children under 18 years of age, including supply teachers, volunteers and contractors.)

Allegations should be reported to the LADO 'without delay'.

Before contacting the LADO, schools and colleges should conduct basic enquiries in line with local procedures to establish the facts to help them determine whether there is any foundation to the allegation, being careful not to jeopardise any future police investigation.

The LADO's role is not to investigate the allegation, but to ensure that an appropriate investigation is carried out, whether that is by the police, children's social care, the school or college, or a combination of these.

# **Low-level Concerns**

Concerns may be graded Low-level if the concern does not meet the criteria for an allegation; and the person\* has acted in a way that is inconsistent with the staff code of conduct, including inappropriate conduct outside of work. Example behaviours include, but are not limited to:

- being over 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; or,
- using inappropriate sexualised, intimidating or offensive language.

If the concern has been raised via a third party, the Head Teacher should collect as much evidence as possible by speaking:

- directly to the person who raised the concern, unless it has been raised anonymously;
- to the individual involved and any witnesses.

Reports about supply staff and contractors should be notified to their employers, so any potential patterns of inappropriate behaviour can be identified.

Staff are encouraged and feel confident to self-refer, where, for example, they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards.

Low-level concerns should be recorded in writing, including:

- name\* of individual sharing their concerns
- · details of the concern

- context in which the concern arose
- action taken

(\* if the individual wishes to remain anonymous then that should be respected as far as reasonably possible)

Records must be kept confidential, held securely and comply with the Data Protection Act 2018. Schools and colleges should decide how long they retain such information, but it is recommended that it is kept at least until the individual leaves their employment.

Records will be reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.

If a concerning pattern of behaviour is identified and then meets the criteria for an allegation, then the matter will be referred to the LADO.

The records' review might identify that there are wider cultural issues within the school or college that enabled the behaviour to occur. This might mean that policies or processes could be revised or extra training delivered to minimise the risk of it happening again.

See flowcharts in Appendix B on 'Managing Allegations' and 'Managing Low-Level Concerns'.

# Physical Intervention/Positive Handling

- The need to use physical intervention with pupils is unlikely but could be necessary in extreme
  circumstances. We recognise that members of school staff have a legal power to use
  reasonable force to prevent pupils from hurting themselves or others, from damaging property,
  or from causing disorder (Use of reasonable force, Advice for Head Teachers, Staff and
  Governing Bodies, DfE July 2013).
- When using reasonable force in response to risk presented by incidents involving children with SEN or disabilities or with medical conditions, we will consider the risks carefully and recognise the additional vulnerability of children in these groups. We will also consider our duties under the Equality Act 2010 in relation to making reasonable adjustments, non-discrimination and our Public Sector Equality Duty.
- Wherever possible we will work with medical and education colleagues to plan positive and
  proactive behaviour support, for instance through drawing up individual behaviour plans for
  more vulnerable children, and agreeing them with parents and carers, schools and colleges. By
  doing this we aim to reduce the occurrence of challenging behaviour and the need to use
  reasonable force. For more information see our 'Promoting Positive Behaviour' policy.
- In our hospital setting, if restraint is necessary, immediate assistance should be sought from nursing staff who have been trained to safely restrain patients. Staff should ensure they are aware of procedures to call for help such as the location and use of emergency buttons and Person Infrared Transmitters (PIT alarms).

- Such events should be recorded and signed by a witness.
- We understand that physical intervention of a nature which is both unreasonable and disproportionate to the circumstances and or causes injury or distress to a child may be considered under child protection or disciplinary procedures.

# **Anti-Bullying**

- Our policy on the prevention and management of bullying is set out in a separate policy and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. Bullying is a safeguarding matter that if left unresolved can become a child protection matter. Our setting will take seriously any bullying concerns and both investigate and take action to protect pupils where appropriate.
- We will liaise with the anti-bullying co-ordinator from SCC where appropriate (<a href="https://www.suffolk.gov.uk/children-families-and-learning/schools/pupil-attendance-and-welfare/bullying-at-school">https://www.suffolk.gov.uk/children-families-and-learning/schools/pupil-attendance-and-welfare/bullying-at-school</a>)
- See full details in our Anti-Bullying Policy.

# **Health & Safety**

- Our Health & Safety policy, reflects the consideration we give to the protection of our children both physically within the school environment and, for example, in relation to internet use, and when away from the school when undertaking school trips and visits.
- See full details in our Health and Safety Policy.

#### Children with Special Educational Needs

In our Trust we recognise that children with special educational needs or disabilities (SEND) or certain health conditions can face additional safeguarding challenges. This policy reflects the fact that additional barriers can exist when recognising abuse and neglect in this group of children. This can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- these children being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children;
- the potential for children with SEND or certain medical conditions being disproportionally impacted by things like bullying- without outwardly showing any signs; and
- communication barriers and difficulties in managing or reporting these challenges.

At Ipswich Hospital School we identify pupils who might need more support to keep safe and we will put in place reasonable adjustments to overcome any barriers.

# Children Missing Education

We understand the safeguarding implications of pupils not attending school without explanation and will work closely with all of our schools and EWO to enable them to fulfil their duties around children missing education. Knowing where children are during school hours is an extremely important aspect of Safeguarding. Missing school can be an indicator of abuse and neglect and may also raise concerns about others safeguarding issues, including the criminal exploitation of children.

In each of our schools:

- We provide individual timetables for the following week's planned sessions
- We scrutinise attendance carefully and take immediate safeguarding action where concerns arise

The Raedwald Trust is committed to working with the Suffolk Children Missing Education Team to improve outcomes for pupils in the county that are not receiving a suitable full-time education.

We will always follow up with parents/carers when pupils are not at school. This means we need to have a least two up to date contacts numbers for parents/carers. Parents should remember to update the school as soon as possible if the numbers change.

In response to the guidance in Keeping Children Safe in Education (2021) the school has:

- Staff who understand what to do when children do not attend regularly
- Appropriate policies, procedures and responses for pupils who go missing from education (especially on repeat occasions).
- Staff who know the signs and triggers for travelling to conflict zones, FGM and forced marriage.
- Procedures to inform the local authority when we plan to take pupils off-roll when they:
  - leave school to be home educated
  - move away from the school's location
  - o remain medically unfit beyond compulsory school age
  - are in custody for four months or more (and will not return to school afterwards); or
  - are permanently excluded

We will ensure that pupils who are expected to attend the school, but fail to take up the place will be referred to the local authority.

When a pupil leaves the school, we will record the name of the pupil's new school and their expected start date.

# Sighting Students

• In some of our schools, we will work with some students that have little or no contact with other professionals. In these situations we will agree responsibility for regular sightings of the student with our commissioners and/or the main school for dual registered students. A protocol will be agreed so that if a student is not seen by a member of staff for a specified period of time then staff will visit the home with the specific intention of sighting the young person to ensure they are safe and well.

- We will be clear with parents that this is part of our role in supporting the school to carry out their safeguarding duties.
- Repeated failed attempts to sight the student will result in a request for the police to carry out a welfare check.
- Young people that are not in receipt of education for a period exceeding four weeks should be referred to the Children Missing Education Officer at Suffolk County Council Tel: 01473 265224

# Absconding / Missing Persons

- When a young person goes missing from a school site, or does not arrive at their specified location, if appropriate school staff can pursue if not guardians should be made aware so that they can complete initial searches prior to notifying the police themselves.
- The only time school staff would be expected to report the young person missing would be if there are safeguarding concerns around the individual or their guardians. This report should be made by calling 101 or 999 whichever is most appropriate at the time.

# Young People Not in Education, Employment or Training (NEET)

- In our Hospital School we encounter young people over the age of 16 that are NEET. In these cases we will seek their consent to refer them to the Suffolk County Council Education, Employment and Training (EET) Service <a href="https://www.enter.website">https://www.enter.website</a> who can provide them with appropriate information, advice and guidance.
- If there are other safeguarding concerns around the young person then we may refer them to the EET team without seeking their consent.

#### **Home Educated Pupils**

• In our inpatient settings we encounter young people who are electively home educated. In these cases we will check they are known to the Suffolk County Council Elective Home Education Team (<a href="https://www.suffolk.gov.uk/children-families-and-learning/schools/elective-home-education-ehe-educating-your-child-at-home/">home-education-ehe-educating-your-child-at-home/</a>) or similar team in the area in which they live to enable them to carry out their duties to establish and maintain contact with families educating their children at home and to offer parents appropriate advice and support in the best interests of their children.

# Private fostering

Private fostering occurs when a child under the age of 16 (under 18, if disabled) is provided
with care and accommodation by a person who is not a parent, person with parental
responsibility for them or a relative in their own home. A child is not privately fostered if the
person caring for and accommodating them has done so for less than 28 days and does not
intend to do so for longer. Such arrangements may come to the attention of school staff
through the normal course of their interaction, and promotion of learning activities, with
children.

