

Title	Safeguarding and Child Protection
Associated Policies	<ul style="list-style-type: none"> • Anti-Bullying (TPO/STU/01) • Behaviour and Discipline (TPO/STU/03) • Complaints (TPO/QA/02) • Disciplinary Procedure (TPO/STA/22) • Disclosure and Barring Service Checks (TPO/STA/03) • Professional and Safe Conduct (TPO/STA/10) • Special Educational Needs and Inclusion (TPO/STU/05) • Staff Induction (TPO/STA/15) • Student Care and Welfare (TPO/STU/06) • Training and Development (TPO/STA/18) • Whistle Blowing (TPO/STA/19) • Social Media (TPO/STA/20) • Online Safety (TPO/STU/12) • Recruitment (TPO/STA/27) • Data Protection (TPO/STA/25) • Single Equality (TPO/EO/01) • Home School Agreement • Dealing with Allegations of Abuse Against Staff (TPO/STA/21) • Sex and Relationships (TPO/STU/10)

REVIEWED: SEPTEMBER 2020

NEXT REVIEW: SEPTEMBER 2021

Or sooner if required due to the Coronavirus pandemic

1. Key Contacts for Safeguarding at Brooke Weston Trust
<p>1.1 School-level contacts, including the Principal, Designated Safeguarding Leads and Deputy Safeguarding Leads, can be found below.</p> <p>1.2 The Safeguarding Strategic Lead for Brooke Weston Trust and the Safeguarding Advisors, who operate across all Trust schools in a support and advisory capacity, can be contacted using the details below:</p> <ul style="list-style-type: none"> • Strategic Lead and Secondary phase Safeguarding Advisor: Claire Greaves 01536 532700 • Primary phase Safeguarding Advisor Sarah Fleming Sarah.Fleming@beanfieldprimary.org 01536 262000 <p>1.3 The Multi-Agency Safeguarding Hub (MASH) The MASH team can advise on whether a family needs early help or whether they meet the threshold for statutory child protection. Telephone: 0300 126 1000. They can be contacted by members of staff or parents/carers.</p> <p>1.4 Local Authority Designated Officer (DO) <u>Northamptonshire</u> Email: LADOferral@northamptonshire.gov.uk Designated Officers Andy Smith - 01604 367862, Christine Lamb - 01604 362633 http://www.northamptonshirescb.org.uk/schools/referrals-eha/designated-officer/ <u>Cambridgeshire</u> Email: LADO@cambridgeshire.gov.uk Telephone 01223 727967 (office hours) Designated Officers Janet Barr - 01223 727968, Paul Walker - 01223 727969, 01223 727967 https://www.safeguardingcambspeterborough.org.uk/children-board/professionals/lado/</p>

1.5 Out of hours service

Should you need to contact children's Social Care urgently during the evening, at night or at the weekend, phone the out of hours team on 01604 626938 (Northamptonshire) or 01733 234724 (Cambridgeshire). An operator will answer the phone and take details of the problem and your contact details. They will then pass this information over to the duty social worker.

1.6 Whistleblowing Officer

Jane MacDonald (jmacdonald@grettonprimary.org or 01536 770366)

1.7 NSPCC

0808 800 5000 or help@nspcc.org.uk – 24 hour service.

