# Child Protection & Safeguarding Policy



DfE no: 850/7900



Approved by: Trustee Board Date: October 2024

Signed: Position: Safeguarding Trustee

Last review: October 2024 Next review by: September 2025

# Monitoring arrangements

This policy will be reviewed at least annually in line with DfE, HSCP, HCC and any other relevant guidance

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# Important contacts

ROLE/ORGANISATION	NAME	CONTACT DETAILS
Designated safeguarding lead (DSL)	Liz Cooper	Liz.cooper@inclusioncollege.org.uk
Deputy DSL	Anna Moores	Anna.moores@inclusioncollege.org.uk
CEO	Cheryl Edwards	cheryl.edwards@inclusioneducation.org.uk
Local authority designated officer (LADO)	Mark Blackwell Barbara Piddington Fiona Armfield	Link to referral form 01962 876364 child.protection@hants.gov.uk
Chair of Governors	Cathy Smith via Sally Foster (Clerk)	sally.foster@inclusioneducation.org.uk
Chair of Trustees	Amanda Minshull-Beech via Sally Foster (Clerk)	sally.foster@inclusioneducation.org.uk
Channel helpline		020 7340 7264
Hampshire children's social care team		0300 555 1384 (Monday-Friday, 8.30am-5.00pm (4.30pm on Fridays) 0300 555 1375 out of hours <u>IARF link</u>
Police		101 or 999 in an emergency

# 1. The Inclusion Way

The Inclusion Way is based on over ten years' experience and captures our wellbeing and mental health ethos, our pedagogical approach and all aspects that affect a learner's educational experience.

We know that the Inclusion Way works because:

- Our students are happy
- Our students tell us it works for them
- Our students make educational, emotional and social progress
- Our parents/carers tell us they feel supported by their school/college in caring for their child.

For over ten years we have supported the most vulnerable young people in our community to become mentally healthy, resilient and successful children.

In this and all other policies, all of which come together to form The Inclusion Way, you will learn what we do to unlock potential in each learner and how we do it.

Before reading this policy, it is important to know our learner and the journey they have taken before they start Inclusion College:

- Our students will have a severe and chronic diagnosed mental health need. They will be
  experiencing, or have experienced, self-harm, suicide ideation, depression and high
  anxiety. Most of our students will be experiencing more than one of these things at any
  one time.
- Our students will likely have diagnosed and undiagnosed SEND needs related to speech, language and communication (SLCN), communication and interaction needs (C&I) or a specific learning need (SpLD).
- Our students will have experienced significant gaps in their education, (in some cases years) at primary and/or secondary level.
- Our students will have a history of non-attendance due to high anxiety and mental health needs and been identified as an emotionally based school avoider (EBSA).
- Our students academic levels will be below age related expectations in Maths, English and Science due to these gaps in education and unmet needs.
- Our students will have experienced trauma, whether through an Adverse Childhood Experience (ACE) or by having been a victim of bullying in previous settings.
- Our learner is a teenager/young adult exploring their identity and discovering who they are and who they want to be. They may present as having difficulties with emotional regulation and academic attainment but they are not of the cognitive ability of primary age children. They are young adults and want to be treated like one.

The Inclusion Way is designed to meet these needs so the learner can succeed. This is how we achieve this, with further information available in the most important policies:

 A PACE approach with each learner's SEN needs being met (see our SEN and Mental Health Policies).

- Establish foundations of positive and sustainable mental health on which we can build learning (see our Mental Health Policy).
- Positive, trusting and consistent relationships with adults (see our Behaviour Policy).
- Recognition that good attendance can look different for everyone at different times and should not be taken for granted. Good attendance should be celebrated because it can be lifechanging (see our Attendance Policy).
- An adaptive pedagogy and curriculum with reading, literacy, Gatsby and cultural capital at its heart (see our Curriculum and Reading policies).

An integral element to the success of the Inclusion Way is our model of triangulation between Mental Health, Quality of Education and SEND. These three aspects are of equal importance and they all inform the each other.

Only by working in combination, as embodied in the school/college through our Deputy Headteachers (Quality of Education, SEND) and Senior Mental Health Lead, overseen by the Headteacher, are our students able to make sustained and holistic progress.



# 2. Aims

The school/college aims to ensure that:

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

# 3. Legislation and statutory guidance

This policy is based on the Department for Education's (DfE's) statutory guidance <u>Keeping Children Safe in Education (2024)</u> and <u>Working Together to Safeguard Children (2023)</u>, and the <u>Governance Handbook</u>. We comply with this guidance and the arrangements agreed and published by our 3 local safeguarding partners (see section 3).

This policy is also based on the following legislation:

- Part 3 of the schedule to the <u>Education (Independent School Standards) Regulations</u>
   2014, which places a duty on academies and independent schools to safeguard and promote the welfare of pupils at the school
- Part 1 of the schedule to the <u>Non-Maintained Special Schools (England) Regulations</u> 2015, which places a duty on non-maintained special schools to safeguard and promote the welfare of pupils at the school
- The Children Act 1989 (and 2004 amendment), which provides a framework for the care and protection of children
- Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the <u>Serious Crime Act 2015</u>, which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18
- Statutory guidance on FGM, which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM
- The Rehabilitation of Offenders Act 1974, which outlines when people with criminal convictions can work with children
- Schedule 4 of the <u>Safeguarding Vulnerable Groups Act 2006</u>, which defines what 'regulated activity' is in relation to children
- Statutory guidance on the Prevent duty, which explains schools' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- The Human Rights Act 1998, which explains that being subjected to harassment, violence and/or abuse, including that of a sexual nature, may breach any or all of the rights which apply to individuals under the European Convention on Human Rights (ECHR)
- The Equality Act 2010, which makes it unlawful to discriminate against people regarding particular protected characteristics (including disability, sex, sexual orientation, gender reassignment and race). This means our governors and headteacher should carefully consider how they are supporting their students with regard to these characteristics. The Act allows our school to take positive action to deal with particular disadvantages affecting students (where we can show it's proportionate). This includes making reasonable adjustments for disabled students. For example, it could include taking positive action to support girls where there's evidence that they're being disproportionately subjected to sexual violence or harassment
- The Public Sector Equality Duty (PSED), which explains that we must have due regard to eliminating unlawful discrimination, harassment and victimisation. The PSED helps us to focus on key issues of concern and how to improve learner outcomes. Some students may be more at risk of harm from issues such as sexual violence; homophobic, biphobic or transphobic bullying; or racial discrimination

Any links to local or national advice and guidance can be accessed via the safeguarding in education web pages:

www.hants.gov.uk/educationandlearning/safeguardingchildren/guidance

Links to online specific advice and guidance can be found at <a href="https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingchildren/onlinesafety">https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingchildren/onlinesafety</a>

Links to other pages from the local authority on safeguarding can be found at <a href="https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingc">https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingc</a> hildren

The procedures of the Hampshire Safeguarding Children Partnership can be accessed at <a href="https://www.hampshirescp.org.uk/procedures/4lscb-procedures/">https://www.hampshirescp.org.uk/procedures/4lscb-procedures/</a>

# 4. Definitions

# Safeguarding and promoting the welfare of children means:

- Providing help and support to meet the needs of children as soon as problems emerge
- Protecting children from maltreatment whether that is within or outside the home, including online
- Preventing impairment of children's mental and physical health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

**Child protection** is part of this definition and refers to activities undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including online.

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

**Neglect** is a form of abuse and is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Appendix 1 defines neglect in more detail.

