#### CHILD PROTECTION AT FORRES SANDLE MANOR SCHOOL

The Head as DSL is the nominated person responsible for safeguarding and child protection matters and will liaise with the local statutory children's agencies as appropriate.

In all cases of actual or suspected abuse our Designated Safeguarding Lead (DSL)/Head must be informed and the FSM Policy followed.

The only exception to this would be if the DSL/Head were implicated in the concerns, in which case the Chair of Governors would be informed without the Head being told.

Mr Jody Wells (Head) is the Designated Safeguarding Lead (DSL) at FSM School. <a href="mailto:jwells@fsmschool.com">jwells@fsmschool.com</a> - 01425 653181

Mrs Tracy Spottiswood (Head of Lower School) is the Deputy Designated Safeguarding Lead (DDSL) with specific responsibility for the Lower School and EYFS at FSM School.

tspottiswood@fsmschool.com - 01425 653181

Mrs Judy Cochand is a Deputy Designated Safeguarding Lead (DDSL) jcochand@fsmschool.com - 01425 653181

Col. Peter Williams is the Governor with responsibility for Safeguarding & Child Protection at FSM School. <a href="mailto:peterwilliams53@gmail.com">peterwilliams53@gmail.com</a> - 01747-840275

# ALL SCHOOL STAFF SHOULD KNOW WHERE THEY CAN ACCESS THIS CHILD PROTECTION GUIDANCE

If the DSL or Deputy DSL's are unavailable, staff should refer directly to Hampshire Children's Reception team (CRT): 01329 225379 or 0300 555 1373 (out of hours) or email: <a href="mailto:csprofessional@hants.gov.uk">csprofessional@hants.gov.uk</a>

Reviewed by Head: August 2020 (in line with KCSiE 2020)

Approved by Governing Body: August 2020
Next Review Date: May 2021

	Content	Page		
	Child protection policy	1 – 8		
	Roles and responsibilities	9 - 17		
	Child protection procedures	18 - 20		
Annex 1	ldentifying vulnerable children	21		
Annex 2	What is child abuse?	22 - 32		
Annex 3	Actions when there are concerns about a child			
Annex 4	FSM flowchart for child protection procedures	34		
Annex 5	Hampshire Thresholds Chart	35		
Annex 6	Safeguarding concern form	36 – 37		
Annex 7	Skin maps	38 – 39		
Annex 8	Dealing with disclosures	40 – 42		
Annex 9	Allegations against adults who work with children	43– 52		
Annex 10	Peer on peer/child on child abuse	52 – 62		
Annex 11	Brook sexual behaviours traffic light tool	63 – 65		
Annex 12	Sexual Violence and Sexual Harassment between Children Risk and Needs Assessment Template	66		
Annex 13	Basic speaking and listening Skills	67 – 68		
Annex 14	Briefing sheet for temporary staff	69		
Annex 15	EYFS & Lower School use of mobile phones policy	70 – 71		
Annex 16	Data Sharing/withholding	72		
Annex 17	Transfer of CP records	73		
Annex 18	Policy review			
Annex 19	Useful contacts	75 - 76		

#### Forres Sandle Manor (Non-Academic) Policy

Policy Title	Child Protection
Policy Lead (Appointment (& Initials))	Head (JW)
Date of Last Review	September 2020
Date of Next Review	May 2021

#### **CHILD PROTECTION**

This policy should also be read in conjunction with the FSM Safeguarding and Welfare Policy which includes 'High risk and emerging safeguarding issues.'

#### STATEMENT OF INTENT

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all our children, both day and boarding.

The Governing body, Head and staff take their responsibility to safeguard and protect the welfare of children seriously. We make every effort to provide a safe and welcoming environment underpinned by a culture of openness where both children and adults feel secure, able to talk and believe that they are being listened to. We will work closely with other agencies to ensure the best standards of care and support.

We maintain an attitude of "it could happen here" where safeguarding is concerned.

The purpose of this policy is to provide staff, temporary staff, volunteers and governors with the framework they need in order to keep children safe and secure in our school and to inform parents and guardians how we will safeguard their children whilst they are in our care. Whilst we strive to minimise risk, we are fully aware that safeguarding risk cannot be eliminated.

Specific guidance is available to staff within the procedure documents.

#### **DEFINITIONS:**

For the purposes of this guidance:

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

The term *Staff* applies to all those working for or on behalf of FSM, full time or part time, including supply, peripatetic and support staff in either a paid or voluntary capacity. This also includes parents and governors.

**Child** refers to all young people who have not yet reached their 18<sup>th</sup> birthday. On the whole, this will apply to pupils of FSM; however the policy will extend to visiting children and students from other establishments.

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

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

#### **Aims**

- To provide Staff with the framework to promote and safeguard the wellbeing of children and in so doing ensure they meet their statutory responsibilities.
- To ensure consistent good practice across the school.
- To demonstrate our commitment to protecting children.

#### INTRODUCTION

- This policy must be read in conjunction with the 'Staff Code of Conduct' and the most recent Keeping Children Safe in Education (KCSIE) publication. (2020)
- Additionally further policies also contribute to the FSM aim of total care:
  - Safeguarding and Welfare Policy
  - o Anti-bullying policy.
  - Behaviour and Discipline policy.
  - Boarders' Handbook.
  - Confidential Reporting policy.
  - Cyberbullying policy.
  - E-Safety (Acceptable Usage) policy.
  - First aid policy.
  - Health and Welfare policy.
  - Intimate Care policy.
  - Preventing Radicalisation policy.
  - Safer Recruitment, Selection and Disclosure Policy
  - Use of Reasonable Force policy.
  - Visitors policy.
  - Worries and Complaints Procedure
  - EYFS Behaviour Management
  - EYFS Use of Mobile Phones and Cameras
  - EYFS Confidential Reporting and Staff Supervision
  - EYFS Intimate Care
  - EYFS Missing Children
  - EYFS Sick and Infectious Children

All employees will be made aware of and be introduced to these policies as part of their induction process. Staff are also invited to comment and add to these policies.

See Policy Review (Annex 18).

#### PRINCIPLES AND VALUES

- Children have a right to feel secure and cannot learn effectively unless they do so.
- All children regardless of age, gender, race, ability, sexuality, religion, culture or language have a right to be protected from harm.
- All staff have a key role in the prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a child is at risk of harm, either in the school or in the community, taking into account contextual safeguarding, in accordance with the guidance.
- We acknowledge that working in partnership with other agencies protects children and reduces risk and so we will engage in partnership working throughout the child protection process to safeguard children.
- Whilst FSM will work openly with parents as far as possible, FSM reserves the right to contact Children's social care or the police, without notifying parents if this is in the child's best interests.

#### LEADERSHIP AND MANAGEMENT

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

In FSM any individual can contact the Designated Safeguarding Lead (DSL) and Deputy Designated Safeguarding Leads if they have concerns about a young person.

The DSL is Jody Wells (*Head*) and the deputy DSLs are Tracy Spottiswood (*Head of Lower School*) and Judy Cochand (*Deputy Head*)

The Chair of Governors, **Col. Peter Williams** is the nominated governor with responsibility for FSM's Safeguarding arrangements. He will receive any reports of allegations against the Head, without the Head being informed. Christine Dure-Smith is the nominated Governor with Deputy Safeguarding and PREVENT responsibilities.

As an employer, we follow safer recruitment guidance as set out in KCSIE 2020.

#### **TRAINING**

All staff in our school are expected to be aware of the signs and symptoms of abuse and must be able to respond appropriately. Training is provided regularly. Separate training is provided to all new staff on appointment. The DSL will attend training at least every other year to enable them to fulfil their role. DSLs and staff will also receive regular safeguarding and child protection updates as required but 'at least' annually. Any update in national or local guidance will be shared with all staff in briefings and then captured in the next whole school training. This policy will be updated during the year to reflect any changes brought about by new guidance.

#### **REFERRAL**

If staff have a concern, they should act upon it immediately and never assume that a colleague or professional will take action. Where possible there should be a conversation with the DSL (or deputy). Staff should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision. The DSL will assess the information and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm, or risk of significant harm has been reached; or they are not clear if the threshold is met, the DSL will ensure that a procedure is developed and then followed and that a referral is made within

24 hours to the relevant Children's Social Care team (CSC) or the Local Authority Designated Officer (LADO) for safeguarding concerns (all cases which concern a staff member) and if appropriate, the police.

If the DSL or deputy DSLs are not available or there are immediate concerns, the staff member **must** refer directly to children's social care, and the police if appropriate. The DSL should be notified at the earliest opportunity thereafter. The CSC team should make a decision within one working day of a referral being made and the course of action they are taking. The DSL or member of staff making the referral should contact the CSC team if they have not received a response within this timeframe.

Generally, the DSL will inform the parents prior to making a referral. However, there are situations where this may not be possible or appropriate, particularly when informing parents/carers may place the child at further risk. If a parent informs us of a concern about their own child, we will inform them of what action we will take with the information they provide.

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

#### CONFIDENTIALITY

- We maintain that all matters relating to child protection are to be treated as confidential and only shared as per the 'Information Sharing Advice for Practitioners' (DfE 2015) guidance.
- There is a lawful basis for child protection concerns to be shared with agencies who have a statutory duty for child protection.
- Information will be shared with individuals within the school who 'need to know'.
- All staff are aware that they cannot promise a child to keep a disclosure confidential.
- Disciplinary action will be considered for any breach of confidentiality.

#### As s school we will educate pupils to recognise when they are at risk and how get help when they need it through:

- The content of the curriculum
- A school ethos which helps children to feel safe and able to talk freely about their concerns, believing that they will be listened to and valued.

#### **Confidential Reporting ('Whistle-Blowing')**

Whistleblowing is a term that is used when staff want to report a concern within their organisation that involves their manager or a person senior to them in the organisation which may prevent them from following the normal reporting systems.

All staff should feel able to raise concerns about poor or unsafe practices and potential failures in FSM's safeguarding regime. If a member of staff has safeguarding concerns about the behaviour of another member of staff towards a pupil, he or she should report it at once to the Head and the LADO must be informed. All investigation will be directed by the LADO. If there is evidence of criminal activity, the police will always be informed. Wherever possible, and subject to the rights of the pupil, the member of staff will be informed of the outcome of the investigation. No one who reports a genuine concern in good faith needs to fear retribution. A member of staff who uses the Confidential Reporting procedure is entitled to have the matter treated confidentially and his/her name protected from being disclosed by the Head to the alleged perpetrator, without his/her prior approval. However, it has to be

recognised that his/her evidence may be required by the Police to be used in any criminal proceedings.

See also Confidential Reporting Policy.

Where a staff member feels unable to raise the issue with their employer or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them.

The NSPCC whistleblowing helpline (0800 028 0285) is available for staff who do not feel able to raise concerns regarding child protection failures internally. Line is available from 8:00am to 8:00pm, Monday to Friday and Email: <a href="help@nspcc.orp.uk.9">help@nspcc.orp.uk.9</a>

If you believe that a member of the school staff is harming a child (an allegation) and this has been reported to the Head and no / insufficient action has been taken, or the member of staff you have concerns about is the Head, then you should contact the LADOs on 01962 876364 or <a href="mailto:child.protection@hants.gov.uk">child.protection@hants.gov.uk</a>

If you believe that a child is being abused by individuals outside the school, you should make a referral to Children's Social Care by calling 0300 555 1384 (office hours) or 0300 555 1373 (outside of office hours)

See also Confidential Reporting Policy

#### As a school we will educate and encourage pupils to keep safe through:

- The content of the curriculum.
- A school ethos which helps children to feel safe and able to talk freely about their concerns, believing that they will be listened to and valued.

#### **DEALING WITH ALLEGATIONS AGAINST STAFF**

If a concern including allegations that may meet the harms test is raised about the practice or behaviour of a member of staff, supply teacher or volunteer, this information will be recorded and passed to the Head, Jody Wells. The local authority designated officer (LADO) will be contacted and the relevant guidance will be followed.

If the allegation is against the Head, the person receiving the allegation will contact the Chair of Governors Col. Peter Williams (the Nominated Safeguarding Governor) directly, without the Head being informed. The Chair of Governors will then contact the LADO.

### This is a legal duty and failure to refer when the criteria are met is a criminal offence.

See Annex 9 – Dealing with Allegations Against Staff.

### DEALING WITH ALLEGATIONS AGAINST PUPILS (Peer on Peer/Child on Child Abuse)

If a concern is raised that there is an allegation of a pupil abusing another pupil within FSM, the 'Peer on Peer/**Child on Child** Abuse' guidance will be followed

#### **USEFUL PUBLICATIONS**

The South West Safeguarding Procedures (<a href="https://www.proceduresonline.com/swcpp/">https://www.proceduresonline.com/swcpp/</a>) also has useful guidance.

#### **TRANSPARENCY**

FSM prides itself on its respect and mutual tolerance. Parents/carers have an important role in supporting FSM. Copies of this policy, together with our other policies relating to issues of safeguarding are on our website and we hope that parents and guardians will always feel able to take up any issues or worries that they may have with FSM. Allegations of child abuse or concerns about the welfare of any child will be dealt with consistently in accordance with this policy. Open communication is essential.

#### Legal context

Section 175 of the education act 2002; the Education (Independent School Standards) Regulations 2014; the Non-Maintained Special Schools (England) Regulations Children act 2004 & 1989

#### Guidance

Hampshire Safeguarding Children Partnership protocols and guidance and their procedures:

Working Together to Safeguard Children (2018)

Keeping Children Safe in Education (2020)

FGM Act 2003 Mandatory Reporting Guidance (2016)

**DfE/Child Sexual Exploitation 2017** 

**HSCB Neglect Strategy** 

What to do if you're worried a child is being abused (2015)

DfE: Sexual violence and sexual harassment between children in schools and colleges

(2017)

Information sharing (2015)

The Prevent Duty (2015)

#### **ROLES AND RESPONSIBILITIES:**

#### STAFF RESPONSIBILITIES

Safeguarding and promoting the welfare of children is **everyone's** responsibility. **Everyone** who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all professionals should make sure their approach is childcentred. This means that they should consider, at all times, what is in the **best interests** of the child.