	Brooke Weston Academy			Corby Business Academy			Kettering Science Academy			Corby Technical School			Thomas Clarkson Academy	
	Associate Principal Shaun Strydom			Associate Principal Simon Underwood			Principal Tony Segalini			Principal Angela Reynolds			Principal Richard Scott	
	Designated Safeguarding Lead Rebecca Waterson			Designated Safeguarding Lead Amy Harris			Designated Safeguarding Lead Claire Greaves			Designated Safeguarding Lead Elizabeth James			Designated Safeguarding Lead Alex Salmon	
Deputy Safeguarding Lead Angeline Annable	Deputy Safeguarding Lead Wanda Gerard	Deputy Safeguarding Lead Nina Smith	Deputy Safeguarding Lead Elaine Pickford	Deputy Safeguarding Lead Julian Smith		Deputy Safeguarding Lead Laurie Chapman	Deputy Safeguarding Lead		Deputy Safeguarding Lead Linda Arnold	Deputy Safeguarding Lead Emma Toye		Deputy Safeguarding Lead Hayley Davies	Deputy Safeguarding Lead Claire Ziebart	Deputy Safeguarding Lead Claire Thomas
Deputy Safeguarding Lead Vicky Hilling	Safeguarding Governor Vikki Williams			Safeguarding Governor Claudia Slabon			Safeguarding Governor Paul Jackson			Safeguarding Governor Gary Campbell		Deputy Safeguarding Lead Kate Allgood	Safeguarding Governor Jan Hutchinson	Deputy Safeguarding Lead Emma Flisher
	Beanfield Primary			Peckover Primary			Compass Primary			Gretton Primary			Oakley Vale Primary	
	Principal Samantha Eathorne			Principal Carrie Norman			Principal Jo Fallowell			Principal Jane MacDonald			Principal Emma Goodwin	
Deputy Safeguarding Lead Sam Eathorne	Designated Safeguarding Lead Sarah Fleming	Deputy Safeguarding Lead Charlie Smith	Deputy Safeguarding Lead Kate Kendal	Designated Safeguarding Lead Esther Fletcher	Deputy Safeguarding Lead Charlotte Salter		Designated Safeguarding Lead Fran Dunn			Designated Safeguarding Lead Sarah Block			Designated Safeguarding Lead Julia Baulch	
Deputy Safeguarding Lead Kelly Greaves	Deputy Safeguarding Lead Callum Reilly	Deputy Safeguarding Lead Julia Dickinson	Deputy Safeguarding Lead Nikki Howell	Deputy Safeguarding Lead Louise Tombleson	Deputy Safeguarding Lead Sam McGovern		Deputy Safeguarding Lead Nicole Andrews			Deputy Safeguarding Lead Hannah Moore			Deputy Safeguarding Lead Becky Annetts	Deputy Safeguarding Lead Andy Buffham
	Safeguarding Governor Stephen Prati			Safeguarding Governor David Oliver	Deputy Safeguarding Lead Reg Talbot		Safeguarding Governor Reg Talbot			Safeguarding Governor Tim Eaton			Safeguarding Governor Stephen Prati	

Brooke Weston Academy – 01536 396366

Rebecca Waterson, Designated Safeguarding Lead, RWaterson@brookeweston.org
 Nina Smith, Deputy Safeguarding Lead, NSmith@brookeweston.org
 Wanda Gerard, Deputy Safeguarding Lead, WGerard@brookeweston.org
 Angeline Annable, Deputy Safeguarding Lead, AAnnable@brookeweston.org
 Vicky Hilling, Deputy Safeguarding Lead, VHilling@brookeweston.org

Corby Business Academy – 01536 303120

Amy Harris, Designated Safeguarding Lead, Amy.Harris@corbybusinessacademy.org
 Elaine Pickford, Deputy Safeguarding Lead, Elaine.Pickford@corbybusinessacademy.org
 Julian Smith, Deputy Safeguarding Lead, Julian.Smith@corbybusinessacademy.org

Corby Technical School – 01536 213100

Elizabeth James, Designated Safeguarding Lead, EJames@corbytechnicalschoo.org
 Linda Arnold, Deputy Safeguarding Lead, LArnold@corbytechnicalschoo.org
 Emma Toye, Deputy Safeguarding Lead, EToye@corbytechnicalschoo.org

Kettering Science Academy – 01536 532700

Claire Greaves, Designated Safeguarding Lead, CGreaves@ketteringscienceacademy.org
 Laurie Chapman, Deputy Safeguarding Lead, LChapman@ketteringscienceacademy.org
 Kayleigh Incles, Deputy Safeguarding Lead, KIncles@ketteringscienceacademy.org
 Victoria Matcham, Deputy Safeguarding Lead, VMatcham@ketteringscienceacademy.org

