



# Safeguarding Policy, Procedure and Guidance

August 2018

To be reviewed by July 2019

**Date ratified by Keith Norman (Vice Chair of Local Governing Body): 1<sup>st</sup> August 2018**



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## Coppice Spring School Safeguarding Policy

*This policy should be read in conjunction with the school's Child Protection Policy and Staff Handbook.*

### **Policy Statement**

Safeguarding determines the actions that we take to keep children safe and protect them from harm in all aspects of their school life. As a school, we are committed to safeguarding and promoting the welfare of all of our students.

The actions that we take to prevent harm; to promote wellbeing; to create safe environments; to educate on rights, respect and responsibilities; to respond to specific issues and vulnerabilities all form part of the safeguarding responsibilities of the school. As such, this overarching policy will link to other policies which will provide more information and greater detail.

### **Aims**

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

### **Principles and Values**

Safeguarding is everyone's responsibility. As such, it does not rest with the Designated Safeguarding Lead (DSL) and their deputies to take a lead responsibility in all of the areas covered within this policy. Following any concerns raised by staff, the DSL or DSL deputies will assess the information and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm, or risk of significant harm has been reached, or they are not clear if the threshold is met, then the DSL will contact Children's Services. If the DSL or DSL deputies are not available or there are immediate concerns, the staff member will refer directly to children's social care.

Health and Safety is a specialist area of safeguarding and the Site Manager, Paul Michalski, leads on this.

Safeguarding processes are intended to put in place measures that minimise harm to children. There will be situations where gaps or deficiencies in the policies and processes we have in

place will be highlighted. In these situations a review will be carried out in order to identify learning and inform the policy, practice and culture of the school.

All students in our school are able to talk to any member of staff to share concerns or talk about situations which are giving them worries. The staff will listen to the student, take their worries seriously and share the information with the DSL and DSL deputies.

In addition, we provide students with information about who they can talk to outside of school both within the community and with local or national organisations who can provide support or help.

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

## Areas of Safeguarding

### Definitions

Within this document:

**'Safeguarding'** is defined in the Children Act 2004 as 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. Our safeguarding practice applies to every child.

The term **staff** applies to all those working for or on behalf of the school, full time or part time, in either a paid or voluntary capacity. This also includes parents and Governors.

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

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

### Key personnel

The designated safeguarding lead for the school is:

Kirstie Harvey (Family Support Worker)

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The deputy safeguarding leads are:

Matthew McLoughlin-Parker (Headteacher)

David O'Neill (Acting Deputy Headteacher)

Rosanna Parker (Deputy Headteacher KS4)

**There is a nominated governor, Keith Norman, who will receive reports of allegations against the Headteacher and act on the behalf of the governing body.**

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## **Part 1 – High risk and emerging safeguarding issues**

### **Preventing Radicalisation**

Children are vulnerable to extremist ideology and radicalisation. Similar to protecting children from other forms of abuse and harm, protecting children from this risk is part of the school's safeguarding approach.

Extremism is the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

There is no single way of identifying whether a child is likely to be susceptible to an extremist ideology. Background factors combined with specific influences such as family and friends may contribute to a child's vulnerability. Similarly, radicalisation can occur through many different methods (such as social media) and settings (such as the internet).

However, it is possible to protect vulnerable people from extremist ideology and intervene to prevent those at risk of radicalisation being radicalised. As with other safeguarding risks, school staff are alert to changes in children's behaviour which could indicate that they may be in need of help or protection. School staff use their judgment to identify children who might be at risk of radicalisation and act proportionately which may include the DSL or deputies making a referral to the Channel programme.

### **The Prevent duty**

All schools are subject to a duty under section 26 of the Counter Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions to have "due regard" to the need to prevent people from being drawn into terrorism. This duty is known as the Prevent duty.

The Prevent duty is seen as part of the schools' wider safeguarding obligations.

### **Channel**

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

The school's DSL and deputies are aware of local procedures for making referral to Chanel. As a Channel partner, the school may be asked to attend a Chanel panel to discuss the individual referred to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support required.

## **Gender based violence / Violence against women and girls**

<https://www.gov.uk/government/policies/violence-against-women-and-girls>

The government have a strategy looking at specific issues that women and girls face. Within the context of this safeguarding policy the following sections are how we respond to violence against girls. Female genital mutilation, forced marriage, honour based violence and teenage relationship abuse all fall under this strategy.

### **Female Genital Mutilation (FGM)**

[www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information](http://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information)

<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

[http://4lscb.proceduresonline.com/chapters/p\\_fem\\_gen\\_mut.html](http://4lscb.proceduresonline.com/chapters/p_fem_gen_mut.html)

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.

#### **FGM mandatory reporting duty for teachers**

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon teachers along with regulated health and social care professionals in England and Wales, to report to the police where they discover (either through student disclosure by the victim or visual evidence- N.B – at no time will staff examine students to confirm this) that FGM appears to have been carried out on a girl under 18. It will be rare for teachers to see visual evidence, 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:  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/573782/FGM\\_Mandatory\\_Reporting\\_-\\_procedural\\_information\\_nov16\\_FINAL.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/573782/FGM_Mandatory_Reporting_-_procedural_information_nov16_FINAL.pdf)

Teachers will personally report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has good reason not to, they should still consider and discuss any such case with the DSL or deputies as appropriate. The duty does not apply in relation to at risk of suspected cases (i.e. where the teacher does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is over 18.

**At no time will staff examine students to confirm this.**

## **Forced Marriage**

Forcing a person into marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some communities use religion and culture as a way to coerce a person into marriage. School can play an important role in safeguarding children from forced marriage.

The forced Marriage Unit has published statutory guidance and multi-agency guidelines for schools. School staff can contact the Forced Marriage Unit if they need advice or information: 02070080151.

### ***Characteristics that may indicate forced marriage***

While individual cases of forced marriage, and attempted forced marriage, are often very particular, they are likely to share a number of common and important characteristics, including:

- an extended absence from school/college, including truancy;
- a drop in performance or sudden signs of low motivation;
- excessive parental restriction and control of movements;
- a history of siblings leaving education to marry early;
- poor performance, parental control of income and students being allowed only limited career choices;
- evidence of self-harm, treatment for depression, attempted suicide, social isolation, eating disorders or substance abuse; and/or
- evidence of family disputes/conflict, domestic violence/abuse or running away from home.

On their own, these characteristics may not indicate forced marriage. However, it is important to be satisfied that where these behaviours occur, they are not linked to forced marriage. It is also important to avoid making assumptions about an individual student's circumstances or act on the basis of stereotyping. For example, an extended holiday may be taken for entirely legitimate reasons and may not necessarily represent a pretext for forced marriage.

## **So-called “Honour Based” Violence**

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

If school staff have a concern regarding a child that might be at risk of HBV or who has suffered from HBV, they should speak to the DSL or deputies. As appropriate, they will activate local safeguarding procedures, using existing national and local protocols for multiagency liaison with police and children services. Where FGM has taken place, since 31<sup>st</sup> October 2015 there has been a mandatory reporting duty placed on teachers.

## **Teenage Relationship Abuse**

<https://www.gov.uk/government/publications/this-is-abuse-summary-report>

<http://www.hampshire.police.uk/internet/advice-and-information/safe4me/healthy-relationships>

<http://www.hampshire.police.uk/internet/advice-and-information/safe4me/healthy-relationships>

<https://www.gov.uk/government/publications/statutory-guidance-framework-controlling-or-coercive-behaviour-in-an-intimate-or-family-relationship>

Research has shown that teenagers didn't understand what constituted abusive behaviours such as controlling behaviours, which could escalate to physical abuse, e.g. checking someone's phone, telling them what to wear, who they can/can't see or speak to and that this abuse was prevalent within teen relationships. Further research showed that teenagers didn't understand what consent meant within their relationships. They often held the common misconception that rape could only be committed by a stranger down a dark alley and didn't understand that it could happen within their own relationships.