- A close family relative is defined as a: grandparent, brother, sister, uncle, aunt and includes half siblings and step-parents; it does not include great aunt or uncles, great grandparents or cousins.
- The school will notify the local authority to allow the local authority to check the arrangement is suitable and safe for the child.
- Parents and private foster carers both have a legal duty to inform the relevant local authority at least six weeks before the arrangement is due to start; not to do so is a criminal offence.
- Whilst most privately fostered children are appropriately supported and looked after, they are
  a potentially vulnerable group who should be monitored by the local authority, particularly
  when the child has come from another country. In some cases privately fostered children are
  affected by abuse and neglect, or be involved in trafficking, child sexual exploitation or
  modern-day slavery.
- Schools have a mandatory duty to report to the local authority where they are aware or suspect that a child is subject to a private fostering arrangement. Although schools have a duty to inform the local authority, there is no duty for anyone, including the private foster carer or social workers to inform the school. However, it should be clear to the school who has parental responsibility.
- School staff should notify the designated safeguarding lead when they become aware of
  private fostering arrangements. The designated safeguarding lead will speak to the family of
  the child involved to check that they are aware of their duty to inform the LA. The school itself
  has a duty to inform the local authority of the private fostering arrangements.
- On admission to the school, we will take steps to verify the relationship of the adults to the child who is being registered

# Looked after children and previously looked after children

We recognise that looked after children (children in care) are particularly vulnerable - the most common reason for children becoming looked after is as a result of abuse and/or neglect.

The DSL will liaise with the Designated Teacher for Looked After Children to ensure that appropriate staff have the information they need in relation to a child's looked after legal status i.e. whether they are looked after:

- under voluntary arrangements with consent of parents or
- on an interim or full care order

and contact arrangements with birth parents or those with parental responsibility. They should also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her.

The DSL will ensure details of the child's social worker and the name of the virtual school head in the authority that looks after the child are recorded on SchoolPod.

Our staff understand that previously looked after children potentially remain vulnerable. This status will be highlighted to staff.

# Children with an allocated Social Worker

At Ipswich Hospital School we recognise that when a child has a social worker, it is an indicator that the child is more at risk than most pupils. This may mean that they more vulnerable to further harm, as well as facing educational barriers to attendance, learning, behaviour and poor mental health. We take these needs into account when making plans to support pupils who have a social worker.

From June 2021, the Virtual Headteacher has responsibility to promote the education of children who have a Social Worker and our school Designated Safeguarding Lead will ensure they liaise with this service.

# Mental Health

All staff at Ipswich Hospital School are aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. School staff are not expected or trained to diagnose mental health conditions or issues, but may notice behaviours that may be of concern.

Where staff have a mental health concern about a child that may also be a safeguarding concern, they should raise the issue immediately by informing the designated safeguarding lead or deputy, following our Raedwald Trust policies. More information can be found in the Mental Health and Behaviour in Schools guidance, at https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2

# Types of abuse and neglect

Types of Abuse and Neglect can be found in 'Keeping Children Safe in Education (2021)' (Part 1). All Trust staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases multiple issues will overlap with one another.

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

- Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.
   Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
- Emotional abuse: the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.
- Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
- Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

# Specific safeguarding issues

- All staff have an awareness of safeguarding issues some of which are listed below. Staff are
  made aware that behaviours linked to the likes of drug taking, alcohol abuse, truanting and
  sharing nudes and semi-nudes (previously known as sexting) put children in danger.
- All staff are made aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but not limited to: bullying (including cyber bullying),

physical abuse such as hitting, kicking, shaking, biting, hair pulling or otherwise causing physical harm, sexual violence/sexual harassment, gender-based violence, sharing nudes and seminudes (previously known as sexting) and limitation/hazing type violence and rituals. Staff are clear about our policy and procedures with regards to peer on peer abuse.

- All staff are aware of the changes to the Voyeurism (Offences) Act 2019 which criminlaise the
  act of 'upskirting'. The Crown Prosecution Service (CPS) defines 'upskirting' as a colloquial term
  referring to the actin of placing equipment such as a camera or mobile phone beneath a
  person's clothing to take a voyeuristic photograph without their permission. It is not only
  confined to victims wearing skirts or dresses and equally applies when men or women are
  wearing kilts, cassocks shorts or trousers. It is often performed in crowded public places, for
  example on public transport or at music festivals, which can make it difficult to notice offenders.
- We are aware that safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside the school. All staff, but especially the DSL (or deputy) should be considering the context within which such incidents and/or behaviours occur. This is known as contextual safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare. The Academy assesses the risks and issues in the wider community when considering the well-being and safety of its pupils. Children's social care assessments should also consider children being harmed outside of the home with regards to contextual safeguarding, so it is important that we provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and the full context of any abuse.

#### Online safety

- In our schools our pupils increasingly work online, we recognise that it is crucial to safeguard our pupils from potentially harmful and inappropriate online material. When children use the school's network to access the internet, they are protected from inappropriate content by our filtering and monitoring systems. However, many pupils are able to access the internet using their own data plan. To minimise inappropriate use, as a Trust we have put together an ESafety guidance document on how to safely access online learning whilst out of school. We ask all pupils to sign this document as agreement that they have read and understood the guidance.
- Staff undergo regular updated safeguarding training, including online safety.
- Children are taught about safeguarding, including online safety, throughout the curriculum and particularly during PSHE.
- Safeguarding training for staff, including online safety training, is integrated, aligned and considered as part of the whole school safeguarding approach and wider staff training and curriculum planning.
- Teachers manage behaviour effectively to ensure a good and safe educational environment and they have a clear understanding of the needs of all pupils.

Within online safety, the breadth of issues can be categorised into four areas of risk:

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

The Raedwald Trust Online Safety policy incorporates further information regarding use of mobile phones and smart technology, and the school's approach to keeping children safe. This also reflects the fact that many children have unlimited and unrestricted access to the internet via mobile phone networks (i.e. 3G, 4G, 5G). This access means some children, whilst at Ipswich Hospital School, could sexually harass their peers via their mobile and smart technology, share indecent images: consensually and non-consensually (often via large chat groups) and view and share pornography and other harmful content.

#### Trauma

# **Definition of Trauma**

Raedwald Trust has adopted a wider definition of trauma which encompass *any* event that is experienced as frightening, painful or out of control, characterised by there being no one available to support or mitigate the impact of traumatic toxic stress. Day-to-day exposure to events such as divorce, loss of a loved one, illness within the family, preparing for an exam or moving to a new house can be experienced as traumatic.

Children who have experienced traumatic events in their past can have more emotional and mental health needs, as well as more behavioural difficulties than most children. Early life trauma impacts on their brain development. Understanding how this trauma impacts the development of the brain allows us to understand the resulting behaviours.

Our aim is to ensure pupils have stability and feel secure and safe; succeed in their learning; develop good relationships with others; and become independent and enthusiastic learners. We will ensure we identify needs as they arise and to provide support as early as possible; monitor situations and need; work in a productive partnership with other agencies to ensure there is a multi-professional approach; and support our pupils' wellbeing and mental health.

At Raedwald Trust we do not discriminate and will make reasonable adjustments.

**Trauma can occur** through a variety of ways which can be deemed as frightening, out of control or painful. Some examples of trauma would be: death of family; illness; separation or divorce; moving

house; entering the care system; exams; early childhood experiences; witnessing or experiencing abuse; and the ongoing effects of Covid-19.

At the Raedwald Trust, we will continue to support all pupils through working closely with other agencies and professionals such Educational Psychologists (EP), Social Services, School Nursing team, Health Professionals, mental health services and the Early Help teams, to ensure that the needs of the child are identified and met.

# Opportunities to teach safeguarding

In our schools we ensure our pupils are taught about safeguarding, including online, through various teaching and learning opportunities, as part of providing a broad and balanced curriculum. Children are taught to recognise when they are at risk and how to get help when they need it. This may include covering relevant issues through personal, social, health and economic education (PSHE), and through relationship and sex education (RSE).

Across the curriculum at Ipswich Hospital School, pupils are introduced to, and encouraged to use a skills based approach to keeping themselves safe. These skills are introduced through PSHE lessons and include risk taking, recognition of healthy and unhealthy relationships and coercive behaviour. Students are then supported, within the safety of the school community, to develop their use of these skills in appropriate and effective ways.

# Allegations of abuse made against other children (peer on peer abuse)

Our staff recognise that children are capable of abusing their peers. In a situation where child abuse is alleged to have been carried out by another child, our child protection procedures should be adhered to for both the victim and the alleged abuser; this means it should be considered as a child care and protection issue for both children.

Peer on peer abuse can take many forms, and gender issues can be prevalent when dealing with this type of abuse this could for example include girls being sexually touched/assaulted or boys being subject to initiation/hazing type violence.

Annex A contains important additional information about specific forms of abuse and safeguarding issues.

# **Dealing with Disclosures**

If a pupil asks to speak to you about a problem do not promise confidentiality but explain that it may be necessary to consult a colleague.

Always stop and listen straight away to someone who wants to tell you about incidents or suspicions of abuse. Listen quietly and actively, giving your undivided attention. Allow silences when needed. Do not show shock or disbelief but take what is said seriously.

#### Reassure

Stay calm, no judgements, empathise. Never make a promise that you can keep what a child has said a secret. Give reassurance that only those who need to know will be told. Reassure the young person that they were right to tell you.