**Sharing of nudes and semi-nudes** (also known as sexting or youth-produced sexual imagery) is where children share nude or semi-nude images, videos or live streams. This also includes pseudo-images that are computer-generated images that otherwise appear to be a photograph or video.

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

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

- The local authority (LA).
- Integrated care boards (previously known as clinical commissioning groups) for an area within the LA.
- The chief officer of police for a police area in the LA area.

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

**Alleged perpetrator(s)** and **perpetrator(s)** are widely used and recognised terms. However, we will think carefully about what terminology we use (especially in front of children) as, in some

cases, abusive behaviour can be harmful to the perpetrator too. We will decide what's appropriate and which terms to use on a case-by-case basis.

# 5. Equality statement

Some children have an increased risk of abuse, both online and offline, and additional barriers can exist for some children with respect to recognising or disclosing it. This is particularly true in our school/college. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

We give special consideration to children who:

- Have special educational needs and/or disabilities (SEND) or health conditions (see section 10).
- Are young carers.
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality.
- Have English as an additional language (EAL)
- Are known to be living in difficult situations for example, temporary accommodation or where there are issues such as substance abuse or domestic violence.
- Are at risk of female genital mutilation (FGM), sexual exploitation, forced marriage, or radicalisation.
- Are asylum seekers.
- Are at risk due to either their own or a family member's mental health needs.
- Are looked after or previously looked after (see section 12).
- Are missing or absent from education for prolonged periods and/or repeat occasions.
- Whose parent/carer has expressed an intention to remove them from college to be home educated.

# 6. Roles and responsibilities

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

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

- Behaviour Policy and curriculum.
- Anti-bullying Policy.
- Mental Health Policy.
- Specific policies supporting transgender young people and Equality, Diversity and Inclusion.
- SEND Policy.
- Our unique pastoral system and our strong relationships with parents/carers.
- Planned programme of relationships, sex and health education (RSHE), which is inclusive and delivered regularly, tackling issues such as:
  - Healthy and respectful relationships.

- Boundaries and consent.
- Stereotyping, prejudice and equality.
- Body confidence and self-esteem.
- How to recognise an abusive relationship (including coercive and controlling behaviour).
- The concepts of, and laws relating to, sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, so-called honour-based violence such as forced marriage and female genital mutilation (FGM) and how to access support.
- What constitutes sexual harassment and sexual violence and why they're always unacceptable.

#### 6.1 All staff

#### All staff will:

- Read and understand part 1 and annex B of the Department for Education's statutory safeguarding guidance, <u>Keeping Children Safe in Education</u>, and review this guidance at least annually
- Sign a declaration at the beginning of each academic year to say that they have reviewed the guidance
- Complete an assessment based on the guidance
- Reinforce the importance of online safety when communicating with parents/carers.
   This includes making parents/carers aware of what we ask children to do online (e.g. sites they need to visit or who they'll be interacting with online)
- Contribute to providing a safe college for all students
- Reassure victims that they are being taken seriously and that they will be supported and kept safe. Students should not be given the impression they are creating a problem or made to feel ashamed for making a report or disclosure
- Be vigilant as multiple safeguarding issues will overlap with one another
- Be aware of the risk factors that increase the likelihood of involvement in serious violence.
- Provide a safe space for students who are LGBTQ+ to speak out and share their concerns
- Establish and maintain an environment where children feel secure, are encouraged to talk and are listened to
- Ensure children know that there are adults in the organisation who they can approach if they are worried or have concerns
- Plan opportunities within the curriculum for children to develop the skills they need to recognise assess and manage risk 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 is happening" with regards to safeguarding. No disclosures does not mean that it is not happening, it means that it is not being reported.
- 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
- Ensure that there are a variety of ways for children to report and disclose.
- 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.
- Follow the allegations procedures (allegations against staff and low level concerns policy) if the disclosure is an allegation against a member of staff.
- Follow the procedures set out by the HSCP and take account of guidance issued by the

DfE.

- Support students in line with their child protection plan
- Treat information with confidentiality but never promising to "keep a secret".
- Ensure that the wishes and feelings of the child are listened to, respected and included
- Notify the DSL or DDSL of any child on a child protection plan or child in need plan who
  has unexplained absence.

#### All staff will be aware of:

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

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

# 6.2 The designated safeguarding lead (DSL)

The DSL is a member of the senior leadership team. Inclusion College's DSL is Liz Cooper (Headteacher). The DSL takes lead responsibility for child protection and wider safeguarding in the college. This includes online safety and understanding our filtering and monitoring processes on college devices and college networks to keep students safe online.

During term time, the DSL will be available during college hours for staff to discuss any safeguarding concerns.

The DSL can be contacted on their Inclusion email address and work phone outside of college hours. If they cannot be contacted, out of hours social care should be contacted on 0300 555 1373.

When the DSL is absent, the deputies will act as cover.

Inclusion College's Deputy is Anna Moores (Assistant Head).

If the DSL and deputies are not available, Cheryl Edwards (CEO) will act as cover (for example, during out-of-hours/out-of-term activities).

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

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

# The DSL will also:

- Keep the headteacher informed of any issues (if not the same person)
- Liaise with local authority case managers and designated officers for child protection concerns as appropriate
- Discuss the local response to sexual violence and sexual harassment with police and local authority children's social care colleagues to prepare the school's policies
- Be confident that they know what local specialist support is available to support all
  children involved (including victims and alleged perpetrators) in sexual violence and
  sexual harassment, and be confident as to how to access this support
- Be aware that children must have an 'appropriate adult' to support and help them in the case of a police investigation or search

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

# 6.3 The governing/trustee boards

The governing board will:

- Facilitate a whole-college approach to safeguarding, ensuring that safeguarding and child protection are at the forefront of, and underpin, all relevant aspects of process and policy development
- Evaluate and approve this policy at each review, ensuring it complies with the law, and hold the headteacher to account for its implementation
- Be aware of its obligations under the Human Rights Act 1998, the Equality Act 2010 (including the Public Sector Equality Duty), and our college's local multi-agency safeguarding arrangements
- Appoint a link governor to monitor the effectiveness of this policy in conjunction with the full governing board. This is always a different person from the DSL
- Ensure all staff undergo safeguarding and child protection training, including online safety, and that such training is regularly updated and is in line with advice from the safeguarding partners
- Ensure that the college has appropriate filtering and monitoring systems in place and review their effectiveness. This includes:
  - Making sure that the leadership team and staff are aware of the provisions in place, and that they understand their expectations, roles and responsibilities around filtering and monitoring as part of safeguarding training

 Reviewing the <u>DfE's filtering and monitoring standards</u>, and discussing with IT staff and service providers what needs to be done to support the college in meeting these standards

#### Make sure:

- The DSL has the appropriate status and authority to carry out their job, including additional time, funding, training, resources and support
- Online safety is a running and interrelated theme within the whole-college approach to safeguarding and related policies
- The DSL has lead authority for safeguarding, including online safety and understanding the filtering and monitoring systems and processes in place
- The college has procedures to manage any safeguarding concerns (no matter how small) or allegations that do not meet the harm threshold (low-level concerns) about staff members (including supply staff, volunteers and contractors). Inclusion Education's allegations against staff and low level concerns policy covers this procedure
- That this policy reflects that children with SEND, or certain medical or physical health conditions, can face additional barriers to any abuse or neglect being recognised
- Where another body is providing services or activities (regardless of whether or not the children who attend these services/activities are children on the college roll):
- Seek assurance that the other body has appropriate safeguarding and child protection policies/procedures in place, and inspect them if needed
- Make sure there are arrangements for the body to liaise with the college about safeguarding arrangements, where appropriate
- Make sure that safeguarding requirements are a condition of using the college premises, and that any agreement to use the premises would be terminated if the other body fails to comply

The CEO will act as the 'case manager' in the event that an allegation of abuse is made against the headteacher, where appropriate.

