



Arden Academy (Arden) is an academy maintained by Arden Multi Academy Trust

Name of Policy	Child Protection Policy	
Lead	Dave Warwood, Associate Headteacher	
Governor Committee	Behaviour, Safety, Inclusion & Intervention Committee	
Policy Status	New Policy	Adopted from SMBC Guidance Document March 2016
	Awaiting Governor Approval	No
	Governor Approved	22 nd January 2018
Review Frequency	1 year	
Version No.	1	
Next Review	Spring 2019	
Reviewed	22/1/18 – adopted policy accepted	
	10/9/18 – DfE updates incorporated	

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Arden Multi Academy Trust Governing Body
Child Protection Policy Statement

The governing body recognise their moral and statutory responsibility to safeguard and promote the welfare of all children. The policy applies to all children between the ages of 0-18 whose care and education comes within the remit of this education provision. (For some special education provisions this age range goes beyond 18). All children regardless of age, gender, race, ability, sexuality, religion, culture or language have a right to be protected from harm.

The governing body will ensure that our school will safeguard and promote the welfare of pupils and work together with other agencies to ensure that our school has adequate arrangements to identify, assess and support those children who have been harmed or are at significant risk of being harmed.

- This policy sets out how the governing body of ARDEN MULTI ACADEMY TRUST is carrying out its statutory responsibility to safeguard and promote the welfare of children in accordance with Section 175 of the Education Act 2002.
- This policy relates to child protection and sits within a broader safeguarding policy. The policy applies to all staff (teaching and non-teaching), governors, volunteers, temporary and supply staff working in the Academy.
- This policy will be reviewed annually by the governing body and is in line with the requirements of Working Together to Safeguard Children (DfE, July 2018), Keeping Children Safe In Education (DfE, September 2018), Inspecting safeguarding in early years, education and skills settings Ofsted document (August 2015).
- This policy is made available to parents on request and published on the Arden Academy website (<http://www.arden.solihull.sch.uk/about-us/arden-policies/>), so that parents have an understanding of the child protection responsibility placed on the school.

Governors' Committee Responsible: BSII Committee

Governor Lead: Sarah Bloomer

Nominated lead member of staff: Mark Hooper, Deputy Headteacher

Status and Review Cycle: Annual

Chair of Governors: Geoff Harley-Mason

Policy Statement:

The welfare of our pupils is our paramount concern. Our school is a community and we all (staff, governors, parents, families and pupils) have an essential role to play in making it safe and secure. This includes maintaining an attitude of “it could happen here” where child protection is concerned.

Safeguarding and promoting the welfare of children is everyone’s responsibility. Everyone who comes into contact with children and their families has a role to play in safeguarding children.

We make every effort to provide a safe and welcoming environment, underpinned by a culture of openness where both children and adults feel secure, able to talk and believe they are being listened to.

Aims:

To set clear expectations of how we expect all staff and volunteers to respond in the event of a concern about a child or young person, including their responsibilities in identifying and reporting possible cases of abuse, in order to safeguard children and young people.

To identify key roles and responsibilities for all staff in relation to child protection, and emphasise the need for good levels of communication between all members of staff in school.

To recognise our responsibility to refer any significant concerns about a child or young person which may indicate physical abuse, emotional abuse, sexual abuse (including child sexual exploitation) or neglect to Multi-agency Safeguarding Hub (MASH). The Solihull Multi-Agency Thresholds Criteria <http://socialsolihull.org.uk/lscb/wp-content/uploads/2014/07/Solihull-Threshold-version-february-015.pdf> should be used to support decision making in any referral.

To provide reports to and attend any statutory child protection conferences, initial and review, core group meetings and child in need conferences that may be called in line with Solihull Local Safeguarding Board (LSCB) [child protection procedures](#).

To engage in child protection statutory assessment and interventions as required, recognising our duty to work with other agencies in protecting children from harm (eg: Children’s Social Work Services, Police Public Protection Unit, health professionals including mental health professionals)

To maintain clear management oversight of all child protection work; identifying, referring and supporting children known to be at risk of harm, ensuring pupils at risk of harm are safeguarded and receive timely support and intervention; including early help and prevention work.

Definitions

Safeguarding: protecting from maltreatment; preventing impairment of health and development; ensuring that children grow up with the provision of safe and effective care; and work in a way that gives the best life chances and transition to adulthood (as defined in the Children Act 2004). This is applied to every child.

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

Child: refers to all young people who have not yet reached their 18th birthday. The policy applies to all pupils of our school. It will extend to visiting children and students from other establishments.

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

Abuse: a form of maltreatment of a child. This could mean neglect, physical, emotional or sexual abuse or any combination of these. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children. In the Children's Acts 1989 and 2004, a **child** is anyone who has not yet reached their 18th birthday.

Legal Framework

The Children's Acts 1989 and 2004 (as amended 2004 section 52) The Children Act 1989 introduced the concept of significant harm as the threshold which justifies compulsory intervention in family life in the best interests of children Under Section 17 (10) of the Children Act 1989, a child is in "need" if:

- He/she is unlikely to achieve or maintain, or have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him/her of services by a local authority;
- His/her health or development is likely to be significantly impaired, or further impaired, without the provision for him/her of such services; or
- He/she is disabled

Education Act 2002 Section 175 (maintained schools) and Section 157 (independent schools, academies and post 16 provision)

The Sexual Offences Act 2003

The Counter-Terrorism and Security Act (2015), section 26 The Prevent Duty
Serious Crime Act (2015), Mandatory reporting duty for known cases of female genital mutilation.
Statutory Guidance: Keeping Children Safe In Education (September 2018)
Statutory Guidance: Working Together to Safeguard Children (July 2018)
Statutory Guidance: Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (DfE 2016).

Inspecting safeguarding in early years, education and skills settings (August 2015)

What to do if you're worried a child is being abused (September 2016)

Leadership and Management of Child Protection

Governing Body

The governing body is responsible for:

- Ensuring there is a nominated safeguarding governor who ensures accountability for child protection and attends appropriate training in order to guide governors on their strategic responsibilities.
- Liaising with the Associate Headteacher/designated staff over all matters regarding child protection issues. This is a strategic role rather than operational – governors are not involved in concerns about individual pupils. The safeguarding governor provides appropriate challenge and support for any action to progress areas of weakness or development in the education provision's child protection arrangements.
- Ensuring a member of the senior leadership team is appointed as the Designated Safeguarding Lead (DSL) who leads on and has clear oversight of all child protection work. The DSL and deputy DSLs must be appropriately trained to undertake this role. Governors must support the DSL in their role by ensuring the allocation of funding and resource is sufficient to meet the current child protection activity.
- Ensuring the DSL produces an annual report to the governing body of child protection activity. This should also reflect the child protection element of the local authority annual review of safeguarding. Under no circumstances should the establishment's governors or trustees be given details of individual cases. Governors or trustees may, however, be provided with a report at the end of the academic year, outlining the number of cases dealt with and other statistics which do not identify individual children.
- Ensuring the education provision fully engages with the local authority in their annual review of safeguarding procedures, providing relevant information in a timely manner. The chair of governors should sign to confirm accuracy of the education provision's arrangements, and ensure any concerns are remedied without delay.
- Ensuring the governing body receives child protection awareness training, including the safeguarding governor.
- Ensuring the school has an effective child protection policy and a staff behaviour policy.
- Ensuring that all school staff and volunteers (including governors) receive child protection awareness training at the required frequency.
- Ensuring the school has a broad and balanced curriculum that teaches children about keeping safe.
- Ensuring national statutory guidance and legislation (specifically Keeping Children Safe in Education, DfE, September 2018 and Working Together to Safeguard Children, DfE, September 2018) and local requirements (specifically Solihull LSCB procedures and Solihull local authority policy, advice and guidance) are adhered to.

Child Protection Roles

The **Designated Safeguarding Lead (DSL) for Child Protection** is Mark Hooper and is a member of the Senior Leadership Team. His job description clearly reflects this role as outlined in Appendix 1; he has undertaken relevant training to the role and receives at least bi-annual updates.

The **Deputy Designated Safeguarding Leads (DSLs)** for child protection are Pete Simpson, Katy Pemberton, Julie Llewellyn and Rebecca Duffy-Turner. Their job descriptions clearly reflect this role. They have undertaken relevant training to undertake the role and receive(s) at least bi-annual updates.

In the absence of the Designated Safeguarding Lead and the Deputy Designated Safeguarding Lead the most senior member of staff in education provision will assume responsibility for any child protection matters that arise.

The nominated safeguarding governor is Sarah Bloomer. She is responsible for child protection and champions good practice; to liaise with the Associate Headteacher and to provide support and challenge in the area of child protection.

The **Associate Headteacher** will ensure that the child protection policies and procedures adopted by the governing body are fully implemented and sufficient resources and time are allocated to enable staff members to discharge their safeguarding responsibilities.

The **governing body** is collectively responsible for ensuring that child protection arrangements are fully embedded within the school's ethos and adhered to in the school's day-to-day practice.

All staff members, governors, volunteers and external providers are expected to:

- Remember that the child's welfare and interests must be the paramount consideration at all times
- Never promise to keep a secret or confidentiality, where a child discloses abuse
- Know the definitions for abuse and the impact abuse can have on children and young people
- Be alert to signs and recognise indicators of possible abuse
- Listen to abuse concerns shared by a child (disclosure) and follow school child protection procedures, including notifying the DSL immediately.
- Undertake induction and training on child protection as required
- Notify the DSL of any unexplained absence of a child on a Child Protection Plan or subject to a Child In Need Plan.
- Report to the DSL any additional concerns, disclosures or observations after the initial referral, not assuming that a referral in itself will protect children.

Any member of staff who has concerns about the safety or potential abuse of a child must report their concerns to the Designated Safeguarding Lead for Child Protection **immediately**. This includes allegations made against other children.

Staff are not expected to take it upon themselves to investigate concerns or make judgements.

Definitions of 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.

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.

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

Neglect 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 and development. Neglect may occur during pregnancy as a result of maternal substance misuse. 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-takers)
- ensure access to appropriate medical care or treatment

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

Staff Induction, Training and Development

We recognise that all staff have a key role to play in identifying and referring child protection concerns early, and providing help for children and young people. All staff and volunteers (including governors) are given appropriate child protection training and induction that includes training on how to recognise signs of abuse **and** how to respond to any concerns.