#### React

React to the pupil only as far as is necessary for you to establish whether or not you need to refer this matter, but don't interrogate for full details.

Don't ask leading questions – keep the open questions e.g. 'is there anything else you want to say?'

If you need to try to get more details again keep to open questions, "tell me a bit more about that"

If you do ask questions remember to record the questions you ask as well as the responses the young person gives.

Do not criticise the perpetrator; the student may have affection for him/her.

Explain what you will do next – inform designated teacher, keep in contact.

#### Record

If possible make brief notes about what they are actually telling you at the time. Keep these notes, however rough they are. If you are unable to make notes at the time write down what was said as soon as you can.

Record what was actually said by the pupil rather than your interpretation of what they are telling you, be factual at all times.

Record the date, time, place and any noticeable nonverbal behaviour.

Record the information as a safeguarding concern on SchoolPod.

#### Report

Report the incident to the DSL and do not tell any other adults or pupils what you have been told.

Never attempt to carry out an investigation of suspected abuse by interviewing the pupil or any others involved. This is a highly skilled role and any attempts by yourself could affect possible criminal proceedings.

# How will we respond to concerns or allegations of peer-on-peer abuse?

The DSL/DDSL will discuss the concern or allegation with the member of staff who has reported it and will, where necessary, take any immediate steps to ensure the safety of the child/all children affected.

Where any concern or allegation indicates that indecent images of a child or children may have been shared online, the DSL/DDSL will consider what urgent action can be taken in addition to the actions and referral duties set out in this policy.

DSL/DDSLs will always use their professional judgement to assess the nature and seriousness of the alleged behaviour and determine whether it is appropriate for the alleged behaviour to be to be dealt with internally and, if so, whether any external specialist support is required. In borderline cases the DSL/DDSL may wish to consult with children's social care or other relevant agencies in accordance with the Local Safeguarding Partnership's procedures on a no-names basis (where possible) to determine the most appropriate response.

Where the DSL/DDSL considers or suspects that the alleged behaviour in question might be abusive or violent on a spectrum or where the needs and circumstances of the individual child/children in question might otherwise require it, the DSL/DDSL should contact children's social care and/or the police immediately and, in any event, within 24 hours of the DSL/DDSL becoming aware of the alleged behaviour.

The DSL/DDSL will discuss the concern(s) or allegation(s) with the agency and agree on a course of action.

The DSL/DDSL will always refer to the police if there are aggravating factors:

- If the incident involves an adult (over 18).
- If there are concerns about the capacity to consent (inc SEND).
- Images show atypical sexual behaviour for their development stage or abusive, violent or harmful acts.
- Images show sex acts with a child under age 13.
- The disclosure places the pupil (or any child) at risk of imminent harm (self-harm, exploitation, harmful response from home etc).

# APPENDIX A – SPECIFIC FORMS OF ABUSE AND SAFEGUARDING ISSUES

Issues covered in this annex:

- Children and the court system
- Children missing from education
- Children with family members in prison
- Child criminal exploitation (CCE)
- Child sexual exploitation (CSE)
- County lines
- Domestic abuse
- Homelessness
- So-called 'honour-based' abuse (including female genital mutilation and forced marriage)
- FGM
- Forced Marriage
- Preventing radicalisation
- The Prevent Duty
- Channel
- Peer on peer/child on child abuse
- Sexual violence and sexual harassment between children in schools and colleges
- Upskirting
- The response to a report of sexual violence or sexual harassment

All sections are taken from Keeping Children Safe in Education 2021.

# Children and the court system

- Children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. There are two age appropriate guides to support children 5-11-year olds and 12-17 year olds.
- The guides explain each step of the process, support and special measures that are available. There are diagrams illustrating the courtroom structure and the use of video links is explained.
- Making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. The Ministry of Justice has launched an online child arrangements information tool with clear and concise information on the dispute resolution service. This may be useful for some parents and carers.

# Children missing from education

All staff should be aware that children going missing, particularly repeatedly, can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect, which may include sexual abuse or exploitation and can also be a sign of child criminal exploitation including involvement in county lines. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation or risk of forced marriage. Early intervention is necessary to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future. Staff should be aware of their school's or college's unauthorised absence and children missing from education procedures.

# Children with family members in prison

Approximately 200,000 children in England and Wales have a parent sent to prison each year.
 These children are at risk of poor outcomes including poverty, stigma, isolation and poor mental health. NICCO provides information designed to support professionals working with offenders and their children, to help mitigate negative consequences for those children.

# Child Criminal Exploitation (CCE)

- CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence.
- The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.
- CCE can include children being forced to work in cannabis factories, being coerced into
  moving drugs or money across the country (county lines, see page 85 for more information),
  forced to shoplift or pickpocket, or to threaten other young people.
- Some of the following can be indicators of CCE:
  - children who appear with unexplained gifts or new possessions;
  - children who associate with other young people involved in exploitation;
  - children who suffer from changes in emotional well-being;
  - children who misuse drugs and alcohol;
  - children who go missing for periods of time or regularly come home late; and
  - children who regularly miss school or education or do not take part in education
- The experience of girls who are criminally exploited can be very different to that of boys. The indicators may not be the same, however professionals should be aware that girls are at risk of criminal exploitation too. It is also important to note that both boys and girls being criminally exploited may be at higher risk of sexual exploitation.

# Child Sexual Exploitation (CSE)

- CSE occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology. CSE can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person's immediate knowledge (e.g. through others copying videos or images they have created and posted on social media). CSE is a form of child sexual abuse.
- Indicators of CSE may include:
  - Acquisition of money, clothes, mobile phones, etc. without plausible explanation;
  - Gang-association and/or isolation from peers/social networks;
  - Exclusion or unexplained absences from school, college or work;
  - Leaving home/care without explanation and persistently going missing or returning late;

Excessive receipt of texts/phone calls;

- Returning home under the influence of drugs/alcohol;
- Inappropriate sexualised behaviour for age/sexually transmitted infections;
- Evidence of/suspicions of physical or sexual assault;
- Relationships with controlling or significantly older individuals or groups;
- Multiple callers (unknown adults or peers);
- Frequenting areas known for sex work;
- Concerning use of internet or other social media;
- Increasing secretiveness around behaviours; and
- Self-harm or significant changes in emotional well-being.
- Potential vulnerabilities include:

Although the following vulnerabilities increase the risk of child sexual exploitation, it must be remembered that not all children with these indicators will be exploited. Child sexual exploitation can occur without any of these issues.

- Having a prior experience of neglect, physical and/or sexual abuse;
- Lack of a safe/stable home environment, now or in the past (domestic abuse or parental substance misuse, mental health issues or criminality, for example);
- Recent bereavement or loss;
- Social isolation or social difficulties;
- Absence of a safe environment to explore sexuality;
- Economic vulnerability;
- Homelessness or insecure accommodation status;
- Connections with other children and young people who are being sexually exploited;
- Family members or other connections involved in adult sex work;
- Having a physical or learning disability;
- Being in care (particularly those in residential care and those with interrupted care histories); and
- Sexual identity.

More information can be found in: Child sexual exploitation: Definition and a guide for practitioners (DfE 2017)

# County lines

- County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs (primarily crack cocaine and heroin) into one or more importing areas [within the UK], using dedicated mobile phone lines or other form of "deal line".
- Exploitation is an integral part of the county lines offending model with children and vulnerable adults exploited to move [and store] drugs and money. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims.
- Children can be targeted and recruited into county lines in a number of locations including schools, further and higher educational institutions, pupil referral units, special educational needs schools, children's homes and care homes. Children are often recruited to move drugs and money between locations and are known to be exposed to techniques such as 'plugging', where drugs are concealed internally to avoid detection. Children can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious

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

Further information on the signs of a child's involvement in county lines is available in guidance published by the Home Office.

# Serious Violence

- Staff are aware of the indicators, which may signal children are at risk from, or are involved
  with serious violent crime. These may include increased absence from school, a change in
  friendships or relationships with older individuals or groups, a significant decline in
  performance, signs of self-harm or a significant change in wellbeing, or signs of assault or
  unexplained injuries. Unexplained gifts or new possessions could also indicate that children
  have been approached by, or are involved with, individuals associated with criminal networks
  or gangs and may be at risk of criminal exploitation.
- Staff are aware of the range of risk factors which increase the likelihood of involvement in serious violence, such as being male, having been frequently absent or permanently excluded from school, having experienced child maltreatment and having been involved in offending, such as theft or robbery. Advice for schools and colleges is provided in the Home Office's Preventing youth violence and gang involvement and its Criminal exploitation of children and vulnerable adults: county lines guidance.

# <u>Domestic abuse</u>

In April 2021, the Domestic Abuse Act 2021 received Royal Assent and introduced a statutory definition for the first time.

Definition: The Domestic Abuse Act 2021 (Part 1) defines domestic abuse as any of the following behaviours, either as a pattern of behaviour, or as a single incident, between two people over the age of 16, who are 'personally connected' to each other:

- (a) physical or sexual abuse;
- (b) violent or threatening behaviour;
- (c) controlling or coercive behaviour;
- (d) economic abuse (adverse effect of the victim to acquire, use or maintain money or other property; or obtain goods or services); and
- (e) psychological, emotional or other abuse.