All governors and trustees will read Keeping Children Safe in Education in its entirety.

Section 15 of this policy has information on how governors are supported to fulfil their role.

#### 6.4 The headteacher

The headteacher is responsible for the implementation of this policy, including:

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

# 6.5 Virtual college heads

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

They should also identify and engage with key professionals, e.g. DSLs, SENCOs, social workers, mental health leads and others.

# 7. Confidentiality

Timely information sharing is essential to effective safeguarding and fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

The Data Protection Act (DPA) 2018 and UK GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe.

If staff need to share 'special category personal data', the DPA 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information without consent if: it is not possible to gain consent; it cannot be reasonably expected that a practitioner gains consent; or if to gain consent would place a child at risk

Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the child's best interests

If a victim asks the college not to tell anyone about the sexual violence or sexual harassment:

- There's no definitive answer, because even if a victim doesn't consent to sharing information, staff may still lawfully share it if there's another legal basis under the UK GDPR that applies
- The DSL will have to balance the victim's wishes against their duty to protect the victim and other children
- The DSL should consider that:
  - Parents or carers should normally be informed (unless this would put the victim at greater risk)
  - The basic safeguarding principle is: if a child is at risk of harm, is in immediate danger, or has been harmed, a referral should be made to local authority children's social care
  - Rape, assault by penetration and sexual assault are crimes. Where a report of rape, assault by penetration or sexual assault is made, this should be referred to the police. While the age of criminal responsibility is 10, if the alleged perpetrator is under 10, the starting principle of referring to the police remains

Regarding anonymity, all staff will:

- Be aware of anonymity, witness support and the criminal process in general where an allegation of sexual violence or sexual harassment is progressing through the criminal justice system
- Do all they reasonably can to protect the anonymity of any children involved in any report of sexual violence or sexual harassment, for example, carefully considering which staff should know about the report, and any support for children involved
- Consider the potential impact of social media in facilitating the spreading of rumours and exposing victims' identities

The government's <u>information sharing advice for safeguarding practitioners</u> includes 7 'golden rules' for sharing information, and will support staff who have to make decisions about sharing information

If staff are in any doubt about sharing information, they should speak to the DSL (or deputy)

Confidentiality is also addressed in this policy with respect to record-keeping in section 14, and allegations of abuse against staff in Inclusion Education's allegations against staff and low level concerns policy.

# 8. Recognising abuse and taking action

All staff are expected to be able to identify and recognise all forms of abuse, neglect and exploitation and shall be alert to the potential need for early help for a child who:

- Is disabled
- Has special educational needs (whether or not they have a statutory education health and care (EHC) plan)
- Is a young carer
- Is bereaved
- Is showing signs of being drawn into anti-social or criminal behaviour, including being affected by gangs and county lines and organised crime groups and/or serious violence, including knife crime
- Is frequently missing/goes missing from education, care or home
- Is at risk of modern slavery, trafficking, sexual and/or criminal exploitation
- Is at risk of being radicalised or exploited
- Is viewing problematic and/or inappropriate online content (for example, linked to violence), or developing inappropriate relationships online
- Is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- Is misusing drugs or alcohol
- Is suffering from mental ill health
- Has returned home to their family from care
- Is at risk of so-called 'honour'-based abuse such as female genital mutilation (FGM) or forced marriage
- Is a privately fostered child
- Has a parent or carer in custody or is affected by parental offending
- Is missing education, or persistently absent from school/college, or not in receipt of fulltime education
- Has experienced multiple suspensions and is at risk of, or has been permanently excluded

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

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

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

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

# The numbers for the police and children's social care can be found at the start of this document.

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

For children living in the Hampshire Local Authority Area, the <u>Interagency Referral Form</u> should be used when making a referral. The <u>Hampshire Safeguarding Children Partnership and Children's Trust Thresholds Chart</u> can help you to identify the risks and types of services a family may need.

You do not need to know everything about the child before contacting Children's Services. If you are concerned, it is important that you talk to someone about this.

More information on how to make a referral can be found on the HIPS procedures website.

In an emergency, call 999.

#### Hampshire Children's Services

Public phone number: 0300 555 1384

Professionals should complete the online <u>Interagency Referral Form</u>. For urgent Child protection enquiries, professionals can phone: 01329 225379. The <u>FAQ</u> section includes detailed information regarding the Children's Reception Team (CRT) and the Multi-Agency Safeguarding Hub (MASH).

#### Information for reporting child abuse to your local council can be found here:

https://www.gov.uk/report-child-abuse-to-local-councilhttps://www.gov.uk/report-child-abuse-to-local-council

# 8.2 If a child makes a disclosure to you

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

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

Bear in mind that some children may:

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

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

# 8.3 If you discover that FGM has taken place or a learner is at risk of FGM

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

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

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

#### Any teacher who either:

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

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

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

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

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

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

Refer to <u>Hampshire Safeguarding Children Partnership's FGM strategy reporting duty flowchart</u> and follow the procedures set out in section 7.1 for contacting Hampshire Children's Services.

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

Figure 1 below, before section 8.7, illustrates the procedure to follow if you have any concerns about a child's welfare.

Where possible, speak to the DSL first to agree a course of action and record this on the college's safeguarding system (CPOMS).

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

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

#### Early help assessment

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

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

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

#### Early Help Services in Hampshire

Early Help means 'identifying as early as possible if a child or family need support and helping them to access services, working together to ensure that this has maximum impact. In other words, offering the right help at the right time.'

Hampshire's model of early help focuses on the following principles::

- Early Help is a 0-19 offer.
- Focusing on the child and family's journey.
- A seamless pathway of interventions as they move in and out of services, step up / step down across the windscreen of need.
- Clearly defined thresholds Hampshire's Threshold Chart
- A range of effective, evidence-based services in place to address assessed needs.
- Practitioners need to understand their role both when providing a service as a single agency (emerging additional need) and as part of a multi-agency response (targeted interagency).

# Early Help Hubs

Hampshire has ten early help hubs. Each hub meets on a weekly basis to coordinate the multiagency response for families with complex needs who do not meet the threshold for statutory social care.

Hampshire Children's Services provide services to meet the different levels of need of children, young people and their families. Use the <u>Children's Trust thresholds of need</u> to identify the level of service that best meets their needs.

All enquiries regarding accessing early help hub services should be made via Children's Services on 0300 555 1384 or by completing the <u>Inter Agency Referral Form (IARF)</u>.

The <u>Early Help Parent/Carer leaflet</u> helps explain the role of early help and what can be expected.

The <u>Family Information and Services Hub</u> is where you will find information about what is going on in your area, details on how families can access services, organisations and activities in Hampshire, and the advice and support that's available.

# Referral

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

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

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

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

To escalate the concern, complete a further IARF, and for any subsequent concerns. On each occasion, the case will be reviewed by the multi-agency safeguarding hub (MASH).

If a staff member believes that their concerns have not been dealt with effectively 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 Inclusion Education's whistleblowing policy should be followed.

If the DSL is unhappy with the response from Children Social Care, they should consider following the HSCP escalation protocol

If the DSL remains, a formal complaint can be made to Children's Services.

# 8.5 If you have concerns about extremism

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

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

Where there is a concern, the DSL will consider the level of risk and decide which agency to make a referral to. This could include the police or <u>Channel</u>, the government's programme for identifying and supporting individuals at risk of becoming involved with or supporting terrorism, or the local authority children's social care team.