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

- Establish and maintain an environment where children feel secure, are encouraged to talk and are listened to.
- Ensure children know that there are adults at FSM whom they can approach if they are worried about any problems.
- Plan opportunities within the curriculum for children to develop the skills they need to recognise, assess and manage risk (including online safety) appropriately and keep themselves safe.
- Attend training in order to be aware of and alert to the signs of abuse.
- Maintain an attitude of "it could happen here" with regards to safeguarding.
- Be aware that safeguarding incidents and/or behaviours can be associated with factors outside of the school and/or can occur between children outside of these environments.
   Staff (especially the DSL & DDSLs) should consider whether pupils are at risk of abuse or exploitation outside of their families i.e. sexual and criminal exploitation
- Ensure they know who the designated safeguarding lead (DSL) and deputy DSLs are and know how to contact them.
- Have an understanding of Early Help and be prepared to identify children who may benefit from early help. Early help means providing support as soon as a problem emerges
- In the context of early help, staff will notify colleagues and/or parents of any concerns about their child(ren), and provide them with, or signpost them to, opportunities to change the situation.
- Liaise with other agencies that support pupils and provide early help.
- Record their concerns if they are worried that a child is being abused and report these to the DSL as soon as practical that day. If the DSL is not contactable immediately, a DDSL should be informed. Use FSM Safeguarding Concern Form.
- Be prepared to refer directly to social care, and the police if appropriate if there is a risk
  of significant harm and the DSL or DDSL is not available.
- If the disclosure is an allegation against a member of staff they will follow the allegations' procedures (*Annex 9*).
- Follow the procedures set out by HSCP and take account of guidance issued by the DfE.
- Support pupils in line with their child protection plan.
- Treat information with confidentiality but never promising to "keep a secret".
- Notify DSL or DDSL of any child on a child protection plan or Child in need plan who has unexplained absence.
- Have an awareness of the Child Protection Policy, the Safeguarding and Welfare Policy, The Staff Code of Conduct and Behaviour Policy and procedures relating to the safeguarding response for children who go missing from education and the role of the DSL.

See Identifying vulnerable pupils (Annex 1).

#### **Lower School and EYFS**

Staff within Lower School and the EYFS will also:

- Be subject to Supervision at regular intervals (Lower School Supervision policy)
- Sign on a daily basis to declare that their DBS status has not changed and that there are no other reasons that they are not suitable to work with children.

If, at any point, there is a risk of immediate serious harm to a child, a referral should be made to children's social care immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point.

#### HAMPSHIRE SAFEGUARDING CHILDREN PARTNERSHIP

Hampshire Safeguarding Children Partnership will work to ensure that all local agencies work together to safeguard children. They can be contacted on 01962 876230

#### HAMPSHIRE CHILDREN'S SERVICES

Hampshire Children's Services has primary responsibility for the protection of children from abuse and can be contacted on <a href="mailto:csprofessional@hants.gov.uk">csprofessional@hants.gov.uk</a> - (01329 225379 or 0845 6035620) and the Local Authority Designated Officer can be contacted on (01962 876364) (or 0845 6004555 out of hours).

#### I.S.I.

From September 2011 Independent Schools Inspectorate (ISI) has been inspecting both standards in education and children's care as regulated by the Department of Education. I.S.I. can be contacted on 020 7710 9900. Their address is: Independent Schools Inspectorate, Ground Floor, CAP House, 9-12 Long Lane, London. EC1A 9HA.

Safeguarding concerns involving our EYFS setting can also be raised with OFSTED. They can be contacted on 0300 123 1231. Their address is Ofsted, Piccadilly Gate Store Street Manchester M1 2WD or enquiries@Ofsted.gov.uk

#### THE GOVERNING BODY

The Governing body fully recognises its responsibilities with regard to safeguarding and to safeguarding and promoting the welfare of children.

The Governing Body ensures that:

- They comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and regularly updated safeguarding training in the school are effective and comply with the law at all times.
- FSM contributes to Multi-agency working in line with statutory guidance Working Together to Safeguard Children and Information Sharing. This includes providing a coordinated offer of early help when additional needs of children are identified and contributing to multi-agency plans to provide additional support to children subject to Safeguarding plans. They should allow access for children's social care from the host local authority and, where appropriate, from a placing local authority, to conduct an assessment.
- Their safeguarding arrangements take into account the procedures and practice of HSCP as part of the Multi-agency safeguarding procedures set up by the HSCP.
- All members of the Governing body are fully trained in safeguarding and the Prevent Duty.

- FSM follows safe recruitment, selection and induction procedures including appropriate checks (see Safer Recruitment, selection and Disclosures policy) and the single central register of staff is in order, ensuring provision meets statutory requirements and advice.
- The Chair of the Governing Body is nominated to liaise with the designated officers from the local authority and/or partner agencies in the event of allegations of abuse made against the Head or member of the Governing Body.
- They appoint a member of staff of the school's management team to the role of Designated Safeguarding Lead who will take lead responsibility on safeguarding and child protection matters. This is explicit in the role-holder's job description. This person has the appropriate authority and should be given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and safeguarding matters, to take part in strategy discussions and Multi-agency meetings – and/or to support other staff to do so – and to contribute to the assessment of children.
- There are effective safeguarding policies and procedures in place including a Child Protection Policy, a Safeguarding and Welfare Policy, a Behaviour and Discipline policy, a Missing Children Policy together with a Staff Code of Conduct which, amongst other things, includes staff/pupil relationships and communications, including the use of social media. These are all provided to all staff – including temporary staff and volunteers – on induction. This should be updated annually and be available publicly via the FSM website
- The Governor Responsible for Safeguarding will also meet annually with the DSL prior to the Governing Board's AGM meeting, in order to discuss recent events and remain fully informed and up to date with any recent events or updates in this area.
- Safeguarding is discussed as an agenda point at the termly Governors' meeting. Minutes should be sufficiently detailed to demonstrate a depth of review.
- An annual report about the discharge of duties is made to the governing body on safeguarding matters including an update and review of procedures and the HSCP is informed annually via the HSCP safeguarding audit.
- There are procedures in place to manage safeguarding concerns, including a Behaviour and Discipline policy and a response to children who go missing from education.
- There are procedures in place to handle allegations against staff and volunteers. Allegations against staff are dealt with by the Head. Such allegations are referred to the Local Authority Designated Officer (LADO). There are also procedures in place to make a referral to the Disclosure and Barring Service (DBS) if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have been had they not resigned. This is a legal duty and failure to refer when the criteria are met is a criminal offence.
- There are procedures in place to handle allegations against other children.
- There are clear systems and processes in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems.
- The child's wishes or feelings are taken into account when determining what action to take and what services to provide to protect individual children through ensuring there are systems in place for children to express their views and give feedback.
- Staff have been trained appropriately and this is updated in line with guidance
- Staff members do not promise confidentiality to the child and always act in the interests
  of the child.
- Children are taught about safeguarding, including online, through teaching and learning opportunities.
- Appropriate filters and appropriate monitoring systems are in place to safeguard pupils from potentially harmful and inappropriate online material.
- Online safety training for staff is integrated, aligned and considered as part of the overarching safeguarding approach.

- Opportunities are provided for staff to contribute to and shape safeguarding arrangements and child protection policy so recognising the experience and expertise of their staff.
- All staff read at least Part One & Annexes A & H of Keeping Children Safe in Education.
- Mechanisms are in place to assist staff to understand and discharge their role and responsibilities as set out in Part one & Annex A of Keeping Children Safe in Education.
- Relevant staff have due regard to the relevant data protection principles, which allow them to share (and withhold) personal information as provided for in the Data Protection Act 2018 and the GDPR – See Annex 16 – Data Sharing/Withholding
- Any safeguarding deficiencies or weaknesses are remedied without delay.

#### **DESIGNATED GOVERNORS**

 Col. Peter Williams, who is Chair of Governors, is Governor with responsibility for safeguarding. Christine Dure-Smith deputises in this role. Dr Stuart Smallwood is the Governor with responsibility for E-Safety. The Governors formally consider safeguarding issues once a year, with day to day issues being delegated to the Head, as DSL.

#### Col. Peter Williams oversees:

- Reviewing the procedures for and the efficiency with which the safeguarding duties have been discharged.
- The scrutiny of training records of staff, safeguarding issues dealt with over the year, how they have been handled and the contribution FSM has made to multi agency working.
- Ensuring that any deficiencies or weaknesses in safeguarding arrangements are remedied without delay.
- Approving amendments to safeguarding arrangements in the light of changing regulations or recommended best practice.

#### THE HEAD AND SENIOR LEADERSHIP

- The Head will ensure that the policies and procedures adopted by the governing body, particularly concerning referrals of cases of suspected abuse and neglect, are followed by all staff.
- Ensure all staff understand the role of the DSL and are aware of systems within FSM which support safeguarding.
- Contribute to Multi-agency working in line with guidance (Working together 2018)
- Provide a co-ordinated offer of early help when additional needs of children are identified.
- Ensure staff are alert to the various factors that can increase the need for early help.
- Working with children's social care, support their assessment and planning processes including the FSM's attendance at conference and core group meetings.
- Safer Employment Practices: FSM follows the Government's recommendations for the safer recruitment and employment of staff who work with children and acts at all times in compliance with the Independent Schools Standards Regulations. All members of the teaching and non-teaching staff at FSM, including part-time staff, temporary and supply staff, and visiting staff, such as musicians and sports coaches, are checked with

the Disclosure and Barring Service (DBS) before starting work. All Governors, volunteer helpers, contractors working regularly during term-time, such as contract catering staff, and adult members of the families of members of staff who live on site are also vetted. Our policies are reviewed by Governors annually. If any outside agencies are involved in the care of our pupils, we will always check compliance of their safeguarding arrangements as appropriate.

- Carry out tasks delegated by the governing body such as training of staff; safer recruitment; maintaining a single central register.
- Provide support and advice on all matters pertaining to safeguarding and child protection to all staff regardless of their position within FSM.
- Treat any information shared by staff or pupils with respect and follow agreed policies and procedures.
- Ensure that allegations or concerns against staff are dealt with in accordance with guidance from Department for Education (DfE), Hampshire Safeguarding Children Partnership (HSCP) and Hampshire County Council (HCC).

#### **DESIGNATED SAFEGUARDING LEAD**

**DSL responsibilities** (to be read in conjunction with DSL role description in KCSIE 2020 (Annex B.)

#### At FSM the DSL is Jody Wells.

The deputy DSLs are Tracy Spottiswood and Judy Cochand

All of these senior members of staff have status and authority to take responsibility for child protection matters, have received training in child protection and Multi-agency working and are familiar with 'Working Together to Safeguard Children 2018'.

In addition to the role of staff and senior management team, the DSL will

#### MANAGE REFERRALS

- Refer cases of suspected abuse to the local authority children's social care and the
  police where appropriate, in a timely manner avoiding any delay that could place the
  child at more risk. This may involve both Hampshire and the local authority of the child's
  home address.
- That where allegations are made against members of staff the Head is informed and that they contact the local authority designated officer (LADO).
- Where an allegation is made against the Head, inform the Chair of Governors, without the Head being informed and ensure that they contact the local authority designated officer (LADO).
- Support staff who make referrals to local authority children's social care.
- Refer cases to the Channel programme where there is a radicalisation concern as required.
- Support staff who make referrals to the Channel programme.

- Refer cases, where a person is dismissed or left due to risk/harm to a child, to the Disclosure and Barring Service as required.
- Refer cases, where a crime may have been committed, to the Police as required.
- Ensure that all parties (child, staff and parents) receive adequate information and support in the event of an allegation of abuse.
- Liaise with relevant local agencies and co-operate with enquiries as required including attendance at case conferences.
- Notify Hampshire Children's Services if there is an unexplained absence of more than two days of a pupil who is in receipt of a Child Protection Plan, or sooner if there is significant concern.
- Put in place appropriate safeguarding responses to children who go missing from education settings, particularly on repeat occasions, to help identify any risk of abuse and neglect including sexual abuse or exploitation and to help prevent the risks of their going missing in future.

#### **WORK WITH OTHERS**

- Assist the Governing Body in fulfilling their safeguarding responsibilities set out in legislation and statutory guidance.
- The designated safeguarding lead and any deputies should act as a point of contact
  with the three safeguarding partners (the local authority; a clinical commissioning group
  within the local authority; and the chief officer of police within the local authority area)
  and work with other agencies in line with Working Together to Safeguard Children.
- <u>NPCC- When to call the police</u> should help designated safeguarding leads understand when they should consider calling the police and what to expect when they do.
- If early help is appropriate, the DSL (or deputy) will generally lead on liaising with other agencies and setting up a Multi-agency assessment as appropriate.
- As required, liaise with the 'case manager' and the LADO for child protection concerns (all cases which concern a staff member); and
- Liaise with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies.
- Work closely with senior mental health leads
- Act as a source of support, advice and expertise for staff.

#### **UNDERTAKE TRAINING**

- Attend initial training for the role and update this at least every two years by attending
  the initial refresher training and then demonstrating evidence of continuing professional
  development and regular safeguarding and child protection updates as required but 'at
  least' annually.
- Undertake Prevent Awareness Training and complete Channel General Awareness module.
- Understand the assessment process for providing early help and intervention, for example, through locally agreed common and shared assessment processes such as early help assessments.

- Have a working knowledge of how local authorities conduct a Safeguarding Case Conference and a Safeguarding Review Conference, and be able to attend and contribute to these effectively when required to do so.
- Be alert to the specific needs including the additional online risks, for example, from online bullying that carers and children with special educational needs or disabilities (SEND) may face
- Be able to keep detailed, accurate, secure written records of concerns and referrals.
- Understand and support FSM with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation.
- Obtain access to resources and attend any relevant or refresher training courses.

#### RAISE AWARENESS

- Ensure policies and records are updated in the light of experience and new information.
   The DSL will ensure that any deficiency in FSM's Child Protection Policy, including amendments to legislation, will be remedied without delay.
- Ensure this policy will be updated at least annually but also during the year to reflect any changes brought about by new guidance.
- Ensure any update in national or local guidance will be shared with all staff in briefings and then captured in the next whole school training.
- Ensure the Child Protection Policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of FSM in this.
- Ensure all staff have access to, understand and use FSM's Safeguarding and Welfare
  policy and Child Protection policy and procedures appropriately. That they know who
  the DSL is, are aware of their role and how to contact them and who to go to in their
  absence.
- Ensure all FSM employees and governors including part time, and temporary staff
  working in FSM are aware of and have had the opportunity to read and understand the
  most recent summary of the document 'Keeping Children Safe in Education' Part 1 and
  Annex A (KCSIE 2020) All staff sign to confirm they have read and understood this
  document.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs and symptoms of abuse, have an awareness of child sexual & criminal exploitation, forced marriage, female genital mutilation, children missing from education, and peer on peer/child on child abuse, including upskirting and their responsibility for referring any concerns to the DSL without delay.
- Ensure that whole school training occurs every three years but that staff also receive regular safeguarding and child protection updates as required but 'at least' annually so that staff and volunteers can fulfil their responsibilities.
- Provide training to staff on the *Prevent* duty.
- Ensure any members of staff joining FSM outside of this training schedule receive induction on, Safeguarding, Child Protection, the Staff Code of Conduct, the most recent summary of the government document 'Keeping Children Safe in Education,' Part 1 and Annex A (KCSIE 2020), Preventing Radicalisation and Behaviour and

Discipline and understand FSM's Policy and procedures, prior to commencement of their duties.