This led to these abusive behaviours feeling 'normal' and therefore left unchallenged as they were not recognised as being abusive.

In response to this the school will provide education to prevent teenagers from becoming victims and perpetrators of abusive relationships by encouraging them to rethink their views of violence, abuse and controlling behaviours, and understand what consent means within their relationships.

## **The Toxic Trio**

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

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

## **Domestic Abuse**

The cross-government definition of domestic violence and abuse is:

Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those ages 16 or over who are, or have been, intimate partners of family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- Psychological

- Physical
- Sexual
- Financial
- Emotional

Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

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

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/domestic-abuse/signs-symptoms-effects/>

<https://www.refuge.org.uk/our-work/forms-of-violence-and-abuse/domestic-violence/>

<http://www.safelives.org.uk/knowledge-hub/spotlights/spotlight-3-young-people-and-domestic-abuse>

## **Homelessness**

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The DSL and deputies are aware of contact details and referral routes in to the Local housing Authority to raise/progress concerns at the earliest opportunity. Indicators that a family may be at risk of homelessness include: household debt, rent arrears, domestic abuse and anti-social behaviour, as well as the family being asked to leave the property. Whilst referrals and or discussion with the Local Authority should be progressed as appropriate, this does not replace a referral to Children Services where a child has been harmed or is at risk of harm.

The Homelessness Reduction Act 2017 places a new legal duty on English councils so that everyone who is homeless or at risk of homelessness will have access to meaningful help including an assessment of their needs and circumstances, the development of a personalised housing plan, and work to help them retain their accommodation or find a new place to live. The following factsheet usefully summarised the new duties:

[https://www.homeless.org.uk/sites/default/files/site-attachments/Homelessness%20Reduction%20Act%20Briefing%20Nov%202017\\_0.pdf](https://www.homeless.org.uk/sites/default/files/site-attachments/Homelessness%20Reduction%20Act%20Briefing%20Nov%202017_0.pdf)

The new duties shift focus to early intervention and encourage those at risk to seek support as soon as possible, before they are facing homelessness.

In most cases the school will be considering homelessness in the context of children who live with their families, and intervention will be on that basis. However, it is recognised that in some cases 16 and 17 year olds could be living independently from their parents or guardians, for example through their exclusion from the family home, and will require a different level of intervention and support. Children's services will be the lead agency for these young people and the DSL and deputies will ensure appropriate referrals are made based on the child's circumstances. The department and the Ministry of Housing, Communities and Local Government have published joint statutory guidance on the provision of accommodation for 16 and 17 year olds who may be homeless and/or require accommodation.

## Parental mental health

<https://www.gov.uk/government/publications/the-mental-health-strategy-for-england>

[http://4lscb.proceduresonline.com/chapters/p\\_childatrisk\\_mhpar.html](http://4lscb.proceduresonline.com/chapters/p_childatrisk_mhpar.html)

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

For children, the impact of parental mental health can include:

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

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

## Parental Substance misuse

[http://4lscb.proceduresonline.com/chapters/p\\_chil\\_drug\\_mis\\_par.html](http://4lscb.proceduresonline.com/chapters/p_chil_drug_mis_par.html)

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

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

For children, the impact of parental substance misuse can include:

- Inadequate food, heat and clothing for children (family finances used to fund adult's dependency)
- Lack of engagement or interest from parents in their development, education or wellbeing

- Behavioural difficulties - inappropriate display of sexual and/or aggressive behaviour
- Bullying (including due to poor physical appearance)
- Isolation – finding it hard to socialise, make friends or invite them home
- Tiredness or lack of concentration
- Child talking of, or bringing into school, drugs or related paraphernalia
- Injuries /accidents (due to inadequate adult supervision )
- Taking on a caring role
- Continued poor academic performance including difficulties completing homework on time
- Poor attendance or late arrival

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

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

### **Missing, Exploited and Trafficked Children (MET)**

[http://4lscb.proceduresonline.com/chapters/p\\_missing\\_exploit\\_traff.html](http://4lscb.proceduresonline.com/chapters/p_missing_exploit_traff.html)

Within Hampshire, the acronym MET is used to identify all children who are missing; believed to be at risk of or being sexually exploited; or who are at risk of or are being trafficked. Given the close links between all of these issues, there has been a considered response to join all three issues so that cross over of risk is not missed.

### **Children Missing from Education**

[http://4lscb.proceduresonline.com/chapters/p\\_child\\_miss\\_edu.html](http://4lscb.proceduresonline.com/chapters/p_child_miss_edu.html)

<https://www.gov.uk/government/publications/school-attendance>

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/395138/Children\\_missing\\_education\\_Statutory\\_guidance\\_for\\_local\\_authorities.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/395138/Children_missing_education_Statutory_guidance_for_local_authorities.pdf)

Patterns of children missing education can be an indicator of either abuse or safeguarding risks. A relatively short length of time a child is missing does not reduce risk of harm to that child, and all absence or non-attendance should be considered with other known factors or concerns.

DSLs, deputies and staff should consider:

Missing lessons: Are there patterns in the lessons that are being missed? Is this more than avoidance of a subject or a teacher? Does the child remain on the school site or are they absent from the site?

- Is the child being sexually exploited during this time?
- Are they late because of a caring responsibility?
- Have they been directly or indirectly affected by substance misuse?

- Are other students routinely missing the same lessons, and does this raise other risks or concerns?
- Is the lesson being missed one that would cause bruising or injuries to become visible?

Single missing days: Is there a pattern in the day missed? Is it before or after the weekend suggesting the child is away from the area? Are there specific lessons or members of staff on these days? Is the parent informing the school of the absence on the day? Are missing days reported back to parents to confirm their awareness?

- Is the child being sexually exploited during this day?
- Do the parents appear to be aware?
- Are the student's peers making comments or suggestions as to where the student is at?

Continuous missing days: Has the school been able to make contact with the parent? Is medical evidence being provided? Are siblings attending school (either our or local schools)?

- Did we have any concerns about radicalisation, FGM, forced marriage, honour based violence, sexual exploitation?
- Have we had any concerns about physical or sexual abuse?

The school will view absence as both a safeguarding issue and an educational outcomes issue. The school may take steps that could result in legal action for attendance, or a referral to children's social care, or both.

## Children Missing from Home or Care

<https://www.gov.uk/government/publications/children-who-run-away-or-go-missing-from-home-or-care>

<http://www.childrensociety.org.uk/what-we-do/policy-and-lobbying/children-risk/runaways>

Children who run away from home or from care, provide a clear behavioural indication that they are either unhappy or do not feel safe in the place that they are living. Research shows that children run away from conflict or problems at home or school, neglect or abuse, or because children are being groomed by predatory individuals who seek to exploit them. Many run away on numerous occasions.

The association of chief police officers has provided the following definitions and guidance.

*Missing person is: 'Anyone whose whereabouts cannot be established and where the circumstances are out of character or the context suggests the person may be the subject of crime or at risk of harm to themselves or another.'*

*An absent person is: 'A person not at a place where they are expected or required to be.'*

*All cases classified as 'missing' by the police will receive an active police response – such as deployment of police officers to locate a child. Cases where the child was classified as 'absent' will be recorded by the police and risk assessed regularly but no active response will be deployed.*

*The absent case will be resolved when a young person returns or new information comes to light suggesting that he/she is at risk. In the latter instance, the case is upgraded to 'missing'.*

Within any case of children who are missing, both push and pull factors will need to be considered.