People are 'personally connected' when they are, or have been married to each other or civil partners; or have agreed to marry or become civil partners. If the two people have been in an

intimate relationship with each other, have shared parental responsibility for the same child, or they are relatives.

The definition of Domestic Abuse applies to children if they see or hear, or experience the effects of, the abuse; and they are related to the abusive person.

Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and child/adolescent to parent violence and abuse. Anyone can be a victim of domestic abuse, regardless of sexual identity, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home.

# **Operation Encompass**

• Operation Encompass operates in the majority of police forces across England. It helps police and schools work together to provide emotional and practical help to children. The system ensures that when police are called to an incident of domestic abuse, where there are children in the household who have experienced the domestic incident, the police will inform the key adult (usually the designated safeguarding lead) in school before the child or children arrive at school the following day. This ensures that the school has up to date relevant information about the child's circumstances and can enable support to be given to the child according to their needs. Police forces not signed up to operation encompass will have their own arrangements in place.

# National Domestic Abuse Helpline

 Refuge runs the National Domestic Abuse Helpline, which can be called free of charge and in confidence, 24 hours a day on 0808 2000 247. Its website provides guidance and support for potential victims, as well as those who are worried about friends and loved ones. It also has a form through which a safe time from the team for a call can be booked.

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

- NSPCC- UK domestic-abuse Signs Symptoms Effects
- Refuge what is domestic violence/effects of domestic violence on children
- SafeLives: young people and domestic abuse.

# <u>Homelessness</u>

• Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The designated safeguarding lead (and any deputies) should be aware of contact details and referral routes in to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity. Indicators that a family may be at risk of homelessness include household debt, rent arrears, domestic abuse and anti-social behaviour, as well as the family being asked to leave a property. Whilst referrals and/or discussion with the Local Housing Authority should be progressed as appropriate, and in accordance with local procedures, this does not, and should not, replace a referral into children's social care where a child has been harmed or is at risk of harm.

- The Homelessness Reduction Act 2017 places a new legal duty on English councils so that everyone who is homeless or at risk of homelessness will have access to meaningful help including an assessment of their needs and circumstances, the development of a personalised housing plan, and work to help them retain their accommodation or find a new place to live. The following factsheets usefully summarise the new duties: Homeless Reduction Act Factsheets. The new duties shift focus to early intervention and encourage those at risk to seek support as soon as possible, before they are facing a homelessness crisis.
- In most cases school and college staff will be considering homelessness in the context of children who live with their families, and intervention will be on that basis. However, it should also be recognised in some cases 16 and 17 year olds could be living independently from their parents or guardians, for example through their exclusion from the family home, and will require a different level of intervention and support. Children's services will be the lead agency for these young people and the designated safeguarding lead (or a deputy) should ensure appropriate referrals are made based on the child's circumstances. The department and the Ministry of Housing, Communities and Local Government have published joint statutory guidance on the provision of accommodation for 16 and 17 year olds who may be homeless and/or require accommodation.
- Further guidance on how Social Care and Housing authorities should work together to prevent 16/17 year olds becoming homeless, and how the duty to refer should operate in this context, can be found in the 'Prevention of homelessness and provision of accommodation for 16 and 17 year old young people who may be homeless and/or require accommodation guidance' p.23 'Working Together to Safeguard Children 2018 (copyright 2020)

# So-called 'honour-based' abuse (including Female Genital Mutilation and Forced Marriage)

• So-called 'honour-based' abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBA are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBA, or already having suffered HBA. Where staff are concerned that a child might be at risk of HBA, they must contact the Designated Safeguard Lead.

# **Actions**

 If staff have a concern regarding a child that might be at risk of HBA or who has suffered from HBA, they should speak to the designated safeguarding lead (or deputy). As appropriate, they will activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care. Where FGM has taken place, since 31 October 2015 there has been a mandatory reporting duty placed on teachers that requires a different approach (see following section).

# **FGM**

- FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.
- FGM typically takes place between birth and around 15 years old; however, it is believed that the majority of cases happen between the ages of 5 and 8.
- Risk factors for FGM include:
  - low level of integration in to UK society
  - mother or a sister who has undergone FGM
  - girls who are withdrawn from PSHE
  - visiting female elder from the country of origin
  - being taken on a long holiday to the country of origin
  - talk about a 'special procedure to become a woman'
- Symptoms of FGM:
  - FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out of school to visit an 'at risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM. Staff should not assume that FGM only happens outside the UK.
- Indications that FGM may have already taken place may include:
  - difficulty walking, sitting or standing and may even look uncomfortable.
  - spending longer than normal in the bathroom or toilet due to difficulties urinating.
  - spending long periods of time away from a classroom during the day with bladder or menstrual problems.
  - frequent urinary, menstrual or stomach problems.
  - prolonged or repeated absences from school or college, especially with noticeable behaviour changes (e.g. withdrawal or depression) on the girls return.
  - the reluctance to undergo normal medical examinations.
  - confiding in a professional without being explicit about the problem due to embarrassment or fear.
  - talking about pain or discomfort between her legs

# FGM mandatory reporting duty for teachers

- Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon teachers along with regulated health and social care professionals in England and Wales, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases may face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils or students, but the same definition of what is meant by "to discover that an act of FGM appears to have been carried out" is used for all professionals to whom this mandatory reporting duty applies.
- Teachers must personally report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has good reason not to, they should still consider and discuss any such case with the school's or college's designated safeguarding lead

(or deputy) and involve children's social care as appropriate. The duty does not apply in relation to at risk or suspected cases (i.e. where the teacher does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is 18 or over. In these cases, teachers should follow local safeguarding procedures.

# Forced marriage

- Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some perpetrators use perceived cultural practices as a way to coerce a person into marriage. Schools and colleges can play an important role in safeguarding children from forced marriage.
- The Forced Marriage Unit has published statutory guidance and Multi-agency guidelines, pages 35-36 of which focus on the role of schools and colleges. School and college staff can contact the Forced Marriage Unit if they need advice or information: Contact: 020 7008 0151 or email fmu@fco.gov.uk.

# Preventing radicalisation

- Children are vulnerable to extremist ideology and radicalisation. Similar to protecting children from other forms of harms and abuse, protecting children from this risk is part of our safeguarding approach.
  - Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.
  - Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.
  - 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 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.
- There is no single way of identifying whether a child is likely to be susceptible to an extremist ideology. Background factors combined with specific influences such as family and friends may contribute to a child's vulnerability. Similarly, radicalisation can occur through many different methods (such as social media or the internet) and settings (such as within the home).
- However, it is possible to protect vulnerable people from extremist ideology and intervene to
  prevent those at risk of radicalisation being radicalised. As with other safeguarding risks, staff
  should be alert to changes in children's behaviour, which could indicate that they may be in
  need of help or protection. Staff should use their judgement in identifying children who might
  be at risk of radicalisation and act proportionately which may include the designated
  safeguarding lead (or deputy) making a Prevent referral.

• The Academy's designated safeguarding lead (and deputies) are also aware of local procedures for making a Prevent referral.

# The Prevent duty

As part of the Counter Terrorism and Security Act 2015, schools have a duty to 'prevent people being drawn into terrorism'. This has become known as the 'Prevent Duty'.

Where staff are concerned that children and young people are developing extremist views or show signs of becoming radicalized, they should discuss this with the Designated Safeguarding Lead.

The Designated Safeguarding Lead has received training about the Prevent Duty and tackling extremism and is able to support staff with any concerns they may have.

We use the curriculum to ensure that children and young people understand how people with extreme views share these with others, especially using the internet.

Staff should be alert to changes in children's behavior, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the DSL or DDSL making a Prevent referral.

We are committed to ensuring that our pupils are offered a broad and balanced curriculum that aims to prepare them for life in modern Britain. Teaching the school's core values alongside the fundamental British Values supports quality teaching and learning, whilst making a positive contribution to the development of a fair, just and civil society.

# Recognising Extremism

Early indicators of radicalisation or extremism may include:

- showing sympathy for extremist causes
- glorifying violence, especially to other faiths or cultures
- making remarks or comments about being at extremist events or rallies outside school
- evidence of possessing illegal or extremist literature
- advocating messages similar to illegal organisations or other extremist groups
- out of character changes in dress, behaviour and peer relationships (but there are also very powerful narratives, programmes and networks that young people can come across online so involvement with particular groups may not be apparent.)
- secretive behaviour
- online searches or sharing extremist messages or social profiles
- intolerance of difference, including faith, culture, gender, race or sexuality
- graffiti, art work or writing that displays extremist themes
- attempts to impose extremist views or practices on others
- verbalising anti-Western or anti-British views
- advocating violence towards others

# Channel

Channel is a voluntary, confidential support programme which focuses on providing support
at an early stage to people who are identified as being vulnerable to being drawn into
terrorism. Prevent referrals may be passed to a multi-agency Channel panel, which will discuss
the individual referred to determine whether they are vulnerable to being drawn into
terrorism and consider the appropriate support required. A representative from the school or
college may be asked to attend the Channel panel to help with this assessment. An
individual's engagement with the programme is entirely voluntary at all stages. Guidance on
Channel is available.