Individuals are also expected to:

- read chapter one of Keeping Children Safe In Education (DfE September 2018) entitled “Safeguarding Information for All Staff” and understand its implications,
- read and understand the school’s child protection policy and make sure they are clear on how to act in the event of a concern and maintaining confidentiality,
- read and understand the staff behaviour policy (code of conduct), so that they are clear on what to do if there is a breach of the code of conduct (governor code of conduct for governors),
- understand the difference between having a concern about a child and a child in immediate danger, and the relevant actions to take,
- understand the early help and support that can be provided by the school (detailed in the Designated Safeguarding Lead Handbook).

The DSL provides at least an annual briefing to the school to provide staff with any updates on changes to child protection legislation, procedures and relevant learning from key serious case reviews.

This training and induction is proportionate to individuals’ roles and responsibilities.

The school maintains accurate signed records of staff child protection induction, training and reading.

The nominated safeguarding governor with responsibility for child protection undergoes child protection training prior to or as soon as appointment to the role and at regular intervals thereafter.

The Designated Safeguarding Lead for child protection attends the multi-agency safeguarding LSCB training within 12 weeks of taking up their responsibilities. The Designated Safeguarding Lead must subsequently attend appropriate training at least on a 2 yearly basis in accordance with government guidance.

We ensure that staff members provided by other agencies and third parties, e.g. supply teachers and contractors, have received appropriate child protection training.

The Impact of Abuse and Neglect

The sustained abuse or neglect of children physically, emotionally, or sexually can have long-term effects on the child's health, development and well-being. It can impact significantly on a child's self-esteem, self-image and on their perception of self and of others. The effects can also extend into adult life and lead to difficulties in forming and sustaining positive and close relationships. In some situations it can affect parenting ability.

Recognising Signs of Child Abuse

The following 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 or harm
- depression
- age inappropriate sexual behaviour
- being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups
- risk of modern slavery, trafficking or exploitation
- early signs of abuse or neglect
- risk of radicalisation or exploitation
- privately fostered

If abuse is suspected, presence of signs of abuse is not proof that the abuse has occurred, but:

- must be regarded as indicators of the possibility of significant harm
- justify the need for careful assessment and discussion with the designated member of staff for child protection / decision making conversation which is logged
- may require consultation with and / or referral to Children's Social Work Service

The absence of such risk indicators does not mean that abuse or neglect has not occurred.

In an abusive relationship the child may:

- appear frightened of the parents
- 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 episodes of illness
- 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 to professionals 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.

Staff area also aware that children are capable of abusing their peers (peer on peer abuse).

Significant Harm

The Children Act 1989 introduced the concept of **significant harm** as the threshold that justifies compulsory intervention in family life in the best interests of a child, and gives local authorities a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.

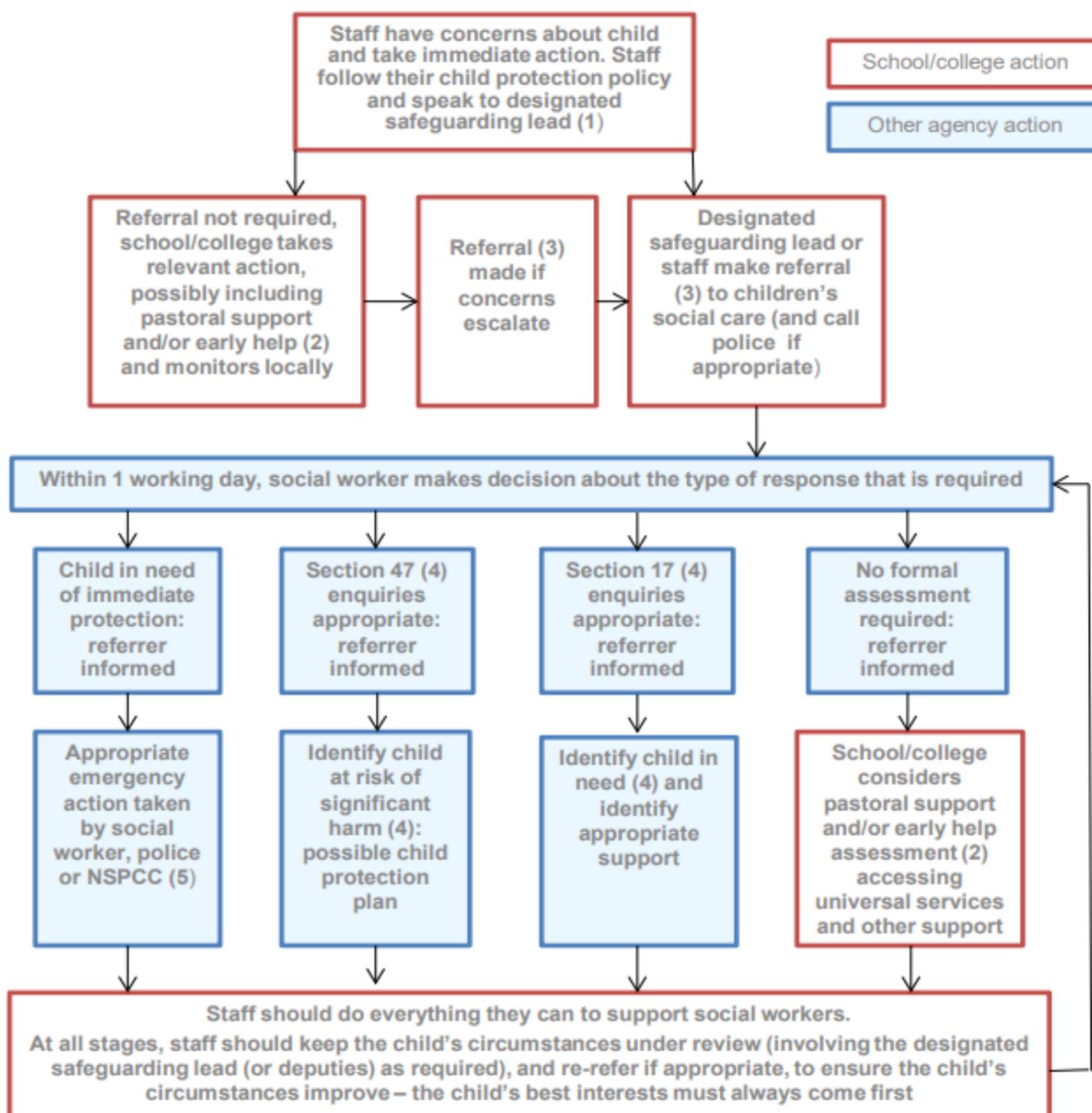
Safeguarding and promoting the welfare of children is defined in Working Together to Safeguard Children (2018) as:

- protecting children from maltreatment;
- preventing impairment of a child's health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes (DfE, September 2018 pg.7)

Action when a child has suffered or is likely to suffer harm

This diagram, taken from Keeping Children Safe in Education (September 2018), illustrates what action should be taken and who should take it where there are concerns about a child. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children’s social care immediately.

Actions where there are concerns about a child



Anybody can make a referral.

*In cases which also involve an allegation of abuse against the staff member, see part four of this guidance which explains action the school or college should take in respect of the staff member.

** Where a child and family would benefit from coordinated support from more than one agency (e.g. education, health, housing, police) there should be an inter-agency assessment. These assessments should identify what help the child and family require to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989. The early help assessment should be undertaken by a lead professional who could be a teacher, special educational needs coordinator, General Practitioner (GP), family support worker, and/or health visitor.

** Where there are more complex needs, help may be provided under section 17 of the Children Act 1989 (children in need). Where there are child protection concerns local authority services must make enquiries and decide if any action must be taken under section 47 of the Children Act 1989, see Chapter 1 of Working Together to Safeguard Children, July 2018, for more information. Members of staff should make a written account of any concern they have regarding the welfare or well-being of a pupil using the education provision pro forma including making a note of any visible marks and injuries. (See Appendix 2 Model Child Welfare Concern and child protection concern/disclosure form example pro forma and Appendix 3 body map)

Dealing with Disclosures or Concerns:

If a child makes an allegation or discloses information which raises concern about actual or potential Significant Harm, the initial response should be limited to listening carefully to what the child says so as to:

- clarify the concerns;
- confirm who the child has already told, if anyone;
- make a full written record of what is being said by the child in their words.

If a child is freely recalling events, the response should be to listen, rather than stop the child; questioning of the information being given must be limited to confirming factual accuracy required to provide a quality referral, e.g. who are the people involved, what has actually happened and when and where did any incident occur.

If the child has an injury but no explanation is volunteered, it is acceptable to enquire how the injury was sustained.

However, the child must not be pressed for information, led or cross-examined or given false assurances of absolute confidentiality. Such well-intentioned actions could prejudice Police investigations.

It is important that the child should not be asked to repeat the information to a colleague or write the information down. Making an accurate and verbatim record of what the child has said (disclosure), (or evidence that has led to the concerns) recording the child's own words, is the responsibility of the person to whom the child has disclosed. This is recorded in CPOMS.

The DSL should be informed of the concerns immediately and be included in the CPOMS log.

A record of all conversations (including the timings, the setting, those present, as well as what was said by all parties) and actions must be kept. These should be recorded on CPOMS.

Any member of staff who has concerns about the welfare of a child must share this information with the DSL.

- The report is given to the DSL immediately who will analyse risk and refer onwards as necessary and appropriate.
- Referrals where urgent action is required should never be delayed in order for a full record to be written.

No enquiries or investigations may be initiated without the authority of Children's Social Work Services or the Police.

Guiding Principles for all staff and volunteers for Dealing with Disclosures:

The Seven R's

The Seven R's provides staff with clear guidance on how to act in the event of a concern or disclosure: Receive, Reassure, Respond, Report, Record, Remember, Review.

Receive

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

Reassure

- Reassure the pupil, but only as far as is honest and reliable
- Do not make promises you may not be able to keep, eg: "I'll stay with you", or "everything will be alright now" or "I'll keep this confidential"
- Do reassure, eg: you could say "I believe you", "I am glad you came to me", "I am sorry this has happened", "We are going to do something together to get help"

Respond

- Respond to the pupil only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details
- Do not ask 'leading' questions, ie: "did he touch your private parts?" or "did she hurt you?". Such questions may invalidate your evidence (and the child's) in any later court proceedings.
- Instead, make use of open ended questions which offers the child the opportunity to provide more information about an event in a way that is not leading, suggestive or putting them under pressure. Open questions may use how? When? Who? Where?
Questions beginning with the phrases "tell me", "describe" or "explain" are useful:
Tell me what happened, tell me who was there
Explain what you mean when you say
Describe the place to me
- Do not criticise the alleged perpetrator; the pupil may care about him/her, and reconciliation may be possible.
- Do not ask the pupil to repeat it all for another member of staff. Explain what you have to do next and whom you have to talk to. Reassure the pupil that it will be a senior member of staff

Report

- Share concerns with the designated safeguarding lead (DSL) immediately. If you are unable to contact your designated safeguarding lead, deputy designated safeguarding lead, or most senior member of staff, and the child is at risk of immediate harm, contact MASH on **0121 788 4300**
- If you are dissatisfied with the response from the DSL or children's social work, you should ask for the decision to be reconsidered, giving your reasons for this.
- A formal referral or any urgent medical treatment **must not** be delayed by the unavailability of designated staff

Record

- If possible make some very brief notes at the time and record them on CPOMS as soon as possible. Keep your original notes on file.
- Any member of staff receiving a disclosure of abuse from a child or young person, or noticing signs or symptoms of possible abuse in a child or young person, will make a written record within the hour recording the disclosure using the child's own words, what was said or seen and the location both of the abuse and the disclosure.