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

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

- Think someone is in immediate danger
- Think someone may be planning to travel to join an extremist group
- See or hear something that may be terrorist-related

# 8.6 If you have a mental health concern

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

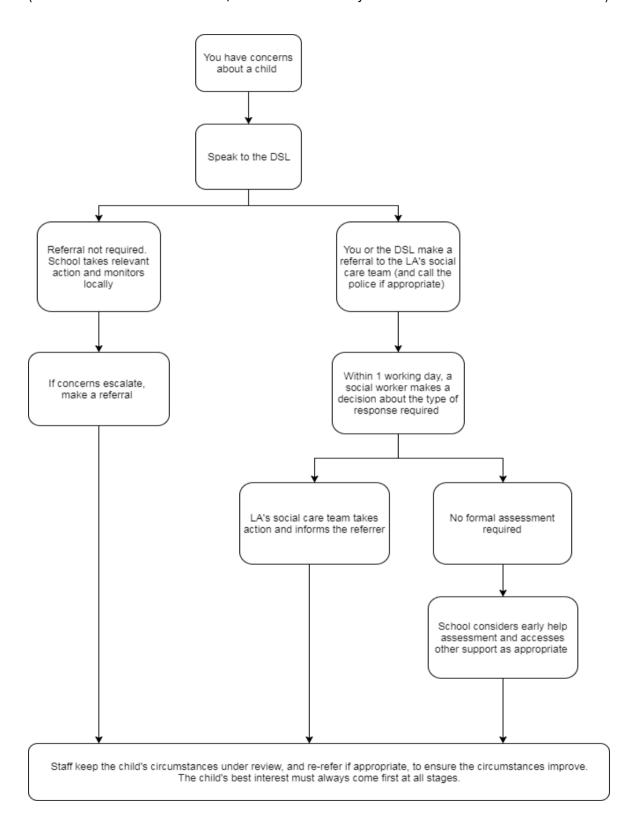
Staff will be alert to behavioural signs that suggest a child may be experiencing a mental health problem or be at risk of developing one.

If you have a mental health concern about a child that is also a safeguarding concern, take immediate action by following the steps in section 8.4 and notify the Safeguarding Team via CPOMS. If you have immediate concerns, speak to one of the safeguarding team without delay.

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

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

(Note – if the DSL is unavailable, this should not delay action. See section 8.4 for what to do.)



# 8.7 Concerns about a staff member, supply teacher, volunteer or contractor

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

The headteacher/chair of governors will then follow the procedures set out in Inclusion Education's allegations of abuse made against staff and low-level concerns policy.

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

The headteacher/proprietor will then follow the procedures set out in Inclusion Education's allegations of abuse made against staff and low-level concerns policy.

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

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

# 8.8 Allegations of abuse made against other students

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

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

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

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

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

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

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

- You must record the allegation and tell the DSL, but do not investigate it
- The DSL will contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence
- The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made and

- any others affected) with a named person they can talk to if needed. This will include considering college transport as a potentially vulnerable place for a victim or alleged perpetrator(s)
- The DSL will contact the children and adolescent mental health services (CAMHS), if appropriate

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

Further information can be found in Inclusion College's Behaviour Policy about how any behavioural concerns will be investigated and what support is available to victims, perpetrators and other children affected.

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

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

To achieve this, we will:

- Challenge any form of derogatory or sexualised language or inappropriate behaviour between peers, including requesting or sending sexual images
- Be vigilant to issues that particularly affect different genders for example, sexualised
  or aggressive touching or grabbing towards female students, and initiation or hazing
  type violence with respect to boys
- Ensure our curriculum helps to educate students about appropriate behaviour and consent
- Ensure students are able to easily and confidently report abuse using our reporting systems (as described in section 7.10 below)
- Ensure staff reassure victims that they are being taken seriously
- Be alert to reports of sexual violence and/or harassment that may point to
  environmental or systemic problems that could be addressed by updating policies,
  processes and the curriculum, or could reflect wider issues in the local area that should
  be shared with safeguarding partners
- Support children who have witnessed sexual violence, especially rape or assault by penetration. We will do all we can to make sure the victim, alleged perpetrator(s) and any witnesses are not bullied or harassed
- Consider intra familial harms and any necessary support for siblings following a report of sexual violence and/or harassment
- Ensure staff are trained to understand:
  - How to recognise the indicators and signs of child-on-child abuse, and know how to identify it and respond to reports
  - That even if there are no reports of child-on-child abuse in college, it does not mean it is not happening staff should maintain an attitude of "it could happen here"
  - That if they have any concerns about a child's welfare, they should act on them immediately rather than wait to be told, and that victims may not always make a direct report. For example:
    - Children can show signs or act in ways they hope adults will notice and react to

- A friend may make a report
- A member of staff may overhear a conversation
- A child's behaviour might indicate that something is wrong
- That certain children may face additional barriers to telling someone because of their vulnerability, disability, gender, ethnicity and/or sexual orientation
- That a learner harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy
- The important role they have to play in preventing child-on-child abuse and responding where they believe a child may be at risk from it
- o That they should speak to the DSL if they have any concerns
- That social media is likely to play a role in the fall-out from any incident or alleged incident, including for potential contact between the victim, alleged perpetrator(s) and friends from either side

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

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

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

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

# Your responsibilities when responding to an incident

If you are made aware of an incident involving the consensual or non-consensual sharing of nude or semi-nude images/videos, including pseudo-images, which are computer-generated images that otherwise appear to be a photograph or video (also known as 'sexting' or 'youth produced sexual imagery'), you must report it to the DSL immediately.

#### You must **not**:

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

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

#### Initial review meeting

Following a report of an incident, the DSL will hold an initial review meeting with appropriate school staff – this may include the staff member who reported the incident and the

safeguarding or leadership team that deals with safeguarding concerns. This meeting will consider the initial evidence and aim to determine:

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

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

- The incident involves an adult
- There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example, owing to special educational needs)
- What the DSL knows about the images or videos suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent
- The imagery involves sexual acts and any learner in the images or videos is under 13
- The DSL has reason to believe a learner is at immediate risk of harm owing to the sharing of nudes and semi-nudes (for example, the young person is presenting as suicidal or self-harming)

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

# Further review by the DSL

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

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

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

# Informing parents/carers

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

# Referring to the police

If it is necessary to refer an incident to the police, this will be done by contacting the police (101).

# **Recording incidents**

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

#### **Curriculum coverage**

Students are taught about the issues surrounding the sharing of nudes and semi-nudes as part of our relationships and sex education, the Life Skills and Wellbeing curriculum, and as part of all teaching of online safety. Teaching covers the following in relation to the sharing of nudes and semi-nudes:

- What it is
- How it is most likely to be encountered
- The consequences of requesting, forwarding or providing such images, including when it is and is not abusive and when it may be deemed as online sexual harassment
- Issues of legality
- The risk of damage to people's feelings and reputation

Students also learn the strategies and skills needed to manage:

- Specific requests or pressure to provide (or forward) such images
- The receipt of such images

This policy on the sharing of nudes and semi-nudes is also shared with students so they are aware of the processes the college will follow in the event of an incident.