# Additional support

- The department has published further advice for schools on the Prevent duty. The advice is intended to complement the Prevent guidance and signposts to other sources of advice and support.
- The Home Office has developed three e-learning modules:
  - Prevent awareness e-learning offers an introduction to the Prevent duty.
  - Prevent referrals e-learning supports staff to make Prevent referrals that are robust, informed and with good intention.
  - Channel awareness e-learning is aimed at staff who may be asked to contribute to or sit on a multi-agency Channel panel.
- Educate Against Hate, is a government website designed to support school teachers and leaders to help them safeguard their students from radicalisation and extremism. The platform provides free information and resources to help school staff identify and address the risks, as well as build resilience to radicalisation.
- For advice specific to further education, the Education and Training Foundation (ETF) hosts the Prevent for FE and Training. This hosts a range of free, sector specific resources to support further education settings comply with the Prevent duty. This includes the Prevent Awareness e-learning, which offers an introduction to the duty, and the Prevent Referral e-learning, which is designed to support staff to make robust, informed and proportionate referrals.
- The ETF Online Learning environment provides online training modules for practitioners, leaders and managers, support staff and governors/Board members outlining their roles and responsibilities under the duty.

# Peer on peer/ child on child abuse

- Children can abuse other children and this can happen both inside and outside of school. This
  is generally referred to as peer on peer abuse and can take many forms. This can include (but
  is not limited to): abuse within intimate personal relationships; bullying (including
  cyberbullying, prejudice-based and discriminatory bullying); sexual violence and sexual
  harassment; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise
  causing physical harm.
- Abuse is abuse and should never be tolerated or passed off as "banter" or "part of growing up". Different gender issues can be prevalent when dealing with peer on peer abuse. This could for example include girls being sexually touched/assaulted or boys being subject to

initiation-type violence. We recognise that it is more likely that girls will be victims and boys perpetrators, but that all peer on peer abuse is unacceptable and will be taken seriously.

- At Ipswich Hospital School we believe that all children have a right to attend school and learn in a safe environment. Children should be free from harm by adults in the school and other students. We recognise that some students will sometimes negatively affect the learning and wellbeing of others and their behaviour will be dealt with under the school's Behaviour Policy. Staff can recognise the indicators and signs of peer on peer abuse and know how to identify it and report it via Raedwald Trust systems.
- All staff are clear on the School's policy and procedures with regards to peer on peer abuse
  and the important role they have to play in preventing it and responding where they believe
  a child may be at risk from it.
- There are systems in place for children to confidently report abuse, knowing their concerns will be treated seriously. There are clear processes in place to support victims, perpetrators and other children affected by peer on peer abuse.
- Behaviour incident logs are regularly reviewed to help identify any changes in behaviour and/or concerning patterns or trends at an early stage.

All staff recognise that even if there are no reported cases of peer on peer abuse, such abuse may still be taking place and is simply not being reported.

Occasionally, allegations may be made against students by others in the school, which are of a safeguarding nature. Safeguarding issues raised in this way may include physical abuse, emotional abuse, sexual abuse and sexual exploitation. It is likely that to be considered a safeguarding allegation against a pupil, some of the following features will be found.

# The allegation:

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

At Ipswich Hospital School we will support the victims of peer on peer abuse.

In cases of sharing nudes and semi-nudes (previously known as sexting) we follow guidance given to schools and colleges by the UK Council for Child Internet Safety (UKCIS) published in 2020: 'Sharing nudes and semi-nudes'

<u>Sexual violence and sexual harassment between children in schools and colleges</u>

Context

- Sexual violence and sexual harassment can occur between two children of any age and sex. It
  can also occur through a group of children sexually assaulting or sexually harassing a single
  child or group of children.
- 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. Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physical and verbal) and are never acceptable. It is important that all victims are taken seriously, kept safe and not made to feel like they are creating a problem for reporting abuse, sexual violence or sexual harassment, and offered appropriate support. Staff should be aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk.
- Staff should be aware of the importance of:
  - making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up;
  - not tolerating or dismissing sexual violence or sexual harassment as "banter", "part of growing up", "just having a laugh" or "boys being boys"; and
  - challenging behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them.

# What is sexual violence and sexual harassment?

# Sexual violence

• It is important that school and college staff are aware of sexual violence and the fact children can, and sometimes do, abuse their peers in this way. When referring to sexual violence we are referring to sexual violence offences under the Sexual Offences Act 2003 as described below:

**Rape**: A person (A) commits an offence of rape if: he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.

**Assault by Penetration:** A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.

**Sexual Assault:** A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents.

**What is consent?** Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal or oral

penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

Educating pupils about consent includes teaching them basic facts such as:

- a child under the age of 13 can never consent to any sexual activity
- the age of consent is 16
- sexual intercourse without consent is rape

# Sexual harassment

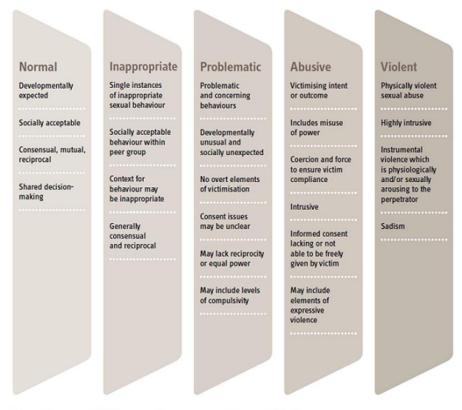
- When referring to sexual harassment we mean 'unwanted conduct of a sexual nature' that
  can occur online and offline. When we reference sexual harassment, we do so in the context
  of child on child sexual harassment. Sexual harassment is likely to: violate a child's dignity,
  and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive
  or sexualised environment.
- Whilst not intended to be an exhaustive list, sexual harassment can include:
  - sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
  - sexual "jokes" or taunting;
  - physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (schools and colleges should be considering when any of this crosses a line into sexual violence it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature; and
  - online sexual harassment. This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include:
  - non-consensual sharing of sexual images and videos;
  - sexualised online bullying;
  - unwanted sexual comments and messages, including, on social media;
  - sexual exploitation; coercion and threats; and
  - Upskirting

# Understanding behaviour

We understand that all behaviour takes place on a spectrum. Understanding where a child's behaviour falls on a spectrum is essential to being able to respond appropriately to it.

#### Sexual Behaviour:

Simon Hackett has proposed the following continuum model to demonstrate the range of sexual behaviours presented by children, which may be helpful when seeking to understand a pupil's sexual behaviour and deciding how to respond to it.



A continuum of children and young people's sexual behaviours (Hackett, 2010)

Hackett's continuum relates exclusively to sexual behaviours and is not exhaustive.

In addition, we use the Brook Sexual Behaviours Traffic Light Tool to help professionals working with children to distinguish between three levels of sexual behaviour – green, amber and red, and to respond according to the level of concern.

https://www.brook.org.uk/our-work/category/sexual-behaviours-traffic-light-tool

# **Upskirting**

• The Voyeurism (Offences) Act, which is commonly known as the Upskirting Act, came into force on 12 April 2019. 'Upskirting' is where someone takes a picture under a persons clothing (not necessarily a skirt) without their permission and or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress or alarm. It is a criminal offence. Anyone of any gender, can be a victim.

# The response to a report of sexual violence or sexual harassment

The initial response to a report from a child is important. It is essential that all victims 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

- sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.
- If staff have a concern about a child or a child makes a report to them, they should follow the referral process as per Raedwald Trust reporting guidance. As is always the case, if staff are in any doubt as to what to do they should speak to the designated safeguarding lead (or a deputy).
- Following a report of sexual violence or sexual harassment, the safeguarding team will ensure they are supported in dealing with this by following the guidance in Part 5 of Keeping Children Safe in Education (2021), alongside the separate guidance 'Sexual violence and sexual harassment between children in schools and colleges'.

#### \*PART FOUR: **RESPONSE TO REPORTS**

See also KCSIE Part 5

#### REPORT RECEIVED

(from the victim or third-party) [Onsite, offsite or online]

# **Definitions**

Sexual Violence

Rape Assault by penetration Sexual assault

Sexual Harassment

Unwanted conduct of a sexual nature, including sexual remarks, sexual taunts, physical behaviour or online sexual harassment

#### Victim reassured

- taken seriously and kept safe; and never be given an impression they are creating a problem
- confidentiality not promised
- listen to victim, non-judgementally
- record the disclosure (facts as reported)
- two staff present (one being the DSL, or reported to DSL as soon as possible)
- victim sensitively informed about referral to other agencies
- if victim does not give consent to share, staff may still lawfully share in order to protect child from harm and to promote the welfare of children (see 'Sexual Violence and Sexual Harassment' paragraph 62)
- parents of victim informed, unless this would put victim at greater risk.

Anonymity

Note that in cases of sexual violence there is legal protection of the victim's identity. Remember that this also includes sharing on social media and discussion amongst pupils in the school.

#### Record-keeping

Remember, to record all concerns, discussions, decisions and reasons for decisions.