- Record the date, time, place, persons present and noticeable non-verbal behaviour, and the words used by the child. If the child uses sexual 'pet' words, record the actual words used, rather than translating them into proper words
- A record of a concern, suspicion or allegation should be made at the time of or as soon as possible after the event. Dates and times of events should be recorded as accurately as possible, together with a note of when the record was made.
- Record facts and observable things, rather than your 'interpretations' or 'assumptions'
- A record should be made of any visible marks, bruising or injuries to a child that give cause for concern. This may be completed on a body map in CPOMS. The child should not be examined intimately or pictures taken of any injuries / marks.
- All written records must be signed and dated clearly with the name of the signatory clearly printed.
- Children **MUST NOT** be asked to make a written statement themselves or to sign any records.
- All records of a child protection nature (handwritten or typed) are passed to the DSL.

Remember

- Support the child: listen, reassure, and be available
- Complete confidentiality is essential. Share your knowledge only with appropriate professional colleagues
- Try to get some support for yourself if you need it

Review

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

Specific Safeguarding Issues

In addition to the four categories of abuse, Keeping Children Safe in Education (2018) identifies the following safeguarding issues:

- Child missing from education
- Child missing from home or care
- Child sexual exploitation (CSE)
- Bullying including cyberbullying
- Domestic violence
- Drugs
- Fabricated or induced illness
- Faith abuse
- Female genital mutilation (FGM)
- Forced marriage
- Gangs and youth violence
- Gender-based violence/violence against women and girls (VAWG)
- Mental health
- Private fostering
- Preventing radicalisation
- Sexting (youth produced sexual imagery)
- Peer on peer abuse
- Trafficking

Definitions of these and local pathways to support are provided in the Solihull Designated Safeguarding Lead's Handbook. National guidance is provided in Keeping Children safe in Education (DfE 2018), page 15.

Preventing Radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. 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. Appendix 4 provides further local advice and guidance for preventing radicalisation. The Solihull Prevent Referral procedures are in Appendix 5 and a risk assessment is in Appendix 6.

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. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber-bullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse. Appendix 7 provides further local advice and guidance on dealing with concerns around pupils who are or could be at risk of child sexual exploitation. The CSE screening tool should be used to support any assessment of risk and to support a referral, a copy should be forwarded to Children's Social Work with the referral.

Female genital mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. Appendix 8 provides further local advice and guidance on female genital mutilation. Staff with teaching responsibilities have a legal duty to act with regards to concerns about FGM, but all staff should register concerns with the DSL

Peer on Peer Abuse

Children can abuse other children. This is generally referred to as peer on peer abuse and can take many forms. This can include (but is not limited to) bullying (including cyberbullying); sexual violence and sexual harassment; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexting and initiating/hazing type violence and rituals.

Child Missing from Education (CMfE)

A child going missing from education is a potential indicator of abuse or neglect. Staff in education provision should follow the provision's procedures for dealing with children that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of their going missing in the future. It is essential that schools encourage high rates of attendance and review all attendance records regularly. Appendix 10 provides further local advice and guidance on CMfE.

Locally, Solihull LSCB has identified domestic violence, substance misuse (particularly parental substance misuse), mental health (particularly parental mental health) and neglect as priority areas. Further information on these areas can be found in the DSL Handbook.

Safeguarding in the School Curriculum

As a school we will educate and encourage pupils to keep safe through the provision of a **broad and balanced curriculum which includes a safeguarding curriculum**. The curriculum (for example history, English, drama, and art) and in particular the personal, social and health education development strand of the curriculum, includes an emphasis on relationships (relationships and sex education), building confidence and resilience in pupils, developing preventative strategies to ensure their own protection and that of others and promoting fundamental British values. Opportunities are provided for pupils to develop the skills and knowledge they need to recognise when they are at risk and how to get help when they need it, for example: the promotion of positive self-esteem, emotional literacy and assertiveness; online safety; preventing radicalisation; body confidence including naming private body parts; female genital mutilation; features of safe and healthy relationships; child sexual exploitation; and anti-bullying work. Clear advice and guidance is built into the curriculum to ensure that pupils understand that there is a range of contacts they can turn to for advice and support and that they know where and how to report abuse.

Supporting Children

We recognise that a child who is abused or witnesses violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth. We recognise that the Academy may provide the only stability in the lives of children who have been abused or who are at risk of harm. We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

We support all children by:

- Encouraging self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression or bullying.
- Ensuring repeated hate incidents, e.g. peer on peer abuse, racist, homophobic or gender or disability based bullying, are considered under child protection procedures.
- Promoting a caring, safe and positive environment within the school, with access to appropriate adults to approach if they are in difficulties;
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children, including notifying social care as soon as there is a significant concern.
- Notify the allocated social worker of any new concerns about a child who is subject to a child protection plan or a child in need plan.
- Monitoring children who have been identified as having welfare of protection concerns and providing appropriate support. An individual support plan is devised, implemented and reviewed regularly for pupils requiring early help of safeguarding. This is kept with the child protection record.
- Where children and young people have exhibited sexually inappropriate/ harmful behaviour and/or exhibited sexually inappropriate/harmful behaviour towards others. Guidance is provided in Appendix 9. Where necessary a co-ordinated multi-agency response is undertaken to ensure the appropriate safeguards and support are in place. We ensure that the needs of children and young people who abuse others will be considered separately from the needs of their victims.
- In regard to peer on peer abuse, abuse is considered as abuse and is not pass off as 'banter' or any other excuse. We recognise that peer on peer abuse can be committed by both males and females, although research suggests it is more commonly committed by males.
- Providing continuing support to a child about whom there have been concerns who leaves the school by ensuring that appropriate information is copied under confidential cover to the child's new setting and ensuring the school medical records are forwarded as a matter of priority.

The Designated Safeguarding Lead Toolkit:

- School safeguarding policy
- School child protection policy
- Solihull MBC multi agency thresholds criteria document
- Solihull MBC designated safeguarding lead handbook
- KCSIE (2018) particularly chapter 1 and chapter 2
- Working Together to Safeguard Children (2018)
- What to do if you're worried a child is being abused (2015)
- Solihull LSCB Procedures
- Inspecting safeguarding in early years, education and skills settings (August 2018)
- School inspection handbook (October 2017)

The role of the DSL

a) Referring

The DSL will assess the information provided on the concern form, using the Solihull multi-agency thresholds criteria and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm or risk of significant harm has been reached; or they are not clear if the threshold is met, then the DSL will contact children's social care.

The DSL will:

- make a professional judgement about what action needs to be taken, using the Solihull Multi-agency Guidance Threshold Criteria to help support Children, Young People and their Families in Solihull, [What to do if you're worried that a child is being abused](http://solihullscb.proceduresonline.com/index.htm), the school child protection procedure and the Solihull LSCB procedures (<http://solihullscb.proceduresonline.com/index.htm>). The DSL will consider the following:
 - the nature of the concern;
 - how and why it has arisen;
 - what the presenting child's and family's needs appear to be;
 - what relevant information is held by the school, (consider any previous referrals, closed case to children's social work, any other school concerns; early help work, developmental needs of the child, parenting capacity, family structure)
 - whether the concern indicates a likelihood of **Significant Harm** and if so;
 - whether there is any need for any urgent action to protect the child, any other child in the same household or any child in contact with an alleged perpetrator;
 - whether there are any other children, either in the household or in contact with any alleged perpetrator of abuse, identified as in need or at risk of harm;
 - whether the child has any sibling(s) at other education provisions or early years settings and consider whether information is such that it should be shared with that other setting.
 - whether there are any concerns regarding an abuse of a position of trust
 - where targeted support services have been offered but there is refusal or reluctance by the parent/carer to engage or engage consistently with the support being offered and therefore the identified cause of concern/need is not being addressed, i.e. no improved outcome for the child;
 - where targeted support services have been in place but the parent or carer appear unable to make the required changes in order to improve outcomes for the child.
- Where a DSL makes a referral, they should include:
 - the known facts,
 - any suspicions or allegations,
 - whether or not there has been any contact with the child's family
 - any information they have on the child's developmental needs, and the capacity of the child's parent or carers to meet those needs.

If the DSL feels unsure about whether a referral is necessary, a telephone call to MASH can be made for advice.

- If the child is in immediate danger and urgent protective action is required, the police should be called. The DSL should also notify Children's Social Care of the occurrence and what action has been taken. This should be formally recorded by the school.

- Where the pupil is suffering from a serious injury, medical attention must be sought immediately by calling an ambulance or taking the child to the Accident and Emergency Department of the local hospital (Associate Headteacher or DSL). The DSL should notify Children's Social Care. On arrival at the hospital, the duty consultant paediatrician must be informed of the nature of the concerns. The DSL should make a referral and ensure that all events, advice, notifications and actions are recorded, including any decision making. The DSL should seek advice from Children's Social Care about informing parents, remembering that parents should normally be informed that a child requires urgent medical attention.
- In accordance with the [Local Safeguarding Children's Board Procedures](#), the agreement of the parents for a referral to MASH should normally be sought where possible, ([Chapter 3.1.Section 13.1](#)). However, if it is felt that seeking any such agreement would increase the level of significant risk to the child, the matter should be discussed with MASH and their advice sought. This must not contribute to a delay in making a referral.
- If the child is known to have an allocated social worker, referrals should be made directly to the allocated worker or, in her/his absence, the manager or a duty officer in the team. Sharing of this information and response should be recorded on the pupil file.

Contact details for a referral for children residing in Solihull:

Solihull Multi-Agency Safeguarding Hub (MASH):

0121 788 4300

0121 605 6060 (Out of Hours)

All referrals need to be confirmed in writing as soon as possible using the [Children and Families Inter agency Referral](#) form online.