Push factors include:

- Conflict with parents/carers
- Feeling powerless
- Being bullied/abused
- Being unhappy/not being listened to
- The Toxic Trio

Pull factors include:

- Wanting to be with family/friends
- Drugs, money and any exchangeable item
- Peer pressure
- For those who have been trafficked into the United Kingdom as unaccompanied asylum seeking children there will be pressure to make contact with their trafficker

As a school we will inform all parents of children who are absent (unless the parent has informed us). If the parent is also unaware of the location of their child, and the definition of missing is met, we will either support the parent to/directly contact the police to inform them.

## **Child Sexual Exploitation (CSE)**

<http://paceuk.info/>

[http://4scb.proceduresonline.com/chapters/p\\_sexual\\_exploit.html](http://4scb.proceduresonline.com/chapters/p_sexual_exploit.html)

Sexual exploitation of children is not limited by the age of consent and can occur up until the age of 18. CSE involves children being in situations, contexts or relationships where they (or a third person) receive 'something' as a result of them performing sexual activities. The something can include food, accommodation, drugs, alcohol, cigarettes, affection, gifts, or money.

Child sexual exploitation can happen via technology without the child being aware; 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 a child may be at risk of CSE include:

- going missing for periods of time or regularly coming home late;
- regularly missing school or education 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;
- mood swings or changes in emotional wellbeing;
- drug and alcohol misuse; and
- displaying inappropriate sexualised behaviour.

CSE can happen to a child of any age, gender, ability or social status. Often the victim of CSE is not aware that they are being exploited and do not see themselves as a victim.

As a school, we educate all staff in the signs and indicators of sexual exploitation. We use the sexual exploitation risk assessment form ([SERAF](#)) and [associated guidance](#) to identify students who are at risk and the DSL (and/or DSL deputies) will share this information as appropriate with children's social care.

We recognise that we may have information or intelligence that could be used to both protect children and prevent risk. Any relevant information that we have will be shared on the community partnership information (CPI) form [Annex 2]

### **Child Criminal Exploitation**

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity: drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns. Key to identifying potential involvement in county lines are missing episodes, when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism should be considered. Like other forms of abuse and exploitation, county lines exploitation:

- Can affect any child or young person (male or female) under the age of 18 years.
- Can affect any vulnerable adult over the ages of 18 years.
- Can still be exploitation even if the activity appears consensual.
- Can involve force and or/enticement-based methods of compliance and is often accompanied by violence or threats of violence.
- Can be perpetrated by individuals or groups, males or females, and young people or adults and is typified by some form of power imbalance in favour of those perpetrating the exploitation. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.

### **Trafficked Children**

[http://4lscb.proceduresonline.com/chapters/p\\_safeq\\_traff\\_ch.htm](http://4lscb.proceduresonline.com/chapters/p_safeq_traff_ch.htm)

Human trafficking is defined by the UNHCR in respect of children as a process that is a combination of :

- movement (including within the UK); and
- for the purpose of exploitation

Any child transported for exploitative reasons is considered to be a trafficking victim.

There is significant evidence that children (both of UK and other citizenship) are being trafficked internally within the UK and this is regarded as a more common form of trafficking in the UK. There are a number of indicators which suggest that a child may have been trafficked into the UK, and may still be controlled by the traffickers or receiving adults. These are as follows:

- shows signs of physical or sexual abuse, and/or has contracted a sexually transmitted infection or has an unwanted pregnancy;
- has a history with missing links and unexplained moves;
- is required to earn a minimum amount of money every day;
- works in various locations;
- has limited freedom of movement;
- appears to be missing for periods;
- is known to beg for money;
- is being cared for by adult/s who are not their parents and the quality of the relationship between the child and their adult carers is not good;
- is one among a number of unrelated children found at one address;
- has not been registered with or attended a GP practice; and
- is excessively afraid of being deported.

For those children who are internally trafficked within the UK indicators include:

- physical symptoms (bruising indicating either physical or sexual assault);
- prevalence of a sexually transmitted infection or unwanted pregnancy;
- reports from reliable sources suggesting the likelihood of involvement in sexual exploitation / the child has been seen in places known to be used for sexual exploitation;
- evidence of drug, alcohol or substance misuse;
- being in the community in clothing unusual for a child i.e. inappropriate for age, or borrowing clothing from older people
- relationship with a significantly older partner ;
- accounts of social activities, expensive clothes, mobile phones or other possessions with no plausible explanation of the source of necessary funding;
- persistently missing, staying out overnight or returning late with no plausible explanation;
- returning after having been missing, looking well cared for despite having not been at home;
- having keys to premises other than those known about;
- low self- image, low self-esteem, self-harming behaviour including cutting, overdosing, eating disorder, promiscuity;
- truancy / disengagement with education;
- entering or leaving vehicles driven by unknown adults;
- going missing and being found in areas where the child or young person has no known links; and/or
- possible inappropriate use of the internet and forming on-line relationships, particularly with adults.

These behaviours themselves do not indicate that a child is being trafficked, but should be considered as indicators that this may be the case.

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

## **Technologies**

[http://4lscb.proceduresonline.com/chapters/p\\_ca\\_information.html](http://4lscb.proceduresonline.com/chapters/p_ca_information.html)

Technological hardware and software is developing continuously with an increase in functionality of devices that people use. The majority of children use online tools to communicate with others locally, nationally and internationally. Access to the Internet and other tools that technology provides is an invaluable way of finding, sharing and communicating information. While technology itself is not harmful, it can be used by others to make children vulnerable and to abuse them.

## **Online Safety and Social Media**

<https://www.thinkuknow.co.uk/Teachers/>

<http://www.saferinternet.org.uk/>

<https://www.thinkuknow.co.uk/Teachers/Resources/>

<http://www.saferinternet.org.uk/search-results?keywords=social%20networking>

<http://www.childnet.com/search-results/?keywords=social%20networking>

<http://www.kidsmart.org.uk/socialnetworking/>

<http://www.lqfl.net/esafety/Pages/Primary-resource-matrix.aspx>

With the current speed of online change, some parents and carers have only a limited understanding of online risks and issues. Parents may underestimate how often their children come across potentially harmful and inappropriate material on the internet and may be unsure about how to respond. Some of the risks could be:

- Unwanted contact
- Grooming
- Online bullying including sexting
- Digital footprint

The school will therefore seek to provide information and awareness to both students and their parents through:

- Acceptable use agreements for children, teachers, parents/carers and governors
- Curriculum activities involving raising awareness around staying safe online
- Information included in letters, newsletters, web site, VLE
- Parents evenings / sessions
- High profile events / campaigns e.g. Safer Internet Day
- Building awareness around information that is held on relevant web sites and or publications

## **Cyberbullying**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/374850/Cyberbullying\\_Advice\\_for\\_Headteachers\\_and\\_School\\_Staff\\_121114.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/374850/Cyberbullying_Advice_for_Headteachers_and_School_Staff_121114.pdf)

<http://www.hampshire.police.uk/internet/asset/f0db2eea-0e3c-4fb4-b98c-e3fa681b860P/primary-social-networking-cyber-bullying>

Central to the School's anti-bullying policy should be the principle that '*bullying is always unacceptable*' and that '*all students have a right not to be bullied*'.

The school should also recognise that it must take note of bullying perpetrated outside school which spills over into the school and so we will respond to any cyber-bullying we become aware of carried out by students when they are away from the site.

Cyber-bullying is defined as "an aggressive, intentional act carried out by a group or individual using electronic forms of contact repeatedly over time against a victim who cannot easily defend himself/herself."

