Oak Hill C of E Primary School

Child Protection / Safeguarding Children Policy

This policy was written in consultation with staff and governors
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All of the above is followed by explanations and examples of the various Forms of Abuse and an explanation of numerous acronyms.

Oak Hill C of E Primary School fully recognises its responsibilities for child protection and the safeguarding of pupils. This policy applies to all staff, governors and volunteers working in the school.

1 Introduction

1.1 This policy looks to provide guidance as to how to best uphold Safeguarding at Oak Hill Church of England Primary School.

1.2 If you have a concern you must contact the school's Designated Safeguarding Leader (Headteacher) or Deputy Safeguarding Leader. These are reported using MyConcern. Anything that ensures the information is shared. If these individuals are unavailable please contact our Safeguarding Governor (Katie Beattie) or call the Gloucestershire County Council Safeguarding helpdesk on 01452 42 65 65. In an emergency always call 999.
Safeguarding is the responsibility of everyone at Oak Hill Church of England Primary School. If you have a concern, share it.

1.3 In September 2022, the Department for Education updated the statutory guidance on safeguarding. This guidance should be read in conjunction with this policy.

1.4 'Keeping Children Safe in Education' (September 2022), which can be found at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1101454/Keeping_children_safe_in_education_2022.pdf

1.5 A summary for staff can be found at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1014058/KCSIE_2021_Part_One_September.pdf

1.6 Gloucestershire County Council's Safeguarding Children Website (a live document) can be found at: https://www.gloucestershire.gov.uk/gscp/

1.7 This policy has been developed in accordance with the principles established by the Childrens Acts 1989 and 2004; the Education Act 2002, and in line with Government publications: 'Working Together to Safeguard Children 2018, 'Keeping Children Safe in Education' 2022, the PREVENT strategy June 2015, The Human Rights Act 1998, The equality Act 2010 and the Public Sector Equality Duty.

1.8 The Governing Body takes seriously its responsibility under section 175 of the Education Act 2002 to safeguard and promote the welfare of children; and to work together with other agencies to ensure adequate arrangements within our school to identify, assess and support those children who are suffering harm. This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002 and in line with statutory guidance: 'Working together to safeguard children' (DfE 2018) and 'Keeping children safe in education'

(DfE 2022). This policy also takes on board procedures and guidance set out by Gloucestershire Safeguarding Children Panel.

1.9 The health, safety and welfare of all our children are of paramount importance to all the adults who work in our school. Our children have the right to protection, regardless of age, gender, race, culture or disability. They have a right to be safe; and feel safe, secure and listened to in our school. All staff believe that our school should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of all children as individuals.

2 Mission Statement

2.1 Maintain and continue to create an environment in which all children and young people feel safe, secure, valued and respected and where they can learn and fully develop.

2.2 Establish and maintain an environment where children are encouraged to talk, and are listened to when they have a worry or concern. Ensure children know they can approach staff if they are worried.

2.3 Establish and maintain an environment where school staff and volunteers are encouraged to share and are listened to when they have concerns about the safety and wellbeing of a child.

2.4 Ensure that all staff know the procedures for reporting a concern or making a child protection referral and that staff are well equipped to spot signs of abuse or a child in need of early help for a variety of reasons.

2.5 Ensure that any children who have been abused will be supported in line with a child protection plan, where deemed necessary.

2.6 Include opportunities in the curriculum for children to develop the skills they need to recognise and stay safe from abuse or from other areas of risk as part of a broad and balanced curriculum. Ensure our children are equipped with the skills they need to keep themselves safe.

2.7 Contribute to the Spiritual, Moral, Social and Cultural (SMSC) development of children as well as other key aspects of a young person's well-being (being healthy, staying safe, enjoying and achieving, making a positive contribution and achieving economic well-being).

2.8 To ensure that we have suitable staff working within our school by adhering stringently to safer recruitment processes and ensuring any unsuitable behaviour is reported and managed quickly using the Allegations Management procedures.

2.9 Ensure all staff members maintain an attitude of 'it could happen here' where safeguarding is concerned and that when issues arise about the welfare of a child, staff members always act in the interests of the child.

2.10 To ensure that within there is an understanding that **safeguarding is the responsibility of EVERYONE. If at any point there is immediate risk of serious harm to a child a referral must be made to social care immediately or dial 999. Anybody can make a referral.**

2.11 In our school, we respect our children. The atmosphere within our school encourages all children to do their best. We provide opportunities that enable our children to take and make decisions for themselves.

2.12 We recognise that abuse and neglect can result in underachievement. We strive to ensure that all our children make good educational progress.

2.13 Our teaching of personal, social and health education and citizenship, as part of the National Curriculum, helps to develop appropriate attitudes in our children, and makes them aware of the impact of their decisions on others. We also teach them how to recognise different risks in different situations, and how to behave in response to them.

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

● Behaviour policy
● Pastoral support system
● 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.

o   What constitutes sexual harassment and sexual violence and why they're always unacceptable.

3 Statutory Framework

3.1 In order to safeguard and promote the welfare of children, we will act in accordance with the following legislation and guidance:

• The Children Act 1989
• The Children Act 2004
• Education Act 2002 (section 175)
• Gloucestershire Safeguarding Children Panel (Inter-agency Child Protection and Safeguarding Children Procedures) (Electronic – live online – https://www.gloucestershire.gov.uk/gscp/)
• Keeping Children Safe in Education (DFE 2022)
• Keeping Children Safe in Education: information for all school and college staff (DFE 2022)
• Working Together to Safeguard Children (DfE 2018)
• The Education (Pupil Information) (England) Regulations 2005

3.2 Working Together to Safeguard Children (DfE 2018) requires all schools to follow the procedures for protecting children from abuse which are established by the Gloucestershire Safeguarding Children Board. Schools are also expected to ensure that they have appropriate procedures in place for responding to situations in which they believe that a child has been abused or are at risk of abuse - these procedures should also cover circumstances in which a member of staff is accused of, or suspected of, abuse.

3.3 Furthermore, Keeping Children Safe in Education (DfE September 2022) places the following responsibilities on all schools:

●   **Schools should be aware of and follow the procedures established by the <u>Gloucestershire Safeguarding Children Partnership(GSCP).</u>**
●   Staff should be alert to signs of abuse and know to whom they should report any concerns or suspicions.
●   Schools should have procedures **(of which all staff are aware)** for handling suspected cases of abuse of pupils, **including procedures to be followed if a member of staff is accused of abuse, or suspected of abuse**.
●   A Designated Senior Person (referred to in 'Keeping Children Safe in Education (DFE, September 2022) as Designated Safeguarding Lead, should have responsibility for coordinating action within the school and liaising with other agencies.
●   **Staff with the designated safeguarding lead responsibility should undergo updated child protection training every two years.**

3.4 Keeping Children Safe in Education (DfE September 2022) also states: **Governing bodies and proprietors should ensure there is an effective child protection policy in place together with a staff behaviour policy (code of conduct). Both should be provided to all staff – including temporary staff and volunteers – on induction**. The child protection policy should describe procedures which are in accordance with government guidance and refer to locally agreed inter-agency procedures put in place by the GSCP, be updated annually, and be available publicly either via the school or college website or by other means.

4 Stakeholder Responsibilities:

Governing Body responsibilities

4,1 The governing board will:
- Facilitate a whole-school 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 school's local multi-agency safeguarding arrangements.
- Appoint a senior board level (or equivalent) lead to monitor the effectiveness of this policy in conjunction with the full governing board. This is always a different person from the DSL, To 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-school approach to safeguarding and related policies.

○ The leadership team and relevant staff are aware of and understand the IT filters and monitoring systems in place, manage them effectively and know how to escalate concerns.

○ The school 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).

○ 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 school 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 school about safeguarding arrangements, where appropriate.
- Make sure that safeguarding requirements are a condition of using the school premises, and that any agreement to use the premises would be terminated if the other body fails to comply.
- All governors 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 school to deliver a robust whole-school approach to safeguarding

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

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

Safeguarding Leads / Deputies responsibilities

4.2 The Designated Safeguarding Lead for Child Protection and Safeguarding (DSL) in our school is Adam Greaves head@oakhill.gloucs.sch.uk (Headteacher). The Deputy Safeguarding Lead for Child Protection and Safeguarding (DDSL) is Jason Avards javards@oakhill.gloucs.sch.uk Another DDSL is Jacqui Edwards jedwards@oakhill.gloucs.sch.uk. The Governor responsible for Child Protection and Safeguarding is Katie Beattie kbeattie@oakhill.gloucs.sch.uk .

4.3 The Designated Safeguarding Lead and deputy Designated Safeguarding Leads will be guided by two principles:

● In accordance with the Children Act, the welfare of the child is always paramount.
● Confidentiality should be respected as far as possible.

4.4 A key role of the DSL is to be fully conversant with the procedures of the Gloucestershire Safeguarding Children's Partnership (GSCP), and to ensure that the school takes action to support any child who may be at risk. The DSL must also make sure that all staff are aware of their responsibilities in relation to child protection. The DSL will work closely with other agencies as appropriate, as well as the GSCB, when investigating any allegations of abuse. All parties involved will

handle such investigations in a sensitive manner, remembering all the time that the interests of the child are of paramount importance.