- Be aware of the training opportunities and briefings provided by HSCP to ensure staff are aware of the latest local guidance on safeguarding
- Encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures FSM may put in place to protect them.
- Help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues that children, including children with a social worker, are experiencing, or have experienced, with teachers and SLT. Ensuring that staff, know who these children are, understand their academic progress and attainment and maintain a culture of high aspirations for this cohort; supporting teaching staff to identify the challenges that children in this group might face and the additional academic support and adjustments that they could make to best support these children.
- Liaise with the teacher i/c Life skills (PSHCEE) to ensure that children are given appropriate education about safeguarding matters inc. Relationship and Health Education . (Primary) and Relationship, Sexual, Health Education (Secondary)
- Ensure children know that there are many adults at FSM whom they can approach if they are worried or that they can address concerns independently to the FSM Independent Listeners.
- Ensure that senior children know how to respond to concerns and allegations.
- Work within EYFS so that they are known to children.
- Give consideration to individuals who may have specific requirements for safeguarding their health or welfare and draw up individual health or welfare plans as required.

#### **RECORDS**

- Ensure that all incidents that give cause for concern are recorded accurately with the appropriate information, dated, signed and stored confidentially, separately and securely, even if there is no need to refer the matter immediately.
- Keep written records of child protection concerns securely and separately from the main pupil file and use these records to assess the likelihood of risk.
- Ensure that copies of safeguarding records are transferred accordingly (separate from pupil files) when a child transfers school. This should be done securely and confirmation of receipt should be obtained.
- Consider liaising with a pupil's new school if it would be appropriate to share any
  information with the new school in advance of a child leaving. For example, information
  that would allow the new school to continue supporting victims of abuse and have that
  support in place for when the child arrives.
- Ensure that where a pupil transfers school and is on a child protection plan or is a child looked after, the information is passed to the new school immediately and that the child's social worker is informed. Consideration is given to a transition meeting prior to moving if the case is complex or on-going.
- Develop, implement and review procedures at FSM that enable the identification and reporting of all cases, or suspected cases, of abuse.

#### **REVIEW**

- Monitor safeguarding awareness at FSM.
- Liaise with the designated governor for safeguarding at least annually and require the governing body to conduct an annual review.
- Meet any other expectations set out for DSLs in KCSiE 2020

#### POLICE, NSPCC, SCHOOL MATRON

Each has specific responsibilities upon referral of a case.

#### **FSM CHILD PROTECTION PROCEDURES**

#### **OVERVIEW**

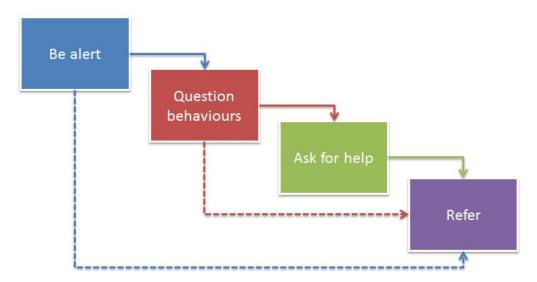
The following procedures apply to all staff working at FSM and will be covered by training to enable staff to understand their role and responsibility. The aim of our procedures is to provide a robust framework which enables staff to take appropriate action when they are worried a child is in need or suffering or likely to suffer significant harm.

The prime concern at all stages must be the interests and safety of the child. Where there is a conflict of interest between the child and an adult, the interests of the child must be paramount.

Staff are aware that very young children with disabilities, special needs or with language delay may communicate concerns with behaviours rather than words. Additionally, staff will question the cause of knocks and bumps in children who have limited mobility, which will include children visiting the site as well as those who are pupils.

#### PROCEDURE FOR REPORTING CONCERNS

There are four key steps to follow to help you to identify and respond appropriately to possible abuse and/or neglect.



It may not always be appropriate to go through all four stages sequentially. 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. Before doing so, you should try to establish the basic facts. However, it will be the role of social workers and the police to investigate cases and make a judgement on whether there should be a statutory intervention and/or a criminal investigation.

Staff could have their suspicion or concern raised in a number of ways, the most likely of which are:

- A child, parent or member of staff "disclosing" abuse.
- Bruising or evidence of physical hurt; which may or may not be accompanied by.

- Unusual behaviour by a child.
- The conduct of a member of staff.

### If a member of staff suspects abuse, spots signs or indicators of abuse, or they have a disclosure of abuse made to them they must:

- Make an initial record of the information on an FSM Safeguarding Concern Form.
- Report it to the DSL immediately (in person or by telephone). **Delay could prejudice the welfare of a child**. If the concerns relate to the conduct of a member of staff these should be reported directly to the Head; there is an obvious need to act immediately and with utmost discretion.
- The Head will consider if there is a requirement for immediate medical intervention, however urgent medical attention should not be delayed if DSL/Head is not immediately available (see point 6 below).
- Make an accurate record (which may be used in any subsequent court proceedings)
  as soon as possible and within 24 hours of the occurrence, of all that has happened,
  including details of:
  - Dates and times of their observations.
  - Dates and times of any discussions they were involved in.
  - Any injuries.
  - Explanations given by the child/adult.
  - The wider environmental factors affecting the child's life that may pose a threat to their safety and/or welfare
  - O What action was taken?
  - Any actual words or phrases used by the child.

The records must be signed and dated by the author or / equivalent on electronic based records.

 In the absence of the DSL or their Deputy, be prepared to refer directly to Children's Social Care (and the police if appropriate) if there is the potential for immediate significant harm

#### Following a report of concerns the DSL must:

- 1. Decide whether there are sufficient grounds for suspecting significant harm, in which case a referral must be made to Children's Social Care and the police if it is appropriate. The rationale for this decision should be recorded by the DSL on the FSM Safeguarding Concern Form.
- 2. Normally FSM will try to discuss any concerns about a child's welfare with the family and where possible to seek their agreement before making a referral to Children's Social Care. However, in accordance with DfE guidance, this should only be done when it will not place the child at increased risk or could impact a police investigation. Where there are doubts or reservations about involving the child's family, the DSL should clarify with Children's Social Care or the police whether the parents should be told about the referral and, if so, when and by whom. This is important in cases where the police may need to conduct a criminal investigation. The child's views should also be taken into account.

- 3. If there are grounds to suspect a child is suffering, or is likely to suffer, significant harm the DSL (or Deputy) must contact Children's Social Care via the <a href="Inter">Inter</a> -Agency Referral Form (IARF) making a clear statement of:
  - a. the known facts
  - b. any suspicions or allegations
  - c. whether or not there has been any contact with the child's family.
- 4. If there is indication that the child is suffering significant harm, a call will also be made to Children's Reception Team (CRT) on 01329 225379.
- 5. If a child is in immediate danger and urgent protective action is required, the police must be called. The DSL must then notify Children's Social Care of the occurrence and what action has been taken.
- 6. When a pupil needs *urgent* medical attention and there is suspicion of parental abuse causing the medical need, the DSL or their Deputy should take the child to the accident and emergency unit at the nearest hospital, while Children's Social Care are informed. Advice should be sought from Children's Social Care about informing the parents, remembering that parents should normally be informed that a child requires urgent hospital attention.
- 7. If there is not a risk of significant harm, the DSL will either actively monitor the situation or consider the Early Help process

In the event that such suspicions involve the Head, the suspicion should be referred to the Chair of Governors, without the Head being informed, contact details for whom are shown on Page 1 of this document. .

The member of staff should pursue the matter if he or she does not feel that it has been recorded and dealt with adequately. It is your responsibility to take action.

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#### **IDENTIFYING VULNERABLE CHILDREN**

Staff should be particularly alert to children who might be at greater risk of abuse, these include a child who:

- is disabled;
- needs a social worker (Children in Need & Child Protection Plans)
- has special educational needs (whether or not they have a statutory education, health and care plan) or is underachieving academically and not working to their full potential.
- requires mental health support
- is a young carer;
- is showing signs of being drawn in to 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.

Other risk factors that may jeopardise a child's emotional health, general wellbeing, behaviour or motivation to learn and thus make them vulnerable include:

- bereavement;
- separation;
- bullying;
- emotional & behavioural difficulties;
- severe or long term illnesses;
- English as an additional language;
- being part of a Minority group.

#### WHAT IS CHILD ABUSE?

The following definitions are taken from *Working together to safeguard children* HM Government (2018). In addition to these definitions, it should be understood that children can also be abused by honour based abuse, forced marriage or female genital mutilation To support the local context, all staff have access to the Hampshire Safeguarding Children Partnership (HSCP) threshold chart posted on the Staffroom Pastoral Care Matters board

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger. Abuse can take place wholly on line, or technology may be used to facilitate offline abuse. They may be abused by an adult or adults, or another child or children. Abuse may take several forms, which are not mutually exclusive:

#### **NEGLECT - See also**

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

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment).
- Protect a child from physical and emotional harm or danger.
- Ensure adequate supervision (including the use of inadequate care-givers).
- Ensure access to appropriate medical care or treatment.
- Ensure a child receives suitable education.

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

#### PHYSICAL ABUSE

Physical abuse happens when a child is deliberately hurt, causing injuries such as cuts, bruises, burns and broken bones. It may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. 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 persistent adverse effects on the child's emotional development.

#### It involves:

- Humiliating, putting down or constantly criticising a child
- Shouting at or threatening a child or calling them names
- Mocking a child or making them perform degrading acts
- Constantly blaming or scapegoating a child for things which are not their fault

- Trying to control a child's life and not recognising their individuality
- Not allowing them to have friends or develop socially
- Pushing a child too hard or not recognising their limitations
- Manipulating a child
- Exposing a child to distressing events or interactions such as drug taking, heavy drinking or domestic abuse
- Persistently ignoring them
- Being cold and emotionally unavailable during interactions with a child
- Never saying anything kind, positive or encouraging to a child and failing to praise their achievements and successes.
- Conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person.
- Not giving a child opportunities to express their views, deliberately silencing them or making 'fun' of what they say or how they communicate.
- Causing a child to frequently feel fear or danger

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 violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including:

- Sexual touching of any part of the body whether the child is wearing clothes or not
- Rape or penetration by putting an object or body part inside a child's mouth, vagina or anus
- Forcing or encouraging a child to take part in sexual activity
- Making a child take their clothes off, touch someone else's genitals or masturbate.

Non-contact abuse involves non-touching activities. It can happen online or in person and includes:

- Causing a child to behave in sexually inappropriate ways.
- Encouraging a child to watch or hear sexual acts
- Showing pornography to a child
- Making, viewing or distributing child abuse images
- Not taking proper measures to prevent a child being exposed to sexual activities by others;
- Allowing someone else to make, view or distribute child abuse images
- Grooming a child in preparation for abuse (including via the internet).

#### Online sexual abuse includes:

- Persuading or forcing a child to send or post sexually explicit images of themselves, this
  is sometimes referred to as sexting
- Persuading or forcing a child to take part in sexual activities via a webcam or smartphone
- Having sexual conversations with a child by text or online
- Meeting a child following online sexual grooming with the intent of abusing them.

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. Child sexual exploitation is a form of child sexual abuse.

#### INDICATORS OF ABUSE: RECOGNISING ABUSE

Children who suffer abuse may be afraid to tell anybody about the abuse. They may struggle with feelings of guilt, shame or confusion – particularly if the abuser is a parent, caregiver or other close family member or friend. Many of the signs that a child is being abused are the same regardless of the type of abuse. Anyone working with children or young people needs to be vigilant to the signs listed below:

- Regular flinching in response to sudden but harmless actions, for example someone raising a hand quickly
- Showing an inexplicable fear of particular places or making excuses to avoid particular people
- Knowledge of 'adult issues' for example alcohol, drugs and/or sexual behaviour which is inappropriate for their age or stage of development
- Angry outbursts or behaving aggressively towards other children, adults, animals or toys
- Becoming withdrawn or appearing anxious, clingy or depressed
- Self-harming or thoughts about suicide
- · Changes in eating habits or developing eating disorders
- Regularly experiencing nightmares or sleep problems
- · Regularly wetting the bed or soiling their clothes
- In older children, risky behaviour such as substance misuse or criminal activity
- Running away or regularly going missing from home or care
- Not receiving adequate medical attention after injuries.

These signs do not necessarily mean that a child is being abused. There may well be other reasons for changes in a child's behaviour such as a bereavement or relationship problems between parents/carers. In assessing whether signs are related to abuse or not, they need to be considered in the context of the child's development and situation.

#### It is also important to note:

- Many forms of abuse may not leave physical signs or physical evidence.
- Forensic evidence can disappear within a short period of time.
- Sexually abused children can suffer physical injury.
- Children of all ages, able bodied, disabled, children with or without learning disability, boys and girls from all races, cultures and classes, are abused.
- Young children's unhappiness and distress can often be seen in their behaviour.
- Older children may show unhappiness, but can be adept at hiding their distress.
- Race and culture may influence children's behaviour, their distress showing in different ways.

#### **NEGLECT - See also HSCB Neglect Strategy**

#### The nature of neglect

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

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

#### Neglect can include parents or carers failing to:

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

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

- Frequently going hungry.
- Frequently having to go to school in dirty clothes.
- Regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse.
- Being abandoned or deserted.
- Living in an unsuitable home environment, for example the house is very dirty or there are dangerous physical conditions.
- Not being taken to the doctor when ill.
- Not receiving dental care.
- Children who have taken on the role of carer for family members

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

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

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

#### Factors contributing to neglect

A number of factors are commonly present in the lives of children experiencing neglect. These factors should not be viewed as causing neglect in all circumstances, but, whether in isolation or combined, these elements can provide early indication of the potential for neglectful care of a child:

Mental health – one or both parents has mental health problems.

Substance misuse.

Domestic violence – unstable and abusive relationships.

Low income – the family has low income (below 60% of the median).

Material deprivation – the family cannot afford a number of food and clothing items.

Cycles of neglect and the adult caregivers' experience of poor parenting as a child.

Worklessness – no parent in the family is in work.

Housing – the family lives in poor quality and/or overcrowded housing.

Qualifications – no parent in the family has any academic or vocational qualifications.

Illness/disability – at least one parent has a limiting long-standing illness, disability or infirmity.

Poor parental functioning (including learning disabilities).

Social isolation.

Low self-concept or esteem.