Teaching follows best practice in delivering safe and effective education, including:

- Putting safeguarding first
- Approaching from the perspective of the child
- Promoting dialogue and understanding
- Empowering and enabling children and young people
- Never frightening or scare-mongering
- Challenging victim-blaming attitudes

# 8.10 Reporting systems for our students

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

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

To achieve this, we will:

- Build quality relationships with our students so that they feel safe to talk about any issues of concerns
- Put systems in place for students to confidently report abuse
- Ensure our reporting systems are well promoted, easily understood and easily accessible for students
- Make it clear to students that their concerns will be taken seriously, and that they can safely express their views and give feedback

Inclusion College staff members build open and trusting relationships with all students so that they feel safe to report any concerns.

Students are aware of members of the safeguarding team through posters around the college site, the college website, induction following admission, pastoral group time and embedded within Inclusion College Life Skills and Wellbeing curriculums.

The relevant safeguarding team members for each site can be found at the start of this document.

# 9. Online safety and the use of mobile technology

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

To address this, our college aims to:

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

#### The 4 key categories of risk

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

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

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

- Educate students about online safety as part of our curriculum. For example:
  - o The safe use of social media, the internet and technology
  - Keeping personal information private
  - o How to recognise unacceptable behaviour online
  - How to report any incidents of cyber-bullying, ensuring students are encouraged to do so, including where they are a witness rather than a victim
- Train staff, as part of their induction, on safe internet use and online safeguarding issues including cyber-bullying and the risks of online radicalisation. All staff members will receive refresher training at least once each academic year

- Educate parents/carers about online safety via our website, communications sent directly to them and during parents' evenings. We will also share clear procedures with them so they know how to raise concerns about online safety
- Make sure staff are aware of any restrictions placed on them with regards to the use of their mobile phone and cameras, for example that:
  - Staff are allowed to bring their personal phones to school for their own use, but will limit such use to non-contact time when students are not present
  - Staff will not take pictures or recordings of students on their personal phones or cameras
- Explain the sanctions we will use if a learner is in breach of our policies on the acceptable use of the internet and mobile phones
- Make sure all staff, students and parents/carers are aware that staff have the power to search students' phones, as set out in the <u>DfE's guidance on searching, screening and</u> confiscation
- Put in place robust filtering and monitoring systems to limit children's exposure to the 4 key categories of risk (described above) from the college's IT systems
- Carry out an annual review of our approach to online safety, supported by an annual risk assessment that considers and reflects the risks faced by our college community
- Provide regular safeguarding and children protection updates including online safety to all staff, at least annually, in order to continue to provide them with the relevant skills and knowledge to safeguard effectively
- Review the child protection and safeguarding policy, including online safety, annually and ensure the procedures and implementation are updated and reviewed regularly

This section summarises our approach to online safety and mobile phone use. For comprehensive details about our college's policy on online safety and the use of mobile phones, please refer to our online safety policy website.

# 9.1. Artificial Intelligence (AI)

Generative artificial intelligence (AI) tools are now widespread and easy to access. Staff, pupils and parents/carers may be familiar with generative chatbots such as ChatGPT and Google Bard.

Inclusion College recognises that AI has many uses, including enhancing teaching and learning, and in helping to protect and safeguard pupils. However, AI may also have the potential to facilitate abuse (e.g. bullying and grooming) and/or expose pupils to harmful content. For example, in the form of 'deepfakes', where AI is used to create images, audio or video hoaxes that look real.

Inclusion College will treat any use of AI to access harmful content or bully pupils in line with this policy and our respective Anti-bullying and Behaviours policies.

Staff should be aware of the risks of using AI tools whilst they are still being developed and should carry out risk assessments for any new AI tool being used by the school.

# 10. Notifying parents or carers

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

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

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

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

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

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

# 11. Students with special educational needs, disabilities or health issues

We recognise that all our students have special educational needs (SEN) or disabilities or certain health conditions and face additional safeguarding challenges, and are 3 times more likely to be abused than their peers. Additional barriers can exist when recognising abuse, exploitation and neglect in this group, including:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration
- Students being more prone to peer group isolation or bullying (including prejudice-based bullying) than other students
- The potential for students with SEN, disabilities or certain health conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs
- Communication barriers and difficulties in managing or reporting these challenges
- Cognitive understanding being unable to understand the difference between fact and fiction in online content and then repeating the content/behaviours in schools or colleges or the consequences of doing so

As all of Inclusion College's students have special educational needs, additional pastoral care is embedded within all of Inclusion College's delivery. This includes:

- A designated pastoral tutor
- A designated pastoral lead
- A Head of Mental Health & Engagement, part of the college leadership team
- A SEND Lead, part of the school leadership team
- Regular home visits
- Embedded pastoral care time within the college timetable to allow students opportunities to share their needs and concerns
- Access to a counsellor.
- Creative Wellness embedded into the curriculum
- Strong, open and supportive partnerships with parents/carers
- Staff who are always available to listen and support the needs of students

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

# 12. Students with a social worker

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

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

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

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

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

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

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

We have appointed an appropriately trained teacher, Liz Cooper, to take the lead on promoting the educational achievement of looked-after and previously looked-after children.

As part of their role, they will:

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

# 14. Students who are part of the LGBTQ+ community

We recognise that learners who are (or who are perceived to be) lesbian, gay, bisexual or gender questioning (LGBTQ+) can be targeted by other children/young adults. See our Behaviour and Anti-bullying policies for more detail on how we prevent bullying based on gender or sexuality.

We also recognise that LGBTQ+ children are more likely to experience poor mental health. Any concerns should be reported to the DSL. Further details of support for mental health can be found in the College's mental health policy.

When families/carers are making decisions about support for their child, they should be encouraged to seek clinical help and advice. This should be done as early as possible.

In all cases will take a supportive approach whilst remaining mindful of wider vulnerabilies, such as complex mental health and psychosocial needs, and in some cases, autism spectrum disorder (ASD) and/or attention deficit hyperactivity disorder (ADHD).

We will also consider the broad range of their individual needs, in partnership with their parents/carers (other than in rare circumstances where involving parents/carers would

constitute a significant risk of harm to the learner). We will also include any clinical advice that is available and consider how to address wider vulnerabilities such as the risk of bullying.

Risks can be compounded where children lack trusted adults with whom they can be open. We therefore aim to reduce the additional barriers faced and create a culture where students can speak out or share their concerns with members of staff.

# 15. Complaints and concerns about college safeguarding policies

# 15.1 Complaints against staff

Complaints against staff that are likely to require a child protection investigation will be handled in accordance with our procedures for dealing with allegations of abuse made against staff. Please see Inclusion Education's Allegations Made Against Staff and Low Level Concerns policy.

# 15.2 Other complaints

Complaints related to students are outlined in Inclusion College's Behaviour Policy.

Any complaints related to the Health and Safety of the premises should be directed to the Headteacher of Inclusion College:

Inclusion College: Liz.Cooper@inclusioncollege.org.uk

# 15.3 Whistleblowing

Inclusion Education has a separate whistleblowing policy. This is available on Inclusion Education and Inclusion College's website.

# 16. Record-keeping

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

All safeguarding concerns, discussions, decisions made and the rationale for those decisions, must be recorded in writing. This should include instances where referrals were or were not made to another agency such as local authority children's social care or the Prevent programme, etc. If you are in any doubt about whether to record something, discuss it with the DSL.

Records will include:

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

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

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

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

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

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

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

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

All paper-based safeguarding records are kept secure in a locked safe, accessible only to the DSL.

All online safeguarding records are shared only with the safeguarding team.

Information is retained until the young person has moved to a new school/college/placement. All the safeguarding documents will be transferred, as outlined above.