- Where the child does not reside in Solihull the referrals must be made to the appropriate cross border local authorities. These must also be confirmed in writing.
- The DSL should receive a response to the referral within one working day. If a response is not received, the DSL should contact MASH to obtain information about the status of the referral.
- Where a referrer is unclear or in disagreement with the decision made, they should ask to speak to the responsible qualified social worker or the duty Assistant Team Manager in the first instance to try and reach an agreed understanding regarding the decision.
- The DSL should follow any action requested from Children's Social Services including allowing visits to the school by social workers and/or the police in relation to the referral and requests for any further information, report or attendance at meetings.

b) Confidentiality and Information Sharing

Pupils should have a range of trusted adults to talk to in school and they should also have a clear understanding of confidentiality boundaries with a range of adults. Laying these foundations at a young age will support pupils in accessing help, guidance and support whenever they need it as they navigate life. This is important because we know that concerns about confidentiality, and subsequent lack of trust, are the main barriers that stop young people from accessing advice and support when they need it.

We recognise that all matters relating to child protection are confidential. We maintain that all matters relating to child protection are to be treated as confidential and only shared in line with Working Together to Safeguard Children guidance. The Associate Headteacher or Designated Safeguarding Lead will disclose any information about a child to other members of staff on a need to know basis only. Information will only be shared with agencies who we have a statutory duty to share with or individuals within the school who 'need to know'. All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children. All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing. We will always undertake to share our intention to refer a child to Social Care with their parents/carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult Children's Social Work for advice.

When there is a concern that a child is at risk of significant harm, all information held by the Academy must be shared with Children's Social Care, police and health professionals. Section 47 of the Children Act 1989 and sections 10 and 11 of the Children Act 2004 empower all agencies to share information in these circumstances. In the event of any doubt, the DSL should liaise with MASH.

Disciplinary action will be considered for any breach of confidentiality.

Further Guidance on information sharing can be found in Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (DfE 2018).

c) Parental Consent to the Referral

The referrer should seek, in general, to discuss concerns with the family and, where possible seek the family's agreement to making a referral unless this may place the child at increased likelihood of suffering **Significant Harm** by:

- Delay in referral;
- The response it prompts from the parents;
- Alerting the alleged perpetrator.

A decision by any professional not to seek parental permission before making a referral to Children's Social Work Services must be recorded and the reasons given.

Where a parent has agreed to a referral, this must be recorded and confirmed on the Children and Families Inter-Agency Referral Form. Where the parent is consulted and refuses to give permission for the referral, further advice should be sought from MASH, unless to do so would cause undue delay. Any further advice and decision making should be fully recorded.

If, having taken full account of the parent's wishes, it is still considered that there is a need for a referral:

- The reason for proceeding without parental agreement must be recorded;
- Children's Social Work Services should be told that the parent has withheld her/his permission;
- The parent should be contacted by the referring professional to inform her/him that after considering their wishes, a referral has been made. The timing of this contact should be agreed with Children's Social Work Services.
- Any decision not to advise a parents about a referral or contact with a Young Person must be recorded in detail in order to provide a record of defensible decision making.

d) Pupil Consent to the referral

The Solihull LSCB child protection procedures state that:

"If the child can understand the significance and consequences of making a referral, his or her views regarding a referral to Children Social Work Services should be obtained and taken into consideration by the referring professional.

Whilst the child's views should be sought, it remains the responsibility of the professional to take whatever action is required to ensure the safety of that child and any other children.

It is important to explain to the child in an age appropriate way how the information will be passed to Children's Social Work Services and/or the Police as the agencies with lead responsibility for the welfare and protection of children.

Where the child does not wish his or her parent to know that they or someone else has made a referral about them, those receiving the referral must consider the wishes and best interests of the child. If the child can be considered as "Fraser Competent" then direct work can be undertaken with the child without parental knowledge or consent, however it is always important to encourage a child to be open and to engage parents unless to do so would increase a risk of harm to the child or young person.

e) Record Keeping:

The importance of good clear child welfare and child protection record keeping has been highlighted in the learning from serious case reviews. Good up to date record keeping of concerns and action taken is essential for two main reasons:

- It helps the Academy to identify causes for concern at an early stage. Often it is only when a number of seemingly minor issues are seen as a whole, that a pattern can be seen indicating safeguarding or child protection concern.
- It helps the Academy to monitor and manage their safeguarding practices and provides evidence of robust and effective child protection policy and practice.

Keeping a good quality record about work with a child who you have child protection concerns and his or her family is an important part of the professional accountability of the school. It helps to focus work, and it is essential to working effectively across agency and professional boundaries. Clear and accurate records for each child ensure that there is a documented account of an agency's or professionals' involvement with a child and/or family or care giver. They help with continuity when individual workers are unavailable or change, and they provide an essential tool for managers to monitor work or for peer review.

- Child protection records must be securely held, separate from the main pupil file, and in a secure place.
- Access to any records and details of a case will be on a 'need to know' basis decided on a case by case basis, to enable those people to take appropriate steps to safeguard the pupil or to carry out their own duties.
- Any contact with other agencies must be recorded as should the rationale for sharing or not sharing information.

f) Management Oversight of Child Protection work

We ensure clear management oversight of work by the Designated Safeguarding Lead and senior leaders including governors. Oversight of numbers of pupils at risk due to child protection concerns are monitored through the threshold data sheet (appendix 12). Regular reports to Governors (BSII Committee) around child protection (anonymised) ensure effective support and challenge in this area of work. Our annual safeguarding audit work is shared with the local authority to ensure 157/175 compliance. Strengths in child protection work and any areas for development are identified and immediately remedied.

g) Supervision of Child Protection Work

We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.

There are clear and effective arrangements for staff development and training in respect of the protection and care of children and learners. Staff and other adults receive regular supervision and support if they are working directly and regularly with children and learners whose safety and welfare are at risk, (Inspecting safeguarding in early years education and skills settings, August 2015, Ofsted).

We further support staff as necessary, by providing an opportunity to talk through their anxieties with the Designated Safeguarding Lead and their line manager, and to seek further support as appropriate. This could include:

- Stress Risk Assessment undertaken by the line manager
- Referral to school counsellor, Nathan Ward
- Referral to Occupational Health for one-to-one counselling

h) Professional Disagreement Procedures

At no time must professional dissent detract from ensuring that the child is safeguarded. The child's welfare and safety must remain paramount throughout.

In the event that a referring professional does not agree with the proposed response to the referral, the referrer should discuss their concerns directly with the duty Assistant Team Manager or Team Manager in the first instance to seek resolution. Professional disagreements should be dealt with in line with LSCB procedures.

i) Transfer of Child Protection records

When a child who has a child protection plan leaves the education provision at the end of statutory schooling or transfers to another education provision, the Designated Safeguarding Lead must:

- inform the child's social worker immediately so that school records and contact details can be updated on the children's social work data base, and the social worker can be advised that you will be liaising with the receiving school to share relevant information.
- liaise with the child's new education provision immediately and arrange the transfer of child protection records to the new school.

When a child who has a child protection file in education provision leaves an education provision and transfers to a new education provision the Designated Safeguarding Lead of the current education provision should review the child protection file and should pass the following to the Designated Safeguarding Lead of the new education provision:

- Any current concerns that are being monitored.
- Any child protection referrals or records of advice sought from MASH (current and historical)
- Any child protection conference minutes (current and historical)
- Any information relating to the time the child was subject to a child protection plan (current or historical)

A child protection file transfer record should be used.

The following information should be dealt with in line with the education provision's file retention policy

- Any historical information, such as monitoring notes, that is older than the current academic year and did not result in either a discussion with MASH for advice or a child protection referral

When a pupil is educated off site by another education provider or is dual registered (for example on a managed move, attending a pupil referral unit or an alternative provision); the Designated Safeguarding Lead should assess what information needs to be shared the Designated safeguarding lead at the other education provision. This decision should be based on the amount of time the child spends at the other provision and the nature of the provision. This should include a discussion with the child's social worker. Where appropriate the Designated Safeguarding Lead at the alternative provision will receive a copy of the pupil's child protection file as detailed above. In this instance, the responsibility for safeguarding remains with Arden Academy.

When a child ceases to be of statutory education provision age or leaves college their records should be retained by the said establishment until the child's 25th birthday.

Solihull MBC Contacts:

- MASH: 0121 788 4300
- Out of hours: 0121 605 6060
- Children's Social Work Child Protection and Review Unit: 0121 788 4310
- Local Authority Duty Officer (LADO) – 0121 788 4310
- SMBC Adult Social Work one stop referral – 0121 704 8007
- Early Help team – 0121 709 7000

Birmingham Contacts

- Birmingham Multi-Agency Safeguarding Hub (MASH) - 0121 303 1888
<http://www.lscbbirmingham.org.uk/index.php/birmingham-multi-agency-safeguarding-hub-mash>
www.lscbbirmingham.org.uk/right-serviceright-time

Coventry Contacts

- Coventry Multi-Agency Safeguarding Hub (MASH) - 024 7678 8555
http://www.coventry.gov.uk/info/31/children_and_families/2186/coventrys_multi_agency_safeguarding_hub_mash
http://coventrychildcare.proceduresonline.com/chapters/p_thresholds.html

Warwickshire Contacts

- Children's Social Care during office hours: 01926 410410
- Emergency Duty Service 01926 886922 outside office hours only
<https://www.warwickshire.gov.uk/wscb>

Worcestershire Contacts

- Access Centre 01905 822666 from Monday to Friday 8.30am to 5.00pm
- Emergency Duty Team (EDT) on 01905 768020 outside office hours
http://www.worcestershire.gov.uk/info/20054/safeguarding_children/364/if_you_are_worried_about_a_child

j) Evaluating and Monitoring Process

Our Child Protection Policy and Procedures will be monitored and evaluated by:

- Governing body visits to the Academy
- Senior Leadership Team 'drop ins' and discussions with children and staff
- Line management and task management of staff
- Audits of case files and record keeping (see Appendix 14 for audit record sheet)
- Discussions with staff involved in child protection work
- Pupil surveys, questionnaires and evidence of the pupil voice in child protection work
- Scrutiny of the Solihull Multi-Agency Thresholds criteria and any data-sets
- Scrutiny of range of risk assessments and information (including child protection files, early help records, pupil concern logs, attendance, bullying logs, behaviour records, to ensure a co-ordinated approach)
- Scrutiny of governing body minutes
- Review of parental concerns and parent questionnaires
- Review of the use of any early help facility in school to support pupils

k) Success Criteria:

1. Staff, when questioned, feel confident that they know what to do, or who to contact, when they have concerns about children or their families.
2. Scrutiny of child protection records confirms that safeguarding procedures set out in this policy are being consistently followed. This includes completion of appropriate records with clear evidence of actions being followed through in a timely and effective manner in order to safeguard pupils and provide support where necessary; and that school attendance at any multi-agency meeting is attended, report provided where necessary and any actions for the school are followed up.
3. Staff, when questioned, believe that safeguarding procedures set out in the policy are being consistently followed throughout the education provision.
4. Content of the policy remains up to date with reference to Solihull Local Safeguarding Children Board's procedures and all other legislation.