By cyber-bullying, we mean bullying by electronic media:

- Bullying by texts or messages or calls on mobile phones
- The use of mobile phone cameras to cause distress, fear or humiliation
- Posting threatening, abusive, defamatory or humiliating material on websites, to include blogs, personal websites, social networking sites
- Using e-mail to message others
- Hijacking/cloning e-mail accounts
- Making threatening, abusive, defamatory or humiliating remarks in on-line forums

Cyber-bullying may be at a level where it is criminal in character.

It is unlawful to disseminate defamatory information in any media including internet sites. Section 127 of the Communications Act 2003 makes it an offence to send, by public means of a public electronic communications network, a message or other matter that is grossly offensive or one of an indecent, obscene or menacing character.

The Protection from Harassment Act 1997 makes it an offence to knowingly pursue any course of conduct amounting to harassment.

If we become aware of any incidents of cyberbullying, we will need to consider each case individually as to any criminal act that may have been committed. The school will pass on information to the police if it feels that it is appropriate or are required to do so.

### **Sexual Violence and sexual harassment between children in schools**

#### **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. It is important that all

victims are taken seriously and offered appropriate support. School staff are aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk.

School staff are 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” or “just having a laugh”, or “boys being boys”.
- 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**

Coppice Spring School is 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 2003 as described below:

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

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

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

What is consent? Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another. 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.

### **Sexual Harassment**

When referring to sexual harassment, it means “unwanted contact of a sexual nature” that can occur online and offline. This relates to 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 (Coppice Spring School will consider when this crosses a line into sexual violence) and displaying pictures, photos, or drawings of a sexual nature.
- Online sexual harassment, this may be standalone or part of a wider pattern of sexual harassment and/or sexual violence. It might include:
  - Non-consensual sharing of sexual images and videos
  - Sexualised online bullying
  - Unwanted sexual comments and messages, including on social media
  - Sexual exploitation, coercion and threats.

### **Child on child sexual violence and sexual harassment**

In accordance with Keeping Children Safe in Education 2018, Coppice Spring School has a robust response to the response, risk assessment and actions undertaken following a report of sexual violence and/or sexual harassment.

Reports of sexual violence and sexual harassment are likely to be complex and require difficult professional decisions to be made, often quickly and under pressure. The making of decisions in these cases are to be considered on a case by case basis by the DSL and Deputy DSLs using their professional judgment supported by other agencies (such as Children Services and Police as required).

All school staff are trained to manage a report of sexual abuse and/or sexual harassment, effective safeguarding practice within Coppice Spring School includes:

- Not promising confidentiality at the initial stage as it is very likely a concern will have to be shared further (for example, with the DSL, deputies, or children services) to discuss next steps. Staff will only share the report with those people who are necessary in order to progress it. It is important that the victim understands what the next steps will be and who the report will be passed to.
- Recognising that a child is likely to disclose to someone they trust; this could be anyone on the school staff. It is important that the person to whom the child discloses recognises that the child has placed them in a position of trust, and should be supportive and respectful of the child.
- Listening carefully to the child, being non-judgmental, being clear about boundaries and how the report will be progressed, not asking leading questions and only prompting the child where necessary with open questions – where, when, what, etc.
- Considering the best way to make a record of the report. Best practice is to wait until the end of the report and immediately write up a thorough summary. This allows the staff member to devote their full attention to the child and to listen to what they are saying. It may be appropriate to make notes, staff should be conscious of the need to remain engaged with the child and not appear distracted by note taking. Either way, it is essential a written record is made.
- Only recording the facts as the child presents them. The notes should not reflect the personal opinion of the note taker. Schools should be aware that notes of such reports could become part of a statutory assessment by Children Services and/or part of a criminal investigation.
- Where the report includes an online element, being aware of searching, screening and confiscation advice (for schools, [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/674416/Searching\\_screening\\_and\\_confiscation.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/674416/Searching_screening_and_confiscation.pdf)) and UKCCIS sexting advice (for schools and colleges, <https://www.safeguardingschools.co.uk/wp-content/uploads/2016/08/Sexting-in-schools-and-colleges-UKCCIS-August-2016.pdf>). The key consideration is for staff not to view or forward illegal

images of a child. The highlighted advice provides more details on what to do when viewing an image is unavoidable.

- If possible, managing reports with two members of staff present (preferably one of them being the DSL or Deputy DSLs) however, this might not always be possible.
- Informing the DSL or Deputy DSLs as soon as practically possible, if the DSL or Deputy DSLs is not involved in the initial report.

### **Risk Assessment**

When there has been a report of sexual violence, the DSL or Deputy DSLs should make an immediate risk and needs assessment. Where there has been a report of sexual harassment, the need for a risk assessment should be considered on a case-by-case basis. The risk and needs assessment should consider:

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

Risk assessments should be recorded (written or electronic) and should be kept under review. At all times, the school will be actively considering the risks posed to all their students and putting adequate measures in place to protect them and keep them safe.

The DSL or Deputy DSLs should ensure they are engaging with Children Services and specialist services as required. Where there has been a report of sexual violence, it is likely that professional risk assessments by social workers and or sexual violence specialists will be required. The risk assessment is not intended to replace the detailed assessments of expert professionals. Any such professional assessments should be used to inform the schools or college's approach to supporting and protecting their students and updating their own risk assessment.

### **Action following a report of sexual violence and/or sexual harassment**

Coppice Spring School will carefully consider any report of sexual violence and/or sexual harassment. The DSL or Deputy DSLs is likely to have a complete safeguarding picture and be the most appropriate person to advise on the school's initial response. Important considerations will be:

- The wishes of the victim in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment. Victims should be given as much control as is reasonably possible over decisions regarding how any investigation will be progressed and any support that they will be offered.
- The nature of the alleged incident(s) including; whether a crime may have been committed and consideration of harmful sexual behaviour.
- The ages of the children involved.
- The developmental stages of the children involved.
- Any power imbalances between the children. For example, is the alleged perpetrator significantly older, more mature or more confident? Does the victim have a disability or learning difficulty?
- If the alleged incident is a one-off or a sustained pattern of abuse.
- If there ongoing risks to the victim, other children or school staff.
- Other related issues and wider safeguarding context.

All staff should act in the best interests of the child. In all cases Coppice Spring School will follow general safeguarding principles as set out through this policy. Immediate consideration should be given as to how best to support and protect the victim and the alleged perpetrator (and any other children involved/impacted).

The beginning point of any report will always be that sexual violence and sexual harassment is not acceptable and will not be tolerated. Especially important is not to pass off any sexual violence or sexual harassment as “banter”, “part of growing up” or “having a laugh”.

### **Options of managing a report**

Coppice Spring School will consider every report on a case-by-case basis, when to inform the alleged perpetrator will be a decision that will be carefully considered. Where a report is going to be made to Children Services and/or the police, then, as a general rule, the school will speak to the relevant agency and discuss next steps and how the alleged perpetrator will be informed of the allegations. However, as per general safeguarding principles, this does not and should not stop the school taking immediate action to safeguard their children where required. There are four likely scenarios to consider when managing any reports of sexual violence and/or sexual harassment, these are:

#### **1. Manage internally**

- In some cases of sexual harassment, for example, one-off incidents, the school may take the view that the children concerned are not in need of early help or statutory intervention and that it would be appropriate to handle the incident internally, perhaps through utilising the school’s behaviour and bullying policies and by providing pastoral support.
- Whatever the school’s response, it will be underpinned by the principled that sexual harassment and violence is never acceptable and will not be tolerated.
- All concerns, discussions, decision and reasons for discussion will be recorded.