#### In addition:

- Inclusion Education's safer recruitment policy sets out its record-keeping specifically with respect to recruitment and pre-appointment checks
- Inclusion Education's allegations made against staff and low level concerns policy sets out our policy on record-keeping with respect to allegations of abuse made against staff

# 17. Training

#### 17.1 All staff

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

This training will be regularly updated and will:

- Be integrated, aligned and considered as part of the whole-college safeguarding approach and wider staff training, and curriculum planning
- Be in line with advice from the 3 safeguarding partners
- Have regard to the Teachers' Standards to support the expectation that all teachers:
  - o Manage behaviour effectively to ensure a good and safe environment
  - o Have a clear understanding of the needs of all students

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

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

All volunteers will receive appropriate training.

# 17.2 The DSL and deputies

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

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

They will also undertake Prevent awareness training.

#### 17.3 Governors/Trustees

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

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

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

# 17.4 Recruitment - interview panels

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

See Inclusion Education's Safer Recruitment Policy for more information about our safer recruitment procedures.

Updated guidance states tat schools/colleges should inform shortlisted candidates that online searches may be carried out as part of pre-recruitment checks.

#### 17.5 Staff who have contact with students and families

All staff who have contact with children and families will have 1:1 line management meetings which will provide them with support, coaching and training, promote the interests of children and allow for confidential discussions of sensitive issues.

# 18. Monitoring arrangements

This policy will be reviewed **annually** by the Headteacher. At every review, it will be approved by the full governing board and Inclusion Education's Trustees.

# 19. Links with other policies

This policy links to the following policies and procedures:

- Behaviour Policy
- Online Safety Policy
- Allegations made against staff and low level concerns policy
- Staff Code of Conduct

- Mental Health Policy
- SEND Policy
- Safer Recruitment Policy
- Whistleblowing Policy
- Anti-bullying Policy
- Complaints Policy
- Health and Safety Policy
- Attendance Policy
- Equality, Diversity and Inclusion Policy
- Relationships, Sex and Health Education Policy
- First Aid Policy
- Use of Supply and Agency Staff policy
- Curriculum Policy
- Privacy notices.

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

# Appendix A: types of abuse

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

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

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

Emotional abuse may involve:

- Conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person
- Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate
- Age or developmentally inappropriate expectations being imposed on children. These
  may include interactions that are beyond a child's developmental capability, as well as
  overprotection and limitation of exploration and learning, or preventing the child
  participating in normal social interaction
- Seeing or hearing the ill-treatment of another
- Serious bullying (including cyber-bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

**Sexual abuse** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve:

- Physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing and touching outside of clothing
- Non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet)

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

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

Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger
- Ensure adequate supervision (including the use of inadequate care-givers)

Ensure access to appropriate medical care or treatment  nay also include neglect of, or unresponsiveness to, a child's basic emotional needs.		
it may also include neglect or, or annesponsiveness to, a critic a basic cirrotional needs.		

# Appendix B: specific safeguarding issues

# The Trigger Trio

The term 'Trigger Trio' has replaced the previous phrase 'Toxic Trio' which was used to describe the issues of domestic violence, mental ill-health and substance misuse which have been identified as common features of families where harm to women and children has occurred.

The above are viewed as indicators of increased risk of harm to children and young people. In an analysis of Serious Cases Reviews undertaken by Ofsted in 2011, they found that in nearly 75% of these cases two or more of the issues were present.

These factors will have a contextual impact on the safeguarding of children and young people.

### Domestic abuse

Domestic abuse is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality.

This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

Research indicates that living within a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, wellbeing and understanding of what constitutes a normal relationship.

Children witnessing domestic abuse is recognised as 'significant harm' in law. These children may become aggressive; display anti-social behaviours; suffer from depression or anxiety; or fail to reach their educational potential.

Indicators that a child is living within a relationship with domestic abuse may include:

- being withdrawn
- suddenly behaving differently
- anxiety
- being clingy
- depression
- aggression
- problems sleeping
- eating disorders

- bed wetting
- soiling clothes
- excessive risk taking
- missing college
- changes in eating habits
- obsessive behaviour
- experiencing nightmares
- taking drugs
- use of alcohol
- self-harm
- thoughts about suicide

These behaviours themselves do not indicate that a child is living with domestic abuse, but should be considered as indicators that this may be the case.

If staff believe that a child is living with domestic abuse, this will be reported to the designated safeguarding lead for referral to be considered to children's social care.

### Parental mental health

The term 'mental ill health' is used to cover a wide range of conditions, from eating disorders, mild depression and anxiety to psychotic illnesses such as schizophrenia or bipolar disorder. Parental mental illness does not necessarily have an adverse impact on a child's developmental needs, but it is essential to always assess its implications for each child in the family. It is essential that the diagnosis of a parent/carer's mental health is not seen as defining the level of risk. Similarly, the absence of a diagnosis does not equate to there being little or no risk.

For children the impact of parental mental health can include:

- The parent / carer's needs or illnesses taking precedence over the child's needs
- Child's physical and emotional needs neglected
- A child acting as a young carer for a parent or a sibling
- Child having restricted social and recreational activities
- Child finds it difficult to concentrate- impacting on educational achievement
- A child missing school/college regularly as (s)he is being kept home as a companion for a parent / carer
- A child adopts paranoid or suspicious behaviour as they believe their parent's delusions.
- Witnessing self-harming behaviour and suicide attempts (including attempts that involve the child)
- Obsessional compulsive behaviours involving the child

If staff become aware of any of the above indicators, or others that suggest a child is suffering due to parental mental health, the information will be shared with the DSL to consider a referral to children's social care.

### Parental Substance misuse

Substance misuse applies to the misuse of alcohol as well as 'problem drug use', defined by the Advisory Council on the Misuse of Drugs as drug use which has: 'serious negative consequences of a physical, psychological, social and interpersonal, financial or legal nature for users and those around them.

Parental substance misuse of drugs or alcohol becomes relevant to child protection when substance misuse and personal circumstances indicate that their parenting capacity is likely to be seriously impaired or that undue caring responsibilities are likely to be falling on a child in the family.

For children the impact of parental substance abuse can include:

- Inadequate heat and clothing for children (family finances used to fund adult's dependency)
- Lack of engagement or interest from parents in their development, education or wellbeing
- Behavioural difficulties- inappropriate display of sexual and/or aggressive behaviour
- Bullying (including due to poor physical appearance)
- Isolation finding it hard to socialise, make friends or invite them home
- Tiredness or lack of concentration
- Child talking of or bringing into college drugs or related paraphernalia
- Injuries /accidents (due to inadequate adult supervision)
- Taking on a caring role
- Continued poor academic performance including difficulties completing homework on time
- Poor attendance or late arrival.

These behaviours themselves do not indicate that a child's parent is misusing substances, but should be considered as indicators that this may be the case.

If staff believe that a child is living with parental substance misuse, this will be reported to the designated safeguarding lead for referral to be considered for children's social care.

## Children who are absent from education

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

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

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

We will follow our procedures for unauthorised absence and for dealing with children who are absent from education, particularly on repeat occasions, to help identify the risk of abuse, exploitation and neglect, including sexual exploitation, and to help prevent the risks of going missing in future. This includes informing the local authority if a child leaves the college without a destination being named, and adhering to requirements with respect to sharing information with the local authority, when applicable, when removing a child's name from the admission register at non-standard transition points.

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

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

## **Child criminal exploitation**

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

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

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

Indicators of CCE can include a child:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Suffering from changes in emotional wellbeing
- Misusing drugs and alcohol
- Going missing for periods of time or regularly coming home late
- Regularly missing school or education
- Not taking part in education

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

## Child sexual exploitation

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

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

The victim can be exploited even when the activity appears to be consensual. Children or young people who are being sexually exploited may not understand that they are being abused. They often trust their abuser and may be tricked into believing they are in a loving, consensual relationship.