Appendix 1: Role of the Designated Safeguarding Lead (DSL)

KCSIE (September 2018) Annex B: Role of the designated safeguarding lead

Governing bodies, proprietors and management committees should ensure an appropriate senior member of staff, from the school or college leadership team, is appointed to the role of designated safeguarding lead.¹⁰⁹ The designated safeguarding lead should take lead responsibility for safeguarding and child protection (including online safety). This should be explicit in the role holder's job description. This person should have the appropriate status and authority within the school to carry out the duties of the post. They should be given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and child protection matters, to take part in strategy discussions and inter-agency meetings, and/or to support other staff to do so, and to contribute to the assessment of children.

Deputy designated safeguarding leads

It is a matter for individual schools and colleges as to whether they choose to have one or more deputy designated safeguarding leads. Any deputies should be trained to the same standard as the designated safeguarding lead and the role should be explicit in their job description. Whilst the activities of the designated safeguarding lead can be delegated to appropriately trained deputies, the ultimate lead responsibility for child protection, as set out above, remains with the designated safeguarding lead, this lead responsibility should not be delegated.

Manage referrals

The designated safeguarding lead is expected to:

- refer cases of suspected abuse to the local authority children's social care as required;
- support staff who make referrals to local authority children's social care;
- refer cases to the Channel programme where there is a radicalisation concern as required;
- support staff who make referrals to the Channel programme;
- refer cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required; and
- refer cases where a crime may have been committed to the Police as required.

Work with others

The designated safeguarding lead is expected to:

- act as a point of contact with the three safeguarding partners;
- liaise with the Associate Headteacher to inform him or her of issues- especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
- as required, liaise with the "case manager" (as per Part four) and the designated officer(s) at the local authority for child protection concerns in cases which concern a staff member;
- liaise with staff (especially pastoral support staff, school nurses, IT Technicians, and SENCOs or the named person with oversight for SEN in a college) on matters of safety and safeguarding (including online and digital safety) and when deciding whether to make a referral by liaising with relevant agencies; and
- act as a source of support, advice and expertise for all staff.

Training

The designated safeguarding lead (and any deputies) should undergo training to provide them with the knowledge and skills required to carry out the role. This training should be updated at least every two years. The designated safeguarding lead should undertake Prevent awareness training.

In addition to the formal training set out above, their knowledge and skills should be refreshed (this might be via e-bulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, and at least annually, to allow them to understand and keep up with any developments relevant to their role so they:

- understand the assessment process for providing early help and statutory intervention, including local criteria for action and local authority children's social care referral arrangements.
- have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so;
- ensure each member of staff has access to, and understands, the school's or college's child protection policy and procedures, especially new and part time staff;
- are alert to the specific needs of children in need, those with special educational needs and young carers;111
- understand relevant data protection legislation and regulations, especially the Data Protection Act 2018 and the General Data Protection Regulation.
- understand the importance of information sharing, both within the school and college, and with the three safeguarding partners, other agencies, organisations and practitioners.
- are able to keep detailed, accurate, secure written records of concerns and referrals;
- understand and support the school or college with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation;
- are able to understand the unique risks associated with online safety and be confident that they have the relevant knowledge and up to date capability required to keep children safe whilst they are online at school or college;
- can recognise the additional risks that children with SEN and disabilities (SEND) face online, for example, from online bullying, grooming and radicalisation and are confident they have the capability to support SEND children to stay safe online;
- obtain access to resources and attend any relevant or refresher training courses; and
- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school or college may put in place to protect them.

Raise Awareness

The designated safeguarding lead should:

- ensure the school's or college's child protection policies are known, understood and used appropriately;
- ensure the school's or college's child protection policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this;
- ensure the child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school or college in this; and
- link with the safeguarding partner arrangements to make sure staff are aware of any training opportunities and the latest local policies on local safeguarding arrangements.

Child protection file

Where children leave the school or college the designated safeguarding lead should ensure their child protection file is transferred to the new school or college as soon as possible. This should be transferred separately from the main pupil file, ensuring secure transit, and confirmation of receipt should be obtained. Receiving schools and colleges should ensure key staff such as designated safeguarding leads and SENCOs or the named person with oversight for SEN in colleges, are aware as required.

In addition to the child protection file, the designated safeguarding lead should also consider if it would be appropriate to share any information with the new school or college in advance of a child leaving. For example, information that would allow the new school or college to continue supporting victims of abuse and have that support in place for when the child arrives.

Availability

During term time the designated safeguarding lead (or a deputy) should always be available (during school or college hours) for staff in the school or college to discuss any safeguarding concerns. Whilst generally speaking the designated safeguarding lead (or deputy) would be expected to be available in person, it is a matter for individual schools and colleges, working with the designated safeguarding lead, to define what “available” means and whether in exceptional circumstances availability via phone and or Skype or other such media is acceptable.

It is a matter for individual schools and colleges and the designated safeguarding lead to arrange adequate and appropriate cover arrangements for any out of hours/out of term activities.

Appendix 2:

CPOMS

Using CPOMS for the first time:

When we set up your CPOMS system, we are provided with a list of all staff names and email addresses which is the information we need to create each user log in.

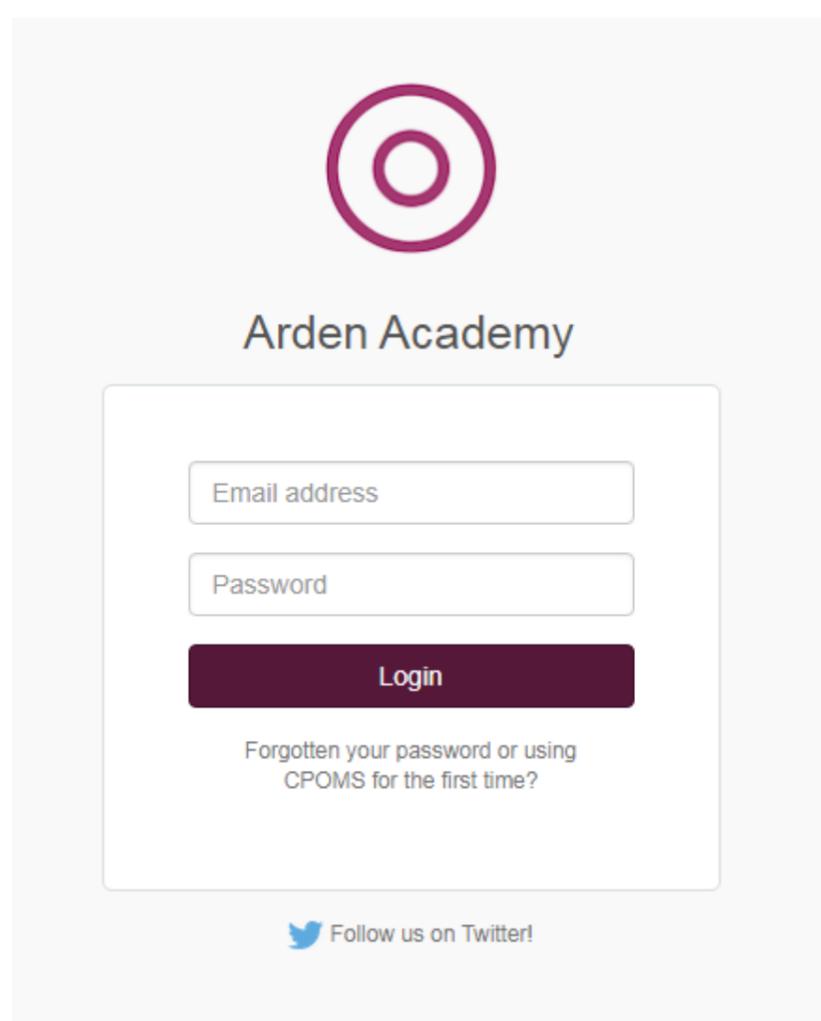
The system works on a user-group basis, which allows us to ensure that each user has the correct amount of access to certain information.

Firstly every user needs to set their own password.

In order to ensure that all users change their passwords to something that is personal and secure we do not provide you with a password to begin with.

To create your first password please visit Arden CPOMS website <https://ardensolihull.cpoms.net/> .

Click on the 'Forgotten your password or using CPOMS for the first time?' option (beneath the 'Login' button).

The image shows a login form for Arden Academy. At the top is a purple circular logo with three concentric circles. Below the logo is the text "Arden Academy". The form itself is a white box with a thin border. It contains two input fields: "Email address" and "Password". Below these fields is a dark purple button labeled "Login". Underneath the button is a link that says "Forgotten your password or using CPOMS for the first time?". At the bottom of the form is a small blue Twitter icon followed by the text "Follow us on Twitter!".

Next, input the email address which was supplied to us and click 'Reset Password'. This will then send you a unique hyperlink to your email address which will enable you to create your first CPOMS password.