4.5 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(other DSL trained staff) informed of any issues
- Liaise with local authority case managers and designated officers for child protection concerns as appropriate.
- Discuss the local response to sexual violence and sexual harassment with police and local authority children's social care colleagues to prepare the 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.

Staff responsibilities:

4.6 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 school and via the school 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.

- Ensuring the relevant staffing ratios are met, where applicable.

4.7 All staff have a responsibility to report to the DSL any concern they have about the safety of any child in their care. All concerns are to be completed by the individual member of staff using My Concern. My Concern forms should be completed with all relevant details and they are automatically passed to the DSL/DDSL immediately. Should any confidential information be held concerning any pupil their attainment record will be annotated with a coloured dot so that any member of school staff looking at these records will become aware of additional information. This information will be held confidentially by the DSL and SENCO.

4.8 All staff will be informed of any vulnerable pupils (these are identified using the suggested list within the OFSTED evaluation schedule), specifically within the class they work with but also within the school.

4.9 Staff have awareness training updated every year to ensure they are updated with relevant information regarding forms and evidence of abuse and safeguarding procedures. Staff have been provided access to copies of relevant documentation eg. Working together to Safeguard Children 2018 and Keeping Children Safe in Education 2022 and are required to sign a document to acknowledge they have read these.

4.10 Reinforce the importance of online safety when communicating with parents. This includes making parents aware of what we ask children to do online (e.g. sites they need to visit or who they'll be interacting with online).

4.11 All staff will be aware of:

- Our systems which support safeguarding, including this child protection and safeguarding policy, the staff [behaviour policy/code of conduct], the role and identity of the designated safeguarding lead (DSL) and deputies, the behaviour 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 and online
- The fact that children who are (or who are perceived to be) lesbian, gay, bi or trans (LGBT) can be targeted by other children and provide a safe space for pupils who are LGBT to speak out and share their concerns.
- What to look for to identify children who need help or protection.

5 Child abuse

5.1 Definition of terms:

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.

5.2 Child abuse takes a variety of forms (see appendix 1 for for signs and indicators)

° **Physical abuse** involves the hitting, shaking or other treatment of a child that can cause actual bodily harm.

°   **Sexual abuse** involves forcing or enticing a child into sexual activities, whether or not the child is aware what is happening. This includes non-contact situations, such as showing children pornography.

°   **Emotional abuse** is the persistent emotional ill-treatment of children, such as frightening them, or putting them in positions of danger. It is also an abuse to convey to children the feeling that they are worthless or unloved.

°   Abuse can also take the form of **neglect**. This could involve failure to provide proper food and warmth, but it might also be failure to nurture the emotional well-being of the child.

°   **Compromised Care**: Sometimes children need to be safeguarded due to the impact of factors which reduce their parent or carer's ability to care for them. This can have severe consequences for the child of it is not identified or no action is taken. Compromised care may arise due to:

Domestic Violence and Abuse: This is any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of sexuality (Department of Health 2005). It occurs across the whole of society regardless of race, ethnicity, religion, social class, age, income and where a person lives. 🎬 Aware that witnessing domestic violence and abuse constitutes harm to a child or young person.

Mental illness of parent or carer: If a parent or carer has a mental illness, it is important not to make assumptions or generalise. However, assessment is important as there may be times that due to the effects of the illness on the parent or carer's behaviour or the effects of medication, there is a possibility that some children may be adversely affected or be at risk of harm.

Drug or alcohol misuse of parent or carer: If a parent or carer misuses drugs or alcohol, this may impact on their parenting capacity but it is important not to generalise or make assumptions in this respect. Some substances may induce behaviour that increases the risk of harm or neglect to the child. The child's safety may also be compromised in other ways.

Learning disability of parent or carer: If a parent or carer has a learning disability, it is important not to make assumptions or generalise. Specialist assessment is recommended and Adult Learning Disability Services should provide valuable input into assessments relating to any child. Children may be particularly vulnerable where both parents/carers have a learning disability, as the parents may need support to develop the understanding, resources, skills and experience to meet the needs of their children.

Fabricated or induced illness (FII): Fabricated or induced illness (FII) is a rare form of child abuse. It occurs when a parent or carer, usually the child's biological mother, exaggerates or deliberately causes symptoms of illness in the child. FII is also known as Munchausen's syndrome by proxy. The term FII covers a wide range of cases and behaviours involving parents seeking healthcare for a child. This ranges from extreme neglect (failing to seek medical care) to induced illness.

Persistent offending behaviour of parent or carer: If a parent or carer is involved in persistent offending behaviour the child's safety may be compromised. For example, the child's home may be targeted or there may be an 'open house' where it is unclear who is providing care for the child, and where individuals who pose a risk of harm may have access to the child.

6 Safeguarding / Child Protection Procedures

6.1 We will follow the procedures set out by the Local Safeguarding Children Board, these can be found on the GSCP website (https://www.gloucestershire.gov.uk/gscp/) or in the appendix to this policy. If necessary staff will refer to and follow the South West Procedure Guidelines to investigate any allegations, these can be found at www.online-procedures.co.uk/swcpp/   We will also take account of guidance issued by the Department for Children, Families and Schools to:

- Ensure we have a designated senior person for safeguarding (child protection) who has received appropriate training and support for this role.
- Ensure we have a nominated governor responsible for child protection.
- Ensure that a single Central Record of staff DBS checks is kept up-dated regularly.
- Ensure every member of staff (including temporary and supply staff and volunteers) and governing body knows the name of the designated senior lead responsible for child protection and their role.
- Ensure that all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the designated senior person responsible for child protection.
- Ensure that parents have an understanding of the responsibility placed on the school and staff for child protection by setting out their obligations in the school prospectus
- Notify the relevant social worker if there is an unexplained absence of a pupil who has a Child Protection Plan.
- Ensure that the Audit of Safeguarding Children is accurately completed. The school aims to achieve Level 1 or 2.

- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters including attendance at child protection conferences and core groups.
- Keep written records of concerns about children, even when there is no need to refer to the matter immediately.
- Ensure all records are kept securely; separate from the main pupil file, and in locked locations.
- Develop and then follow procedures where an allegation is made against a member of staff or volunteer including supply or agency workers, contractors or governors.
- Ensure safe recruitment practices are always followed.
- Ensure safe practices are adhered to for all pupils travelling on the school bus.
- Maintain good communication with the school bus provider in case there are any concerns relating to a child's safety whilst travelling to school and back home.

7 Identification of concerns

7.1 We recognise that because of the day to day contact with children, school staff are well placed to observe the outward signs of abuse. The school will therefore:

- 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 school whom they can approach if they are worried.
- Include opportunities in the PSHCE curriculum for the children to develop the skills they need to recognise and stay safe from abuse.

8 Procedure to be followed if an adult has concerns about a child

8.1 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. Use MyConcern to record your concern https://www.thesafeguardingcompany.com/myconcern/ .
- 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.

If you suspect FGM the procedures to follow are:

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 **pupil 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 pupil is *at risk* of FGM or FGM is suspected but is not known to have been carried out. Staff should not examine pupils.

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

8.2 Any action taken by the named DSL when dealing with an issue of child protection must be in accordance with the procedures outlined in the LA's Child Protection guidelines.

All adults in our school share responsibility for keeping our children safe. We may on occasion report concerns which, on investigation, prove unfounded.

Staff must not keep to themselves any information about abuse which a child gives them; they are required by law to pass this information on.

If a child alleges abuse, the school will usually make a referral to the LA without first informing parents. However, in some circumstances parents will be informed first.

If a referral is made, a case conference is likely to be called. Case conferences offer the opportunity to share information and formulate a plan of action. Staff are expected to attend and participate in all case conferences and meetings held.

8.3 If a member of staff thinks a child or young person is at immediate risk of significant harm they should contact the Children's Helpdesk on: 01452 426565 or in an emergency always call 999. Do not wait to discuss this with the DSL/DDSL but do report it afterwards.

9 Anti-Bullying

Our school policy on anti-bullying is set out in our anti-bullying and hate policy. This acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms e.g. cyber, racist, homophobic and gender related bullying. We keep a record of known bullying incidents. All staff are aware that children with SEND and / or differences/perceived differences are more susceptible to being bullied / victims of child abuse. We keep a record of bullying incidents.

We recognise that to successfully deal with bullying we:

- Involve parents to ensure that they are clear that the school does not tolerate bullying and are aware of the procedures to follow if they believe that their child is being bullied. Parents feel confident that the school will take any complaint about bullying seriously and resolve the issue in a way that protects the child, and they reinforce the value of good behaviour at home.
- Involve pupils. All pupils understand the school's approach and are clear about the part they can play to prevent bullying, including when they find themselves as bystanders.
- Regularly evaluate and update their approach to take account of developments in technology, for instance updating 'acceptable use' policies for computers.
- Implement disciplinary sanctions. The consequences of bullying reflect the seriousness of the incident so that others see that bullying is unacceptable.