#### **2. Early Help**

- The school may decide that the children involved do not require statutory interventions, but may benefit from early help. Early help means providing support as soon as a problem emerges, at any point in a child’s life. Providing early help is more effective in promoting the welfare of children than reacting later. Early help can be particularly useful to address non-violent harmful sexual behaviour and may prevent escalation of sexual violence.
- Multi-agency early help will work best when placed alongside strong school policies, preventative education and engagement with parents and carers.
- The school’s response is underpinned by the principle that sexual violence and sexual harassment is never acceptable and will not be tolerated.
- All concerns, discussions, decision and reasons for decision will be recorded.

#### **3. Referrals to Children Services**

- Where a child has been harmed, is at risk of harm, or is in immediate danger, the school will make a referral to local children services.
- At the referral to children services stage, the school will generally inform parents or carers, unless there are compelling reasons not to (if informing a parent or carer is going to put the child at additional risk). Any such decision will be made with the support of children services.
- If a referral is made, children services will then make enquiries to determine whether any of the children involved are in need of protection or other services.

- Where statutory assessments are appropriate, the school (especially the DSL or Deputy DSLs) will be working alongside, and cooperating with the relevant lead social worker. Collaborative working will help ensure the best possible package of coordinated support is implemented for the victim and, where appropriate, the alleged perpetrator and any other children that require support.
- The school will not wait for the outcome (or even the start) of a children services investigation before protecting the victim and other children in the school. It will be important for the DSL or Deputy DSLs to work closely with children services (and other agencies as required) to ensure any actions the school takes does not jeopardise a statutory investigation. The risk assessment will assist the school in making any decisions. Consideration of the safeguarding the victim, alleged perpetrator, any other children directly involved in the safeguarding report and all children in the school will be immediate.
- In some cases, children services will review the evidence and decide a statutory intervention is not appropriate. The school (generally led by the DSL or Deputy DSLs) will be prepared to refer again if they believe the child remains in immediate danger or at risk of harm. If a statutory assessment is not appropriate, the DSL or Deputy DSLs will consider other support mechanisms such as early help, specialist support and pastoral support.
- Whatever the response, the school will continue to underpin the principle that sexual violence and sexual harassment is never acceptable and will not be tolerated.
- All concerns, discussions, decisions and reasons for decisions will be recorded.

#### 4. **Reporting to the Police**

- Any report to the police will generally be in parallel with a referral to children services (as above).
- Where a report of rape, assault by penetration or sexual assault is made, the starting point is this should be passed to the police. Whilst the age of criminal responsibility is ten, if the alleged perpetrator is under ten, the starting principle of reporting to the police remains. The police will take a welfare, rather than a criminal justice approach.
- At this stage, the school will generally inform parents or carer unless there are compelling reasons not to, for example, if informing a parent or carer is likely to put a child at additional risk. In circumstances where parents or carers have not been informed, it is especially important that the school is supporting the child in any decision they take. This should be with the support of children's services and any appropriate specialist agencies.
- Where a report has been made to the police, the school will consult with the police and agree what information can be disclosed to staff and others; in particular, the alleged perpetrator and their parents or carers. School will also discuss the best way to protect the victim and their anonymity.
- All police forces in England have specialist units that investigate child abuse. The names and structures of these units are matters for local forces. The DSL and DSL Deputies are aware of their local arrangements.
- In some cases, it may become clear very quickly, that the police (for whatever reason) will not take further action. In such circumstances, the school will continue to engage with specialist support for the victim as required.
- Whatever the response, it should be under-pinned by the principle that sexual violence and sexual harassment is never acceptable and will not be tolerated.
- All concerns, discussions, decision and reasons for decisions will be recorded.

## Gaming

<http://www.saferinternet.org.uk/search-results?keywords=gaming>

<http://www.childnet.com/search-results/?keywords=gaming>

<http://www.kidsmart.org.uk/games/>

<http://www.lqfl.net/esafety/Pages/Primary-resource-matrix.aspx>

Online gaming is an activity that the majority of children and many adults get involved in. The school will raise awareness:

- By talking to parents and carers about the games their children play and help them identify whether they are appropriate
- By supporting parents in identifying the most effective way of safeguarding their children by using parental controls and child safety mode.
- By talking to parents about setting boundaries and time limits when games are played.
- By highlighting relevant resources.

## Online reputation

<http://www.childnet.com/resources/online-reputation-checklist>

<http://www.saferinternet.org.uk/search-results?keywords=online%20reputation>

<http://www.kidsmart.org.uk/digitalfootprints/>

Online reputation is the opinion others get of a person when they encounter them online. It is formed by posts, photos that have been uploaded and comments made by others on people's profiles. It is important that children and staff are aware that anything that is posted could influence their future professional reputation. The majority of organisations and work establishments now check digital footprint before considering applications for positions or places on courses.

## Grooming

<http://www.saferinternet.org.uk/search-results?keywords=grooming>

<http://www.childnet.com/search-results/?keywords=grooming>

<http://www.internetmatters.org/issues/online-grooming/>

Online grooming is the process by which one person with an inappropriate sexual interest in children will approach a child online, with the intention of developing a relationship with that child, to be able to meet them in person and intentionally cause harm.

The school will build awareness amongst children and parents, ensuring that the child:

- Only has friends online that they know in real life
- Is aware that if they communicate with somebody that they have met online, that relationship should stay online

The school will support parents to:

- Recognise the signs of grooming
- Have regular conversations with their children about online activity and how to stay safe online

The school will ensure they raise awareness by:

- Providing information to parents
- Include awareness around grooming as part of their curriculum
- Identifying with both parents and children how they can be safeguarded against grooming

## Part 2 – Safeguarding issues relating to individual student needs

### **Students with medical conditions (in school)**

[www.gov.uk/government/publications/supporting-students-at-school-with-medical-conditions--3](http://www.gov.uk/government/publications/supporting-students-at-school-with-medical-conditions--3)

There is a separate policy outlining the school's position on this – see *Supporting Students with Medical Conditions Policy*.

As a school we will make sure that sufficient staff are trained to support any student with a medical condition. All relevant staff will be made aware of the condition to support the child and be aware of medical needs and risks to the child. An individual healthcare plan may be put in place to support the child and their medical needs.

### **Students with medical conditions (out of school)**

[www3.hants.gov.uk/education/parents-info/inclusion-service.htm](http://www3.hants.gov.uk/education/parents-info/inclusion-service.htm)

There will be occasions when children are temporarily unable to attend our school on a full time basis because of their medical needs. These children and young people are likely to be:

- Children and young people suffering from long-term illnesses
- Children and young people with long-term post-operative or post-injury recovery periods
- Children and young people with long-term mental health problems (emotionally vulnerable)

Where it is clear that an absence will be for more than 15 continuous school days, the Education and Inclusion Service will be contacted to support with the student's education.

### **Intimate care**

[http://4lscb.proceduresonline.com/chapters/q\\_int\\_care.html](http://4lscb.proceduresonline.com/chapters/q_int_care.html)

See Guidelines for good practice Annex 1 (adapted from the Chailey Heritage Centre)

### **Fabricated or induced illness**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/277314/Safeguarding\\_Children\\_in\\_whom\\_illness\\_is\\_fabricated\\_or\\_induced.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/277314/Safeguarding_Children_in_whom_illness_is_fabricated_or_induced.pdf)

[http://4lscb.proceduresonline.com/chapters/p\\_fab\\_ind\\_ill.html](http://4lscb.proceduresonline.com/chapters/p_fab_ind_ill.html)

There are three main ways that a carer could fabricate or induce illness in a child. These are not mutually exclusive and include:

- Fabrication of signs and symptoms. This may include fabrication of past medical history;
- Fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents; and
- Induction of illness by a variety of means.

If we are concerned that a child may be suffering from fabricated or induced illness we will follow the established procedures of the Hampshire Safeguarding Children Board.