Thomas Clarkson Academy – 01945 585237

Alex Salmon, Designated Safeguarding Lead, ASalmon@thomasclarksonacademy.org
 Hayley Davies, Deputy Safeguarding Lead, HDavies@thomasclarksonacademy.org
 Claire Ziebart, Deputy Safeguarding Lead, CZiebart@thomasclarksonacademy.org
 Emma Flisher, Deputy Safeguarding Lead, EFlisher@thomasclarksonacademy.org
 Claire Thomas, Deputy Safeguarding Lead, CThomas@thomasclarksonacademy.org
 Kate Allgood, Deputy Safeguarding Lead, KAllgood@thomasclarksonacademy.org

Key:	Duties:
Principal	Statutory for the Principal to maintain overall responsibility; liaise with Designated Officer as and when necessary; audit CPOMS 3 times per year
Designated Safeguarding Lead	Statutory for the DSL to be part of the Academy SLT; maintain overall day to day responsibility; undertake refresher training every 2 years* and deliver whole staff training annually (as outlined in the Keeping Children Safe in Education document)/ not less than termly; attend BWT training opportunities; maintain accurate records through CPOMS; ensure knowledge of appropriate policies; liaise with Safeguarding Governor *Where a DSL's training has expired, BWT will allow the DSL to continue in the role for a maximum period of 3 months provided that a refresher training session has been booked.
Deputy Safeguarding Lead	Refer to and liaise with the Local Authority and other agencies in line with "Working Together to Safeguard Children 2018"; undertake refresher training every 2 years*; act as a source of support, advice and expertise to all staff on safeguarding matters; inform DSL of any issues including those progressing to S47; attend BWT training opportunities; maintain accurate records through CPOMS; liaise with Safeguarding Governor; encourage a culture of listening to students and promoting their wishes and feelings *Where a Deputy Safeguarding Lead's training has expired, BWT will allow the Deputy Safeguarding Lead to continue in the role for a maximum period of 3 months provided that a refresher training session has been booked.

Beanfield Primary – 01536 262000

Sarah Fleming, Designated Safeguarding Lead, Sarah.Fleming@beanfieldprimary.org

Julia Dickinson, Deputy Safeguarding Lead, Julia.Dickinson@beanfieldprimary.org

Callum Reilly, Deputy Safeguarding Lead, Callum.Reilly@beanfieldprimary.org

Sam Eathorne, Deputy Safeguarding Lead, Sam.Eathorne@beandfirdprimary.org

Kelly Greaves, Deputy Safeguarding Lead, Kelly.Greaves@beanfieldprimary.org

Charlie Smith, Deputy Safeguarding Lead, Charlie.Smith@beanfieldprimary.org

Compass Primary – 01536 532707

Fran Dunn, Designated Safeguarding Lead, FDunn@compassprimary.org

Nicole Andrews, Deputy Safeguarding Lead, NAndrews@compassprimary.org

Gretton Primary – 01536 770366

Sarah Block, Designated Safeguarding Lead, Sarah.Block@grettonprimary.org

Hannah Moore, Deputy Safeguarding Lead, Hannah.Moore@grettonprimary.org

Oakley Vale Primary – 01536 461199

Julia Baulch, Designated Safeguarding Lead, JBaulch@oakleyvaleprimary.org

Becky Annetts, Deputy Safeguarding Lead, BAnetts@oakleyvaleprimary.org

Andy Buffham Deputy safeguarding Lead, abuffham@oakleyvaleprimary.org

Peckover Primary – 01945 584741

Esther Fletcher, Designated Safeguarding Lead, efletcher@peckoverprimary.org

Carrie Norman, Deputy Safeguarding Lead, CNorman@peckoverprimary.org

Kate Kendal, Deputy Safeguarding Lead, kkendal@peckoverprimary.org

Louise Tombleson, Deputy Safeguarding Lead, ltombleson@peckoverprimary.org

Sam McGovern, Deputy Safeguarding Lead, smcgovern@peckoverprimary.org

Contact information for the Chief Executive in the event of reporting a Principal: acampbell@brookewestontrust.org / 01536 397000