#### Considerations

(Sexual Violence, Sexual Harassment and Harmful Sexual Behaviours) Immediately: Consider how to support the victim and the alleged perpetrator

- wishes of the victim
- nature of the alleged incident
- ages of the children
- development stage of the child
- any power imbalance
- one-off, or part of a pattern of behaviour
- any ongoing risks to victim or others
- other related issues and wider context (eg. CSE)

#### MANAGE INTERNALLY

One-off incidents which the school believes that the child(ren) are not in need of early help or statutory intervention, which would be appropriate to deal with internally under the school's behaviour policy or anti-bullying policy.

#### **EARLY HELP**

Non-violent Harmful Sexual Behaviours (see Harmful Sexual Behaviours Framework (NSPCC))

#### **REFER TO** SOCIAL CARE

All incidents where a child has

been harmed, is at risk of harm or is in immediate danger.

Social Care staff will decide next steps. Be ready to escalate if necessary.

#### **REFER TO POLICE**

All incidents of rape, assault by penetration or sexual assault.

(incl. if perpetrator is 10 or under) Discuss next steps with police, for example, disclosing information to other staff, informing alleged perpetrator and their parents.

# **RISK ASSESSMENT**

Case-by-case basis

(for details see paragraphs 69 and 70

Sexual Violence and Sexual Harassment between children in schools and colleges (DfE, 2021))

# **RISK ASSESSMENT**

**Immediately** 

Do not wait for outcome of referral before protecting victim.

Emphasis on victim being able to continue normal routines.

Alleged perpetrator removed from any classes with victim (also consider shared spaces and journey to/from school) [Not a judgement of guilt]

# SAFEGUARD AND SUPPORT VICTIM **AND (ALLEGED) PERPETRATOR**

(see separate page)

# SAFEGUARD AND SUPPORT VICTIM AND (ALLEGED) **PERPETRATOR**

(see separate page)

# DISCIPLINARY MEASURES TAKEN

(see school's Behaviour Policy/Anti-bullying Policy)

### **CRIMINAL PROCESS ENDS**

- Conviction or Caution: follow behaviour policy, consider Permanent Exclusion. If pupil remains in school, make clear expectations; keep victim and perpetrator apart. Consider victim's wishes.
- Not Guilty: Support victim and alleged perpetrator
- No Further Action: Support victim and alleged perpetrator

# DISCIPLINARY **MEASURES TAKEN**

(may be undertaken based on balance of probabilities, unless prejudicial or unreasonable)

Ensure actions do not jepordise the investigation School to work closely with police and/or other agencies

#### Source:

\*Sexual Violence and Sexual Harassment between children in schools and colleges (DfE, 2021)

SVSH Flow Chart for Schools 2021 v.1.0

www.safeguardinginschools.co.uk Andrew Hall

# Additional advice and support

# Abuse

- What to do if you're worried a child is being abused DfE advice
- Domestic abuse: Various Information/Guidance Home Office (HO)
- Faith based abuse: National Action Plan DfE advice
- Relationship abuse: disrespect nobody Home Office website

# **Bullying**

- Preventing and Tackling Bullying DfE advice
- Cyber bullying: advice for Head Teachers and school staff DfE advice

# Children missing from education, home or care

- Children missing education DfE statutory guidance
- Child missing from home or care DfE statutory guidance
- Children and adults missing strategy Home Office strategy

# Children with family members in prison

• National Information Centre on Children of Offenders - Barnardo's in partnership with HM Prison and Probation Service

# **Child Exploitation**

• Trafficking: safeguarding children - DfE and HO guidance

# Drugs

- Drugs: advice for schools DfE and ACPO advice
- Drug strategy 2017 Home Office strategy
- Information and advice on drugs Talk to Frank website
- ADEPIS platform sharing information and resources for schools: covering drug (& alcohol) prevention Website by Mentor UK

# "Honour Based Abuse" (so called)

- Female genital mutilation: information and resources- Home Office guidance
- Female genital mutilation: multi agency statutory guidance DfE, DH, and HO statutory guidance

# Health and Well-being

- Fabricated or induced illness: safeguarding children DfE, DH, HO
- Rise Above: Free PSHE resources on health, wellbeing and resilience Public Health England
- Medical-conditions: supporting pupils at school DfE statutory guidance
- Mental health and behaviour DfE advice

# Homelessness

Homelessness: How local authorities should exercise their functions - Ministry of Housing,
 Communities & Local Government guidance

# Online (see also Annex C)

• Sharing nudes and semi-nudes' - UK Council for Internet Safety

# Private fostering

• Private fostering: local authorities - DfE statutory guidance

#### Radicalisation

- Prevent duty guidance- Home Office guidance
- Prevent duty: additional advice for schools and childcare providers DfE advice
- Educate Against Hate website DfE and Home Office advice
- Prevent for FE and Training Education and Training Foundation (ETF)

# Upskirting

• Upskirting know your rights - UK Government

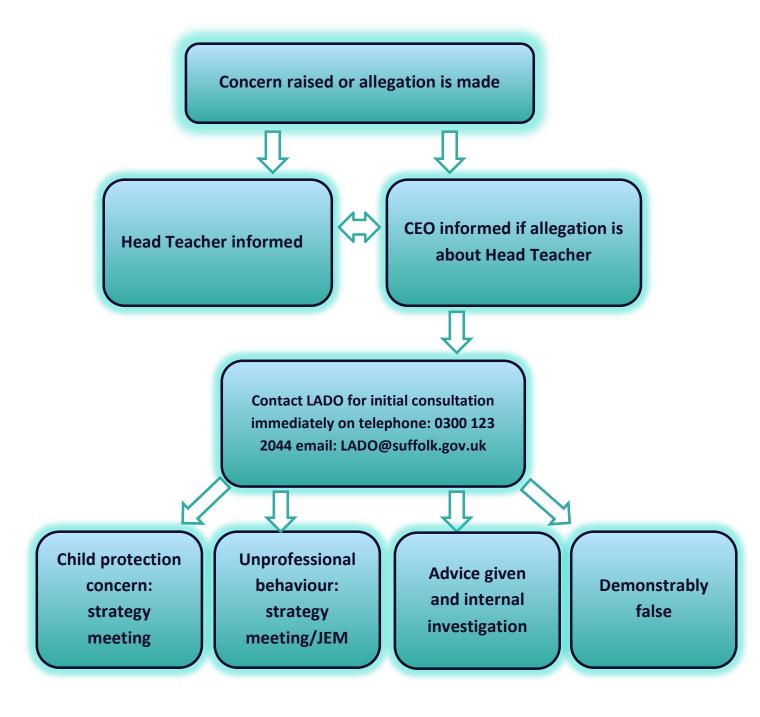
#### Violence

- Gangs and youth violence: for schools and colleges Home Office advice
- Ending violence against women and girls 2016-2020 strategy Home Office strategy
- Violence against women and girls: national statement of expectations for victims Home Office guidance
- Sexual violence and sexual harassment between children in schools and colleges DfE advice
- Serious violence strategy Home Office Strategy

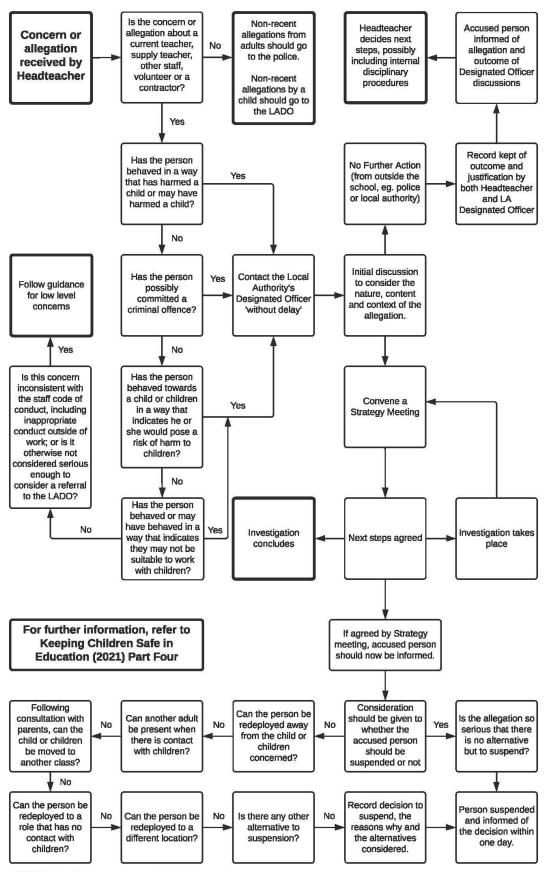
# APPENDIX B – ALLEGATIONS AGAINST STAFF FLOW CHART

The Raedwald Trust and its academies operate in a culture of openness and transparency in all matters including safeguarding. Please refer to our Managing Allegations Against Staff Policy available on our website for full details of how we respond to an allegation against a staff member.