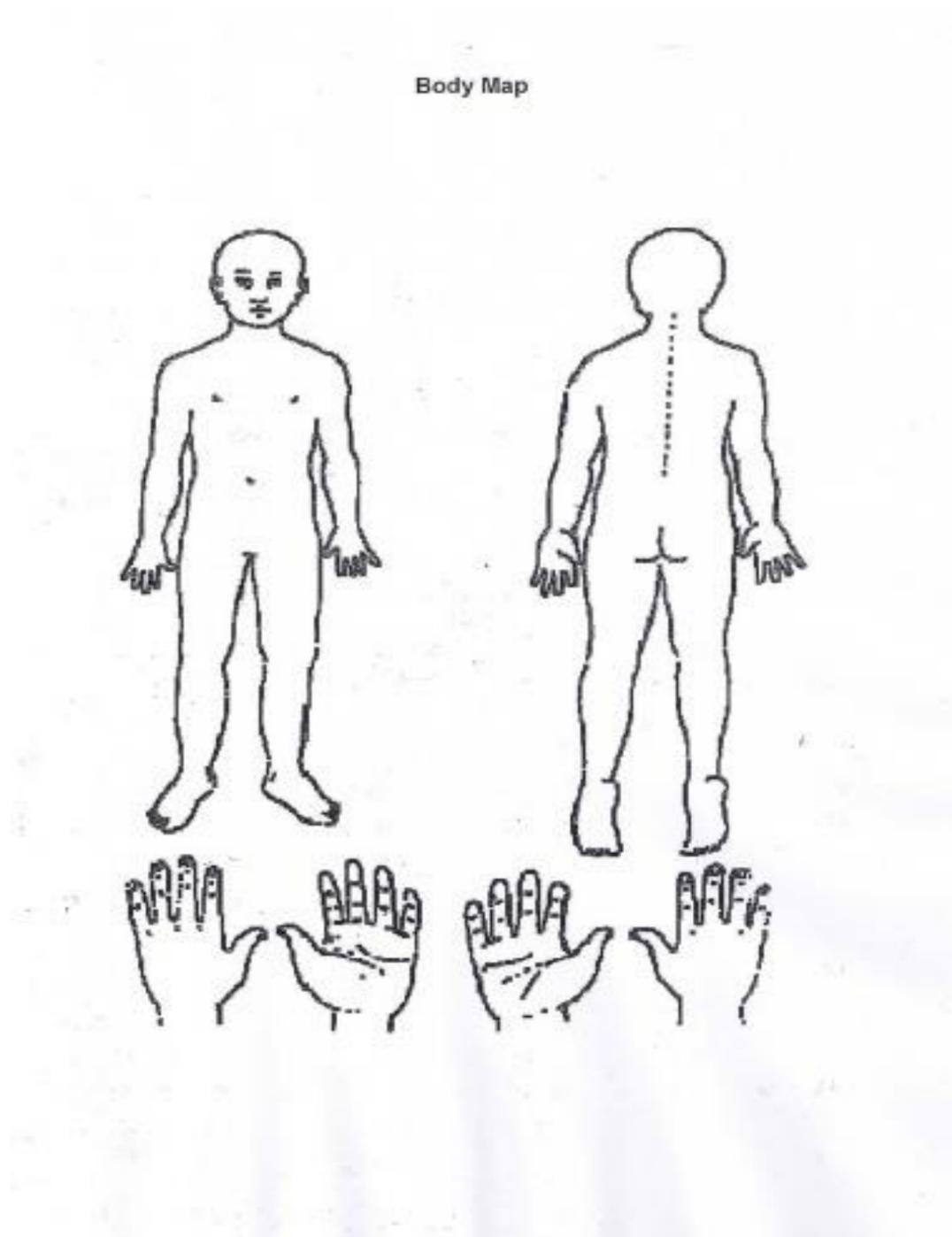
N.B. Please note that this is the email address that we have been provided upon setting up the system. If you are told that 'the email address you entered does not exist' then it is likely that we have a different address – if this is the case then you can contact the Meritec CPOMS helpdesk at:- servicepoint@meritec.co.uk, or telephone 0845 345 1155 where one of the team will be able to help.

Appendix 3: Body Map

Name of child:.....

Date of use of body map:.....

Name of staff member:.....



ARDEN ACADEMY

Child Protection File front page



Pupil Name

DOB

LAC Child Protection Plan Other

Siblings

Name	DOB	School

Other agency contacts

Name	Agency	Contact details

Chronology of Key Events (brief detail)

Event and action taken	Outcome	Contact with	Recorded by

Appendix 5: Thresholds data sheet

Education Provision Name: _____

Numbers of pupils vulnerable due to child protection concerns mapped against Solihull multiagency thresholds criteria

LOCAL AUTHORITY WITH RESPONSIBILITY	SOLIHULL THRESHOLD LEVEL					
	Level 1 Threshold Universal Needs	Level 2 Threshold Additional Needs	Level 3 Threshold Complex Needs	Level 4 Threshold Acute Specialist Needs (Child Protection)		
				CIN	CP	LAC
Solihull						
Birmingham						
Coventry						
Warwickshire						
Other Local Authorities (please state)						
Total						

From list above, please provide further detail around pupils vulnerable due to Child Protection concerns subject to early help and support using the early help engagement tool.

<u>At Level 2 Threshold</u>		<u>At Level 3 Threshold</u>	
– How many pupils are currently undergoing early help engagement?		– How many pupils are currently undergoing early help engagement?	
– How many pupils are currently subject to targeted early help support using the early help engagement tool?		– How many pupils are currently subject to targeted early help support using the early help engagement tool?	
– Who leads this work? (school or other agency)		– Who leads this work? (school or other agency)	

Appendix 6: Child protection file transfer record

Pupil File Record

Pupil Name & Form	
Date of Leaving Arden	
Destination School	
Pupil File Checked by DSW	Y / N
Child Protection File Checked by DSW	Y / N / NA
SEN File Checked by DSW	Y / N / NA
Date Files Sent	
Name/Address of Recipient	
Acknowledgment of Receipt Confirmed	Y / N Date _____
Name and Signature/Acknowledgement of recipient (attach postage receipt, confirmation emails etc)	

Appendix 7: An audit tool for Designated Safeguarding Leads for child protection / SLT / Governors for auditing in education provision recording

Date of Audit:

Completed by:

Section 1: Are case records up to date

From a sample of (insert number) of child protection files

Child ID (eg child 1, or child A)	Date of last of recording	Comments

Section 2: Is the child's voice /experience included in the record

Area	Comments
The impact on the child is clearly recorded?	
The child's views are clearly recorded in their own words?	

Section 3: Facts and professional judgements are distinguished in the record

Area	Comments
Does the author differentiate clearly between facts and professional judgements?	
Would someone else reading the file understand the reasons/evidence underpinning professional judgements	
Is it clear what/who the sources of information are?	

Section 4: File Structure

Area	Comment
Are all entries dated and signed?	
Does the file contain a chronology of events?	
Is information repeated in more than one place in the file?	
Where information is repeated is there a clear reason for this?	
Are entries/previous files cross referenced	

Actions / Follow up

Appendix 8: Guidance for preventing radicalisation

Preventing radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. 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.

Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. This also includes calls for the death of members of the British armed forces, whether in this country or overseas.

The Prevent Duty and Schools.

From 1 September 2016, all schools are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, in the exercise of their functions to have “due regard to the need to prevent people from being drawn into terrorism”.

Risk Assessment

Schools and childcare providers are expected to assess the risk of children being drawn into terrorism, including support for extremist ideas. 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.

The general risks affecting children and young people may vary from area to area, and according to their age. Schools and childcare providers are in an important position to identify risks within a given local context. It is important that schools and childcare providers understand these risks so that they can respond in an appropriate and proportionate way. At the same time, schools and childcare providers should be aware of the increased risk of online radicalisation, as terrorist organisations seek to radicalise young people through the use of social media and the internet.

There is no single way of identifying an individual who is likely to be susceptible to a terrorist ideology. As with managing other safeguarding risks, staff should be alert to changes in children’s behaviour that could indicate that they may be in need of help or protection. Children at risk of radicalisation may display different signs or seek to hide their views. School staff should use their professional judgement identifying children who might be at risk of radicalisation and act proportionately.

Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.

Indicators of vulnerability include:

- Identity Crisis – the pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
- Personal Crisis – the pupil may be experiencing family tensions; chaotic family background; a sense of isolation; and low self-esteem; bereavement; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; demonstrating controlling behaviour; they may be searching for answers to questions about identity, faith and belonging;
- Personal Circumstances – migration; local community tensions; and events affecting the pupil’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;

- Unmet Aspirations – the pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;
- Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
- Expressing hatred to others or a group;
- Lack of trust in authorities;
- Inappropriate on line behaviour (inappropriate internet contact and content);
- Special Educational Need – pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others;
- Not in education, employment or training, unemployed,

However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.

More counter-terrorism critical risk factors could include:

- Family/associates linked to extremism;
- Attend vulnerable locations permissive to extremist ideology;
- Express support for extremist ideology of extremist groups;
- Being in contact with extremist recruiters;
- Attended extremist protests or gatherings;
- Has expressed support for ISIS/IS
- Accessing violent extremist websites, especially those with a social networking element
- Possessing or accessing violent extremist literature;
- Using extremist narratives and a global ideology to explain personal disadvantage;
- Justifying the use of violence to solve societal issues;
- Joining or seeking to join extremist organisations;
- Significant changes to appearance and / or behaviour;
- Expressing desire to travel to theatres of war/conflict zones:
 - Syria
 - Yemen
 - Parts of Iraq, Afghanistan and Pakistan
 - Potentially Somalia/Libya
- Associate to travellers to war/conflict zones, via school/friend/family networks
- Contact with others in vulnerable countries