CSE can include both physical contact (penetrative and non-penetrative acts) and non-contact sexual activity. It can also happen online. For example, young people may be persuaded or forced to share sexually explicit images of themselves, have sexual conversations by text, or take part in sexual activities using a webcam. CSE may also occur without the victim's immediate knowledge, for example through others copying videos or images.

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

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

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

#### Child-on-child abuse

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

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

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

- Bullying (including cyber-bullying, prejudice-based and discriminatory bullying)
- Abuse in intimate personal relationships between children (this is sometimes known as 'teenage relationship abuse')
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse)
- Sexual violence, such as rape, assault by penetration and sexual assault (this may include an online element which facilitates, threatens and/or encourages sexual violence)
- Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse
- Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party
- Consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery)
- Upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm

• Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element)

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

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

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

### **Domestic abuse**

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

Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse (abuse in intimate personal relationships between children) and child/adolescent to parent violence and abuse. It can be physical, sexual, financial, psychological or emotional. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear or experience its effects.

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

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

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

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

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

## Homelessness

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

The DSL and deputies will be aware of contact details and referral routes into the local housing authority so they can raise/progress concerns at the earliest opportunity (where appropriate and in accordance with local procedures).

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

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

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

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

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

#### **FGM**

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

Section 8.3 of this policy sets out the procedures to be followed if a staff member discovers that an act of FGM appears to have been carried out or suspects that a learner is at risk of FGM.

Indicators that FGM has already occurred include:

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

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

- The girl's family having a history of practising FGM (this is the biggest risk factor to consider)
- FGM being known to be practised in the girl's community or country of origin
- A parent or family member expressing concern that FGM may be carried out
- A family not engaging with professionals (health, education or other) or already being known to social care in relation to other safeguarding issues
- A girl:
  - o Having a mother, older sibling or cousin who has undergone FGM
  - Having limited level of integration within UK society
  - Confiding to a professional that she is to have a "special procedure" or to attend a special occasion to "become a woman"

- Talking about a long holiday to her country of origin or another country where the practice is prevalent, or parents/carers stating that they or a relative will take the girl out of the country for a prolonged period
- Requesting help from a teacher or another adult because she is aware or suspects that she is at immediate risk of FGM
- Talking about FGM in conversation for example, a girl may tell other children about it (although it is important to take into account the context of the discussion)
- o Being unexpectedly absent from college
- Having sections missing from her 'red book' (child health record) and/or attending a travel clinic or equivalent for vaccinations/anti-malarial medication

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

#### **Forced marriage**

Forcing a person into marriage is a crime. A forced marriage is one entered into without the full and free consent of 1 or both parties and where violence, threats, or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological.

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

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

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

## The DSL will:

- Speak to the learner about the concerns in a secure and private place
- Activate the local safeguarding procedures and refer the case to the local authority's designated officer
- Seek advice from the Forced Marriage Unit on 020 7008 0151 or fmu@fco.gov.uk
- Refer the learner to an education welfare officer, pastoral tutor, learning mentor, or school counsellor, as appropriate

## **Preventing radicalisation**

- Radicalisation refers to the process of a person legitimising support for, or use of, terrorist violence
- **Extremism** is the promotion or advancement of an ideology based on violence, hatred or intolerance, that aims to:
  - o Negate or destroy the fundamental rights and freedoms of others; or
  - Undermine, overturn or replace the UK's system of liberal parliamentary democracy and democratic rights; or
  - o Intentionally create a permissive environment for others to achieve the results outlined in either of the above points
- Terrorism is an action that:
  - Endangers or causes serious violence to a person/people;
  - Causes serious damage to property; or
  - o Seriously interferes or disrupts an electronic system

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

College's have a duty to prevent children becoming involved with or supporting terrorism. The DSL will undertake Prevent awareness training and make sure that staff have access to appropriate training to equip them to identify children at risk.

We will assess the risk of children in our college becoming involved with or supporting terrorism. This assessment will be based on an understanding of the potential risk in our local area, in collaboration with our local safeguarding partners and local police force.

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

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

Staff will be alert to changes in students' behaviour.

The government website <u>Educate Against Hate</u> and charity <u>NSPCC</u> say that signs that a learner is being radicalised can include:

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

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

If staff are concerned about a learner, they will follow our procedures set out in section 7.5 of this policy, including discussing their concerns with the DSL.

Staff should always take action if they are worried.

## Sexual violence and sexual harassment between children in college

Sexual violence and sexual harassment can occur:

• Between 2 children of any age and sex

- Through a group of children sexually assaulting or sexually harassing a single child or group of children
- Online and face to face (both physically and verbally)

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

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

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

When supporting victims, staff will:

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

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

Staff should be aware of the importance of:

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

If staff have any concerns about sexual violence or sexual harassment, or a child makes a report to them, they will follow the procedures set out in section 7 of this policy, as appropriate. In particular, section 8.8 and 8.9 set out more detail about our college's approach to this type of abuse.

## Serious violence

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

- Increased absence from school/college
- Change in friendships or relationships with older individuals or groups
- Significant decline in performance
- Signs of self-harm or a significant change in wellbeing
- Signs of assault or unexplained injuries

• Unexplained gifts or new possessions (this could indicate that the child has been approached by, or is involved with, individuals associated with criminal networks or gangs and may be at risk of criminal exploitation (see above))

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

- Being male
- Having been frequently absent or permanently excluded from school
- Having experienced child maltreatment
- Having been involved in offending, such as theft or robbery
- Staff will be aware of these indicators and risk factors. If a member of staff has a concern about a learner being involved in, or at risk of, serious violence, they will report this to the DSL.

### Mental health

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

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

Staff see students day in, day out. They know them well and are well placed to spot changes in behaviour that might indicate an emerging problem with the mental health and emotional wellbeing of students.

The balance between the risk and protective factors are most likely to be disrupted when difficult events happen in students' lives. These include:

- loss or separation resulting from death, parental separation, divorce, hospitalisation, loss of friendships (especially in adolescence), family conflict or breakdown that results in the child having to live elsewhere, being taken into care or adopted
- **life changes** such as the birth of a sibling, moving house or changing schools/colleges or during transition from primary to secondary school, or secondary school to sixth form/college
- **traumatic events** such as abuse, domestic violence, bullying, violence, accidents, injuries or natural disaster.

When concerns are identified, staff will provide opportunities for the child to talk or receive support within our provision environment. Parents will be informed of the concerns if necessary and a shared way to support the child will be discussed.

Where the needs require additional professional support referrals will be made to the appropriate team or service with the parent's agreement or child's if they are considered to be competent.

If staff have a mental health concern about a child that is also a safeguarding concern, we will take immediate action. If we have a mental health concern that is not also a safeguarding concern, speak to the Mental Health Lead to agree on a course of action.

# Appendix C: safeguarding processes

# Checking the identity and suitability of visitors

All visitors will be required to verify their identity to the satisfaction of staff and to leave their belongings, including their mobile phone(s), in a safe place during their visit.

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

Visitors are expected to sign in using the "Sign In App" and agree to respective the school/college's safeguarding and child protection policy, as well as wear a visitor's badge and will be accompanied by a member of staff at all times

Visitors to the school/college who are visiting for a professional purpose, such as educational psychologists and school/college improvement officers, will be asked to show photo ID and:

- Will be asked to show their DBS certificate, which will be checked alongside their photo ID: or
- The organisation sending the professional, such as the LA or educational psychology service, will provide prior written confirmation that an appropriate level of DBS check has been carried out (if this is provided, we will not ask to see the DBS certificate)

If an Enhanced DBS and ID check has been completed (typically for regular visitors, such as Educational Psychologists) they will have a green badge which designates this person does not require a member of staff with them.