## Mental Health

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/508847/Mental\\_Health\\_and\\_Behaviour\\_-\\_advice\\_for\\_Schools\\_160316.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/Mental_Health_and_Behaviour_-_advice_for_Schools_160316.pdf)  
<http://www.youngminds.org.uk/>  
<https://www.gov.uk/government/publications/the-mental-health-strategy-for-england>

Form tutors and class teachers see their students every day. They know them well and are well placed to spot changes in behaviour that might indicate an emerging problem with the mental health and emotional wellbeing of students.

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

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

When concerns are identified, school staff will provide opportunities for the child to talk or receive support within the school environment. Parents will be informed of the concerns and a shared way to support the child will be discussed. Where the needs require additional professional support, referrals will be made to the appropriate team or service with the parent's agreement (or child's if they are competent as per Fraser guidelines).

## Self-injury

Self-injury is any deliberate, non-suicidal behaviour that inflicts physical harm on someone's own body and is aimed at relieving emotional distress. It can include cutting, scratching, burning, banging and bruising, overdosing (without suicidal intent) and deliberate bone-breaking/spraining.

### **Risk factors associated with self-injury:**

- Mental health disorders including depression and eating disorders
- Drug/alcohol abuse, and other risk-taking behaviour
- Recent trauma e.g. death of relative, parental divorce
- Negative thought patterns, and low self-esteem
- Bullying Abuse – sexual, physical and emotional
- Abuse –sexual, physical, emotional and neglect

- Sudden changes in behaviour and academic performance

When concerns are identified, school staff will listen to students in emotional distress calmly and in a non-judgemental way and report any self-injury to the designated safeguarding leads. School staff will reassure pupils that in order to achieve health and happiness staff need to know of any difficulties so that they can offer support. School staff promote problem-solving techniques and non-harmful ways to manage emotional distress and staff are aware of the related health and safety issues such as first-aid.

The designated safeguarding leads maintain electronic records of self-injury incidents and concerns, liaising with local services and advising of the help and support available. School staff will contact parent(s) at the appropriate time(s) to discuss the concerns, with involvement from the student. All students known to be self-injuring will be monitored and appropriately supported.

### **Suicide:**

While self-injury and suicide are separate, those who self-injure are in emotional distress, and those who end their lives are also in emotional distress. It is vital that all emotional distress is taken seriously to minimise the chances of self-injury, and suicide. All disclosures of suicidal ideation warning signs are taken seriously by the school. When concerns are identified, school staff will listen to students calmly and in a non-judgemental way and identify the most appropriate support, school staff will refer all concerns to a designated safeguarding lead in the school. The Designated safeguarding lead (or DSL deputies) will discuss with the student their thoughts and emotions, and from this, will implement a plan to ensure the student is safe and supported. The school will refer students for additional support from external agencies, including, specialist mental health intervention, counselling support, children service safeguards and if required staff will refer students to emergency provisions in cases of high, unmanageable risks. School staff will ensure that parents/carers are informed and involved with the making of any plans involving the risk or concern of suicide and school staff will ensure that parents/carers are advised of the support available for them in relation to proactively and safely managing suicidal ideation in the home environment.

## **Part 3 – Other safeguarding issues impacting students**

### **Bullying**

[http://4lscb.proceduresonline.com/chapters/p\\_bullying.html](http://4lscb.proceduresonline.com/chapters/p_bullying.html)

<https://www.gov.uk/government/publications/preventing-and-tackling-bullying>

<http://www3.hants.gov.uk/childrens-services/childrenandyoungpeople/bullying.htm>

There is a separate policy outlining the school's position on this. Our Anti-Bullying Policy can be found on our website and on the staff hard drive.

## Prejudice based abuse

Prejudice based abuse or hate crime is any criminal offence which is perceived by the victim or any other person to be motivated by a hostility or prejudice based on a person's real or perceived:

- Disability
- Race
- Religion
- Gender identity
- Sexual orientation

Although this sort of crime is collectively known as 'Hate Crime', the offender doesn't have to go as far as being motivated by 'hate', they only have to exhibit 'hostility'.

This can be evidenced by:

- Threatened or actual physical assault
- Derogatory name calling, insults, for example racist jokes or homophobic language
- Hate graffiti (e.g. on school furniture, walls or books)
- Provocative behaviour e.g. wearing of badges or symbols belonging to known right wing, or extremist organisations
- Distributing literature that may be offensive in relation to a protected characteristic
- Verbal abuse
- Inciting hatred or bullying against students who share a protected characteristic
- Prejudiced or hostile comments in the course of discussions within lessons
- Teasing in relation to any protected characteristic e.g. sexuality, language, religion or cultural background
- Refusal to co-operate with others because of their protected characteristic, whether real or perceived
- Expressions of prejudice calculated to offend or influence the behaviour of others
- Attempts to recruit other students to organisations and groups that sanction violence, terrorism or hatred.

As a school we will respond by:

- Clearly identifying prejudice based incidents and hate crimes and monitor the frequency and nature of them within the school
- Taking preventative action to reduce the likelihood of such incidents occurring
- Recognising the wider implications of such incidents for the school and local community
- Providing regular reports of these incidents to the Governing Body
- Ensuring that staff are familiar with formal procedures for recording and dealing with prejudice based incidents and hate crimes
- Dealing with perpetrators of prejudice based abuse effectively
- Supporting victims of prejudice based incidents and hate crimes

## **Drugs and substance misuse**

<https://www.gov.uk/government/publications/drugs-advice-for-schools>

<http://www3.hants.gov.uk/education/hias/drug-and-alcohol/resources-for-schools.htm>

There is a separate policy outlining the school's position on this. Our Drugs Policy can be found on our website

## **Faith Abuse**

<https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief>

[http://4lscb.proceduresonline.com/chapters/p\\_ca\\_religion.html](http://4lscb.proceduresonline.com/chapters/p_ca_religion.html)

The number of known cases of child abuse linked to accusations of "possession" or "witchcraft" is small, but children involved can suffer damage to their physical and mental health, their capacity to learn, their ability to form relationships and to their self-esteem.

Such abuse generally occurs when a carer views a child as being "different", attributes this difference to the child being "possessed" or involved in "witchcraft" and attempts to exorcise him or her. A child could be viewed as "different" for a variety of reasons such as, disobedience; independence; bed-wetting; nightmares; illness; or disability. There is often a weak bond of attachment between the carer and the child. There are various social reasons that make a child more vulnerable to an accusation of "possession" or "witchcraft". These include family stress and/or a change in the family structure.

The attempt to "exorcise" may involve severe beating, burning, starvation, cutting or stabbing and isolation, and usually occurs in the household where the child lives.

If the school become aware of a child who is being abused in this context, the DSL (DSL Deputies or if not available, any staff member) will follow the normal referral route in to children's social care.

## **Gangs and Youth Violence**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/418131/Preventing\\_youth\\_violence\\_and\\_gang\\_involvement\\_v3\\_March2015.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/418131/Preventing_youth_violence_and_gang_involvement_v3_March2015.pdf)

[http://4lscb.proceduresonline.com/chapters/p\\_safeg\\_qang\\_activity.html](http://4lscb.proceduresonline.com/chapters/p_safeg_qang_activity.html)

The vast majority of young people will not be affected by serious violence or gangs. However, where these problems do occur, even at low levels there will almost certainly be a significant impact.

As a school we have a duty and a responsibility to protect our students. It is also well established that success in learning is one of the most powerful indicators in the prevention of youth crime. Dealing

with violence also helps attainment. While students generally see educational establishments as safe places, even low levels of youth violence can have a disproportionate impact on any education. Crucial preventive work can be done within school to prevent negative behaviour from escalating and becoming entrenched.