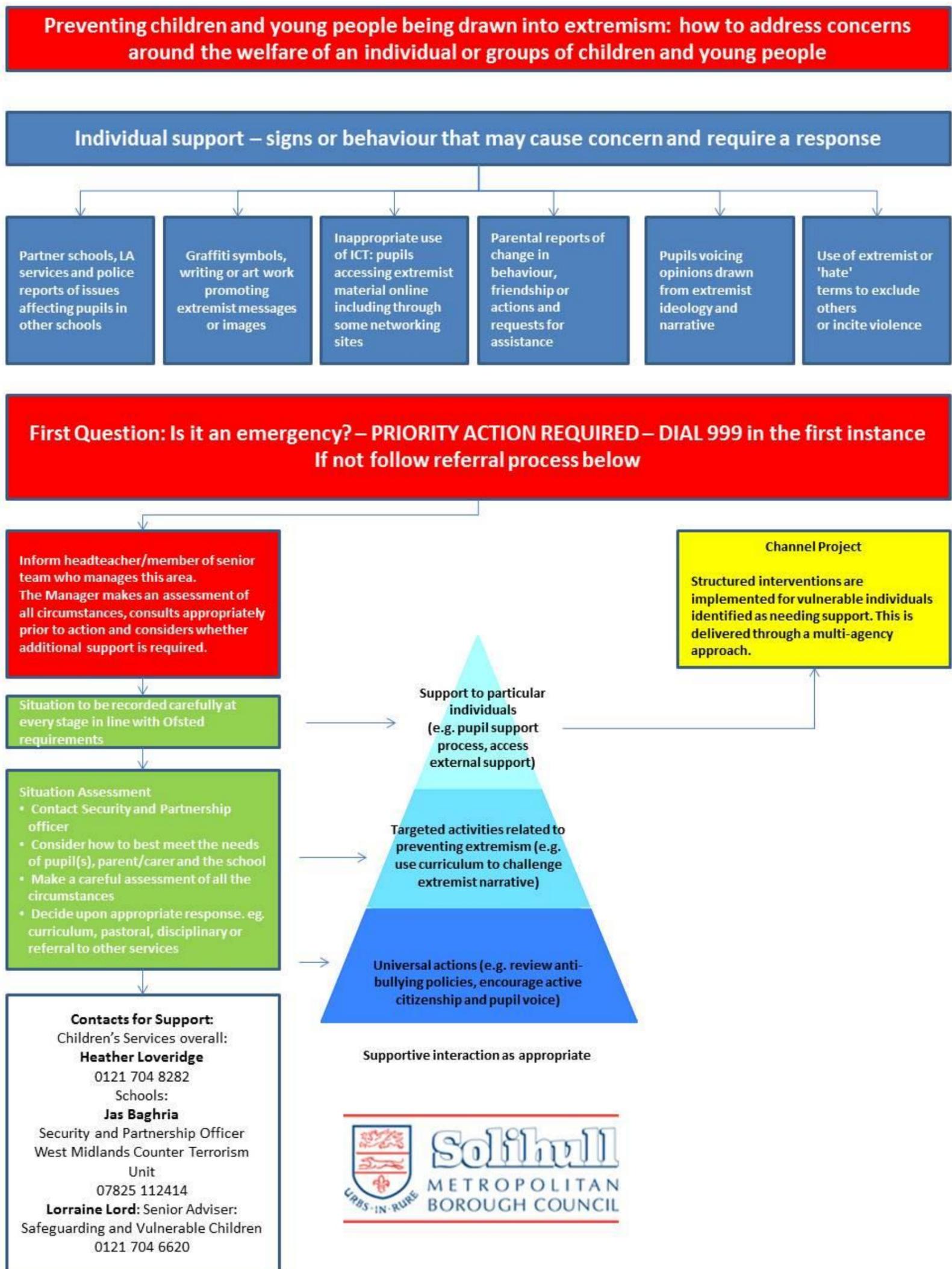
Training for school staff

The statutory guidance refers to the importance of Prevent awareness training to equip staff to identify children at risk of being drawn into terrorism and to challenge extremism ideas. The Home Office has developed a core training product for this purpose – Workshop to Raise Awareness of Prevent (WRAP). There are a number of professionals – particularly in safeguarding roles – working within Local Authorities, Police, Health and Higher and Further Education who are accredited WRAP trained facilitators.

Individual schools and childcare providers are best placed to assess their training needs in the light of their assessment of the risk. As a minimum, however, schools should ensure that the Designated Safeguarding Lead undertakes Prevent awareness training and is able to provide advice and support to other members of staff on protecting children from the risk of radicalisation. We recognise that it can be more difficult for many childcare providers, such as child-minders, to attend training and we are considering other ways in which they can increase their awareness and be able to demonstrate that. This advice is one way of raising childcare providers' awareness

- Staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. They should refer as outlined above.
- In order for schools to fulfil the Prevent duty, it is essential that staff are able to identify children who may be vulnerable to radicalisation.
- School staff should be trained in Working to Raise Awareness of Prevent (WRAP 3), a Home Office workshop.
- School Prevent Lead should understand when it is appropriate to make a referral to the CTU.
- Channel is a programme which focusses 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. The Channel online training can be accessed at http://course.ncalt.com/Channel_General_Awareness
- 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 harms (eg: drugs, gangs, neglect), whether these come from within their family or are the product of outside influences.
- Schools need to ensure that children are safe from terrorist and extremist material when accessing the internet in schools. Schools should ensure that suitable filtering is in place. Children should also be taught to stay safe on line, both in school and outside. (See e-safety section of this document). General advice and resources for schools on internet safety are available on the UK Safer Internet Centre website. Every teacher and other school staff need to be aware of the risks posed by online activity of extremist and terrorist groups.

Appendix 9: Prevent referral chart



Appendix 10: Radicalisation and Extremism Risk Assessment

Radicalisation and Extremism Risk Assessment

Education Provider

	Yes/No	Evidence
Does the education provider’s child protection policy include preventing radicalisation in line with the Prevent Duty?		
Does the education provider work with outside agencies on radicalisation and extremism e.g. Channel?		
Have staff received appropriate training?		
Does the education provision have a trained Prevent lead?		
Do staff know who to discuss concerns with? (Single point of contact - SPOC)		
Is suitable filtering of the internet in place?		
Do children know who to talk to about their concerns?		
Are there opportunities for pupils to learn about radicalisation and extremism?		
Have any cases been reported? If so, how many and what has been the outcome/learning/action?		
Are individual pupils risk assessed?		
What factors make the education provision community potentially vulnerable to being radicalised? (e.g. EDL local base, extreme religious views promoted locally, tensions between local communities, promotion of radical websites by some pupils/parents)		
Comment on the education provision’s community, locality and relevant history		
Risk evaluation	Low Medium High	Way Forward

Date completed..... Signed.....

Appendix 11: Local advice and guidance on dealing with concerns around pupils who are or could be at risk of child sexual exploitation

What is CSE?

Child Sexual Exploitation (CSE)

What is CSE?

The West Midlands Metropolitan Area has adopted the following definition of child sexual exploitation, taken from statutory guidance:

*Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. **In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.** Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.*

Indicators of risk

Staff in schools should be vigilant to the signs that a child or young person may be at risk of child sexual exploitation (CSE). Young people with the following characteristics are likely to be at higher risk of sexual exploitation:

- Going missing for periods of time or regularly returning home late
- Regularly missing school or not taking part in education
- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Having older boyfriends or girlfriends
- Suffering from sexually transmitted infections
- Uncharacteristic and significant mood swings or changes in emotional wellbeing
- Drug and alcohol misuse
- Displaying inappropriate sexualised behaviour
- Use of mobile phone and internet that causes concern
- Involved with or linked to gang activity.

Taken from Solihull Local Safeguarding Children Board Induction Pack: CSE, Human Trafficking and Runaways

LSCB procedures for CSE

Child sexual exploitation is abuse and Solihull's safeguarding procedures should be followed:

http://solihullscb.proceduresonline.com/chapters/p_safeg_sex_exploit.html

http://solihullscb.proceduresonline.com/pdfs/cse_protocol.pdf

Identifying children / young people at risk and what to do if you are concerned:

- If there are serious concerns that a child or young person is at immediate risk, the police should be called and a referral to children's social work services (Solihull's multi-agency safeguarding hub, or MASH) should be made **without delay**.
- If there are concerns that a child or young person is at risk of significant harm, follow procedures to refer to MASH.
- Otherwise, complete the CSE Screening Tool and make a professional judgement as to the child/young person's level of risk.

Screening tool

A regional screening tool has been developed to enable the identification of children and young people at risk of sexual exploitation. Where the school or education provider has identified that there are or may be potential concerns about a child or young person under the age of 18, the screening tool should be completed to determine any level of risk. The screening tool and guidance on how to complete it, using professional judgement, is available on the LSCB website:

<http://www.solihull.gov.uk/Portals/0/SocialServicesAndHealth/CSEScreeningtoolkit.pdf>

Support in completing the screening tool can be accessed from Solihull's dedicated CSE team within Early Help: 0121 709 7000. Following completion, the screening tool should be submitted to the CSE Officer, cse@solihull.gcsx.gov.uk.

It should then determine the response.

Important: actions following completion of the screening tool

- Screening tool Level 2 or 3 outcome: Follow procedures to refer to MASH
- Screening tool Level 1 outcome: Advise CSE Team so the child/young person's details can be logged and risk level tracked. Address risks at an Early Help level:
 - Devise intervention to address specific risks highlighted in the screening tool
 - Carry out the planned work advising colleagues and CSE team if any changes are needed to the original plan
 - Regularly re-screen the child/young person's risks, escalating to MASH if the level of risk increases.
- Screening outcome: no risks identified. No action needed

Children's Social Work Services:

MASH: 0121 788 4333 or mash@solihull.gcsx.gov.uk

Emergency Duty Team (EDT) (out of hours): 0121 605 6060

Police:

Central Referral Unit: 03451135000

Emergency: 999

Appendix 12: Local advice and guidance on female genital mutilation, including the new duty to refer

FGM is illegal in the UK. For the purpose of the criminal law in England, Wales and Northern Ireland, FGM is mutilation of the labia majora, labia minora or clitoris. The World Health Organisation (WHO) defines Female Genital Mutilation (FGM) as: “all procedures which involve partial or total removal of the external female genitalia or injury to female genital organs whether for cultural or other non-therapeutic reasons” (WHO, 1996).

FGM is prevalent in 28 African countries as well as in parts of the Middle East and Asia. It is estimated that approximately 103,000 women aged 15-49 and approximately 24,000 women aged 50 and over who have migrated to England and Wales are living with the consequences of FGM. In addition, approximately 10,000 girls aged under 15 who have migrated to England and Wales are likely to have undergone FGM. FGM is practised by families for a variety of complex reasons but often in the belief that it is beneficial for the girl or woman.

FGM constitutes a form of child abuse and violence against women and girls, and has severe short term and long-term physical and psychological consequences.

The age at which girls undergo FGM varies enormously according to the community. The procedure may be carried out when the girl is new-born, during childhood or adolescence, just before marriage or during the first pregnancy. However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at a higher risk.

Taken from [Multi-Agency Practice Guidelines: Female Genital Mutilation \(Home Office/Department for Education, 2014\)](https://www.gov.uk/government/publications/female-genital-mutilation-guidelines)
<https://www.gov.uk/government/publications/female-genital-mutilation-guidelines>

Potential School Action

All staff should be aware of risk factors, warning signs and indicators of FGM as part of their duties around safeguarding. As of the 31st October, 2015, a mandatory reporting duty states that teachers in England and Wales must report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils or students, but the same definition of what is meant by “to discover that an act of FGM appears to have been carried out” is used for all professionals to whom this mandatory reporting duty applies. Information on when and how to make a report can be found at: Mandatory reporting of female genital mutilation procedural information.

Where Female Genital Mutilation is **known** either through **disclosure** or the **observation** of physical signs (through normal day to day practice e.g. nappy changing, personal care etc., school staff should:

- follow their school’s child protection policy and report any case of known Female Genital Mutilation to the Designated Safeguarding Lead immediately, ensuring a written record of the concern or disclosure
- the teacher should immediately make a report to the police (orally or in writing – recommended route: call 101) providing the following information:

1. explain that you are making a report under the FGM mandatory reporting duty

2. your details:

- name
- contact details (work telephone number and e-mail address) and times when you will be available to be called back
- role
- place of work

3. details of your organisation's designated safeguarding lead:

- Name – Mark Hooper
- contact details (work telephone number and e-mail address) – mhooper@arden.solihull.sch.uk, 01564-773348
- place of work – Arden Academy

4. the girl's details:

- name
- age/date of birth
- address

- the report should be logged by the Designated Safeguarding Lead on the school child protection file or record, ensuring police notification is logged including the case reference number.