#### **Indicators of neglect**

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

#### Physical indicators of neglect

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

#### Behavioural indicators of neglect

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

#### Appendix 1: Guide to Recognising Neglect in Children

Development and Education	Universal Level 1	Early Help Level 2		Targeted Early Help Level 3	Children's Social Care Level 4
Pre-School specific check-list (aged 0-5 years)	Child well stimulated, carer aware of importance of this	Carer is aware of importance of stimulating child however sometimes inconsistent interaction due to personal circumstances		Carer provides inconsistent or limited stimulation, child is sometimes left alone unless making noisy demands	Carer provides limited or no stimulation. Carer gets angry at demands made by child. Carer is hostile to professional advice. Child is restrained for the carers convenience such as in a pram
School aged child specific check-list (aged 5-16 years)	Child receives good level stimulation- carer talks to child in interactive way, reads stories, plays with child Child has age appropriate toys.	Carer provides appropriate level of stimulation.  Child has toys/games to support their development.		Carer provides inconsistent stimulation, does not appear to understand the importance for the child. Child lacks age appropriate toys/games (not due to finances)	Little or no stimulation provided.  Carer provides few toys/games - usually from other sources - not well kept.
	Carer takes child out to local parks/ activities regularly.	Carer takes child out to parks/activities - although sometimes struggles		Child has limited opportunities for activities/outings	Few if any activities/outings for the child Child prevented from going on outings/trips (e.g. with schools or friends).
	Carer takes active interest in child's schooling, attendance good, encourages child to see education as important.  Interested in school and homework.	Carer understands importance of school.  Provides appropriate level of support - although sometimes personal circumstances lead to inconsistency.  Attendance generally good - can sometimes sanction days off where not necessary.		Carer makes limited effort to maintain schooling, lacks consistent engagement.  Carer does not actively support homework/ attendance	Carer makes little or no effort to support education/schooling.  Lack of engagement, no support for homework.  Does not regard attendance as a concern.  Does not encourage child to see any area of education as positive.
Friendships	Carer supports friendship and understands importance to child.	Carer supports friendship, but does not always promote.		Child mainly finds own friendships, carer does not understand importance of friendships.	Carer hostile to friendships and shows no interest/ support.
Bullying	Carer alert to child being bullied/bullying behaviour and addresses issues.	Carer aware of bullying and intervenes when child asks		Carer has limited understanding of child being bullied/bullying behaviour and does not intervene or appropriately support child.	Carer indifferent to child bullying or being bullied.
Attachment and emotional care	Universal Level 1	Early Help Level 2		Targeted Early Help Level 3	Children's Social Care Level 4
Parental motivation for change	Carer is determined to act in child's best interests.	Carer seems concerned with child's welfare and wants to meet their needs but has problems with their own pressing needs.		Carer is not concerned enough about child to address competing needs and this leads to some of child's needs not being met.	Carer rejects the parenting role and takes a hostile attitude to child care responsibilities.
	Carer is concerned about child's welfare and wants to meet the child's physical, social and emotional needs to the extent they understand them.	Professed concerns are often not translated into actions, and carer regrets their own difficulties are dominating.  Would like to change but finds it hard.		Carer does not have the right priorities and may take an indifferent attitude.	Carer does not see that they have a responsibility to the child and believe the child is totally responsible for them elves, or the child deserves hostile parenting.
	Carer is realistic and confident about the problems to overcome and is willing to make sacrifices for the child.	Disorganised, pays insufficient time to children or misreads signals.		Lack of interest in the child's welfare and development.	May seek to give up responsibility for the child.

Page **27** of **76** 

#### **EMOTIONAL ABUSE**

#### The nature of emotional abuse

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

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

#### Indicators of emotional abuse

#### **Developmental issues**

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

#### **Behaviour**

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

#### Social issues

- Withdrawal from physical contact.
- Withdrawal from social interaction.

Page 28 of 76

- Over-compliant behaviour.
- Insecure, clinging behaviour.
- Poor social relationships.

#### **Emotional responses**

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

#### PHYSICAL ABUSE

#### The nature of physical abuse

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

A skin map (*Annex 7*) can assist in the clear recording and reporting of physical abuse. This should only be used to record observed injuries or those volunteered by the pupil and no child should be asked to remove clothing by a member of staff.

### Indicators of physical abuse / factors that should increase concern Bruising:

- Multiple bruising or bruises and scratches (especially on the head and face).
- Bruises on the cheeks, ears, palms, arms and feet
- Clusters of bruises e.g., fingertip bruising (caused by being grasped).
- Bruises around the neck and behind the ears the most common abusive injuries are to the head.
- Bruises on the back, chest, buttocks, or on the inside of the thighs.
- Marks indicating injury by an instrument e.g., linear bruising (stick), parallel bruising (belt), marks of a buckle.
- · Bite marks.

#### Burns or scalds:

- Deliberate burning may also be indicated by the pattern of an instrument or object

   e.g., electric fire, cooker or cigarette.
- Scalds with upward splash marks or tide marks.
- Other signs:

- Untreated injuries.
- Recurrent injuries or burns.
- Bald patches.

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

- The explanation given does not match the injury.
- The explanation uses words or phrases that do not match the vocabulary of the child (adult's words).
- No explanation is forthcoming.
- The child (or the parent/carer) is secretive or evasive.
- The injury is accompanied by allegations of abuse or assault.

#### You should be concerned if the child or young person:

- Is reluctant to have parents/carers contacted.
- Runs away or shows fear of going home.
- Is aggressive towards themselves or others.
- Flinches when approached or touched.
- Is reluctant to undress to change clothing for sport.
- Wears long sleeves during hot weather.
- Is unnaturally compliant in the presence of parents/carers.
- Has a fear of medical help or attention.
- Admits to a punishment that appears excessive.

#### **SEXUAL ABUSE**

#### The nature of sexual abuse

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

Sexual exploitation is seen as a separate category of sexual abuse. Indicators of CSE can be found in the school's safeguarding policy.

#### Characteristics of child sexual abuse

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

Page 30 of 76

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

#### Indicators of sexual abuse

#### Physical observations

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

#### **Behavioural observations**

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

#### **OFFENDERS**

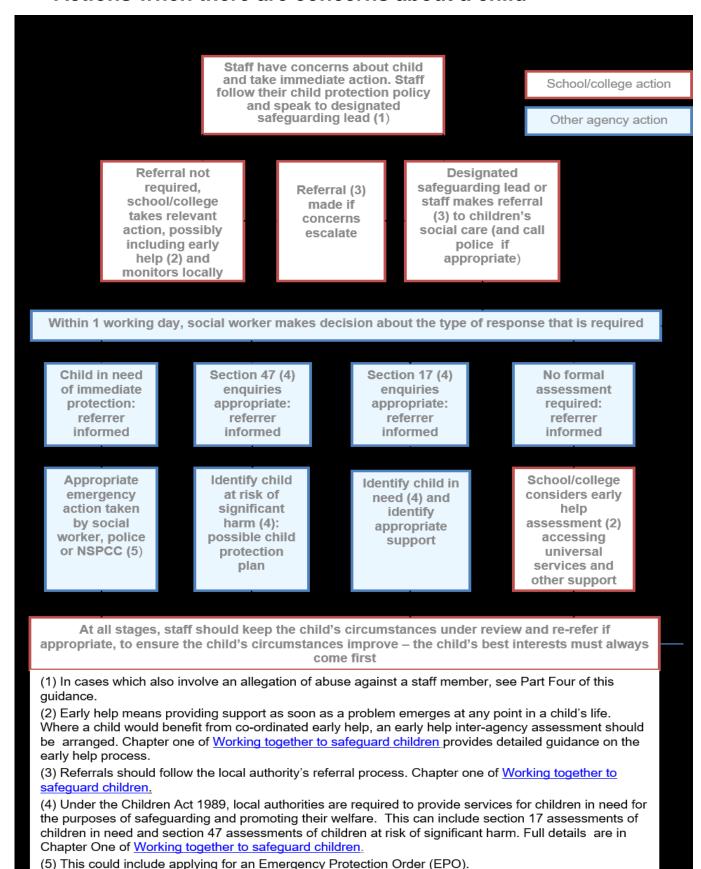
- Can be male/female/a friend/a relative/kind/ordinary etc.
- Often have experienced parental separation in early childhood.
- Often have difficulty with relationships, are loners and underachievers.
- Always have a need to exert power.

#### **STEPS TO OFFENDING**

- Thinking and wanting.
- Making it 'OK'.
- Creating the opportunity.
- Overcoming the victim's resistance i.e. befriending (grooming).
- Offence.
- Together with threats to 'telling'.

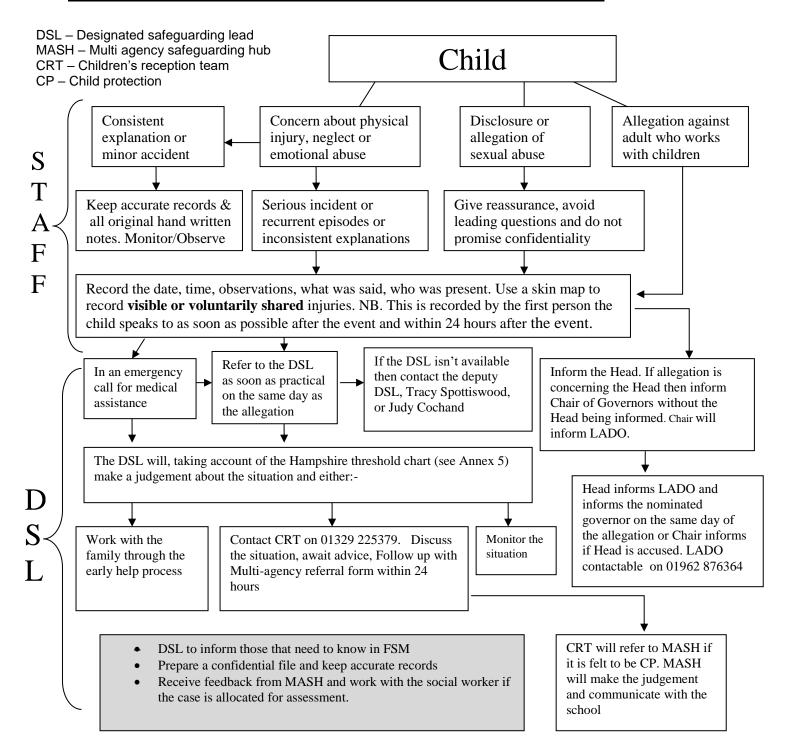
This cycle can take months but eventually will be repeated.

#### Actions when there are concerns about a child



#### Annex 4

#### FLOWCHART FOR FSM CHILD PROTECTION PROCEDURES











Annex 5

# Hampshire Safeguarding Children Partnership and Children's Trust Thresholds Chart

https://www.hampshirescp.org.uk/wp-content/uploads/2019/08/Hampshire-IOW-Thresholds-Chart-July-2019-1.pdf

See also paper copy in Staff room or Staffroom/School Child Protection Policy copies

#### **CONFIDENTIAL**

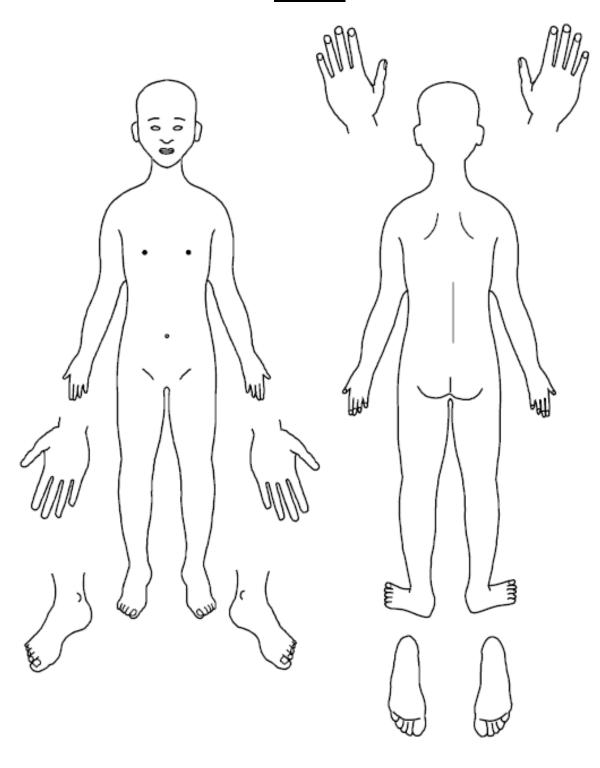
## FSM SAFEGUARDING CONCERN FORM - DISCLOSURES, OBSERVATIONS AND ACTIONS

Referral details									
Time:	Na	ame of Referrer:							
Date:	Ro	ole:							
Place:	Ad	ctivity at time of disclosure/observation	on/action:						
Are you reporting your own concerns or responding to concerns raised by someone else?									
(delete as appropriate)									
If responding to someone else's conce	erns, please <sub>l</sub>	provide their name and position.							
Child's details:									
Name:	D 0 D	0 1 50	•.						
Age:	D.O.B.:	Gender: Ethnic	•						
School:		Class:	Teacher:						
Any Disability or S.E.N.:									
Changes in Child's Behaviour?									
Any other information?	<b>.</b>								
- Details of physical signs or ind	icators:								
Details of concern: (include actu	ual words s	aid if possible)							
Nature of concern									
What were you doing before an									
		g time when concern was raised?							
What was said and done and by	•								
What the child or person actual	•								
Any interpretations or conclusion		nat observed, heard or alleged?							
Note what is fact and what is on		_							
What you said about confidentia	•	•							
Any action taken immediately a	nd before r	making the record?							

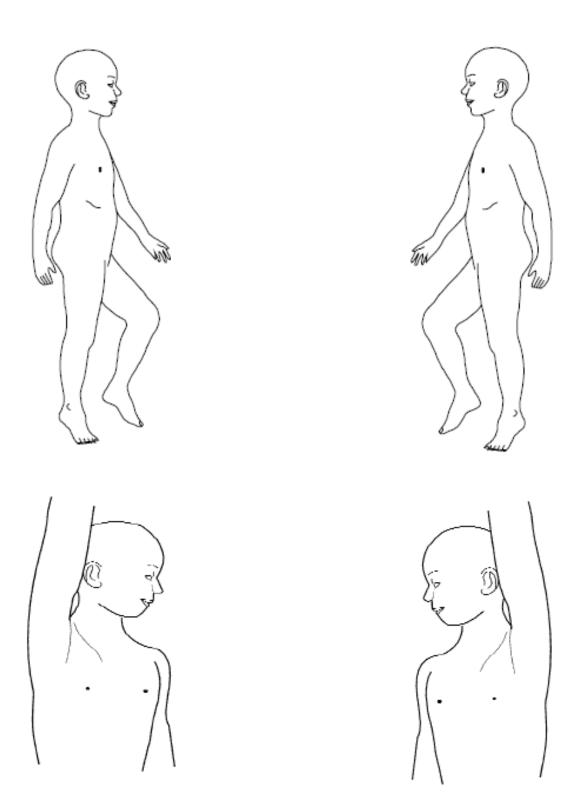
Parties involved and any witnes	ses?		
Current Safety of Child?			
- M II IO			
Emergency Medical?			
Who Else Knows?			
who else knows?			
Action Taken to date:			
Name and designation of who you	reported to:		
Traine and deergnamen or mie year			
Their contest detaile.			
Their contact details:			
Agreed actions:			
Notification to which agency: e.g. I	LADO, Police:		
Organisation:			
Date/Time: Name and phone no. of contact:			
Further Actions required by whom	and when:		
Taraner / teache required by union.	and mion		
		<del></del>	
Completed by:	Date:	Time:	
Signed off by: :	Date:	Time:	
Olgrica on by	Date.	TITIO.	