- Openly discuss differences between people that could motivate bullying, such as religion, ethnicity, disability, gender or sexuality. Also children with different family situations, such as looked after children or those with caring responsibilities. Schools can also teach children that using any prejudice based language is unacceptable.
- Use specific organisations or resources for help with particular problems. Schools can draw on the experience and expertise of anti-bullying organisations with a proven track record and/or specialised expertise in dealing with certain forms of bullying.
- Provide effective staff training. Anti-bullying policies are most effective when all school staff understand the principles and purpose of the school's policy, its legal responsibilities regarding bullying, how to resolve problems, and where to seek support. Schools can invest in specialised skills to help their staff understand the needs of their pupils, including those with special educational needs and/or disability (SEND) and lesbian, gay, bisexual and transgender (LGB&T) pupils.
- Work with the wider community such as the police and children's services where bullying is particularly serious or persistent and where a criminal offence may have been committed. Successful schools also work with other agencies and the wider community to tackle bullying that is happening outside school.
- Make it easy for pupils to report bullying so that they are assured that they will be listened to and incidents acted on. Pupils should feel that they can report bullying which may have occurred outside school including cyber-bullying.
- Create an inclusive environment. Schools should create a safe environment where pupils can openly discuss the cause of their bullying, without fear of further bullying or discrimination.
- Celebrate success - celebrating success is an important way of creating a positive school ethos around the issue.

10 Racist Incidents

Our policy on racist incidents is set out separately, and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of racist incidents.

11 Procedure where Honour Based Violence, Forced Marriage, Female Genital Mutilation is suspected/alleged

Honour based Violence is a collection of practices used to control behaviour within families to protect perceived cultural or religious beliefs and honour. Violence can occur when offenders perceive that a relative has shamed the family or community by breaking their 'code of honour'. Honour Based Violence cuts across all cultures and communities: Turkish, Kurdish, Afghani, South Asian, African, Middle Eastern, South

and Eastern European for example. This is not an exhaustive list. Where a culture is heavily male dominated, HBV may exist.

'A forced marriage is a marriage in which one or both spouses do not (or, in the case of some vulnerable adults, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure.'

For more information see;

http://www.fco.gov.uk/en/travel-and-living-abroad/when-things-go-wrong/forced-marriage/

http://www.fco.gov.uk/en/travel-and-living-abroad/when-things-go-wrong/forced-marriage/case-studies/safer-schools-partnership

12 Female Genital Mutilation (see section 38 and Appendix 2 for more information)

Female Genital Mutilation (FGM) is the partial or complete removal, or modification of, the female genitalia for cultural or religious reasons. In most cases, FGM can be seen as an attempt to prevent female infidelity and sexual independence by reducing a woman's sex drive.

For more information see;

http://www.fco.gov.uk/en/travel-and-living-abroad/when-things-go-wrong/fgm/

If you suspect or it is alleged that any of the above has happened or there is an immediate risk to a child, please follow the same procedure under 'Procedure to follow if adults have concerns' (section 8).

13 Child sexual exploitation (CSE)

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. Some young people who are being sexually exploited do not exhibit any external signs of this abuse. If you suspect or it is alleged that any of the above has happened or there is an immediate risk to a child, please follow the same procedure under 'Procedure to follow if adults have concerns'.

14 Child criminal exploitation

Child criminal exploitation (CCE) is a form of abuse where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive

a child into criminal activity, in exchange for something the victim needs or wants, and/or for the financial or other advantage of the perpetrator or facilitator, and/or through violence or the threat of violence.

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

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

Indicators of CCE can include a child:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Suffering from changes in emotional wellbeing
- Misusing drugs and alcohol
- Going missing for periods of time or regularly coming home late
- Regularly missing 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.

15 Domestic abuse

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

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

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

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

school (usually the designated safeguarding lead) before the child or children arrive at school the following day. This is the procedure where police forces are part of [Operation Encompass](#)

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

16 Homelessness

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

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

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

17 Sharing of nudes and semi-nudes

The sharing of nudes and semi-nudes or 'Sexting' is the exchange of self-generated sexually explicit images, through mobile picture messages or webcams over the internet. 'Sexting' is often seen as flirting by children and young people who feel that it's a part of normal life.

NSPCC online information

www.nspcc.org.uk/keeping-children-safe/online-safety/sexting-sending-nudes/

Where staff have concerns regarding a child accessing or sending images, they should contact the DSL immediately for further advice.

18 Child on Child Abuse

Allegations of abuse made against other pupils

We recognise that children are capable of abusing other children. 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 pupils.

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 pupils hurting other pupils will be dealt with under our school'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 pupils in the school at risk
- Is violent
- Involves pupils 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).

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

If a pupil makes an allegation of abuse against another pupil you must:
- Record the allegation and tell the DSL, but do not investigate it.
- The DSL will contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence.
- The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made and any others affected) with a named person they can talk to if needed.
- The DSL will contact the children and adolescent mental health services (CAMHS), if appropriate.
- Add further details here depending on your school's procedures for recording, investigating and dealing with allegations, and supporting victims, perpetrators and any other children affected..

18.1 Creating a supportive environment in school 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 pupils, and initiation or hazing type violence with respect to boys.

● Ensure our curriculum helps to educate pupils about appropriate behaviour and consent.

● Ensure pupils are able to easily and confidently report abuse using our reporting systems.

● Ensure staff reassure victims that they are being taken seriously.

● 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 school, 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.
- The importance of explaining to children that the law is in place to protect them rather than criminalise them.
- The importance of understanding intra-familial harms and any necessary support for siblings following incidents.
- This school will consider the school bus as a potentially vulnerable place for victim (s) and alleged perpetrator.
- That a child harming a child could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy
- The important role they have to play in preventing child-on-child abuse and responding where they believe a child may be at risk from it
- That they should speak to the DSL if they have any concerns

19 Gender Identity and Sexuality

We believe that Relationship and Sex Education should meet the needs of all pupils regardless of their developing sexuality and gender identity and be able to deal honestly and sensitively with sexual orientation, answer appropriate questions and offer support. The school liaises with parents on this issue to reassure them of the content and context.

20 Violence against Women and Girls (VAWG)

If professionals become aware that a child is being subjected to violence, they should always follow their child protection process. Professionals should note that male victims will receive the same access to protection.

21 Radicalisation

21.1 Radicalisation is defined as the act or process of making a person more radical or favouring of extreme or fundamental changes in political, economic or social conditions, institutions or habits of the mind. Extremism is defined as the holding of extreme political or religious views.

Although serious incidents involving radicalisation have not occurred at Oak Hill C of E Primary School to date, we will be constantly vigilant and remain fully informed about the issues which affect the wider community. Staff are trained to understand that that instances of radicalisation 'could happen here' and to refer any concerns to the DSL and all teachers have completed basic training from the college of policing relating to the PREVENT strategy. Following this training our staff should understand when it is appropriate to make a referral to the Channel programme. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

21.2 Protecting children from the risk of radicalisation should be seen as part of schools' wider safeguarding duties, and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The internet and the use of social media in particular has become a major factor in the radicalisation of young people. As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. School staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately which may include making a referral to the Channel programme.

22 Prevent

22.1 From 1 July 2015 specified authorities, including all schools as defined in the summary of this guidance, are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 ("the CTSA 2015"), in the exercise of their functions, to have "due regard" to the need to prevent people from being drawn into terrorism". This duty is known as the Prevent duty. It applies to a wide range of public-facing bodies. Bodies to which the duty applies must have regard to statutory guidance issued under section 29 of the CTSA 2015 ("the Prevent guidance").

Paragraphs 57-76 of the Prevent guidance are concerned specifically with schools (but also cover childcare). The statutory Prevent guidance summarises the requirements on schools in terms of four general themes: risk assessment, working in partnership, staff training and IT policies.

22.2 Schools are expected to assess the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. This means being able to demonstrate both a general understanding of the risks affecting children and young people in the area and a specific understanding of how to identify individual children who may be at risk of radicalisation and what to do to support them. It is not necessary for schools and colleges to have distinct policies on implementing the Prevent duty.

23 Trafficking

Wherever staff or volunteers come into contact with a child who has arrived unaccompanied in the country and is not in contact with Children's Social Services or a child who is accompanied, but for whom they have concerns regarding their welfare or safety, they should consult the DSL immediately.

24 Gangs and Youth Violence

Schools have a duty and a responsibility to protect their pupils and students. It is also well established that success in learning is one of the most powerful indicators in the prevention of youth crime.
Schools and colleges are places where important interventions can take place to prevent violent behaviour, including more serious violence such as young people carrying a knife, and violence that takes place in the community.
Where a member of staff suspects that violence may be occurring no matter how low level, the DSL should be consulted immediately.

25 Safer Working Practice

All staff are required to read the document "Safer Working Practice" as part of their Oak Hill C of E Primary Safeguarding and Child Protection Induction. Staff sign to say they are aware of the document and know how to access it for future referral. We recognise that touch is appropriate in the context or working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.

26 Whistle Blowing

Staff have access to copies of our school Whistle Blowing Policy.
http://www.oakhill.gloucs.sch.uk/policies__reports___guidance_/school_policies/polic
ies.html

27 Physical restraint

There may be times when adults, in the course of their school duties, have to intervene physically in order to restrain children and prevent them from coming to harm. Such intervention will always be the minimum necessary to resolve the situation and follow guidelines in 'The Guide to Safer Working Practices' document. (See Physical Handling Policy - copies available from the school office).