As a school we will:

- develop skills and knowledge to resolve conflict as part of the curriculum;
- challenge aggressive behaviour in ways that prevent the recurrence of such behaviour;
- understand risks for specific groups, including those that are gender-based, and target interventions;
- safeguard, and specifically organise child protection, when needed;
- make referrals to appropriate external agencies;
- carefully manage individual transitions between educational establishments, especially into alternative provision and other special schools; and
- work with local partners to prevent anti-social behaviour or crime.

## **Private fostering**

<https://www.gov.uk/government/publications/children-act-1989-private-fostering>  
<http://www3.hants.gov.uk/private-fostering>

Private fostering is an arrangement by a child's parents for their child (under 16 or 18 if disabled) to be cared for by another adult who is not closely related and is not a legal guardian with parental responsibility for 28 days or more.

It is not private fostering if the carer is a close relative to the child such as grandparent, brother, sister, uncle or aunt.

The Law requires that the carers and parents must notify the children's services department of any private fostering arrangement.

If the school becomes aware that a student is being privately fostered we will inform the children's services department and inform both the parents and carers that we have done so.

## **Parenting**

All parents will struggle with the behaviour of their child(ren) at some point. This does not make them poor parents or generate safeguarding concerns. Rather it makes them human and provides them with opportunities to learn and develop new skills and approaches to deal with their child(ren).

Some children have medical conditions and/or needs e.g. Tourette's, some autistic linked conditions, ADHD; that have a direct impact on behaviour and can cause challenges for parents in dealing with behaviours. This does not highlight poor parenting either.

Parenting becomes a safeguarding concern when the repeated lack of supervision, boundaries, basic care or medical treatment places the child(ren) in situations of risk or harm.

In situations where parents struggle with tasks such as setting boundaries and providing appropriate supervision, timely interventions can make drastic changes to the wellbeing and life experiences of the child(ren) without the requirement for a social work assessment or plan being in place.

As a school we will support parents in understanding the parenting role and provide them with strategies to make a difference by:

- Providing details of community based parenting courses; e.g. <http://www3.hants.gov.uk/childrens-services/familyinformationdirectory.htm> and Barnardo's Parenting Service <http://www.barnardos.org.uk/hspss>
- Linking to web based parenting resources (for example <http://www.familylives.org.uk/>)
- Referring to the Assistant Head of School – Care, Guidance & Support
- Discussing the issue with the parent and supporting them in making their own plans of how to respond differently (using evidence based parenting programmes)
- Considering appropriate early help services <http://www3.hants.gov.uk/childrens-services/childrens-trust/earlyhelp.htm>

## Part 4 –Safeguarding processes

### **Alternative Provision**

All professionals have a statutory responsibility to safeguard and promote the welfare of children and young people and tracking and reporting attendance at alternative provision is an essential component in achieving this.

There is an expectation that any safeguarding concerns are raised with the designated safeguarding lead at Coppice Spring School and that all alternative providers adhere to the safeguarding and child protection policies held by the school. On setting up an alternative provision placement copies of the safeguarding and child protection policies from the placement are requested from the alternative provision and checked that they comply fully with the school's procedures by the Assistant Head of School (who is also the Designated Safeguarding Lead).

Safeguarding and child protection arrangements, in addition to alternative provider DBS records, are assessed through the school's Quality Assurance process which is arranged by the Deputy Headteacher (KS4).

### **Safer Recruitment**

[www.gov.uk/government/publications/keeping-children-safe-in-education--2](http://www.gov.uk/government/publications/keeping-children-safe-in-education--2)

The school operates a separate safer recruitment process as part of the school's Recruitment Policy. On all recruitment panels there is at least one member who has undertaken safer recruitment training. The process checks the identity, criminal record (enhanced DBS), mental and physical capacity, right to work in the U.K., professional qualification and seeks confirmation of the applicant's experience and history through references.

**As an employer we comply with the "Disqualification under the Childcare Act 2006" guidance issued in February 2015.**

### **Staff Induction**

The DSL or their deputies will provide all new staff with training to enable them to both fulfil their role and also to understand the child protection policy, the safeguarding policy, the staff code of conduct (found in Section One of the Staff Handbook), and part one of Keeping Children Safe in Education 2018. This induction may be covered within the annual training if this falls at the same time; otherwise it will be carried out separately during the initial starting period.

### **Health and Safety**

[www.gov.uk/government/publications/health-and-safety-advice-for-schools](http://www.gov.uk/government/publications/health-and-safety-advice-for-schools)  
<http://www.hse.gov.uk/services/education/>

The site, the equipment and the activities carried out as part of the curriculum are all required to comply with the Health and Safety at Work act 1974 and regulations made under the act.

All risks are required to be assessed and recorded plans of how to manage the risk are in place. The plans should always take a common sense and proportionate approach to allow activities to be safe rather than preventing them from taking place. The school has a Health and Safety policy which details the actions that we take in more detail.

## **Site Security**

[www.gov.uk/government/publications/school-security](http://www.gov.uk/government/publications/school-security)

We aim to provide a secure site, but recognise that the site is only as secure as the people who use it. Therefore all people on the site have to adhere to the rules which govern it. These are:

- All gates are locked except at the start and end of the school day
- Doors are kept closed to prevent intrusion
- Visitors and volunteers enter at the reception and must sign in
- Visitors and volunteers are identified by a badge that they must wear while on site
- Children are only allowed home during the school day with adults/carers with parental responsibility or permission being given
- All children leaving or returning during the school day have to sign out and in
- Empty classrooms have windows closed

## **Off site visits**

[www.hants.gov.uk/outdoor\\_education](http://www.hants.gov.uk/outdoor_education)

[www.hampshireoutdoors.com](http://www.hampshireoutdoors.com)

<http://oeapng.info/evc/>

A particular strand of health and safety is looking at risks when undertaking off site visits. Some activities, especially those happening away from the school and residential visits, can involve higher levels of risk. If these are annual or infrequent activities, a review of an existing assessment may be all that is needed. If it is a new activity, a visit involving adventure activities, residential, overseas or an 'Open Country' visit, a specific assessment of significant risks must be carried out. The school has an educational visits coordinator (EVC) who liaises with the local authority's outdoor education adviser and helps colleagues in schools to manage risks and support with off site visits and provides training in the management of groups during off site visits, as well as First Aid in an outdoor context.

## **First Aid**

[www.gov.uk/government/publications/first-aid-in-schools](http://www.gov.uk/government/publications/first-aid-in-schools)

## **Physical Intervention (use of reasonable force)**

<https://www.gov.uk/government/publications/use-of-reasonable-force-in-schools-guidelines-for-the-use-of-restrictive-physical-intervention-in-Hampshire-maintained-schools>

Our behaviour policy outlines how we will use physical intervention. This can be found on the school website or on the staff hard drive.

### **Taking and the use and storage of images**

<https://ico.org.uk/for-the-public/schools/photos>

As a school we will seek consent from the parent of a student and from teachers and other adults before taking and publishing photographs or videos that contain images that are sufficiently detailed to identify the individual in school publications, printed media or on electronic publications.

We will not seek consent for photos where you would not be able to identify the individual.

We will seek consent for the period the student remains registered with us and, unless we have specific written permission, we will remove photographs after a child (or teacher) appearing in them leaves the school or if consent is withdrawn.

Photographs will only be taken on school owned equipment and stored on the school network. No images of students will be taken or stored on privately owned equipment by staff members.

### **Transporting students**

<http://documents.hants.gov.uk/education/LADOsafeguardingchildrenineducation2014templateletterforparent.doc>

On occasions parents and volunteers support with the task of transporting children to visits and off-site activities arranged by the school. (This is in addition to any informal arrangements made directly between parents for after school clubs etc.)