Provide to Designated Safeguarding Lead for secure storage

## Skin map



Name of Child:	
Date of birth:	_ Date of recording:
Name of completer:	



Any additional information:		

## **DEALING WITH DISCLOSURES**

All staff receive induction training on Child Protection and Safeguarding which includes how to listen and respond to children. The following information is intended to assist you if you become involved in a potential safeguarding situation when a child or young person makes a disclosure.

A disclosure from a child could occur at any time. Note that this is a completely different procedure to interviewing pupils on disciplinary issues.

A member of staff who is approached by a child should:

- Listen positively and sympathetically and try to reassure them.
- Let the child talk without interrupting or directly questioning and allow the pupil to finish.
- Not promise complete confidentiality and explain that they may need to pass information to other professionals to help keep the child or other children safe. The degree of confidentiality should always be governed by the need to protect the child.

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

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

### **GUIDING PRINCIPLES, THE SEVEN R'S**

#### Receive

- Remain calm.
- Listen to what is being said, without displaying shock or disbelief.
- Accept what is said and take it seriously.
- Make a note of what has been said as soon as practicable.

## Reassure

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

## Respond

- Respond to the pupil only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details.
- If possible, let them tell you, no more. Do not ask 'leading' questions i.e. 'did he touch your private parts?' or 'did she hurt you?' Such questions may invalidate your evidence (and the child's) in any later prosecution in court. The acronym T.E.D can be helpful. (Tell me, Explain, Describe).
- Do not ask the child why something has happened
- Use only the specific vocabulary used by the child in explaining the allegation.
- Do not criticise the alleged perpetrator; the pupil may care about him/her, and reconciliation may be possible.
- Do not ask the pupil to repeat it all for another member of staff. Explain what you have to do next and whom you have to talk to. Reassure the pupil that it will be a senior member of staff.

## Report

- Share concerns with the DSL or Deputy DSL's as soon as possible or in the case of an allegation against a member of staff, the Head.
- If you are not able to contact your DSL or Deputy DSL's and the child is at risk of immediate harm, contact the children's services department directly.
- If you are dissatisfied with the level of response you receive following your concerns, you should press for re-consideration.

#### Record

- If possible make some brief notes at the time, and write them up as soon as possible using the FSM School Safeguarding Concern Form (Annex 6). (Keep your original notes on file).
- Record the date, time, place, persons present and noticeable nonverbal behaviour, and the words used by the child. If the child uses sexual 'pet' words, record the actual words used, rather than translating them into 'proper' words.
- Record the date and times of an alleged event.
- Complete a body map to indicate the position of any noticeable bruising or injury but only of that which has been observed or is freely disclosed by a pupil.
- Record facts and observable things, rather than your 'interpretations' or 'assumptions.'
- Sign and date it and return it immediately to the DSL. If the DSL/Head is part of an allegation, refer the record to the Chair of Governors, without the DSL/Head being told.
- The record will be stored securely and away from the main pupil records. Referrals
  where urgent action is required should never be delayed in order for a full record to be
  written.

## If you are needed to teach, cover will be arranged for you.

### Remember

Support the child: listen, reassure, and be available.

- Complete confidentiality is essential. Share your knowledge only with appropriate professional colleagues.
- Try to get some support for yourself if you need it.

## Review (led by DSL)

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

## What happens next?

- It is important that concerns are followed up and it is everyone's responsibility to ensure that they are.
- The member of staff should be informed by the DSL what has happened following the report being made. If they do not receive this information they should be proactive in seeking it out.
- If a staff member believes that their concerns have not been referred on or that the child remains at risk, they should initially ask the DSL to reconsider, ensuring that the risks are understood. If this does not result in a satisfactory outcome, or the DSL rationale appears to miss the risk to the child, then the *Confidential Reporting* procedures of the school should be followed. If the DSL is unhappy with the response from Children Social Care, they should consider following the HSCP escalation protocol.
- Receiving a disclosure can be upsetting for the member of staff and schools should have a procedure for supporting them after the disclosure. This might include reassurance that they have followed procedure correctly and that their swift actions will enable the allegations to be handled appropriately. For some staff, use of an employeebased counselling service may be appropriate.

## **ALLEGATIONS AGAINST ADULTS WHO WORK WITH CHILDREN**

Working Together to Safeguard Children (2018) states that organisations should have clear policies in line with those from the **local safeguarding arrangements** for dealing with allegations against people who work with children. Those policies should make a clear distinction between an allegation, a complaint or a concern about the quality of care or practice.

Allegations as defined by KCSiE should be reported to the Local Authority Designated Officer, (LADO). Complaints or concerns can be managed independently by FSM under internal procedures.

## Complaints could include:-

- Breaches of the Code of Conduct
- Failure to follow policy, procedure or guidance
- Any breach of data protection or confidentiality
- Poor behaviour management
- Inappropriate use of social media
- Misadministration of medication

### Concerns could include:-

- Inappropriate use of language, shouting or swearing
- Discussing personal or sexual relationships with, or in the presence, of pupils
- Making (or encouraging others to make) unprofessional comments which scapegoat, demean or humiliate children, or might be interpreted as such.

### **ALLEGATIONS PROCEDURE**

This procedure should be used in all cases in which it is alleged a member of staff or volunteer in a school has:

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

'Staff' includes adults in the school from external agencies; those in a temporary, supply or locum basis within the school; and adults not directly involved in face to face work within the FSM environment.

Allegations that a member of staff has abused a pupil or pupils either inside the FSM premises or during an FSM trip or visit could be made by:

- Parents.
- The abused pupil.
- Other members of staff.

- Other pupils.
- The Police or Social Services.
- A third party.

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

- Report any concerns about the conduct of any member of staff or volunteer to the Head as soon as possible
- If an allegation is made against the Head, the concerns need to be raised with the Chair of Governor as soon as possible without the Head being informed. If the Chair of Governors is not available, then the LADO should be contacted directly. Allegations against a teacher who is no longer teaching should be referred to the police.
- There may be situations when the Head or Chair of Governors will want to involve the police immediately, if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.
- Once an allegation has been received by the Head or Chair of Governors, they will
  contact the LADO on 01962 876364 or <a href="mailto:child.protection@hants.gov.uk">child.protection@hants.gov.uk</a> as soon as
  possible and before carrying out any investigation into the allegation other than
  preliminary enquiries.
- Inform the parents of the allegation unless there is a good reason not to do so.

In Hampshire, the Independent Schools LADO is: Fiona Armfield: <a href="mailto:fiona.armfield@hants.gov.uk">fiona.armfield@hants.gov.uk</a> – or Mark Blackwell <a href="mailto:mark.blackwell@hants.gov.uk">mark.blackwell@hants.gov.uk</a> both available on (01962 876364)

In liaison with the LADO, the school will determine how to proceed and if necessary the LADO will refer the matter to Children's Social Care and/or the police.

If the matter is investigated internally, the LADO will advise the school to seek guidance from their personnel/HR provider in following procedures set out in chapter 4 of 'Keeping Children Safe in Education' (2020) and the HSCP procedures.

When an allegation is made, FSM will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered. Information will remain confidential between these parties and the investigating outside agencies until FSM has been informed otherwise and then in line with KCSIE 2020.

FSM will take advice from the LADO, police and children's social care services to agree the following:

- Who needs to know and, importantly, exactly what information can be shared.
- How to manage speculation, leaks and gossip.
- What, if any information can be reasonably given to the wider community to reduce speculation.
- How to manage press interest if and when it should arise.

The Head will inform the accused person about the allegation as soon as possible after consulting the LADO. It is extremely important that the Head provides them with as much information as possible at that time. However, where a strategy discussion is needed, or Page 44 of 76

police or children's social care services need to be involved, the Head will not do that until those agencies have been consulted, and have agreed what information can be disclosed to the accused. FSM will consider carefully whether the circumstances of a case warrant a person being suspended from contact with children at the school or whether alternative arrangements can be put in place until the allegation or concern is resolved. All options to avoid suspension will be considered prior to taking that step (see further information on suspension which follows).

- Where it is clear that an investigation by the police or children's social care services is unnecessary, or the strategy discussion or initial evaluation decides that is the case, the LADO should discuss the next steps with the Head. In those circumstances, the options open to FSM depend on the nature and circumstances of the allegation and the evidence and information available. This will range from taking no further action to dismissal or a decision not to use the person's services in future. Suspension will not be the default position: an individual will be suspended only if there is no reasonable alternative.
- In some cases, further enquiries will be needed to enable a decision about how to proceed. If so, the LADO should discuss with the Head how and by whom the investigation will be undertaken. In straightforward cases, the investigation should normally be undertaken by the DSL or another senior member of the FSM staff.
- Should an allegation be made against a supply teacher, Agencies should be fully involved and co-operate in any enquiries from the LADO, police and/or children's social services. FSM will usually take the lead because agencies do not have direct access to children or other FSM staff, so they will not be able to collect the facts when an allegation is made, nor do they have all the relevant information required by the LADO as part of the referral process. Supply teachers, whilst not employed by FSM, are under the supervision, direction and control of the governing body when working here. They should be advised to contact their trade union representative if they have one, or a colleague for support. The allegations management meeting which is often arranged by the LADO should address issues such as information sharing, to ensure that any previous concerns or allegations known to the agency are taken into account by FSM during the investigation.
- When using an agency, FSM should inform the agency of its process for managing allegations. This should include inviting the agency's human resource manager or equivalent to meetings and keeping them up to date with information about its policies.

The initial sharing of information and evaluation may lead to a decision that no further action is to be taken in regard to the individual facing the allegation or concern; If the matter is investigated internally, the LADO will advise the school to seek guidance from their personnel/HR provider in following procedures set out in 'Keeping children safe in education' (2020) and the HSCP procedures. This decision and a justification for it should be recorded by both the Head and the LADO, and agreement reached on what information should be put in writing to the individual concerned and by whom. The Head will then consider with the LADO what action should follow both in respect of the individual and those who made the initial allegation.

### **ANONYMOUS ALLEGATIONS**

If we are faced with an anonymous allegation of child abuse which names both a member of staff and a child, we will handle it in exactly the same way as if we knew the identity of the person making the allegation. Where the allegation names the member of staff, but not the pupil, we will normally interview the member of staff, and ask for his or her version of events. It could be appropriate to establish a mentoring or review programme for that individual, or to provide him or her with further training. A record would be kept on the individual's personal file.

The following definitions should be used when determining the outcome of allegation investigations:

- **Substantiated:** there is sufficient evidence to prove the allegation.
- **Malicious**: there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive.
- False: there is sufficient evidence to disprove the allegation.
- **Unsubstantiated**: there is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.
- **Unfounded**: to reflect cases where there is no evidence or proper basis which supports the allegation being made.

### ALLEGATIONS INVOLVING THE HEAD

The Chair of Governors, without the Head being informed, will obtain legal advice before proceeding to the steps outlined below. The Head will normally be suspended for the duration of the investigatory process and asked to vacate his school residence, and a Deputy Head will be made acting Head until the conclusion of the investigation and resolution of the issue.

A DDSL will take responsibility for safeguarding until the conclusion of the investigation and resolution of the issue.

# SUPPORTING THOSE INVOLVED Support for the Pupil

Our priority is to safeguard the young people in our care. We will give all the support that we can to a pupil who has been abused.

- Parents or carers of a child or children involved will be told about the allegation as soon
  as possible if they do not already know of it. However, where a strategy discussion is
  required, or police or children's social care services need to be involved, the DSL/Chair
  of Governors will not do so until those agencies have been consulted and have agreed
  what information can be disclosed to the parents or carers.
- The Head/DSL and LADO will consider how best to support and monitor the pupil concerned through any process of investigation, liaising closely with parents, guardians, Local Safeguarding Children Partnership (LSCP), or other agencies involved to identify the support strategies that will be appropriate.
- Parents or carers will also be kept informed about the progress of the case, and told the outcome where there is not a criminal prosecution, including the outcome of any Page 46 of 76

- disciplinary process. The deliberations of a disciplinary hearing, and the information taken into account in reaching a decision, cannot normally be disclosed, but the parents or carers of the child should be told the outcome in confidence.
- Parents and carers will also be made aware of the prohibition on reporting or publishing allegations about teachers in section 141F of the Education Act 2002. If parents or carers wish to apply to the court to have reporting restrictions removed, they should be told to seek legal advice.
- In cases where a child may have suffered significant harm, or there may be a criminal prosecution, children's social care services, or the police as appropriate, should consider what support the child or children involved may need.
- FSM will ensure the child's wishes and feelings are taken into account at each stage when determining what action to take and what services to provide.

## Supporting a Member of Staff Accused

FSM have a duty of care to their employees. FSM will act to manage and minimise the stress inherent in the allegations process. Support for the individual is vital to fulfilling this duty. Individuals will be informed of concerns or allegations as soon as possible and given an explanation of the likely course of action, unless there is an objection by the children's social care services or the police. The individual will be advised to contact their trade union representative, if they have one, or a colleague for support. Welfare counselling or medical advice may also be sought.

The Head will appoint a named representative to keep the person who is the subject of the allegation informed of the progress of the case and consider what other support is appropriate for the individual. Particular care needs to be taken when employees are suspended to ensure that they are kept informed of both the progress of their case and current work-related issues. Social contact with colleagues and friends should not be prevented unless there is evidence to suggest that such contact is likely to be prejudicial to the gathering and presentation of evidence.

### Suspension

Suspension of a member of staff is a neutral act and does not imply that any judgement has been reached about his or her conduct. Even so, suspension will not be an automatic response when an allegation is reported; all options to avoid suspension will be considered prior to taking that step. It is a serious step, and we will take legal advice beforehand, and will normally only suspend a member of staff where:

- There is a serious risk of harm (or further harm) to the child.
- The allegations are so serious as to constitute grounds for dismissal, if proven.
- The police are investigating allegations of criminal misconduct.
- We recognise fully that we have a duty of care towards all of our staff, and we will always:
  - Keep an open mind until a conclusion has been reached.
  - Interview a member of staff before suspending him or her.
  - Keep him or her informed of progress of the investigation.

- Any member of staff who is invited to a meeting whose outcome is likely to result in his
  or her suspension, is entitled to be accompanied by a friend or Trade Union
  representative.
- Staff living in school accommodation who are suspended will be required to remain offsite for the duration of their suspension. FSM will assist in finding alternative accommodation.