28 Children missing from education

Should any child not be in school for morning registration the class teacher will in the first instance inform the school office. The secretary will telephone parents of children who have not come to school and where no reason has been given normally by 9:30am and this is formally recorded. (See Child Missing from Education Policy for additional details)
http://www.oakhill.gloucs.sch.uk/policies__reports___guidance_/school_policies/polic
ies.html

29 Medication

The school has a number of policies to support the use of medication in school and supporting pupils with long term medical illnesses. These are;

- Administering Medicines Policy
- Medical needs Policy.
- Intimate care plans

Staff receive regular first aid training and there are a number of staff who have received specific training to undertake the role of first aiders in school. Where pupils have specific needs, these will be identified on a plan, agreed with both the child and parents.

30 Online Safety
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 school aims to:

.   Have robust processes in place to ensure the online safety of pupils, staff, volunteers and governors.

.   Protect and educate the whole school 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 school community.

.   Establish clear mechanisms to identify, intervene in and escalate any incidents or concerns, where appropriate.

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30.1 The 4 key categories of risk

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

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

To meet our aims and address the risks above we will:
- Educate pupils about online safety as part of our curriculum. For example:
  - The safe use of social media, the internet and technology
  - Keeping personal information private
  - How to recognise unacceptable behaviour online
  - How to report any incidents of cyber-bullying, ensuring pupils 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:
  - o Staff are allowed to bring their personal phones to school for their own use, but will limit such use to non-contact time when pupils are not present.
  - o Staff will not take pictures or recordings of pupils on their personal phones or cameras.

- Make all pupils, parents/carers, staff, volunteers and governors aware that they are expected to sign an agreement regarding the acceptable use of the internet in school, use of the school's ICT systems and use of their mobile and smart technology.
- Explain the sanctions we will use if a pupil is in breach of our policies on the acceptable use of the internet and mobile phones.
- Make sure all staff, pupils and parents/carers are aware that staff have the power to search pupils' phones, as set out in the DfE's guidance on searching, screening and 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 school'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 school community.

31 Allegations against staff

All staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults. Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers will be given at induction.

We understand that a pupil, parent or other professional may make an allegation against a member of staff. If such an allegation is made, or information is received which suggests that a person may be unsuitable to work with children, the member of staff receiving the allegation or aware of the information, will immediately inform the Head teacher. The Head on all such occasions will discuss the content of the allegation with the Local Authority Designated Officer (LADO).
If the allegation made to a member of staff concerns the Head Teacher the person receiving the allegation will immediately inform the Chair of Governors chair@oakhill.gloucs.sch.uk , who will consult with the LADO as above, without notifying the Head first. Oak Hill will follow the GSCB procedures for managing allegations against staff.
Under no circumstances will we send a child home, pending such an investigation, unless this advice is given exceptionally, as a result of a consultation with the LADO. Suspension of the member of staff, excluding the Head, against whom an allegation

has been made, needs careful consideration, and the Head will seek the advice of the LADO and HR in making this decision.

In the event of an allegation against the Head, the decision to suspend will be made by the Chair of Governing Body with advice from HR and LADO.

31. 1 Definition of low-level concerns

The term 'low-level' concern is any concern – no matter how small – that an adult working in or on behalf of the school may have acted in a way that:
- Is inconsistent with the staff code of conduct, including inappropriate conduct outside of work, **and**
- Does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the designated officer at the local authority
- Examples of such behaviour could include, but are not limited to:
- Being overly friendly with children
- Having favourites
- Taking photographs of children on their mobile phone
- Engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- Humiliating pupils

31.2 Sharing low-level concerns

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

We will create this culture by:
- Ensuring staff are clear about what appropriate behaviour is, and are confident in distinguishing expected and appropriate behaviour from concerning, problematic or inappropriate behaviour, in themselves and others
- Empowering staff to share any low-level concerns as per section 7.7 of this policy
- Empowering staff to self-refer
- Addressing unprofessional behaviour and supporting the individual to correct it at an early stage.
- Providing a responsive, sensitive and proportionate handling of such concerns when they are raised.
- Helping to identify any weakness in the school's safeguarding system.

31.3 Responding to low-level concerns

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

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

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

31.4 Record keeping

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

Records will be:

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

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

31.5 References

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

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

32 Staff training

The DSL will receive regular training to raise their awareness of abuse, and to improve their knowledge of the child protection procedures that have been agreed locally. This will occur every 2 years. Whole staff training for Child Protection must take place every three years. It is the DSL's responsibility to ensure that any temporary staff, volunteers, supply staff etc have the knowledge and information that they require in order to ensure the safety and well being of our pupils. Staff will also receive information regarding Safer Working Practices with young people and will sign to acknowledge that they have received and read this information.

33 Confidentiality

We regard all information relating to individual child protection issues as confidential, and we treat it accordingly. We pass information on to appropriate persons only.
We comply with the government requirements set out in DHS Circular LA 83/14, and by the LA, with regard to confidentiality. The files we keep on children are available to those children's parents. Information from third parties will not be disclosed without their prior consent. Access to these files may be withheld in certain prescribed cases where there are instances of actual or alleged abuse (see DfE Circular 16/19). Working notes are not subject to disclosure, but will be summarised and then kept on file. Our guidelines are in line with the safeguards on disclosure of information set out in the Education (School Records) Regulations 1989.

34 Support for Pupils

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation and some sense of blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school their behaviour may be challenging and defiant or they may be withdrawn. The school will endeavour to support the pupil through:

> The content of the curriculum – ensuring safeguarding issues are explored
> The school ethos which promotes a positive, supportive and secure
> environment and gives pupils a sense of being valued.
> The school behaviour policy which is aimed at supporting vulnerable pupils in
> the school. The school will ensure that the pupils know that some behaviour is
> unacceptable but they are valued and not to be blamed for any abuse that has
> occurred.
> Liaison with other agencies that support the pupil such as social services,
> CYPS, entitlement and inclusion, and educational psychology service.

- Ensuring that, where a pupil who has a child protection plan leaves, their information is transferred to the new school immediately and that the child's social worker is informed.
- If the incident is a criminal offence and there are delays in the criminal process, the DSL will work closely with the police (and other agencies as required) while protecting children and/or taking any disciplinary measures against the alleged perpetrator. We will ask the police if we have any questions about the investigation.
- 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.
- The DSL will take the lead role in any disciplining of the alleged perpetrator(s). We will provide support at the same time as taking any disciplinary action.
- Disciplinary action can be taken while other investigations are going on, e.g. by the police. The fact that another body is investigating or has investigated an incident doesn't (in itself) prevent our school 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.

35 Recruitment and Retention

To make sure we recruit suitable people, we will ensure that those involved in the recruitment and employment of staff to work with children have received appropriate safer recruitment training.

We have put the following steps in place during our recruitment and selection process to ensure we are committed to safeguarding and promoting the welfare of children.

35.1 Advertising

When advertising roles, we will make clear:

- Our school's commitment to safeguarding and promoting the welfare of children
- That safeguarding checks will be undertaken
- The safeguarding requirements and responsibilities of the role, such as the extent to which the role will involve contact with children

- Whether or not the role is exempt from the Rehabilitation of Offenders Act 1974 and the amendments to the Exceptions Order 1975, 2013 and 2020. If the role is exempt, certain spent convictions and cautions are 'protected', so they do not need to be disclosed, and if they are disclosed, we cannot take them into account.

35.2 Application form
Our application forms will:

- Include a statement saying that it is an offence to apply for the role if an applicant is barred from engaging in regulated activity relevant to children (where the role involves this type of regulated activity)
- Include a copy of, or link to, our child protection and safeguarding policy.

35.3 Shortlisting
Our shortlisting process will involve at least 2 people and will:
- Consider any inconsistencies and look for gaps in employment and reasons given for them.
- Explore all potential concerns.
- Once we have shortlisted candidates, we will ask shortlisted candidates to:

Complete a self-declaration of their criminal record or any information that would make them unsuitable to work with children, so that they have the opportunity to share relevant information and discuss it at interview stage. The information we will ask for includes:
  - If they have a criminal history
  - Whether they are included on the barred list
  - Whether they are prohibited from teaching
  - Information about any criminal offences committed in any country in line with the law as applicable in England and Wales
  - Any relevant overseas information

- Sign a declaration confirming the information they have provided is true.
- We will also consider carrying out an online search on shortlisted candidates to help identify any incidents or issues that are publicly available online.

35.4 Seeking references and checking employment history
We will obtain references before interview. Any concerns raised will be explored further with referees and taken up with the candidate at interview.
When seeking references we will:
- Not accept open references
- Liaise directly with referees and verify any information contained within references with the referees.

- Ensure any references are from the candidate's current employer and completed by a senior person. Where the referee is school based, we will ask for the reference to be confirmed by the headteacher/principal as accurate in respect to disciplinary investigations
- Obtain verification of the candidate's most recent relevant period of employment if they are not currently employed
- Secure a reference from the relevant employer from the last time the candidate worked with children if they are not currently working with children
- Compare the information on the application form with that in the reference and take up any inconsistencies with the candidate
- Resolve any concerns before any appointment is confirmed

35.5 Interview and selection

When interviewing candidates, we will:
- Probe any gaps in employment, or where the candidate has changed employment or location frequently, and ask candidates to explain this.
- Explore any potential areas of concern to determine the candidate's suitability to work with children.
- Record all information considered and decisions made.