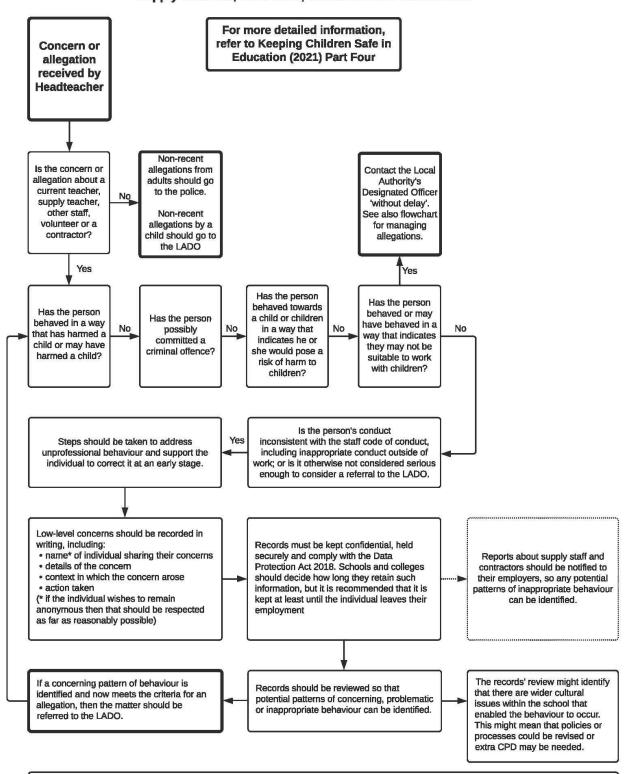
If you have a concern that a person who works with children and young people may have behaved inappropriately or you have received information that may constitute an allegation you must:



# Allegations made against/Concerns raised in relation to teachers, including supply teachers, other staff, volunteers



# Managing low level concerns raised in relation to teachers, including supply teachers, other staff, volunteers and contractors



#### What is a low level concern?

The term 'low-level' concern does not mean that it is insignificant, it means that the behaviour towards a child does not meet the threshold set out at KCSIE (2021) paragraph 338. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' - that an adult working in or on behalf of the school or college 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 LADO.

# **APPENDIX C**

Raedwald Trust: Early Help Offer		
SSCB website.	Important information for parents and professionals across Suffolk in relation to keeping children safe and avenues of support including early help options.	
	http://www.sscb.org.uk/	
	(Suffolk Safeguarding Children's Board)	
RT universal support for all RT pupils and families.	All RT staff are available in a pastoral capacity should parents or carers have a concern about anything at all. RT staff may not have the answer but will try to find out the answer or sign-post parents/other professionals in the right direction.  Parents can either talk directly with the RT staff or Head teacher. RT staff are available within office hours (9am – 4pm on weekdays during term-time).  Alderwood Academy – 01473 725860  First Base Bury St Edmunds Academy – 01284 762453	
	First Base Ipswich Academy – 01473 719553	
	Parkside Academy KS4 School – 01473 719559	
	Parkside Academy KS3 School- 01473 717013	
	St Christopher's Academy – 01473 725115	
	Westbridge Academy – 01473 251329	
RT	RT have combined PSHE (Personal Social Health Education), SRE (Sex and	
Personal	Relationships Education) and SMSC (Spiritual Moral Social and Cultural) Education	
Development	and Careers Education, Advice and Guidance and called it the Personal	
Curriculum	Development Curriculum. The comprehensive RT Personal Development curriculum covers many aspects of keeping young people safe, healthy, resilient and aware of the world around them so that they can make informed decisions. Where pupils have specific issues that need discussing or addressing we will make their Personal Development curriculum bespoke to them. Other specific topics helping pupils stay safe covered within the wellbeing curriculum include (age appropriate content): Sex education: positive relationships, contraception help/advice/where to get further information. Fertility and the impact of STIs/drugs, legal consent age and the definition of informed consent.  Gender, identity and tolerance: preventing homophobic and transphobic bullying; preventing bullying of pupils from different types of families (e.g. same sex parents); avoiding anti-gay derogatory language; Gender identity - there isn't such	
	thing as a typical girl or a typical boy. Understanding and acceptance of others different than us, including those with different religions.  Drugs: Alcohol, Smoking and illegal drugs.	
	Keeping Safe: Online safety (safe use of Facebook and internet); personal safety (out and about); How to respond to an emergency; Sharing nudes and semi-nudes	

(previously known as Sexting) - what is it, is it illegal and how to take control and stay safe. Appropriate assertiveness. How to stay safe from radicalisation and extremism, how to stay safe from teenage relationship abuse and other current safeguarding issues. Emotional well-being: Where to go for help if you, your friend or family member is struggling with emotional well-being/mental health problems, what the signs are that someone is struggling, what makes you feel good; How to look after your own emotional well-being; Personal strength and self-esteem; Stress management; more effective coping mechanisms than self-harming behaviours, suicide prevention and recognising that not everyone is happy all of the time. Relationships: How to make and maintain positive friendship; family relationships; different types of families; abusive relationships (recognition of teenage relationship abuse and peer on peer abuse) Healthy Living: Taking responsibility for managing your own health; importance of sleep; the main components of healthy living (diet, exercise and wellbeing); focus on breakfast; managing health and wellbeing when you are unwell (making sure you take your medicine when you should, have the right perspective, doing what you can do within the limitations of your health condition) Healthy and respectful relationships, respectful behavior and consent and how sexual violence and sexual harassment is always wrong. We have an open, honest and respectful culture in our schools. Home-school When a dual registered/inpatient young person is due to return to their school, both parents and pupils may feel they need some specific support. Part of the role support of RT is to liaise with the home-school while pupils are with RT. Schools have their own offer or early help as well as targeted support. RT can speak to schools about support that might be needed or may help in whatever circumstance. Generally support required is discussed at reintegration planning meetings. Helping pupils Information on where pupils can get help include: know where to go for help Samaritans national contact ring Freephone: 116 123 (UK) if they need Childline: 0800 1111 help. Self Harm support: www.thesource.me.uk/health/self-harm www.mind.org.uk www.ipswichandeastsuffolkccg.nhs/selfharm YoungMinds www.youngminds.org.uk (web based support for young people and parents/carers) PAPYRUS: www.papyrus-uk.org Provides confidential help and advice to prevent suicide in young people. Tel HOPELineUK: 08000 0684141 Text:07786 209697

	Chat Health – School Nurse Service: 07507333356
Online safety	www.ceop.police.uk
Omine sarety	www.nspcc.org.uk
	www.esafety-adviser.com
Whistle	If a member of RT staff is concerned about the conduct or behaviour of another
blowing	member of staff, visitor or volunteer, they are aware of the RT Whistle Blowing
	Policy and to report it immediately to the Head Teacher.
	If the concern is about the Head Teacher, then they will inform the CEO
RT link to the	The RT has its own Mental Health First Aider and work closely with CAMHS.
Suffolk Child	Through our links, we are able to help with all aspects of well-being including
and	support during transitions such as reintegration back to school, and how to manage
Adolescent	exam anxiety.
Mental	
Service	The RT often provides advice and guidance to school staff on how to support
(CAMHS).	children and young people with complex mental health difficulties, and can
	undertake initial assessments and provide evidence to support a request for
	appropriate provision.
Bullying	All Suffolk schools including RT schools are committed to tackling bullying. We want
(including	to know immediately if there any issues with bullying at RT so that it can be
cyber-	addressed. It could be that bullying is related to a child's home-school. RT staff can
bullying)/child	contact the school if parents do not feel comfortable doing so. RT can also offer
death/suicide	bespoke lessons on anti-bullying for anyone who has suffered bullying to encourage
/prevention	behaviours that might avert it in the future (e.g. assertiveness) or to boost self
	esteem. In serious cases of bullying parents should contact the police; particularly if
	there are threats involved. In an emergency call 999 or 101. Other sources of help
	and advice are: http://www.suffolkscb.org.uk/
	(Suffolk Safeguarding children's board) and <a href="http://www.bullying.co.uk">http://www.bullying.co.uk</a> . Education
	about bullying is an integral part of the RT Personal Development programme.
Suffolk Local	Services for children and young people in Suffolk (aged 0-25) with special
Offer	educational needs and disabilities
Offici	https://infolink.suffolk.gov.uk/kb5/suffolk/infolink/localoffer.page?localofferchann
	elnew=0
Suffolk	The Multi-Agency Safeguarding Hub (MASH)
Safeguarding	The MASH can advise on whether a family needs early help or whether they meet
Saleguarung	the threshold for statutory child protection.
	the uneshold for statutory clina protection.
	Call Customer First on 0808 800 4005
	Can Customer First on 0000 000 4003
	To make a referral to the MASH please use the multi-agency referral form
Drug concerns	Drugs education is covered in the RT Personal Development curriculum as a
	preventative measure.