Where FGM is **suspected** or recognised as a **risk**, school staff should:

- follow their school's child protection policy and report any case of known Female Genital Mutilation to the Designated Safeguarding Lead immediately, ensuring a written record of the concern or disclosure
- refer the case to the Solihull Multi-Agency Safeguarding Hub (MASH). The referral should be of good quality clearly stating all known facts. All Female Genital Mutilation cases entering MASH go straight to a strategy discussion, police are informed as part of the multi-agency discussion who update their information and investigate as appropriate.

The [Solihull LSCB](#) webpages provide comprehensive guidance and advice for frontline professionals and their managers, individual's in Solihull's local communities and community groups such as faith and leisure groups on:

- Identifying when a child may be at risk of being subjected to FGM and responding appropriately to protect the child;
- Identifying when a child has been subjected to FGM and responding appropriately to support the child; and
- Measures which can be implemented to prevent and ultimately eliminate the practice of FGM.

http://solihullscb.proceduresonline.com/chapters/p_fem_gen.html#intro

Appendix 13:

Peer on Peer Abuse

Peer on peer abuse - children can abuse other children. This is generally referred to as peer on peer abuse and can take many forms. This can include (but is not limited to) bullying (including cyberbullying); sexual violence and sexual harassment; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexting and initiating/hazing type violence and rituals.

Sexual violence and sexual harassment between children in schools and colleges

Context

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment. Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physical and verbal) and are never acceptable. It is important that all victims are taken seriously and offered appropriate support. Staff should be aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk.

Staff should be aware of the importance of:

- making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up;
- not tolerating or dismissing sexual violence or sexual harassment as “banter”, “part of growing up”, “just having a laugh” or “boys being boys”; and
- challenging behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them.

What is Sexual violence and sexual harassment?

Sexual violence

It is important that school and college staff are aware of sexual violence and the fact children can, and sometimes do, abuse their peers in this way. When referring to sexual violence we are referring to sexual offences under the Sexual Offences Act 2003¹⁰⁵ as described below:

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

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

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

What is consent?

Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.¹⁰⁷

Sexual harassment

When referring to sexual harassment we mean 'unwanted conduct of a sexual nature' that can occur online and offline. When we reference sexual harassment, we do so in the context of child on child sexual harassment. Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
- sexual "jokes" or taunting;
- physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (schools and colleges should be considering when any of this crosses a line into sexual violence - it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature; and
- online sexual harassment. This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include:
 - non-consensual sharing of sexual images and videos;
 - sexualised online bullying;
 - unwanted sexual comments and messages, including, on social media; and
 - sexual exploitation; coercion and threats

The response to a report of sexual violence or sexual harassment

The initial response to a report from a child is important. It is essential that all victims are reassured that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report. If staff have a concern about a child or a child makes a report to them, they should follow the referral process as set out from paragraph 22 in Part one of this guidance. As is always the case, if staff are in any doubt as to what to do they should speak to the designated safeguarding lead (or a deputy).

Potential school actions

Following the notification or disclosure of sexualised inappropriate behaviour, the following actions should be considered:

- Inappropriate sexual behaviour in children and young people should be dealt with guided by the same policy and guidelines as other inappropriate behaviour in school.
- School staff will also need to follow the procedures outlined in their Child Protection/Safeguarding/Behaviour/Anti-bullying Policies and discuss concerns with the designated member of staff for child protection.

- If the school becomes aware that a child is displaying inappropriate sexualised behaviour, an assessment should be made as to whether or not the behaviour is abusive. This should involve information gathering from relevant adults in school in order to establish where the behaviour sits on a continuum from that which could be expected of a child/young person at that age/stage to that which may indicate has been abused/is abusing others.
- If the behaviour is inappropriate but not thought to be abusive, the school may wish to speak to the parent or carer to devise a consistent strategy to manage the behaviours, eliminate any medical reasons underpinning the behaviours, and consider a possible referral to other agencies (e.g. CAHMS, Educational Psychologist, SEMH team).
- Where a pupil's behaviour results in a serious breach of the Behaviour policy, or the pupil is persistently breaching the policy by repeating this behaviour, the School may decide to exclude the pupil, either on a fixed term or permanent basis. A permanent exclusion should only take place where behaviour is sufficiently serious and allowing the pupil to remain in school would seriously harm the education or welfare of the pupil or others in the school.

Curriculum (Universal provision through PSHE)

The school's PSHE curriculum should include:

- High quality Relationships and Sex Education for all pupils appropriate to their age, needs and maturity. The following topics will be of relevance when providing a curriculum that empowers pupils to recognise and manage risk and to keep themselves safe: Naming sexual body parts; public/private places; acts and body parts; personal space; consent; laws around sexual activity; how and when to access help and support; pornography and the sharing of sexual imagery; protective behaviours.
- Anti-bullying learning that, where appropriate, includes learning about sexual bullying.

Resources and additional support

LSCB procedures for children who abuse others may be of relevance in some circumstances:

http://solihullscb.proceduresonline.com/chapters/p_child_who_abuse.html

A MASH referral may be necessary in order to safeguard the child/young person.

MASH: (0121) 788 4333

Out of Hours (EDT) (0121) 605 6060

Sexually Abusive or Healthy Behaviour? Guidance to distinguish between healthy and abusive sexual behaviours in children and young people, Solihull LSCB, 2006

http://www.solihull.gov.uk/Portals/0/SocialServicesAndHealth/Sexually_abusive_or_healthy_behaviour.pdf

The Brook Sexual Behaviours Traffic Light Tool supports professionals working with children and young people by helping them to identify and respond appropriately to sexual behaviours.

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

Sexual Development in Primary Aged Children: Developing a Whole School Approach, Royal Devon and Exeter Foundation Trust and Devon County Council. The guidance in this booklet is designed to support

schools in dealing with children's emotional and sexual development. Parts are also of relevance to secondary and special schools. http://www.devon.gov.uk/sexual_deg_for_websitebook.pdf

Child's play? Preventing abuse among children and young people. This booklet provides information to aid the recognition of the warning signs of harmful sexual behaviour in children and aims to build confidence to do something about it. It would be a useful resource for staff and parents.

http://www.stopitnow.org.uk/files/stop_booklets_childs_play_preventing_abuse_among_children_and_young_people01_14.pdf

Managing Sexualised Behaviour Guidelines, Falkirk, Clackmannanshire and Stirling Councils, May '13 contains useful and practical strategies when working with pupils who are exhibiting inappropriate sexual behaviours, particularly those on the autistic spectrum.

http://www.autismtoolbox.co.uk/files/image/Wellbeing/Managing_Sexualised_Behaviour_Guidelines_final.pdf

Sexual bullying: a guide for school staff and other professionals that support children and young people with SEN and disabilities, Anti-bullying Alliance, 2014. The Anti-Bullying Alliance has developed this guide on prevention and response to sexual bullying to assist teachers and other professionals as they seek to educate and support children with special educational needs and disabilities.

<http://www.anti-bullyingalliance.org.uk/media/12258/Sexual-bullying-and-SEND-guidance-for-teachers-and-other-professionals-Sept14.pdf>

Life Support Productions produce resources to support children with learning disabilities to access relationships and sex education. <http://www.lifesupportproductions.co.uk/order.php>

This information sheet gives some suggestions about understanding and responding to inappropriate sexual behaviour. It is specifically about the behaviour of men and boys with learning disabilities.

<http://www.challengingbehaviour.org.uk/learning-disability-files/8---Difficult-Sexual-Behaviour-2013.pdf>

Talking Together.. About Growing Up. A workbook for parents of children with learning disabilities, £12.99 and Talking together about sex and relationships: A practical resource for schools and parents working with young people with learning disabilities, £14.99 (p&p £4.99)

Further information on the books from fpa on 0845 1228 600 or online at Web: www.fpa.org.uk

Growing and Learning is a set of three books and picture cards written by Jane Keeling a nurse, mum of an autistic child, and an educator to support parents and carers. The three packs cover subjects from puberty to periods and wet dreams and are designed to be accessible to even youngsters with profound communication difficulties. www.growingandlearning.co.uk

Appendix 14: Local advice and guidance on Child Missing from Education (CME)

A child going missing from education is a potential indicator of abuse or neglect. Staff in education provision should follow the provision's procedures for dealing with children that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of their going missing in the future.

All children, regardless of their circumstances, are entitled to a full time education which is suitable to their age, ability, aptitude and any special educational needs they may have. Central to raising standards in education and ensuring all pupils can fulfil their potential, pupils need to attend regularly. Missing out on lessons leaves children vulnerable to falling behind. Children with poor attendance tend to achieve less in both primary and secondary school.

Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing in their area.

All education providers should:

- Promote good attendance and reduce absence, including persistent absence
- Ensure every pupil has access to full-time education to which they are entitled
- Act early to address patterns of absence
- Ensure parents perform their legal duty by ensuring their children of compulsory school age who are registered at school attend regularly
- Ensure all pupils are punctual to school and lessons
- Ensure they liaise with the named social worker where Children's Social Work are engaged with the child or family.

School Requirements

The **law** requires schools to have an admission register and an attendance register. All pupils must be placed on both registers. Schools should use the national absence and attendance codes to record and monitor attendance and absence in a consistent way which complies with the regulations. They are also used for collection statistics through the School Census System. The codes are detailed in School Attendance (DfE, October 2014 - https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/361008/Advice_on_school_attendance_sept_2014.pdf). Please note the requirements around the use of the L and U code (page 8), and requirements for recording attendance of Gypsy, Roma, Traveller pupils (page 11).

Schools should promote good school attendance and put in place appropriate safeguarding policies, procedures and responses for children who go missing from education, particularly on repeat occasions. The local authority model attendance policy and attendance toolkit are useful resources to support this work.

<https://extranet.solgrid.org.uk/schoolissues/behaviourattendance/Behaviour%20and%20Attendance%20Toolkit/Forms/AllItems.aspx>

It is essential that staff are alert to signs to look out for, and the individual triggers to be aware of, when considering the risks of potential safeguarding concerns, such as travelling to conflict zones, FGM, CSE, forced marriage.