35.6 Pre-appointment vetting checks

We will record all information on the checks carried out in the school's single central record (SCR). Copies of these checks, where appropriate, will be held in individuals' personnel files. We follow requirements and best practice in retaining copies of these checks, as set out below.

35.7 New staff

All offers of appointment will be conditional until satisfactory completion of the necessary pre-employment checks. When appointing new staff, we will:
- Verify their identity.
- Obtain (via the applicant) an enhanced DBS certificate, including barred list information for those who will be engaging in regulated activity (see definition below). We will obtain the certificate before, or as soon as practicable after, appointment, including when using the DBS update service. We will not keep a copy of the certificate for longer than 6 months, but when the copy is destroyed we may still keep a record of the fact that vetting took place, the result of the check and recruitment decision taken.
- Obtain a separate barred list check if they will start work in regulated activity before the DBS certificate is available.
- Verify their mental and physical fitness to carry out their work responsibilities.
- Verify their right to work in the UK. We will keep a copy of this verification for the duration of the member of staff's employment and for 2 years afterwards.
- Verify their professional qualifications, as appropriate.

- Ensure they are not subject to a prohibition order if they are employed to be a teacher
- Carry out further additional checks, as appropriate, on candidates who have lived or worked outside of the UK. These could include, where available:
- For all staff, including teaching positions: [criminal records checks for overseas applicants](#)
- For teaching positions: obtaining a letter from the professional regulating authority in the country where the applicant has worked, confirming that they have not imposed any sanctions or restrictions on that person, and/or are aware of any reason why that person may be unsuitable to teach

Academies, including free schools, and independent schools add:
- Check that candidates taking up a management position* are not subject to a prohibition from management (section 128) direction made by the secretary of state
- Management positions are most likely to include, but are not limited to, headteachers, principals and deputy/assistant headteachers.

Schools with pupils aged under 8 add: We will ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006. Where we take a decision that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment on the individual's personnel file. This will include our evaluation of any risks and control measures put in place, and any advice sought.

Regulated activity means a person who will be:
- Responsible, on a regular basis in a school or college, for teaching, training, instructing, caring for or supervising children; or
- Carrying out paid, or unsupervised unpaid, work regularly in a school or college where that work provides an opportunity for contact with children; or
- Engaging in intimate or personal care or overnight activity, even if this happens only once and regardless of whether they are supervised or not

35. 8 Existing staff
In certain circumstances we will carry out all the relevant checks on existing staff as if the individual was a new member of staff. These circumstances are when:
- There are concerns about an existing member of staff's suitability to work with children; or
- An individual moves from a post that is not regulated activity to one that is; or
- There has been a break in service of 12 weeks or more
- We will refer to the DBS anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult where:
- We believe the individual has engaged in [relevant conduct](#); or

- We believe the individual has received a caution or conviction for a relevant (automatic barring either with or without the right to make representations) offence, under the [Safeguarding Vulnerable Groups Act 2006 (Prescribed Criteria and Miscellaneous Provisions) Regulations 2009](); or
- We believe the 'harm test' is satisfied in respect of the individual (i.e. they may harm a child or vulnerable adult or put them at risk of harm); and
- The individual has been removed from working in regulated activity (paid or unpaid) or would have been removed if they had not left.

35.9 Agency and third-party staff

We will obtain written notification from any agency or third-party organisation that it has carried out the necessary safer recruitment checks that we would otherwise perform. We will also check that the person presenting themselves for work is the same person on whom the checks have been made.

35.10 Contractors

- We will ensure that any contractor, or any employee of the contractor, who is to work at the school has had the appropriate level of DBS check (this includes contractors who are provided through a PFI or similar contract). This will be:
- An enhanced DBS check with barred list information for contractors engaging in regulated activity
- An enhanced DBS check, not including barred list information, for all other contractors who are not in regulated activity but whose work provides them with an opportunity for regular contact with children
- We will obtain the DBS check for self-employed contractors.
- We will not keep copies of such checks for longer than 6 months.
- Contractors who have not had any checks will not be allowed to work unsupervised or engage in regulated activity under any circumstances.
- We will check the identity of all contractors and their staff on arrival at the school.

Schools with pupils aged under 8 add: For self-employed contractors such as music teachers or sports coaches, we will ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006. Where we decide that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment. This will include our evaluation of any risks and control measures put in place, and any advice sought.

35.11 Trainee/student teachers

Where applicants for initial teacher training are salaried by us, we will ensure that all necessary checks are carried out.

Where trainee teachers are fee-funded, we will obtain written confirmation from the training provider that necessary checks have been carried out and that the trainee has been judged by the provider to be suitable to work with children.

Schools with pupils aged under 8 add: In both cases, this includes checks to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006.

35.12 Volunteers

We will:
- Never leave an unchecked volunteer unsupervised or allow them to work in regulated activity.
- Obtain an enhanced DBS check with barred list information for all volunteers who are new to working in regulated activity .
- Carry out a risk assessment when deciding whether to seek an enhanced DBS check without barred list information for any volunteers not engaging in regulated activity. We will retain a record of this risk assessment.

Schools with pupils aged under 8 add:

Ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006. When we decide that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment. This will include our evaluation of any risks and control measures put in place, and any advice sought

35.13 Governors

All schools include:
- All governors will have an enhanced DBS check without barred list information.
- They will have an enhanced DBS check with barred list information if working in regulated activity.
- All governors will also have a section 128 check (as a section 128 direction disqualifies an individual from being a maintained school governor).

36 Pupils staying with host families

Where the school makes arrangements for pupils to be provided with care and accommodation by a host family to which they are not related (for example, during a foreign exchange visit), we will request enhanced DBS checks with barred list information on those people.

Where the school is organising such hosting arrangements overseas and host families cannot be checked in the same way, we will work with our partner schools abroad to ensure that similar assurances are undertaken prior to the visit.

37 Use of Premises

The need to ensure that the body concerned has appropriate safeguarding policies and procedures in place now applies 'regardless of whether or not the children who attend any of these services or activities are children on the school roll.
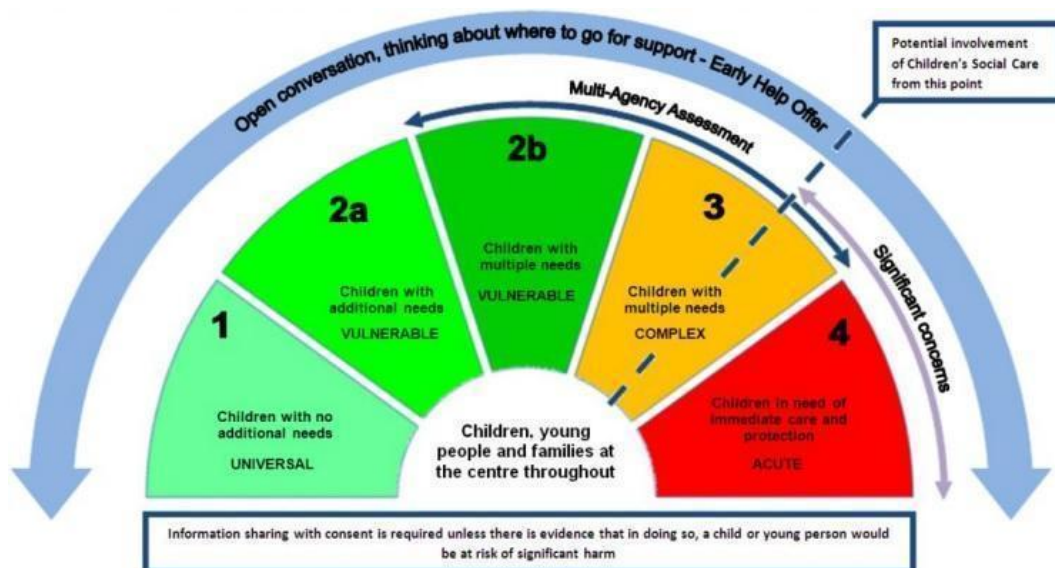
38 Oak Hill's Offer of Early Help

Everyone needs help at some time in their lives and therefore an ethos of early help is important for any school. The co-ordinated Oak Hill offer of early help is outlined in the table . We believe that early interventions for children or families, in many cases, will prevent children from experiencing harm. Oak Hill offers a number of early preventative measures.

Expert and professional organisations are best placed to provide up-to-date guidance support and intervention on specific safeguarding issues when and if they arise. School will refer to appropriate agencies when help is required to support children, young people or families or to prevent harm.

All staff must be aware of the offer of early help. At all times all staff should consider if there is any offer of early help that we can make in order to help a child thrive. The GCSP 'continuum of need' windscreen is an important diagram to keep in mind for all children. http://www.gscb.org.uk/CHttpHandler.ashx?id=47407&p=0

Our aim is to help pupils and families as early as possible when issues arise: 'the right help at the right time to stop any issues getting worse'. Early help is an approach not necessarily an action. It includes prevention education as well as intervention where necessary or appropriate. In some cases, immediate urgent action might be necessary if a child or young person is at risk of immediate harm.