## **Alternatives to Suspension**

We will always consider whether an alternative to suspension might be appropriate. Possibilities include:

- Redeployment within the school so that the individual does not have direct contact with the child or children concerned.
- Providing an assistant to be present when the individual has contact with children.
- Redeploying to alternative work in the school so the individual does not have unsupervised access to children; moving the child or children to classes where they will not come into contact with the member of staff, making it clear that this is not a punishment and parents have been consulted.
- Sending the member of staff on leave.

If immediate suspension is considered necessary, the rationale and justification for such a course of action should be agreed and recorded by both the Head and the LADO. This should also include what alternatives to suspension have been considered and why they were rejected. Where it has been deemed appropriate to suspend the person, written confirmation should be dispatched within one working day, giving as much detail as appropriate for the reasons for the suspension. It is not acceptable for an employer to leave a person who has been suspended without any support. The person should be informed at the point of their suspension who their named contact is within the organisation and provided with their contact details.

### If the Member of Staff Resigns

The resignation of a member of staff or volunteer mid-way through an investigation would not lead to the investigation being abandoned. Our policy is always to complete every investigation into allegations of child abuse.

### **Compromise Agreements**

The policy at FSM is to follow the DfE guidance set out in "Keeping Children Safe in Education" (2020) on the use of compromise agreements in cases of child abuse which is: "Compromise agreements, by which a person agrees to resign, and a school (...) agrees not to pursue disciplinary action, and both parties agree a form of words to be used in any future reference, must not be used in these cases. In any case, such an agreement will not prevent a thorough police investigation where that is appropriate. Nor can it override the statutory duty to make a referral to List 99 (latterly ISA and now the Disclosure and Barring Service (D.B.S)) and the TRA, where circumstances require it."

### **Length of Investigatory Process**

We recognise that everyone's interests are served by completing any investigatory process as swiftly as possibly. FSM is a small community and we will aim to spend as little time as is compatible with fair and impartial processes on the investigatory process. If the nature of the allegation does not require formal disciplinary action, we will look to **instigate** appropriate action within three working days." We would expect almost every other case to be completed within one month.

### Referral When a Person's Services Are Discontinued

Like all schools, we have a statutory legal duty to refer an individual, where there is the risk that he or she may harm, or has caused harm to children. This will be made to the DBS within one month of the individual's dismissal or resignation because he or she has been considered unsuitable to work with children. Ceasing to use a person's services includes: dismissal; non-renewal of a fixed-term contract; no longer engaging/refusing to engage a supply teacher provided by an employment agency; terminating the placement of a student teacher or other trainee; no longer using staff employed by contractors; no longer using volunteers; resignation; and voluntary withdrawal from supply teaching, contract working, a course of initial teacher training, or volunteering.

Reports concerning members of staff or volunteers are normally made by the Head. If the Head is involved, the report is made by the Chair of Governors. The referral form can be downloaded from the DBS website, (<a href="www.homeoffice.gov.uk/DBS">www.homeoffice.gov.uk/DBS</a>). FSM plays no part in the subsequent process of barring individuals from working with children and/or vulnerable adults. We also have a legal duty to respond to any requests for information that we receive from the DBS at any time.

Address for referrals:
Disclosure and Barring Service
Post Office Box 3963
Royal Wooten Bassett
SN4 4NH
dbsdispatch@dbs.gsi.gov.uk

Tel: 03000 20 190

FSM will also notify the DfE and consider making a referral to the Teaching Regulation Agency (TRA). FSM will make a Serious Incident Report to the Charity Commission whenever the Commission's guidelines deem it appropriate to do so.

#### RECORDING ALLEGATIONS OF ABUSE

Details of allegations that are found to have been malicious should be removed from personnel records. However, for all other allegations, it is important that a clear and comprehensive summary of the allegation, details of how the allegation was followed up and resolved, and a note of any action taken and decisions reached including any disciplinary actions, is kept on the confidential personnel file of the accused. A copy will be given to the individual and they will be told that the record will be retained until he or she reaches statutory retirement age, or for ten years, if that is longer.

# HANDLING MALICIOUS, FALSE, UNSUBSTANTIATED OR UNFOUNDED ALLEGATIONS

The Child: A child who has been the centre of unfounded or unsubstantiated allegations of child abuse needs professional help in dealing with the aftermath. The LADO should refer the matter to the children's social care services to determine whether the child concerned is in need of services such as an Educational Psychologist, as well as possible support from a Counsellor. We shall be mindful of the possibility that the allegation of abuse was an act of displacement, masking abuse that is actually occurring within the child's own family and/or community. If an allegation is shown to be deliberately invented or malicious, the Head will consider whether any disciplinary action is appropriate against the pupil who made it; or whether the police should be asked to consider if action might be appropriate against the person responsible, even if he or she was not a pupil. However much support the child may need in such circumstances; we need to be sensitive to the possibility that the aftermath of an unfounded allegation of abuse may result in the irretrievable breakdown of the relationship with the teacher. In such circumstances, we may conclude that it is in the child's best interests to move to another school. We would do our best to help him/her to achieve as smooth a transition as possible, working closely with the parents or quardians.

The Member of Staff: A member of staff could be left at the end of an unfounded or unsubstantiated allegation of child abuse with severely diminished self-esteem, feeling isolated and vulnerable, all too conscious that colleagues might shun him/her on the grounds of "no smoke without fire." If issues of professional competency are involved, and though acquitted of child abuse, disciplinary issues are raised; we recognise that he or she is likely to need both professional and emotional help. We will undertake to arrange a mentoring programme in such circumstances, together with professional counselling outside the school community. A short sabbatical or period of re-training may be appropriate. Where it is decided on the conclusion of a case that a person who has been suspended can return to work, the Head will consider how best to facilitate that. Most people will benefit from some help and support to return to work after a stressful experience. Depending on the individual's circumstances, a phased return and/or the provision of a mentor to provide assistance and support in the short term may be appropriate. The Head will also consider how the person's contact with the child or children who made the allegation can best be managed if they are still a pupil at FSM.

NB. No such cases should be included in an employer's references.

## ALLEGATION OF ABUSE OF A CHILD WHO IS NOT A PUPIL AT FSM

If we were given information that suggested that a member of staff was abusing a child who was not a pupil at FSM, we would immediately pass such information to the Hampshire Safeguarding Children's Partnership (HSCP) to handle. We would then interview the member of staff and formally advise them of the allegations, making it clear that FSM would not play any part in the investigatory process. They would be advised of the possibility of facing suspension, re-assignment to other duties etc. in exactly the same way as if the

allegation had involved an FSM pupil. If the allegation subsequently proved to be unfounded, he or she would be given full support by FSM in resuming their career.

### **LEARNING LESSONS**

At the conclusion of a case in which an allegation *is* substantiated, the LADO should review the circumstances of the case with the Head to determine whether there are any improvements to be made to FSM's procedures or practice to help prevent similar events in the future. This should include issues arising from the decision to suspend the member of staff, the duration of the suspension and whether or not suspension was justified. Lessons should also be learnt from the use of suspension when the individual is subsequently reinstated. The LADO and Head should consider how future investigations of a similar nature could be carried out without suspending the individual.

#### PEER ON PEER/CHILD ON CHILD ABUSE

Children can abuse other children. This is generally referred to as peer on peer/child on child abuse. It is any form of physical, sexual, emotional and financial abuse, and coercive control exercised between children, and within children's relationships (both intimate and non-intimate), friendships, and wider peer associations.

1 Peer-on-peer/child on child abuse can take various forms, including (but not limited to): serious bullying (including cyberbullying), ); physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; initiating/hazing type violence and rituals; and harmful sexual behaviours, relationship abuse, domestic violence and abuse, child sexual exploitation, child criminal exploitation, youth and serious youth violence, and/or prejudice-based abuse including, but not limited to, gender-based abuse.

2 Online peer-on-peer/ child on child abuse is any form of peer-on-peer abuse with a digital element, for example, sexting, online abuse, coercion and exploitation, peer-on-peer/ child on child grooming, threatening language delivered via online means, the distribution of sexualised content, and harassment.

At FSM 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 and other students in the school. In most instances, the conduct of students towards each other will be covered by FSM's Behaviour and Disciplinary policy, Anti-bullying or Cyberbullying policy. Occasionally some behaviours may be of such a serious nature that they may raise further safeguarding concerns. These allegations are most likely to include physical abuse, emotional abuse or sexual violence, sexual harassment and sexual exploitation.

It is likely that for an allegation to be considered a safeguarding concern, some of the following features will be found. If 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.

### Victims and alleged perpetrators

There are many different ways to describe children who have been subjected to peer on peer/child on child abuse and many ways to describe those who are alleged to have carried out any form of abuse.

For the purposes of this advice, we use the term 'victim'. It is a widely recognised and understood term. It is important that staff recognise that not everyone who has been subjected to peer on peer/child on child abuse considers themselves a victim or would want to be described in this way. We will be conscious of this when managing any incident and be prepared to use any term with which the individual child is most comfortable.

For the purpose of this advice we use the term 'alleged perpetrator'. It is important to remember that, as a child, any alleged perpetrator is entitled to, deserving of, and should be provided with, a different level of support to that which might be provided to an adult who is alleged to have abused a child.

Reports of sexual violence and sexual harassment are extremely complex to manage. It is essential that victims are protected, offered appropriate support and every effort is made to ensure their education is not disrupted. It is also important that other children, adult students and school staff are supported and protected as appropriate.

### **HARMFUL SEXUAL BEHAVIOURS:**

See also Safeguarding Policy: Sexting (Youth Produced Imagery)

Children's sexual behaviours exist on a wide continuum, from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviours are developmentally inappropriate and may cause developmental damage.

Children and young people who develop harmful sexual behaviour (HSB) harm themselves and others.

### HSB can include:

- using sexually explicit words and phrases;
- inappropriate touching;
- using sexual violence or threats; or
- full penetrative sex with other children or adults.

Harmful sexual behaviours can occur online and offline and can occur simultaneously between the two. When considering harmful sexual behaviours, ages and the stages of development of the children are critical factors to consider. Sexual behaviour between children can be considered harmful if one of the children is much older, particularly if there is more than two years' difference in age or if one of the children is pre-pubescent and the other is not. However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature.

### Spotting the signs of harmful sexual behaviour

It's normal for children to show signs of sexual behaviour at each stage in their development. Children also develop at different rates and some may be slightly more or less advanced than other children in their age group. Behaviours which might be concerning depend on the child's age and the situation.

The Brook sexual behaviours traffic light tool can help when considering harmful sexual behaviours. See *Annex 11* 

Harmful sexual behaviours can, in some cases, progress on a continuum. Addressing inappropriate behaviour can be an important intervention that helps prevent problematic, abusive and/or violent behaviour in the future. Children displaying harmful sexual behaviours have often experienced their own abuse and trauma. It is important that they are offered appropriate support.

# THE SAFEGUARDING IMPLICATIONS OF SEXUAL ACTIVITY BETWEEN YOUNG PEOPLE.

The intervention of child protection agencies in situations involving between sexual activity children can require difficult professional judgments. Some situations are statutorily clear:

a child under the age of 13 can never consent to sexual activity;

Page 54 of 76

- the age of consent is 16;
- sexual intercourse without consent is rape;
- rape, assault by penetration and sexual assault are defined in law, and
- Creating and sharing sexual photos and videos of under-18s is illegal (often referred to as sexting). This includes children making and sharing sexual images and videos of themselves.

But it will not necessarily be appropriate to initiate safeguarding procedures where sexual activity involving children and young people below the age of legal consent (16 years) comes to notice. In our society generally, the age at which children become sexually active has steadily dropped. It is important to distinguish between consensual sexual activity between children of a similar age (where at least one is below the age of consent), and sexual activity involving a power imbalance, or some form of coercion or exploitation. It may also be difficult to be sure that what has or has been alleged to have taken place definitely does have a sexual component.

### SEXUAL VIOLENCE AND SEXUAL HARASSMENT BETWEEN CHILDREN?

### Context:

- Sexual violence and sexual harassment can occur between two children of any age or sex. They can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. However, research shows it is more likely that girls will be the victims of sexual violence and more likely that sexual harassment will be perpetrated by boys
- 2. 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 and offered appropriate support.

## WHAT IS SEXUAL VIOLENCE AND SEXUAL HARASSMENT?

Sexual violence includes:

**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.

#### Consent?

Someone consents only if s/he agrees by choice and has the freedom and capacity to make that choice. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g.to oral but not vaginal 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.

#### Sexual harassment

Sexual harassment is 'unwanted conduct of a sexual nature' that can occur online and offline. 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: deliberating brushing against someone, interfering with someone's clothes (schools 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, which might include:
  - non-consensual sharing of sexual images and videos and sharing sexual images and videos (both often referred to as sexting)
  - o unwanted sexual comments on social media:
  - o unwanted sexual comments and messages, including, on social media; and
  - o sexual exploitation; coercion and threats

Sexual harassment (as set out above) creates an atmosphere that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence.

### **UPSKIRTING**

'Upskirting' typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.

## PREVENTING PEER ON PEER/CHILD ON CHILD ABUSE

FSM's approach to peer on peer/ child on child abuse will be part of FSM's broader whole school approach to safeguarding and child protection.

FSM has a clear set of values and standards, and these will be upheld and demonstrated throughout all aspects of FSM life.

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.

Staff should also be aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk.

- Additional barriers can sometimes exist when recognising abuse in SEND children.
   These can include:
  - assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
  - the potential for children with SEND being disproportionately impacted by behaviours such as bullying and harassment, without outwardly showing any signs; and
  - o communication barriers and difficulties overcoming these barriers.
- Children who are Lesbian, Gay, Bi, or Trans (LGBT) can be targeted by their peers. In some cases, a child who is perceived by their peers to be LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT.

This is further underpinned by FSM's Behaviour and Discipline policy and pastoral support system, and by a planned programme of evidence-based content delivered through the PSHCEE curriculum which develops students understanding of acceptable behaviour and keeping themselves safe. This programme is developed to be age and stage of development appropriate, and may tackle such issues as:

- healthy and respectful relationships;
- what respectful behaviour looks like;
- gender roles, stereotyping, equality;
- body confidence and self-esteem;
- prejudiced behaviour;
- that sexual violence and sexual harassment is always wrong; and
- addressing cultures of sexual harassment.

Children at FSM are regularly made aware of the processes by which to raise their concerns or make a report, knowing that they will be listened to, believed and valued. This should include processes when they have a concern about a friend or peer.

FSM will also consider carefully if external input is necessary to train and/or support staff, teach children and/or provide support to children.

FSM will also deliver targeted work on assertiveness and keeping safe to those pupils identified as being at risk and develop robust risk assessments & provide targeted work for pupils identified as being a potential risk to other pupils

### THE RESPONSE TO A REPORT OF PEER ON PEER/CHILD ON CHILD ABUSE

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.

If staff have a concern about a child or a child makes a report to them, as with all safeguarding concerns it is important that in such instances staff take appropriate action in accordance with this child protection policy.