In managing these arrangements, the school will put in place measures to ensure the safety and welfare of young people carried in parents' and volunteers' cars. This is based on guidance from the local authority and follows similar procedures for school staff using their cars on school business.

Where parents'/volunteers' cars are used on school activities, the school will notify parents/volunteers of their responsibilities for the safety of students, to maintain suitable insurance cover and to ensure their vehicle is roadworthy.

All parents/volunteers are therefore asked to complete and return the form attached as annex 3 to the school before they offer to use their car to help with transporting students.

### **Disqualification under the Childcare Act (2006)**

<https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006>

The Childcare Act (2006) was put in place to prevent adults who have been cautioned or convicted of a number of specific offences from working within childcare.

Staff (meaning individuals employed by the school or local authority), those undertaking training in schools (both salaried and unsalaried, casual workers and volunteers) are covered by this legislation in the following circumstances:

- they are employed and/or provide early years childcare (this covers the age range from birth until 1<sup>st</sup> September following a child's fifth birthday, i.e. up to and including reception age). This includes education in nursery and reception classes (e.g. teachers and support staff in a reception class) and/or any supervised activity (such as breakfast clubs, lunchtime supervision and after school care provided by the school) both during and outside of school hours for children in the early years age range; and
- they work in childcare provided by the school outside of school hours for children who are above reception age but who have not attained the age of 8. This includes before school settings, such as breakfast clubs, after school provision and holiday clubs. It does NOT include education or supervised activity for children above reception age during school hours including extended school hours for co-curricular learning activities, such as the school's choir or sports teams.

The legislation also applies to any staff directly concerned in the management of such early or later years' provision.

In 2009, additional regulations were made to include those living in the same household as another person who is (or would be) disqualified under the Act.

As a school we require all staff who may be impacted by this piece of legislation to complete a self-declaration form and to inform the Headteacher immediately if they become aware of any changes to their circumstances that would require us to be aware.

If a member of staff is impacted by the disqualification by association provisions we will ask them to apply for a waiver from Ofsted and put in place appropriate risk management plans while the waiver is being processed.

If a waiver is not granted we will seek advice from our HR provider and/or the LADO as to how risk is most effectively managed.

## **Annexes**

### **Annex 1**

#### **Intimate care**

Guidelines for good practice adapted from the Chailey Heritage centre

1. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and the situation. Privacy is an important issue. Much intimate care is carried out by one staff member alone with one child. The 4LSCBs believe this practice should be actively supported unless the task requires two people. Having people working alone does increase the opportunity for possible abuse. However, this is balanced by the loss of privacy and lack of trust implied if two people have to be present - quite apart from the practical difficulties. It should also be noted that the presence of two people does not guarantee the safety of the child or young person - organised abuse by several perpetrators can, and does, take place. Therefore, staff should be supported in carrying out the intimate care of children alone unless the task requires the presence of two people. The 4LSCBs recognise that there are partner agencies that recommend two carers in specific circumstances. Where possible, the member of staff carrying out intimate care should be someone chosen by the child or young person. For older children it is preferable if the member of staff is the same gender as the young person. However, this is not always possible in practice. Agencies should consider the implications of using a single named member of staff for intimate care or a rota system in terms of risks of abuse.
2. Involve the child as far as possible in his or her own intimate care. Try to avoid doing things for a child that s/he can do alone, and if a child is able to help ensure that s/he is given the chance to do so. This is as important for tasks such as removing underclothes as it is for washing the private parts of a child's body. Support children in doing all that they can themselves. If a child is fully dependent on you, talk with her or him about what you are doing and give choices where possible.
3. Be responsive to a child's reactions. It is appropriate to "check" your practice by asking the child - particularly a child you have not previously cared for - "Is it OK to do it this way?"; "Can you wash there?"; "How does mummy do that?". If a child expresses dislike of a certain person carrying out her or his intimate care, try and find out why. Conversely, if a child has a "grudge" against you or dislikes you for some reason, ensure your line manager is aware of this.
4. Make sure practice in intimate care is as consistent as possible. Line managers have a responsibility for ensuring their staff have a consistent approach. This does not mean that everyone has to do things in an identical fashion, but it is important that approaches to intimate care are not markedly different between individuals. For example, do you use a flannel to wash a child's private parts rather than bare hands? Do you pull back a child's foreskin as part of daily washing? Is care during menstruation consistent across different staff?

5. Never do something unless you know how to do it. If you are not sure how to do something, ask. If you need to be shown more than once, ask again. Certain intimate care or treatment procedures, such as rectal examinations, must only be carried out by nursing or medical staff. Other procedures, such as giving rectal Valium, suppositories or intermittent catheterisation, must only be carried out by staff who have been formally trained and assessed as competent.
6. If you are concerned that during the intimate care of a child:
  - You accidentally hurt the child
  - The child seems sore or unusually tender in the genital area
  - The child appears to be sexually aroused by your actions
  - The child misunderstands or misinterprets something
  - The child has a very emotional reaction without apparent cause (sudden crying or shouting)

Report any such incident as soon as possible to another person working with you and make a brief written note of it. This is for two reasons: first, because some of these could be cause for concern, and secondly, because the child or another adult might possibly misconstrue something you have done.

7. Additionally, if you are a member of staff who has noticed that a child's demeanour has changed directly following intimate care, e.g. sudden distress or withdrawal, this should be noted in writing and discussed with your designated person for child protection.
8. Encourage the child to have a positive image of her or his own body. Confident, assertive children who feel their body belongs to them are less vulnerable to abuse. As well as the basics like privacy, the approach you take to a child's intimate care can convey lots of messages about what her or his body is "worth". Your attitude to the child's intimate care is important. As far as appropriate and keeping in mind the child's age, routine care of a child should be enjoyable, relaxed and fun.

Intimate care is to some extent individually defined, and varies according to personal experience, cultural expectations and gender. The 4LSCBs recognise that children who experience intimate care may be more vulnerable to abuse:-

- Children with additional needs are sometimes taught to do as they are told to a greater degree than other children. This can continue into later years. Children who are dependent or over-protected may have fewer opportunities to take decisions for themselves and may have limited choices. The child may come to believe they are passive and powerless
- Increased numbers of adult carers may increase the vulnerability of the child, either by increasing the possibility of a carer harming them, or by adding to their sense of lack of attachment to a trusted adult
- Physical dependency in basic core needs, for example toileting, bathing, dressing, may increase the accessibility and opportunity for some carers to exploit being alone with and justify touching the child inappropriately
- Repeated "invasion" of body space for physical or medical care may result in the child feeling ownership of their bodies has been taken from them

- Children with additional needs can be isolated from knowledge and information about alternative sources of care and residence. This means, for example, that a child who is physically dependent on daily care may be more reluctant to disclose abuse, since they fear the loss of these needs being met. Their fear may also include who might replace their abusive carer.



## Annex 2

# Community Partnership Information

*Guidance:* This form is for the sharing of non-urgent information by partner agencies that relates to the **Missing, Exploited** and **Trafficked** agenda and inter-connecting issues, such as **Modern Slavery**. This information may be sanitised and used in subsequent partnership forums for the purposes of identifying and mitigating risk. Completed forms should be sent electronically to [24/7-Intel@hampshire.pnn.police.uk](mailto:24/7-Intel@hampshire.pnn.police.uk). Any questions or concerns regarding this form can be raised with your police contact, or to FIB. The form is not a referral form, nor does it replace any pre-existing referral or notification mechanism.

**Your name:**

**Your organisation:**

**Your telephone number:**

**Your email address:**

**Information (including date & location):**

**Information Source:**

Where did this information come from (name/Dob/address)?

Can they be re-contacted? What are their contact details?

How did they find this information out?

When did they find this information out?