Oak Hill's offer of Early Help

Universal source of help for all families in Gloucestershire: **Gloucestershire Family Information Service (FIS)**	Gloucestershire Family Information Service (FIS) advisors give impartial information on childcare, finances, parenting and education. FIS are a useful source of information for parents and professionals. They support families, children and young people aged 0-19 years of age (25 for young people with additional needs) and professionals working with these families. They can help link parents up with other organisations that

	might be able to help or provide the information themselves e.g. parents could ask them about holiday clubs for your children across Gloucestershire. Contact the FIS by emailing:familyinfo@gloucestershire.gov.uk Or telephone: (0800) 542 0202 or (01452) 427362. FIS also have a website which has a wealth of information to support many issues such as childcare and support for children with disabilities. www.glosfamilies.org
GSCB (Gloucestershire Safeguarding Children's Panel) website	https://www.gloucestershire.gov.uk/gscp/ Important information for parents and professionals across Gloucestershire in relation to keeping children safe and avenues of support including early help options.
Oak Hill's universal support for all pupils and families.	All staff are available in a pastoral capacity should parents have a concern about anything at all. Staff may not have the answer but will try to find out the answer or sign-post parents/other professionals in the right direction. Parents can either talk directly with the staff or telephone the Head.
E-safety	E-safety is a key part of the ongoing (PSHE/SMSC/SRE) curriculum. PACE (parents against child exploitation) UK is a useful website to engage parents with e-safety issues. www.paceuk.info/ The NSPCC offer support in regards to eSafety https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/online-safety/ Think U Know offers resources to help educate children as to how to stay safe online https://www.thinkuknow.co.uk/
Bullying (including cyber-bullying)/child death/suicide prevention	All Gloucestershire schools are committed to tackling bullying. We want to know immediately if there any issues with bullying at school so that it can be addressed. It could be that bullying is related to a child's home-school. School can also offer bespoke lessons on anti-bullying for anyone who has suffered bullying to encourage behaviours that might avert it in the future (e.g. assertiveness) or to boost self-esteem. We have a series of teaching resources produced by the Gloucestershire healthy living and Learning Team (www.ghll.org.uk) to support this. In serious cases of bullying parents should contact the police; particularly if there are threats involved. In an emergency call 999. Other sources of help and advice are: www.gscb.org (Gloucestershire Safeguarding children's board) http://www.bullying.co.uk . Gloucestershire Healthy Living and Learning team provide alerts and resources in relation to supporting young people being bullied.
Children or young people with multiple needs (vulnerable) or multiple needs (complex) requiring multi-agency input or assessment.	Within Gloucestershire Targeted Support Teams provide multiagency support for children and families. A phone call to discuss a possible referral is helpful before making written referral. School actively refer to when appropriate:

	Targeted support Teams (TST): Gloucester (tel:01452 328076), Stroud (tel: 01452 328130); Tewkesbury (tel: 01452 328 250), Cotswold (tel: 01452 328101), Forest of Dean (tel: 01452 328048) and Cheltenham (tel: 01452 328160). These teams are made up of the following professionals: CAF Coordinators; Community Lead Professional - disabled children and young people; Inclusion Co-ordinator; Community Social Worker; Family Support Workers. They all work together from one base so they can recognise and respond to local needs and act as a focal point for co-ordinating support for vulnerable children, young people and their families.
	Support provided includes: Support for school and community based lead professionals working with children and families through the CAF process; Collaboration with social care referrals that do not meet their thresholds, to co-ordinate support within the community; Work in partnership to support children with special educational needs in school; Advice and guidance from a social work perspective on a 'discussion in principle basis' ; Support children with disabilities and their families to access activities and meet specific needs; Advice and guidance to lead professionals and the provision of high quality parenting and family support services to families.
	Youth Support Team (YST): The Youth Support Team provide a range of services for vulnerable young people aged between 11 - 19 (and up to 25 for young people with special needs), including: - Youth offending - Looked after children - Care leaver's support services (for those aged 16+) - Early intervention and prevention service for 11 - 19 year olds - Support for young people with learning difficulties and/or disabilities - Positive activities for young people with disabilities - Support with housing and homelessness - Help and support to tackle substance misuse problems and other health issues - Support into education, training and employment - Support for teenage parents - For General Enquiries: T: 01452 426900 E: info.glos@prospects.co.uk To make a referral: T: 01452 427923 E: fasttrackteam@prospects.co.uk
Drug concerns	www.infobuzz.co.uk/ : Info Buzz provides individual targeted support around drugs & emotional health issues, development of personal & social skills, and information & support around substance misuse. Drugs education is covered in the school curriculum. The Life Education Bus visits annually as part of this provision PSHE/SMSC) curriculum as a preventative measure.
Mental health concerns *Please note that in Gloucestershire CYPS (children and young	• Referral to school nurses may be appropriate. • Referral to CYPS (Gloucestershire's mental health services) via your own GP.

people's services) replaced CAMHS (child and adolescent mental health services)	• For children/young people/adults with existing mental health difficulties concerns should be discussed with the existing medical professionals (consultant psychiatrists). In an emergency call 999 or 111. **• CYPS* Practitioner advice line (for professionals to call) tel: 01452 894272.**
Child Sexual exploitation (CSE)	CSE screening tool (can be located on the GSCB website: www.gscb.org.uk/article/113294/Gloucestershire-proceduresand-protocols) This should be completed if CSE suspected. Clear information about Warning signs, the screening tool and Gloucestershire's multi-agency protocol for safeguarding children at risk of CSE are at www.gscb.org . Referrals should be made to Gloucestershire social care and the Gloucestershire Police. Gloucestershire Police CSE Team: The CSE team sits within the Public Protection Bureau Single agency team (Police) DS Nigel Hatten, DC Tess Nawaz, DC Kim Toogood, PC Dawn Collings, PC Nicki Dannatt, PC Jenny Kadodia, PC Christina Pfister (Missing persons Coordinator) 01242 276846 All referrals to go to the Central Referral Unit 01242 247999 • Further information: National Working Group (Network tackling Child Sexual Exploitation) www.nationalworkinggroup.org and PACE UK (Parents Against Child Sexual Exploitation) www.paceuk.info
Domestic violence	The GSCB (Gloucestershire Safeguarding Children's board) have published a Domestic Abuse pathway for educational settings which is on the GSCB website. If a child or young person is suspected of living at home with a domestically abusive parent or if a young person has domestic abuse in their own relationship then the usual procedures should be followed and a referral made to the children's helpdesk (tel: 01452 426565). The response will vary according to the age of the young person so that the appropriate agencies are involved. **Gloucestershire Domestic Abuse Support Service (GDASS)** www.gdass.org.uk **MARAC Gloucestershire Constabulary**: Multi Agency Risk Assessment Conferences (MARACs) prioritise the safety of victims who have been risk assessed at high or very high risk of harm. The MARAC is an integral part of the Specialist Domestic Violence Court Programme, and information will be shared between the MARAC and the Courts, in high and very high risk cases, as part of the process of risk management.
Teenage relationship abuse	Please see comment about the Domestic abuse pathway for educational settings above (in domestic violence section). www.gov.uk – home office 'teachers guide to violence and abuse in teenage relationships.' All violence or suspected violence should be reported the police and/or social care as appropriate. GDASS (Gloucestershire Domestic Abuse Support Service) can be referred to for support. • Young person's GDASS leaflet. • Lead GHLL Teacher for advice and support with curriculum resources (tel: 01452 427208)

	• Gloucestershire Take a Stand – www.glostakeastand.com Prevention: Resources used in the Wellbeing Curriculum resources – www.ghll.org .
Fabricated and induced illness (FII)	http://www.nhs.uk/Conditions/Fabricated-or-induced-illness for information on behaviours and motivation behind FII. Any professionals suspecting FII must involve the Police, Social Services and follow the child protection procedures outlined in this policy.
Faith abuse	www.gov.uk/government/publications/national-action-plan-totackle-child-abuse-linked-to-faith-or-belief for copy of DfE document 'national action plan to tackle child abuse linked to faith or belief.' Judith Knight; Diocese of Gloucester Head of Safeguarding/faith abuse contact: jknight@glosdioc.org.uk. For other faith groups contact Jane Bee (GCC LADO).
Female genital mutilation (FGM)	http://www.nhs.uk/Conditions/female-genital-mutilation for NHS information and signs of FGM. Any suspicion of FGM should be referred to the Police and social care. - Meg Dawson (Head) has completed the online home office training, 'Female Genital Mutilation: Recognising and Preventing FGM' - E-learning package- http://www.fgmelearning.co.uk/ for interested staff or professionals (free home office e-learning) Posters/leaflets on FGM shared with staff and pupils.
Forced marriage	Forced marriage SPOC (Single Point of Contact) for Forced Marriage in Gloucestershire is Acting DI Jo Mercurio (Gloucestershire Constabulary, Public Protection Bureau). UK Forced Marriage Unit fmu@fco.gov.uk Telephone: 020 7008 0151 Call 999 (police) in an emergency. www.gov.uk/stop-forced-marriage for information on Forced Marriage. Visit Home Office website to undertake Forced Marriage e-learning package https://www.gov.uk/forcedmarriage. GSCB one day Awareness training delivered by Infobuzz www.gscb.org.uk Please see 'Multi-Agency Practice Guidelines- Handling cases of Forced Marriage' for more information and detail https://www.gov.uk/forcedmarriage. *All practitioners must be aware of this, that is they may only have one chance to speak to a potential victim and thus they may only have one chance to save a life. This means that all practitioners working within statutory agencies need to be aware of their responsibilities and obligations when they come across forced marriage cases. If the victim is allowed to walk out of the door without support being offered, that one chance might be wasted.* Prevention Freedom Charity- Aneeta Prem 'But it's not fair' book. A book for teenagers looking at forced marriage from the point of view of school friends of the girl who went to India and didn't come back. This book promotes discussion.
Gangs and youth violence	Contact the Avenger Task Force/Inspector Neil Smith (Gloucestershire Police tel: 101). A task force set up to identify potential gang members as