See 'Dealing with Disclosures (Annex 8)

As usual, important decisions should be made on a case by case basis, on the basis of an assessment of the children's best interests with the designated safeguarding lead (or a deputy) taking a leading role and using their professional judgement. Referral to other agencies, such as children's social care and the police as required under safeguarding arrangements may be necessary, guided by an assessment of the extent to which a child is suffering, or is likely to suffer, significant harm.

When there has been a report of sexual violence, the DSL (or a deputy) should make an immediate risk and needs assessment. Where there has been a report of sexual harassment, the need for a risk assessment should be considered, along with a preventative, supervision plan, on a case-by-case basis. The risk and needs assessment should consider:

- the victim, especially their protection and support;
- the alleged perpetrator; and
- all the other children (and, if appropriate, staff) at FSM especially any actions that are appropriate to protect them;

The plan should be monitored and a date set for a follow-up evaluation with everyone concerned.

The DSL (or a deputy) should ensure they are engaging with children's social care and specialist services as required. Where there has been a report of sexual violence, it is likely that professional risk assessments by social workers and or sexual violence specialists will be required. Any such professional assessments should be used to inform FSM's approach to supporting and protecting their pupils and updating their own risk assessment.

Key specific considerations will include:

- the wishes of the victim in terms of how they want to proceed. This is especially important
  in the context of sexual violence and sexual harassment. Victims should be given as
  much control as is reasonably possible over decisions regarding how any investigation
  will be progressed and any support that they will be offered;
- the nature of the alleged incident(s), including: might a crime have been committed and consideration of harmful sexual behaviour:

- the ages, maturity and understanding of the children involved;
- the developmental stages of the children involved;
- any power imbalance between the children. For example, is the alleged perpetrator significantly older, more mature or more confident? Does the victim have a disability or learning difficulty?
- their social and family circumstance;
- any evidence in the behaviour or presentation of the children that might suggest they have been harmed;
- any evidence of pressure to engage in sexual activity;
- any indication of sexual exploitation;
- if the alleged incident is a one off or a sustained pattern of abuse;
- are there ongoing risks to the victim, other children, or FSM staff; and
- other related issues and wider context. Assessments of children in such cases should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare

#### **NEXT STEPS**

- There are 4 scenarios that FSM will then consider:
  - To manage an incident internally;
  - Manage the incident through the Early Help process.
  - o If a child has been harmed, is in immediate danger, or is at risk of harm a referral should be made to the children's reception team (CRT). A social worker should respond to the referrer within one working day to explain what action they will be taking and the DSL will follow through the outcomes of the discussion.
  - Where there is a report of a rape, assault by penetration or sexual assault, the starting point is it should be passed to the police.
- Children's social care will consider if early help, section 17 and/or 47 statutory assessments are appropriate.
- Staff may be expected to participate in an early help assessment, child protection enquiry, strategy discussion and child protection conference.
- Parents, of both the student being complained about and the alleged victim, will be informed and kept updated on the progress of the referral under advisement from the police/children's services.
- In all cases, the DSL will make a record of the concern, the discussion, any outcome and the reasons for decisions. A copy will be kept in the files of both pupils' files.
- FSM will need to give immediate consideration to the proximity of the alleged perpetrator
  and victim on school premises and on transport to and from FSM where appropriate. Any
  actions will be in the best interests of both children and should not be perceived to be a
  judgment on the guilt of the alleged perpetrator.
- It may be appropriate to exclude the pupil being complained about for a period of time according to the FSM's Behaviour and Discipline policy and procedures.

- In the case of students whose parents are abroad, the student's 'Guardian' will be requested to provide support to the student and to accommodate them if it is necessary to suspend them during the investigation.
- If it is necessary for a student to be interviewed by the police in relation to allegations of abuse, FSM will be informed as soon as possible and ensure that the student is supported during the interview by an appropriate adult.
- Where an allegation of sexual violence or sexual harassment is progressing through the criminal justice system, FSM will consider anonymity, witness support and the criminal process in general so we can offer support and act appropriately
- Where neither social services nor the police accept the complaint, a thorough school investigation will take place into the matter using FSM's usual disciplinary procedures.

In all instances, FSM will record and be able to justify its record keeping.

FSM recognises that incidents of peer on peer/child on child abuse that occur online (either in isolation or in connection to offline incidents) can introduce a number of complex factors. These include the potential for the incident to take place across a number of social media platforms and services and for things to move from platform to platform online. It also includes the potential for the impact of the incident to extend further than FSM's local community (e.g. for images or content to be shared around neighbouring schools) and for a victim (or alleged perpetrator) to become marginalised and excluded by both online and offline communities. There is also the strong potential for repeat victimisation in the future if abusive content continues to exist somewhere online. Online concerns can be especially complicated.

# Safeguarding and supporting the victim

FSM will:

- Consider the age and the developmental stage of the victim, the nature of the allegations and the potential risk of further abuse.
- The needs and wishes of the victim should be paramount (along with protecting the child)
  in any response. It is important they feel in as much control of the process as is
  reasonably possible. Wherever possible, the victim, if they wish, should be able to
  continue in their normal routine. Overall, the priority should be to make the victim's daily
  experience as normal as possible, so that the school or college is a safe space for them.
- The victim should never be made to feel they are the problem for making a report or made to feel ashamed for making a report.
- Consider the proportionality of the response. Support should be tailored on a case-bycase basis. The support required regarding a one-off incident of sexualised name-calling is likely to be vastly different from that for a report of rape. Support can include:
- Children and Young People's Independent Sexual Violence Advisors (ChISVAs) provide emotional and practical support for victims of sexual violence.
- Child and adolescent mental health services (CAMHS).
- Rape Crisis Centre's can provide therapeutic support for children who have experienced sexual violence.
- Internet Watch Foundation (to potentially remove illegal images).

Victims may not disclose the whole picture immediately. They may be more comfortable providing information on a piecemeal basis. It is essential that dialogue is kept open and

encouraged. When it is clear that ongoing support will be required, the victim should be asked if they would find it helpful to have a designated trusted adult (for example, their form tutor or designated safeguarding lead) to talk to about their needs. The choice of any such adult should be the victim's.

A victim of sexual violence is likely to be traumatised and, in some cases, may struggle in a normal classroom environment. While FSM should avoid any action that would have the effect of isolating the victim, in particular from supportive peer groups, there may be times when the victim finds it difficult to maintain a full-time timetable and may express a wish to withdraw from lessons and activities. This should be because the victim wants to, not because it makes it easier to manage the situation. If required, FSM should provide a physical space for victims to withdraw.

It is important that FSM do everything they reasonably can to protect the victim from bullying and harassment as a result of any report they have made.

Whilst they should be given all the necessary support to remain at FSM, if the trauma results in the victim being unable to do this, alternative provision or a move to another school should be considered to enable them to continue to receive suitable education. This should only be at the request of the victim (and following discussion with their parents or carers).

It is important that if the victim does move to another educational institution (for any reason), that the new educational institution is made aware of any ongoing support needs. The DSL should take responsibility to ensure this happens (and should discuss with the victim and, where appropriate their parents or carers as to the most suitable way of doing this) as well as transferring the child protection file.

## Safeguarding and supporting the alleged perpetrator

Following an allegation there is a difficult balancing act to consider. On the one hand to safeguard the victim (and the wider student body) and on the other hand providing the alleged perpetrator with an education, safeguarding support as appropriate and implementing any disciplinary sanctions.

Factors FSM will consider include:

- The age and the developmental stage of the alleged perpetrator and nature of the allegations. Any child will likely experience stress as a result of being the subject of allegations and/or negative reactions by their peers to the allegations against them.
- The proportionality of the response. Support (and sanctions) should be considered on a case-by-case basis. An alleged perpetrator may potentially have unmet needs (in some cases these may be considerable) as well as potentially posing a risk of harm to other children. Harmful sexual behaviours in young children may be (and often are) a symptom of either their own abuse or exposure to abusive practices and or materials. Advice should be taken, as appropriate, from children's social care, specialist sexual violence services and the police.
- It is important that if the alleged perpetrator does move to another educational institution (for any reason), that the new educational institution is made aware of any ongoing support needs. The designated safeguarding lead should take responsibility to ensure this happens as well as transferring the child protection file.

## Discipline and the alleged perpetrator

Disciplinary action can be taken whilst other investigations by the police and/or children's social care are ongoing. The fact that another body is investigating or has investigated an incident does not in itself prevent a school from coming to its own conclusion, on the balance of probabilities, about what happened, and imposing a penalty accordingly. FSM will consider if, by taking any action, they would prejudice an investigation and/or any subsequent prosecution. Careful liaison with the police and/or Children's Social Care will help. It will also be important to consider whether there are circumstances that make it unreasonable or irrational for the school to reach their own view about what happened while an independent investigation is considering the same facts.

## Discipline and support

Taking disciplinary action and still providing appropriate support are not mutually exclusive actions. They can, and should, occur at the same time if necessary. On the one hand there is preventative or forward-looking action to safeguard the victim and/or the perpetrator, especially where there are concerns that the perpetrator themselves may have been a victim of abuse; and, on the other, there is disciplinary action to punish a perpetrator for their past conduct.

### **Working with parents and carers**

FSM will, in most instances, engage with both the victim's and the alleged perpetrator's parents or carers when there has been a report of peer on peer/child on child abuse. The exception to this rule is if there is a reason to believe informing a parent or carer will put a child at additional risk. In some cases, children's social care and/or the police will have a very clear view and FSM will work with relevant agencies to ensure a consistent approach is taken to information sharing.

Parents and carers may well struggle to cope with a report that their child has been the victim of an assault or is alleged to have assaulted another child. Details of organisations that support parents will be signposted.

### Safeguarding other children

Consideration will be given to supporting children who have witnessed peer on peer/child on child abuse. Witnessing such an event is likely to be traumatic and support may be required.

Following any report of peer on peer/child on child abuse, it is likely that some children will take "sides". FSM will be doing all they can to ensure both the victim and alleged perpetrator, and any witnesses, are not being bullied or harassed.

Social media may play a central role in the fall out from any incident or alleged incident. There is the potential for contact between victim and alleged perpetrator and likelihood that friends from either side could well harass the victim or alleged perpetrator online.

School transport is a potentially vulnerable place for a victim or alleged perpetrator following any incident or alleged incident. FSM, as part of its risk assessment, will consider any additional potential support needs to keep all their children safe.

# Brook sexual behaviours traffic light tool

## Behaviours: age 0 to 5

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

# What is a green behaviour?

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

## What can you do?

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

### **Green behaviours**

- holding or playing with own genitals
- attempting to touch or curiosity about other children's genitals
- attempting to touch or curiosity about breasts, bottoms or genitals of adults
- games e.g. mummies and daddies,
- doctors and nurses
- enjoying nakedness
- interest in body parts and what they do
- curiosity about the differences between boys and girls

# What is an amber behaviour?

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

## What can you do?

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

### Amber behaviours

- preoccupation with adult sexual behaviour
- pulling other children's pants down/skirts up/trousers down against their will
- talking about sex using adult slang
- preoccupation with touching the genitals of other people
- following others into toilets or changing rooms to look at them or touch them
- talking about sexual activities seen on TV/online

# What is a red behaviour?

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

## What can you do?

Red behaviours indicate a need for immediate intervention and action.

## **Red behaviours**

- persistently touching the genitals of other children
- persistent attempts to touch the genitals of adults
- simulation of sexual activity in play
- sexual behaviour between young children involving penetration with objects

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• forcing other children to engage in sexual play

This is intended to be used as a guide only.

Brook has taken every care to ensure that the information contained in this publication is accurate and up-to-date at the time of being published. As information and knowledge is constantly changing, readers are strongly advised to refer to the guidance tool at <a href="https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool">https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool</a> for further information

https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool for further information
Brook accepts no responsibility for difficulties that may arise as a result of an individual acting on the advice and recommendations it contains. Brook sexual behaviours traffic light tool adapted from Family Planning Queensland. (2012). Traffic Lights guide to sexual behaviours. Brisbane: Family Planning Queensland, Australia.

## Behaviours: age 5 to 9 and 9 to 13

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

# What is a green behaviour?

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

## What can you do?

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

## Green behaviours 5-9

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

### **Green behaviours 9-13**

- · solitary masturbation
- use of sexual language including swear and slang words
- having girl/boyfriends who are of the same, opposite or any gender
- interest in popular culture, e.g. fashion, music, media, online games, chatting online
- need for privacy
- consensual kissing, hugging, holding hands with known peers
- exhibitionism amongst same age peers within the context of play e.g. occasional flashing or mooning
- use of mobile phones and internet In relationships with known peers

# What is an amber behaviour?

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

## What can you do?

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

#### Amber behaviours 5-9

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

#### Amber behaviours 9-13

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

# What is a red behaviour?

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

## What can you do?

Red behaviours indicate a need for Immediate intervention and action.

### Red behaviours 5-9

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

### Red behaviours 9-13

- exposing genitals or masturbating in public
- distributing naked or sexually provocative images of self or others
- sexually explicit talk with younger children
- sexual harassment
- arranging to meet with an online acquaintance in secret
- genital injury to self or others
- forcing other children of same age, younger or less able to take part in sexual activities
- sexual activity e.g. oral sex or intercourse
- presence of sexually transmitted infection (STI)
- evidence of pregnancy

## Behaviours: age 13 to 17

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

# What is a green behaviour?

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

## What can you do?

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

### **Green behaviours**

- solitary masturbation
- sexually explicit conversations with peers
- obscenities and jokes within the current cultural norm
- interest in erotica/pornography
- use of internet/e-media to chat online
- having sexual or non-sexual relationships
- sexual activity including hugging, kissing, holding hands
- consenting oral and/or penetrative sex with others of the same or opposite gender who are of similar age and developmental ability
- · choosing not to be sexually active

# What is an amber behaviour?

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

## What can you do?

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

### Amber behaviours

- accessing exploitative or violent pornography
- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress,
- withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- concern about body image
- taking and sending naked or sexually provocative images of self or others
- single occurrence of peeping, exposing, mooning or obscene gestures
- giving out contact details online
- joining adult- only social networking sites and giving false personal information
- arranging a face to face meeting with an online contact alone

# What is a red behaviour?

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

## What can you do?

Red behaviours indicate a need for immediate intervention and action.