Child Sexual exploitation	National 24/7 CSE helpline launched for children and young people: Call or text 116 000
(CSE)	A new helpline has been launched to enable children and young people to discuss any concerns relating to CSE themselves or a friend at any time. The new helpline is open 24 hours, 365 days per year.
	Any concerns that a child is being sexually exploited should be discussed with the DSL in the first instance. The CSE screening tool for professionals (can be located on
	the SuffolkSCB website: <a href="www.suffolkscb.org">www.suffolkscb.org</a> , <a href="www.suffolkscb.org&lt;/a&gt;, &lt;a href=" www.suffolkscb.org"="">www.suffolkscb.org</a> , <a href="www.suffolkscb.org">www.suffolkscb.org</a> , <a href="www.suffolkscb.org">www.su</a>
	Referrals should be made to Suffolk MASH Team (see above).
	Further information: National Working Group (Network tackling Child Sexual
	Exploitation) www.nationalworkinggroup.org and PACE UK (Parents Against Child
	Sexual Exploitation) <u>www.paceuk.info</u>
Domestic	For more information please refer to the following website
violence/Inter	http://www.auffallsah.aug.uk/aufaguanding taping/damagtis.ah.ug/
-personal violence (IPV)	http://www.suffolkscb.org.uk/safeguarding-topics/domestic-abuse/
Teenage	Pupils at RT are taught about positive relationships in the Personal Development
relationship	Curriculum (see SRE above).
abuse	All violence or suspected violence in teenage relationships should be reported to
	the MASH Team (see above).
	Information for schools can be found in the ATL Publication:
	https://www.atl.org.uk/Images/relationship-abuse-between-young-people-
	information-for-schools-nov-13.pdf
Fabricated and induced	http://www.nhs.uk/Conditions/Fabricated-or-induced-illness for information on
illness (FII)	behaviours and motivation behind FII. Any professionals suspecting FII must contact the MASH and follow the OHS child protection procedures.
Female	Female Genital Mutilation (FGM) comprises all procedures involving partial or total
genital	removal or the external female genitalia. FGM is illegal in the UK and as of October
mutilation	2015 mandatory reporting commenced. If HOE staff or other professionals discover
(FGM)	that an act FGM appears to have been carried out on a girl under 18 years old there is a statutory duty to report it to the police.
	Read <a href="http://www.nhs.uk/Conditions/female-genital-mutilation">http://www.nhs.uk/Conditions/female-genital-mutilation</a> for NHS information and signs of FGM. Any suspicion of FGM should be referred to
	the Police and social care.
	E-learning package- http://www.fgmelearning.co.uk/ for interested staff or
	professionals (free home office e-learning).
	All RT staff have received training on FGM.
Forced	SuffolkSCB information can be found at: <a href="https://www.suffolkscb.org.uk/safeguarding-">www.suffolkscb.org.uk/safeguarding-</a>
marriage	topics/forced-marriage-and-honour-based-abuse/
	UK Forced Marriage Unit fmu@fco.gov.uk
	Telephone: 020 7008 0151
	Call 999 (police) in an emergency.

	<u>www.gov.uk/stop-forced-marriage</u> for information on Forced Marriage. <i>Visit Home Office website to undertake Forced Marriage e-learning package</i> <a href="https://www.gov.uk/forced-marriage">https://www.gov.uk/forced-marriage</a> .
	Please see 'Multi-Agency Practice Guidelines- Handling cases of Forced Marriage' for more information and detail: <a href="https://www.gov.uk/forcedmarriage">https://www.gov.uk/forcedmarriage</a> .
	All staff must be aware of this, that is they may only have <u>one chance</u> to speak to a potential victim and thus they may only have one chance to save a life. This means that all practitioners working within statutory agencies need to be aware of their responsibilities and obligations when they come across forced marriage cases. If the victim is allowed to walk out of the door without support being offered, that one chance might be wasted.
	Prevention - <a href="www.freedomcharity.org.uk">www.freedomcharity.org.uk</a> The Freedom Charity (UK charity) have a helpline, text facility and app which can be downloaded to help to provide support and protection for victims of abuse, FGM or forced marriage. They can be contacted on tel: 0845 607 0133 or text 4freedom to 88802 or go to the website to download the app from the app page.
	Karma Nirvana - This organisation offers support, information and help with rehousing to victims of forced marriages, domestic violence and honour based crimes. It also offers a bi-lingual service. Phone confidential helpline: 01332 604098
Gender-based violence/	Home office policy document, 'Ending violence against women and girls. Strategy 2016-2020 (March 2016).
violence	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/522166/V
against	AWG Strategy FINAL PUBLICATION MASTER vRB.PDF
women and	FGM (Female Genital Mutilation) is violence against women and girls.
girls (VAWG)	Suffolk Rape Crisis Centre: 0800 0850 520
	www.srchelp.org.uk/home/
Honour based	The police have made it a high priority to help communities fight back to tackle
abuse (HBA)	both honour based abuse and hate crime. The 'Honour Network Help line': 0800 5 999 247
	Local information from SSCB: http://www.suffolkscb.org,uk
Private	Suffolk County council website information on private fostering.
fostering	https://www.suffolk.gov.uk/children-families-and-learning/fostering-and-adoption/
	A private fostering arrangement is essentially one that is made without the
	involvement of a local authority. Private fostering is defined in the Children Act
	1989 and occurs when a child or young person under the age of 16 (under 18 if
	disabled) is cared for and provided with accommodation, for 28 days or more, by
	someone who is not their parent, guardian or a close relative. (Close relatives are defined as; step-parents, siblings, brothers or sisters of parents or grandparents).
	Contact MASH to report private fostering arrangements.
Radicalisation	<u>Prevention</u> : RT teach traditional British values through the Personal Development
and	and RE Curriculums, and through its pastoral programmes: democracy, rule of law,
Extremism	respect for others, liberty, tolerance of those with different faiths and beliefs and
(PREVENT	promotion of 'Britishness'. Online-safety is an important aspect of the curriculum to
duty).	keep pupils safe from radicalisation. Pupils need to understand that radicalisation
	can be a form of grooming online and understand the notion of propaganda. They

As of 1 July	need to be taught to be discerning about what they read on the internet as the
2015 duty in	dangers of speaking to strangers online.
the Counter-	
terrorism and	All RT staff have had training in how to spot the signs of radicalisation and
security act	extremism and when to refer to the Channel panels.
2015 for	All teaching and admin staff and governors have completed Channel training.
specified	Anti-Terrorist Hotline: tel 0800 789 321 The 'Advice on the Prevent duty' written by
authorities	the Department for Education explains what governors and <u>staff</u> can do if they have
(including all	any concerns relating to extremism. The Department for Education has also set up
schools) to	a telephone helpline (020 7340 7264) to enable people to raise concerns directly.
have due	Concerns can also be raised by email to <a href="mailto:counter.extremism@education.gsi.gov.uk">counter.extremism@education.gsi.gov.uk</a> .
regard to the	If you see extremist of terrorist content online please report it via:
need to	https://www.gov.uk/report-terrorism
prevent	
people being	
drawn in to	
terrorism.	
Sharing nudes	Prevention: pupils are taught about the dangers and legal implications of sharing
and semi-	nudes and semi-nudes through the PSHE and IT lessons.
nudes	Advice for schools:
(previously	<u>UK Council for Internet Safety - GOV.UK (www.gov.uk)</u> Further information can be
known as	found at:
Sexting)	http://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/sexting (NSPCC
	website).
	Childnet: http://www.childnet.com/young-people/secondary/hot-topics/sexting
	Booklet: 'So you got naked online' can be accessed at
- 65. 1.	http://www.childnet.com/ufiles/So%20you%20got%20naked%20online.pdf
Trafficking	Trafficking can include a young person being moved across the same street to a
	different address for the purpose of exploitation. It doesn't have to include people,
	children or young people being moved great distances.
	Local information from SSCB can be found at:
Childrenh.a	http://www.suffolkscb.org.uk/safeguarding-topics/child-sexual-exploitation-cse/
Children who	Local procedures can be found on SSCB website at: enter Suffolk website
run away or	Statutory guidance can be found at:  http://modia.odusation.gov.uk/assats/files/pdf/s/desf_00670_2000v2.pdf
go missing	http://media.education.gov.uk/assets/files/pdf/s/dcsf-00670-2009v2.pdf
CME (Children	Local procedures can be found on SSCB website at:
missing	http://www.suffolkscb.org.uk/safeguarding-topics/child-sexual-exploitation-cse/
education)	
A child	Children Missing Education (CME) refers to 'any child of compulsory school age who
	is not registered at any formally approved education activity e.g. school, alternative
missing from education is a	provision, elective home education, and has been out of education provision for at
potential	least 4 weeks'. CME also includes those children who are missing (family
indicator of	
abuse or	whereabouts unknown and are usually children who are registered on a school roll
neglect.	/ alternative provision. This might be a child who is not at their last known address
Keeping	and either: has not taken up an allocated school place as expected, or has 10 or
Children Safe	more days of continuous absence from school without explanation, or left school
in Education	suddenly and the destination is unknown. It is the responsibility of the Local
III Laucation	<u> </u>

(2021) has further information on CME which has been read by all RT staff.	Authority (LA), to: Collate information on all reported cases of CME of statutory school aged children.  Statutory guidance can be found at: <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3</a> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3</a> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3</a> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3</a> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3</a> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3</a> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/system/uploads/attachment_data/file/3</a> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/3">https://www.gov.uk/government/uploads/system/uploads/syst</a>
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# APPENDIX D – SIGNS AND SYMPTOMS OF ABUSE AND NEGLECT

(Keeping Children Safe in Education (September 2021) Paragraphs 19 – 26)

**Abuse:** a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children.

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

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

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

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