	vulnerable individuals and potential victims and aims to help them. Prevention: wellbeing curriculum – self-esteem & identity, law & order and considering impact of violence on communities.
Gender-based violence/violence against women and girls (WAWG)	www.gov.uk – home office policy document, 'Ending violence against women and girls in the UK' (June 2014). FGM (Female Genital Mutilation) is violence against women and girls. Hope House SARC (Sexual Assault Referral Centre): 01452 754390 Gloucestershire Rape and Sexual Abuse Centre: 01452 526770
Honour based violence (HBV)	The police have made it a high priority to help communities fight back to tackle both honour based violence and hate crime. The 'Honour Network Help line': 0800 5 999 247 Inspector Fay Komarah is the Gloucestershire Police contact for honour based violence.
Private fostering	http://www.gloucestershire.gov.uk/privatefostering Gloucestershire County council website information on private fostering. Refer to Gloucestershire Children & Families Helpdesk on 01452 426565 or Gloucestershire Private Fostering Social Worker 01452 427874. A private fostering arrangement is essentially one that is made without the involvement of a local authority. Private fostering is defined in the Children Act 1989 and occurs when a child or young person under the age of 16 (under 18 if disabled) is cared for and provided with accommodation, for 28 days or more, by someone who is not their parent, guardian or a close relative. (Close relatives are defined as; step-parents, siblings, brothers or sisters of parents or grandparents).
Radicalisation	Gloucestershire Constabulary: 101 and Jane Bee (LADO) Anti-Terrorist Hotline: 0800 789 321 See Appendix 2 for further information on radicalisation. Prevention: Oak Hill teach traditional British values through the curriculum: democracy, rule of law, respect for others, liberty, tolerance of those with different faiths and beliefs and promotion of 'Britishness'.
Sexting	http://www.nspcc.org.uk/preventing-abuse/keeping-childrensafe/sexting (NSPCC website). Gloucestershire Police have a small sexual exploitation team. Contact Sgt. Nigel Hatton.
Trafficking	Serious crime which must be reported to Jane Bee (Gloucestershire LADO) and the Gloucestershire Police. Trafficking can include a young person being moved across the same street to a different address for the purpose of exploitation. It doesn't have to include people, children or young people being moved great distances. See Appendix 2 for further information on Trafficking.
Children who run away (missing persons/missing children)	PC Christina Pfister (Missing persons Coordinator Gloucestershire Police). Tel: 101 (Gloucestershire Police). GSCB Missing Children Protocol http://www.gscb.org.uk : Gloucestershire's protocol on partnership

	working when children and young people run away and go missing from home or care.
	ASTRA (Gloucestershire): The ASTRA (Alternative Solutions To Running Away) has the primary aim of reducing the incidence of persistent running away across Gloucestershire. The project provides support, advice and information to young people up to eighteen years old who have run away. This might be from a family home, foster home or from a residential unit. ASTRA provides support after the event to enable a young person to address the causes of running away. The ASTRA project offers young people help and the support required in order to find Alternative Solutions To Running Away. Freephone Telephone number: 0800-389-4992 EXCLUSIVELY for young people who have run away and have no money. All other callers are asked to use the 'ordinary' number (tel: 01452 541599).
CME (Children missing education)	Anyone concerned that a child is missing education (CME) can make a referral to the Education Entitlement and Inclusion team (EEI) at Gloucestershire County Council. Tel: 01452 426960/427360. Children Missing Education (CME) refers to 'any child of compulsory school age who is not registered at any formally approved education activity e.g. school, alternative provision, elective home education, and has been out of education provision for at least 4 weeks'. CME also includes those children who are missing (family whereabouts unknown), and are usually children who are registered on a school roll / alternative provision. This might be a child who is not at their last known address and either: has not taken up an allocated school place as expected, or has 10 or more days of continuous absence from school without explanation, or left school suddenly and the destination is unknown. This also includes children whose parent/carer who has expressed an intention to educate them at home. It is the responsibility of the Education Entitlement and Inclusion team, on behalf of the Local Authority (LA), to: Collate information on all reported cases of CME of statutory school aged children in Gloucestershire maintained schools, academies, free schools, alternative provision academies and Alternative Provision Schools (APS). The EEI Team will also liaise with partner agencies and other LAs and schools across Britain to track pupils who may be missing education and ensure each child missing education is offered full time education within 2 weeks of the date the LA was informed

Monitoring and review

The governing body will ensure that the school has designated a senior member of staff to take lead responsibility for dealing with child protection issues.

This policy will be reviewed annually by the governing body.

Links to additional Policies:

This policy should be read in conjunction with all school policies; with specific reference to Whistleblowing, Health and Safety, Single Central Record, Child Protection Procedures, Allegations, Anti-Bullying, Racial Equality, Positive Behaviour, Staff code of Conduct and Confidentiality.

ACRONYMS
DSL – **Designated Safeguarding Lead**
DDSL - **Deputy Designated Safeguarding Lead**
DfE - **Department for Education**
NCSL - **National College for School Leadership**
GSCB - **Gloucestershire Safeguarding Children's Board**
SEND - **Special Educational Needs and Disabilities**
SENCO - **Special Educational Needs Co-ordinator**
DBS - **Disclosure and barring service**
LA - **Local Authority**
LADO - **Local Authority Designated Officer**

Appendix 1

Categories of abuse and indications of harm
Categories of Abuse:
1.Physical Abuse
2.Emotional Abuse (including Domestic Abuse)
3. Neglect
4. Sexual Abuse

Signs of Abuse in Children:
The following non-specific signs may indicate something is wrong:
• Significant change in behaviour
• Extreme anger or sadness
• Aggressive and attention-seeking behaviour
• Suspicious bruises with unsatisfactory explanations
• Lack of self-esteem
• Self-injury
• Depression
• Age inappropriate sexual behaviour
• Child Sexual Exploitation.

Risk Indicators
The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:
• Must be regarded as indicators of the possibility of significant harm
• Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
• May require consultation with and / or referral to Social Care

The absence of such indicators does not mean that abuse or neglect has not occurred. In an abusive relationship the child may:
• Appear frightened of the parent/s
• Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:
• Persistently avoid child health promotion services and treatment of the child's episodic illnesses
• Have unrealistic expectations of the child
• Frequently complain about /to the child and may fail to provide attention or praise (high criticism/low warmth environment).
• Be absent or misusing substances.

• Persistently refuse to allow access on home visits.
• Be involved in domestic abuse.
• Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

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

<u>**Indicators in the child**</u>
Bruising
It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non-accidental unless there is evidence or an adequate explanation provided:
• Bruising in or around the mouth
• Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
• Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally, for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas
• Variation in colour possibly indicating injuries caused at different times
• The outline of an object used e.g. belt marks, hand prints or a hair brush
• Linear bruising at any site, particularly on the buttocks, back or face
• Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
• Bruising around the face
• Grasp marks to the upper arms, forearms or leg
• Petechae haemorrhages (pinpoint blood spots under the skin.) Commonly associated with slapping, smothering/suffocation, strangling and squeezing
Fractures
Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a child will have had a fracture without the carers being aware of the child's distress. If the child is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture.
There are grounds for concern if:
• The history provided is vague, non-existent or inconsistent
• There are associated old fractures
• Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick. Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the child will cry and if there is a fracture,

there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

Mouth Injuries

Tears to the frenulum (tissue attaching upper lip to gum) often indicates force feeding of a baby or a child with a disability. There is often finger bruising to the cheeks and around the mouth. Rarely, there may also be grazing on the palate.

Poisoning

Ingestion of tablets or domestic poisoning in children under 5 is usually due to the carelessness of a parent or carer, but it may be self-harm even in young children.