### **Red behaviours**

- exposing genitals or masturbating in public
- preoccupation with sex, which interferes with daily function
- sexual degradation/humiliation of self or others
- attempting/forcing others to expose genitals
- sexually aggressive/exploitative behaviour
- sexually explicit talk with younger children
- sexual harassment
- non-consensual sexual activity
- use of/acceptance of power and control in sexual relationships
- genital injury to self or others
- sexual contact with others where there
- is a big difference in age or ability
- sexual activity with someone in authority and in a position of trust
- sexual activity with family members
- involvement in sexual exploitation and/or trafficking
- · sexual contact with animals

Print date: 07/09/2020

 receipt of gifts or money in exchange for sex

## Appendix 12

# Sexual Violence and Sexual Harassment between Children Risk and Needs Assessment Template

Brook Traffic Light Assessment	What are the risks? Who might be harmed & how?	Action	Action by Who?	Action by when?	Action status or Date Completed & Outcome including further actions
Red Behaviour:					
Amber Behaviour:					

## Annex 13

## **COUNSELLING: BASIC SPEAKING AND LISTENING SKILLS**

## **UNHELPFUL QUESTIONS:**

## **HELPFUL QUESTIONS:**

TOO MANY QUESTIONS	May be an interrogation that may lead to defensiveness and can be obtrusive - ask why you need to know	OPEN QUESTIONS	These open up issues and allow a person the space in which to respond e.g. "I wonder what you felt about your father leaving?" Or "In what way did you tell her to go away?
			N.B. Avoid using "Why" or making assumptions e.g. "You must have been angry".
LEADING QUESTIONS	Put the answer into the other person's mouth e.g. "Your Dad's a great guy, isn't he"? Is this really a question or a statement?	ELABORATION QUESTIONS	These give the other the opportunity to expand on what they have already started talking about e.g. "Is there anything more?"
CLOSED QUESTIONS	Limit the other person's options for responding - e.g. "Do you like domestic or imported cheese?"	SPECIFICATIO N QUESTIONS	These aim to concretise and to elicit detail about a problem area e.g. "When you say she upsets you, what precisely happens" "How many times?"
TOO PROBING QUESTIONS	Questions that the other person is not ready to answer given the level of trust existing in your relationship.	FOCUSING ON FEELINGS QUESTIONS	These aim to help the person express feelings e.g. "How do you feel about that?" - "Would you care to describe your feeling".
POORLY TIMED QUESTIONS	Questions that interrupt the other person from doing their own work and come at the wrong time in the helping process.		

# INEFFECTIVE LISTENING LISTENING

## **EFFECTIVE**

Listener looks bored, uninterested or judgmental; avoids eye contact; displays distracting mannerisms (doodles, plays with paper clip etc.)	Non-verbal Behaviour	Listener maintains positive posture; avoids distracting mannerisms; keeps attention focused on speaker, maintains eye contact; nods and smiles when appropriate.
Listener keeps focus of comments on self: "When something like that happens to me, I"	Focus of Attention	Listener shifts focus of attention to the speaker. "When that happened, what did you do?"
Listener fails to accept speaker's ideas and feelings: "I think it would have been better to"	Acceptance	Listener accepts ideas and feelings: "That's an interesting idea: can you say more about it?"
Listener fails to empathise "I don't see why you felt that"	Empathy	Listener empathises "So when that happened, you felt angry"
Listener fails to probe into an area, on an idea or feeling	Probing	Listener probes in a helpful way; to follow up "Could you tell me more about what led you to feel that way?" and follows up: "You said that"
Listener fails to check by restating in her own words important statements made by the speaker.	Paraphrasing	Listener paraphrases at an appropriate time to check understanding.
Listener fails to summarise	Summarising	Listener summarises progress of the conversation from time to time.
Listener narrows the range of ideas by suggesting a "correct" course of action	Advising	Listener widens the range of ideas by suggesting a number of alternatives from which the speaker can choose.

## BRIEFING SHEET FOR TEMPORARY AND SUPPLY STAFF

## For supply staff and those on short contracts at FSM School.

While working in FSM, you have a duty of care towards the children here. This means that at all times you should act in a way that is consistent with their safety and welfare.

In addition, if at any time you have a concern about a child or young person, particularly if you think they may be at risk of abuse or neglect, it is your responsibility to share that concern with the school Designated Safeguarding Lead (DSL), who is Jody Wells, Head.

This is not an exhaustive list but you may have become concerned as a result of:

- Observing a physical injury, which you think may have been non-accidental.
- Observing something in the appearance of a child or young person which suggests they are not being sufficiently well cared for.
- Observing behaviour that leads you to be concerned about a child or young person.
- A child or young person telling you that they have been subjected to some form of abuse.

In any of the circumstances listed here, you must write down what you saw or heard, date and sign your account, and give it to the DSL/Head. This may be the beginning of a legal process – it is important to understand that legal action against a perpetrator can be seriously damaged by any suggestion that the child has been led in any way.

If a child talks to you about abuse, you should follow these guidelines:

- Rather than directly questioning the child, just listen and be supportive.
- Never stop a child who is freely recalling significant events, but don't push the child to tell
  you more than they wish.
- Make it clear that you may need to pass on information to staff in other agencies who may be able to help – do not promise confidentiality. You are obliged to share any information relating to abuse or neglect.
- Write an account of the conversation immediately, as close to verbatim as possible.
   Alternatively a 'Safeguarding Concern Form' can be obtained from the School Office. Put the date and timings on it, and mention anyone else who was present. Then sign it, and give your record to the DSL, who should contact children's social care if appropriate.

FSM has a policy on safeguarding children and young people which you can find, together with the local procedures to be followed by all staff, on the Pastoral Matters board in the Staff room.

Remember, if you have a concern, discuss it with the DSL.

## Forres Sandle Manor (EYFS) Policy

Policy Title	Use of Mobile Phones and Cameras
Policy Lead (Appointment (& Initials))	Head of Lower School (TJS)
Date of Last Review	January 2020
Date of Next Review	January 2021

### **USE OF MOBILE PHONES**

*General Welfare Requirements:* Safeguarding and promoting children's welfare. The provider must take the necessary steps to safeguard and promote the welfare of children.

A Unique Child	Positive	Enabling	Learning and
	Relationships	Environments	Development
1.3 Keeping safe		3.3 The learning	
1.4 Health and		environment	
wellbeing			

## **Policy Statement**

Mobile phones may be used by staff in the EYFS so long as their use is appropriate. We have a duty of care for the health, safety and wellbeing of each and every child in the EYFS in both the indoor and outside learning environments and the use of a mobile phone must not detract from the quality of learning, supervision and care of children.

#### **Procedures**

- The Lower School has a landline which is reserved for calls related to the school's business, though it is available for staff use when necessary.
- Staff may have their mobiles with them in school for emergency contact with their families. They are asked to keep them with the school secretary who will get them in the case of an emergency or in the staff room. Casual or inappropriate use of the phone, either through texts or calls, distracts from the care of the children or may cause a risk.
- Should a member of staff need to answer their mobile phone in the case of an
  emergency or another essential purpose, they will immediately inform another
  member of staff in their classroom or the Head of Lower School that they are
  doing so and if possible warn colleagues that they may be expecting such a call if
  this is appropriate. They must ensure that staff/pupil ratios are adequate to
  enable them to take their call.
- Text messages and casual phone calls should be made in the free-time of the staff and not when supervising children.

Page 70 of 76

- It is a requirement that staff take the school mobile phone with them to Forest School, outside visits and trips. This contains contact numbers of parents and school for use in emergencies and may be used to contact the emergency services if necessary.
- Staff are made aware that if inspectors observe, or become aware of staff using
  mobile phone for calls or texts for non-essential purposes when they should be
  supervising children, they will draw this to the attention of the Head of Lower
  School, or to the Head of the school should the offense be that of the Head of
  Lower School. The inspectors will consider if the staff member was meeting the
  needs of the children, when using the telephone, and consider the impact on
  inspection judgements. (Mobile Phones Feb 2011, No. 110003)
- Only School cameras or i-pads are used to take photos of appropriate photographs of the children in the EYFS. These are only to be used on school equipment within the setting for record keeping purposes and must never be appropriated for staff use.
- Children in KS1 and above may be photographed on a member of staff's
  personal mobile phone but only if this phone is registered for such a purpose with
  the Bursary and only on the condition that any and all photographs are deleted
  once transferred.
- Parents' permission is sort to publish children's photos and parents have the right to refuse this permission.

The Data Protection Act 2018 and GDPR do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children.

Relevant data protection principles, which allow them to share (and withhold) personal information, as provided for in the Data Protection Act 2018 and the GDPR includes:

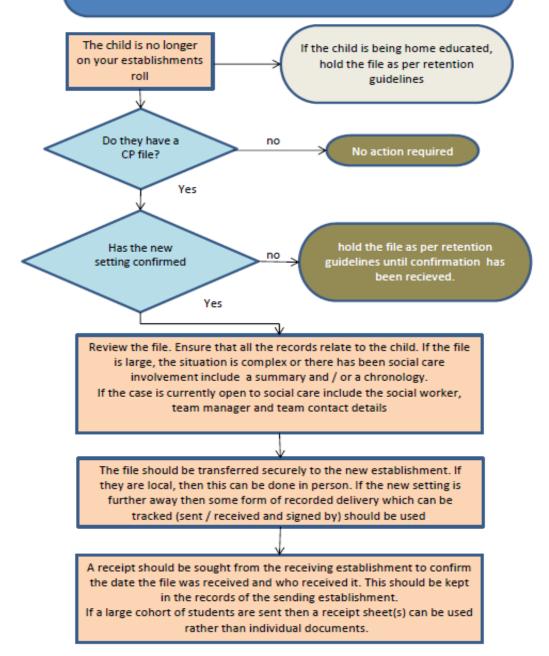
- Being confident of the processing conditions which allow them to store and share information for safeguarding purposes, including information which is sensitive and personal, and should be treated as 'special category personal data'.
- Understanding that 'safeguarding of children and individuals at risk' is a processing condition that allows practitioners to share special category personal data. This includes allowing practitioners to share information without consent where there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner but it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk.
- For schools, not providing pupils' personal data where the serious harm test under the legislation is met. For example, in a situation where a child is in a refuge or another form of emergency accommodation, and the serious harms test is met, they must withhold providing the data in compliance with schools' obligations under the Data Protection Act 2018 and the GDPR.

Where in doubt schools should seek independent legal advice.

See also Data Protection Toolkit for schools, Information sharing (2015)

## Transfer of CP records

This flow chart outlines the process for educational establishments (2 - 19) to follow when a child leaves. The CP record is the collection of concerns, indicators, signs and disclosures that could indicate abuse. The information does not need to have been reported to children's social care but does need to be a relevant or recognised indicator of abuse.



further information can be found at http://www.irms.org.uk/groups/public-sector/resources/134records-management-toolkit-for-schools

## **POLICY REVIEW**

As a school, we review this policy at least annually in line with DfE, HSCP and HCC and other relevant statutory guidance.

FSM monitors and evaluates its Child Protection policy and procedures through the following activities:

- Governing body visits to FSM.
- Staff safeguarding questionnaires.
- Staff Forum responses.
- Senior Leadership Team discussion sessions with children and staff.
- Pupil questionnaires.
- Frequent scrutiny of attendance data.
- Frequent scrutiny of governing body meeting minutes.
- Regular review of parental concerns and parental questionnaires.

**Whole School Training:** Sept. 4 2018 (next training Sept. 2021) Hampshire Children's Services Workforce Development Team

**Judy Cochand:** 7/5/19) (next training May 2021)

DSL refresher: Hampshire Children's Services Workforce Development Team

Jody Wells (26/2/18) (next training Feb. 2020)

DSL refresher: Hampshire Children's Services Workforce Development Team

**Tracy Spottiswood** (31/1/18) (next training Jan. 2020) Lead Practitioner Safeguarding Briefing with SfYC.

## Annex 19

## **Useful contacts**

Key Personnel	Name (s)	Email & Telephone No.
DSL & "Prevent" lead	Jody Wells	01425 653181
	(Head)	jwells@fsmschool.com
Deputy DSL(s)	Tracy Spottiswood	01425 653181
	(Head of Lower School)	tspottiswood@fsmschool.com
	Judy Cochand (Deputy	jcochand@fsmschool.com
	Head)	
Chair of governors &	Col. Peter Williams	Number available from Bursary
Nominated governor for		
Safeguarding	Obsisting Dema Conith	Niverbana surilabla franca Divisaria
Nominated governor for Prevent	Christine Dure Smith	Number available from Bursary
Children's reception team		csprofessional@hants.gov.uk
Cimuren S reception team		01329 225379
Out of hours social care		0300 555 1373
Hampshire Safeguarding Children Partnership		hscp@hants.gov.uk 01962 876230
•	5 . 5:1::	
Safeguarding advisors / local	Barbara Piddington	ch.protection@hants.gov.uk or
authority designated officers	Fiona Armfield	fiona.armfield@hants.gov.uk
(LADOs)	Mark Blackwell	01962 876364
Head Matron	Nicola Brown	01425 653181 or 07917 062540
School Dr - Fordingbridge	Dr Chalmers	01425 653430
Surgery		
Children's service department	Vanessa Johns	Vanessa.johns@hants.gov.uk
district manager		02380 816106
Early help hub manager	Debbie Cusack	02380 627735
Children Missing Education	Callum Williamson	cme@hants.gov.uk
Tracking Officer		01962 845363
Hampshire Children's	Sue Pollard	Sue.pollard@hants.gov.uk
Services Department - School		01962 846277
Admissions	DDC confidential	agraitive @ dha gai gay yik
Disclosure and barring	DBS confidential	sensitive@dbs.gsi.gov.uk 0151 676 1452
service (DBS)	checking service	
DBS referrals helpline		01325 953795
Southwest Safeguarding		https://www.proceduresonline.com/swcpp/
Procedures - NSPCC Safeguarding Line		help@nspcc.org.uk
Norce Saleguarding Line		0808 800 5000
Child line		0800 1111
Cillia lille		0000 1111
Teaching Regulation Agency		misconduct.teacher@education.gov.uk
(formally the NCTL)		0207 593 5393
For resources and training		www.hampshiresafeguardingchildrenparnership.org.uk
opportunities		0045 0454545
Hampshire Police		0845 0454545
Police	<del>  </del>	101 or in emergencies 999
CHANNEL Police Practitioner	Tony Jenkyn	07990 081130
(SE)		

Hampshire PREVENT Officer	David Knowles	prevent.engagement@hampshire.pnn.police.uk 07584 14642
Anti-Terrorist Hotline		0800 789 321
Crime stoppers		0800 555111
DfE dedicated extremism hotline		www.gov.uk/report-suspicious-activity-to-mi5 or www.gov.uk/report-terrorism 020 73407264
NAPAC – National Association for people Abused in Childhood.	Training on dealing with historical abuse	www.napac.org.uk
NAPAC – National Association for people Abused in Childhood.	Information booklet on dealing with historical abuse	www.napac.org.uk/project_category/booklets/
HIPS (Hampshire, Isle of Wight, Portsmouth, Southampton)	This website provides staff from all relevant agencies with access to the full suite of local children's safeguarding policies, procedures and guidance that should be used in inform any individual agency policies.	http://hipsprocedures.org.uk/