If they are wearing a red badge this indicates to all adults that they require a member of staff's supervision because they have not been checked by the school/college.

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

### Non-collection of children

If a child is not collected at the end of the day, we will:

- Review their information for any changes to routine
- If there is no change of routine, the taxi provider or parent/carer will be contacted
- In the case of a taxi provider, if they do not respond, the parent/carer will be contacted to collect the child
- If this is unsuccessful, the adults who are authorised by the parents/carers to collect their child from the setting and whose telephone numbers are recorded on the Registration Form are contacted.
- All reasonable attempts will be made to contact the parents or nominated carers. The child will not leave the premises with anyone other than those named on their file.
- If no one collects the child after one hour and there is no-one who can be contacted to collect the child, we apply the procedures for uncollected children and contact Children's Services (see details above).
- The child will remain on site in the care of two fully-vetted workers until they are safely collected either by the parents/carers or by a social care worker.

# Missing students

In the unlikely event that a learner leaves the premises or goes missing, the following measures will be taken to try to locate the learner in order to return them to effective supervision as soon as possible.

If a child goes missing, we will:

- As soon as a learner has been identified as missing, the Headteacher (or other senior leader) should be informed immediately
- Maintain the safety and wellbeing of other students
- The premises will be searched for the learner whilst they are contacted directly (if their details have been shared with theirs and parent/carer permission)
- The learner's parents/carers will be contacted to inform them that their child cannot be located and check whether the learner has returned home
- If the parents/carers cannot be contacted, and the learner still not located, the police should be called (see below).
- Following any incident a full investigation will take place and learner's risk assessment will be reviewed by the Safeguarding Team and any recommendations will be added to the Inclusion College Safeguarding & Child Protection Policy

# Reporting to the Police

If there is any cause to believe that the learner may have been harmed or is at risk of being harmed, has a history of missing episodes or is known to be at risk of exploitation, and parents cannot be contacted, then the police must be called immediately on 999.

Any reporting to the police will be made a member of the Safeguarding Team.

The police will be provided with as much information as possible including:

- Name/DOB/Any Alias
- Address / Previous Addresses
- Phone numbers/Emails/Social Media details
- Family Details (Names/Addresses etc)
- Contact details for any key worker/Social Worker
- List of Associates if known
- Details of any vulnerability (i.e. Learning Disabilities/Mental Health/Physical injury or Illness/Medication)
- Details of any current concern/issue for the learner
- Circumstances of Disappearance

From this point it will become the responsibility of the police to assess the level of risk and inform the next steps for the school.

# Physical Intervention (use of reasonable force)

Every child and young person has a right to be treated with respect and dignity, and deserves to have their needs recognised and be given the right support. Some children and young people with learning disabilities, autistic spectrum conditions, trauma or mental health difficulties may react to distressing or confusing situations by displaying behaviours which may be harmful to themselves and others and may have been at heightened risk of restrictive intervention to minimise the impact of their behaviour, on them and on other people.

Research has shown that children and young people, their families and carers have said that restraint and restrictive intervention are traumatising. We also know that use of restraint and restrictive intervention can have long-term consequences on the health and wellbeing of children and young people, and that it can have a negative impact on staff who carry out such intervention. The personal costs to children and young people's development and welfare and to staff from the use of restraint are well documented. These include damage to physical, psychological, social and emotional wellbeing and to their neuro-cognitive, behavioural and emotional development. Restraint can be traumatising for children and repeated use of restraint can have damaging, re-traumatising effects

Young people who have experienced trauma in the past are especially at risk of experiencing psychological harm from restrictive interventions. For example: exclusion and seclusion can echo relational trauma and systemic trauma; physical restraint can echo physical and sexual abuse. As a result, these interventions may cause re-traumatisation which, in turn, may drive even more challenging behaviour

Children and young people with learning disabilities, autistic spectrum conditions and mental health difficulties may often respond with behaviour that challenges (verbal or non-verbal) when they are in pain, or experiencing sensory overload, or when confronted with situations they do not understand or environments in which they cannot easily cope, which cause anxiety or fear, and for which they are unprepared. Such behaviour may be perceived as 'naughty' or 'bad' if the child or young person is unable to follow instructions or fit in with existing rules and structures and it can be a form of communication for children and young people who are unable to communicate verbally.

Young people who have been exposed to trauma are more likely to have psychological and behavioural problems, and there is evidence that greater trauma exposure is associated with more severe and diverse behaviour problems. In addition, young people with behavioural issues and mental health conditions may be at higher risk of abuse and neglect than children without these conditions. These findings taken together suggest the possibility of a feedback cycle in which young people who have experienced trauma and who have mental health conditions and behavioural issues are at the highest risk of further trauma, mental health conditions and behavioural issues.

Inclusion College promotes a learner centred approach with trauma- informed practices and, as such, does not operate a system of using restraint punitively or as a behaviour management tool. Staff are trained to use positive behaviour support and other alternatives which can deescalate challenging behaviour, and tackle the reasons for it at source. This is our primary approach. We believe in relationships built on respect, trust and nurture and to break this by using restraint on a young person would be both wrong and potentially damaging.

The likelihood of challenging behaviour can often be anticipated by those who know the learner well. Measures to understand the range of communication used by young people to express emotions, including distressed behaviour, are put in place. Measures to identify triggers of

distressed behaviour and to prevent or address it are also developed with the involvement of the child or young person and their family, and with careful assessment, planning and support we create the right environment for education, care and support.

## **Primary Strategies**

We put in place strategies for each individual learner to reduce the likelihood of the behaviour happening; for example, managing situations that we know will trigger a behaviour, changing environments, changing grouping and timetabling and providing opportunities for new experiences and acquiring new skills.

## Secondary Strategies

These are our plans for what to do if the primary strategies do not work and behaviour starts to escalate. These include using calming approaches, changing the environment, and diverting the young person's attention to an activity they enjoy.

## Reactive Strategies

These are planned, robust strategies that are put in place to be used as a response to an incident of challenging behaviour. They aim to take control of a situation and minimise the risk to the person and others.

### These include:

- Continued use of proven and evidence based de-escalation strategies and calming techniques
- Alerting staff for example Headteacher, SLT and/ or Counsellors of escalating situation for support and intervention
- Removal and supervision of other students in a safe place
- Learner to leave site (under the care of staff, parent/ carer or other appropriate professional)
- In cases of violence, extreme destruction, risk to self or others the police may be called
- In extreme cases of violence towards other students, self or staff, non violent intervention may be necessary such as standing between students or standing at a door to protect others

## **Transporting students**

On occasion, staff support with the task of transporting children to visits and off-site activities arranged by Inclusion College.

In managing these arrangements, we will put in place measures to ensure the safety and welfare of young people carried in staff or volunteers' cars, as well as the adults involved. This is based on guidance from the local authority for school staff using their cars on school business.

Inclusion College will notify staff and volunteers of their responsibilities for the safety of students, to maintain suitable insurance cover and to ensure their vehicle is roadworthy. All staff are directed to have read and adhere to the Staff Travel policy which can be found in the Inclusion College secure staff folder.

Inclusion College contracts the services of a community transport provider to provide

services for some students, relevant compliance documents are held at the head office.