Fabricated or Induced Illness

Professionals may be concerned at the possibility of a child suffering significant harm as a result of having illness fabricated or induced by their carer. Possible concerns are:

• Discrepancies between reported and observed medical conditions, such as the incidence of fits

• Attendance at various hospitals, in different geographical areas

• Development of feeding / eating disorders, as a result of unpleasant feeding interactions

• The child developing abnormal attitudes to their own health

• Non organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause

• Speech, language or motor developmental delays

• Dislike of close physical contact

• Attachment disorders

• Low self esteem

• Poor quality or no relationships with peers because social interactions are restricted

• Poor attendance at school and under-achievement

Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child. A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite. **Children and young people who have dog bites should always be referred to the Multi Agency Safeguarding Hub for further investigation.**

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded. Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid. Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

The following points are also worth remembering:
• A responsible adult checks the temperature of the bath before the child gets in.
• A child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.
• A child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks.

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, or unusually shaped, may suggest abuse.

Emotional/behavioural presentation

Refusal to discuss injuries

Admission of punishment which appears excessive

Fear of parents being contacted and fear of returning home

Withdrawal from physical contact

Arms and legs kept covered in hot weather

Fear of medical help

Aggression towards others

Frequently absent from school

An explanation which is inconsistent with an injury

Several different explanations provided for an injury

Indicators in the parent

May have injuries themselves that suggest domestic violence

Not seeking medical help/unexplained delay in seeking treatment

Reluctant to give information or mention previous injuries

Absent without good reason when their child is presented for treatment

Disinterested or undisturbed by accident or injury

Aggressive towards child or others

Unauthorised attempts to administer medication

Tries to draw the child into their own illness.

Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault

Parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids

Observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care.

May appear unusually concerned about the results of investigations which may indicate physical illness in the child

Wider parenting difficulties may (or may not) be associated with this form of abuse.

Parent/carer has convictions for violent crimes.

Indicators in the family/environment

Marginalised or isolated by the community

History of mental health, alcohol or drug misuse or domestic violence

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

2. EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Indicators in the child
Developmental delay
Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
Aggressive behaviour towards others
Child scapegoated within the family
Frozen watchfulness, particularly in pre-school children
Low self-esteem and lack of confidence
Withdrawn or seen as a 'loner' - difficulty relating to others
Over-reaction to mistakes
Fear of new situations
Inappropriate emotional responses to painful situations
Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
Self-harm
Fear of parents being contacted
Extremes of passivity or aggression

Drug/solvent abuse
Chronic running away
Compulsive stealing
Low self-esteem
Air of detachment – 'don't care' attitude Social isolation – does not join in and has few friends
Depression, withdrawal
Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention
Low self-esteem, lack of confidence, fearful, distressed, anxious
Poor peer relationships including withdrawn or isolated behaviour

Indicators in the parent
Domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse.
Abnormal attachment to child e.g. overly anxious or disinterest in the child
Scapegoats one child in the family
Imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection.
Wider parenting difficulties may (or may not) be associated with this form of abuse.

Indicators of in the family/environment
Lack of support from family or social network.
Marginalised or isolated by the community.
History of mental health, alcohol or drug misuse or domestic violence.
History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

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

Once a child is born, neglect may involve a parent or carer failing to:
• provide adequate food, clothing and shelter (including exclusion from home or abandonment);
• protect a child from physical and emotional harm or danger;
• ensure adequate supervision (including the use of inadequate care-givers); or
• ensure access to appropriate medical care or treatment.
It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators in the child

Physical presentation

Failure to thrive or, in older children, short stature

Underweight

Frequent hunger

Dirty, unkempt condition

Inadequately clothed, clothing in a poor state of repair

Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold

Swollen limbs with sores that are slow to heal, usually associated with cold injury

Abnormal voracious appetite

Dry, sparse hair

Recurrent / untreated infections or skin conditions e.g. severe nappy rash, eczema or persistent head lice / scabies/ diarrhoea

Unmanaged / untreated health / medical conditions including poor dental health

Frequent accidents or injuries

Development

General delay, especially speech and language delay

Inadequate social skills and poor socialization

Emotional/behavioural presentation

Attachment disorders

Absence of normal social responsiveness

Indiscriminate behaviour in relationships with adults

Emotionally needy

Compulsive stealing

Constant tiredness

Frequently absent or late at school

Poor self esteem

Destructive tendencies

Thrives away from home environment

Aggressive and impulsive behaviour

Disturbed peer relationships

Self-harming behaviour

Indicators in the parent

Dirty, unkempt presentation

Inadequately clothed

Inadequate social skills and poor socialisation

Abnormal attachment to the child .e.g. anxious

Low self-esteem and lack of confidence

Failure to meet the basic essential needs e.g. adequate food, clothes, warmth and hygiene

Failure to meet the child's health and medical needs e.g. poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy

Child left with adults who are intoxicated or violent

Child abandoned or left alone for excessive periods

Wider parenting difficulties, may (or may not) be associated with this form of abuse

Indicators in the family/environment
History of neglect in the family

Family marginalised or isolated by the community.

Family has history of mental health, alcohol or drug misuse or domestic violence.

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals

Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating

Lack of opportunities for child to play and learn

4. SEXUAL ABUSE

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

The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Indicators in the child
Physical presentation
Urinary infections, bleeding or soreness in the genital or anal areas

Recurrent pain on passing urine or faeces
Blood on underclothes
Sexually transmitted infections
Vaginal soreness or bleeding
Pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father
Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Emotional/behavioural presentation
Makes a disclosure.
Demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
Inexplicable changes in behaviour, such as becoming aggressive or withdrawn
Self-harm - eating disorders, self-mutilation and suicide attempts
Poor self-image, self-harm, self-hatred
Reluctant to undress for PE
Running away from home
Poor attention / concentration (world of their own)
Sudden changes in school work habits, become truant
Withdrawal, isolation or excessive worrying
Inappropriate sexualised conduct
Sexually exploited or indiscriminate choice of sexual partners
Wetting or other regressive behaviours e.g. thumb sucking
Draws sexually explicit pictures
Depression

Indicators in the parents
Comments made by the parent/carer about the child.
Lack of sexual boundaries
Wider parenting difficulties or vulnerabilities
Grooming behaviour
Parent is a sex offender

Indicators in the family/environment
Marginalised or isolated by the community.
History of mental health, alcohol or drug misuse or domestic violence.
History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.
Family member is a sex offender.

Sexual Abuse by Young People

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.

Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is "acting out" which may derive from other sexual situations to which the child or young person has been exposed. If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base.

Assessment

In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

• Equality – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies

• Consent – agreement including all the following:

o Understanding what is proposed based on age, maturity, development level, functioning and experience

o Knowledge of society's standards for what is being proposed

o Awareness of potential consequences and alternatives

o Assumption that agreements or disagreements will be respected equally

o Voluntary decision

o Mental competence

• Coercion – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these

regardless of victim resistance. In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

Child Sexual Exploitation

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

• underage sexual activity
• inappropriate sexual or sexualised behaviour
• sexually risky behaviour, 'swapping' sex
• repeat sexually transmitted infections
• in girls, repeat pregnancy, abortions, miscarriage
• receiving unexplained gifts or gifts from unknown sources
• having multiple mobile phones and worrying about losing contact via mobile
• having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
• changes in the way they dress
• going to hotels or other unusual locations to meet friends
• seen at known places of concern
• moving around the country, appearing in new towns or cities, not knowing where they are
• getting in/out of different cars driven by unknown adults
• having older boyfriends or girlfriends
• contact with known perpetrators
• involved in abusive relationships, intimidated and fearful of certain people or situations
• hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
• associating with other young people involved in sexual exploitation • recruiting other young people to exploitative situations
• truancy, exclusion, disengagement with school, opting out of education altogether
• unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
• mood swings, volatile behaviour, emotional distress
• self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
• drug or alcohol misuse
• getting involved in crime
• police involvement, police records
• involved in gangs, gang fights, gang membership
• injuries from physical assault, physical restraint, sexual assault.

Appendix 2 - FGM

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

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

- Indicators that FGM has already occurred include:
- A pupil confiding in a professional that FGM has taken place
- A mother/family member disclosing that FGM has been carried out
- A family/pupil already being known to social services in relation to other safeguarding issues

  A girl:

- Having difficulty walking, sitting or standing, or looking uncomfortable
- Finding it hard to sit still for long periods of time (where this was not a problem previously)
- Spending longer than normal in the bathroom or toilet due to difficulties urinating
- Having frequent urinary, menstrual or stomach problems
- Avoiding physical exercise or missing PE
- Being repeatedly absent from school, or absent for a prolonged period Demonstrating increased emotional and psychological needs – for example, withdrawal or depression, or significant change in behaviour
- Being reluctant to undergo any medical examinations
- Asking for help, but not being explicit about the problem
- Talking about pain or discomfort between her legs

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

- The girl's family having a history of practising FGM (this is the biggest risk factor to consider)
- FGM being known to be practised in the girl's community or country of origin
- A parent or family member expressing concern that FGM may be carried out
- A family not engaging with professionals (health, education or other) or already being known to social care in relation to other safeguarding issues

  A girl:

- Having a mother, older sibling or cousin who has undergone FGM
- Having limited level of integration within UK society
- Confiding to a professional that she is to have a "special procedure" or to attend a special occasion to "become a woman"

- Talking about a long holiday to her country of origin or another country where the practice is prevalent, or parents/carers stating that they or a relative will take the girl out of the country for a prolonged period
- Requesting help from a 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)
- Being unexpectedly absent from school
- 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.