2. Policy Statement

- 2.1** This policy sets out how the Brooke Weston Trust carries out its statutory responsibility to safeguard and promote the welfare of students in accordance with Section 157 of the Education Act 2002 and the Education (Independent School Standards) Regulations 2014.
- 2.2** The Brooke Weston Trust commits to providing an environment which safeguards and promotes the welfare, safety, health and guidance of our students. The Brooke Weston Trust recognises the importance of the contribution it can make to protecting and supporting students across its academies.
- 2.3** This policy fully adheres to the guidance as outlined by Keeping Children Safe in Education (KCSIE) (September 2020) and Working Together to Safeguard Children (February 2019). In particular, this policy emphasises the Trust’s position on the following:
- Schools must be aware of and follow the procedures established by the Safeguarding Partnership Boards (Northamptonshire and Cambridgeshire/Peterborough);
 - Staff are to be alert to signs of abuse and know to whom they should report any concerns or suspicions;
 - Schools must have procedures (of which all staff are aware) for handling suspected cases of abuse of students, including procedures to be followed if a member of staff is accused of abuse, or suspected of abuse;
 - A Designated Safeguarding Lead (DSL) and any Deputy Safeguarding Leads (DepSL’s) will have responsibility for co-ordinating action within the school and liaising with other agencies. They must be the most appropriate person to advise on the response to safeguarding concerns.
- 2.4** Brooke Weston Trust commits to work in partnership with the Northamptonshire Safeguarding Children Partnership (NSCP) and the Cambridgeshire and Peterborough Safeguarding Children Partnership and will follow their guidance and implement their systems and protocols for referring families for early help and reporting child protection concerns. The Partnerships will ensure that each academy is aware of issues within the community that are relevant to them. DSL’s will ensure that all staff and governors are aware of those issues and systems for reporting and will provide local safeguarding updates as signposted by the Partnership/s.
- 2.5** Key documents with which this policy is in accordance include:
- Keeping Children Safe in Education (KCSIE) September 2020
 - Working Together to Safeguard Children February 2019
 - The Children and Families Act 2014
 - The Children Act 1989 and 2004
 - S.175/157 The Education Act 2002 and 2011
 - Teachers’ Standards September 2012
 - Dealing with Allegations of Abuse Against Teachers and Other Staff March 2012
 - Protecting Children From Radicalisation: The Prevent Duty 2015 Education (Independent Schools Standards) (England) Regulations 2014
 - Information Sharing: Guidance for Safeguarding Services July 2018
 - Equality Act 2010
 - Public Sector Equality Duty 2012
 - Teaching Online Safety in Schools 2019
 - DfE Guidance on Relationships education, relationships and sex education (RSE) and health education July 2020
 - Laming Report 2003 – Victoria Climbié and “Baby Peter” Review 2009
 - What to do if you are worried a child is being abused 2015
 - Bichard Inquiry 2003 - the Soham murders
 - Jay Rotherham enquiry 2015

3. What are the core aims of this policy?

3.1 The aim of the policy is:

- To protect children from any maltreatment and prevent impairment of their health and/or development
- To ensure each academy offers a provision of safe and supportive environment for all children under its care, with a culture of vigilance
- To ensure that staff have the ability, knowledge and resources to safeguard the general welfare of children with a clear process for referring concerns to specific key safeguarding personnel
- To enable all children, no matter what their background or circumstance, to have optimum life chances beyond school

3.2 The Brooke Weston Trust will therefore ensure the following arrangements are in place to safeguard and promote the welfare of children:

- **Prevention:** The Brooke Weston Trust will provide an environment and establish and maintain an ethos where all students feel secure, are encouraged to talk and in which they are listened to carefully. Staff and volunteers will be trained regularly to understand their responsibilities with regard to reporting safeguarding or child protection concerns. Students are taught about safeguarding, including online, through various teaching and learning opportunities as part of a broad and balanced curriculum. Students are taught to recognise when they are at risk and how to get the help they need through PSHE, Wellbeing and mental health work and Anti-Bullying activities.
- **Protection:** The Brooke Weston Trust will ensure that each member of staff, governor and other visitor involved in regulated activity with students have an up to date DBS check and are sufficiently trained and supported to respond appropriately and sensitively to Child Protection concerns.
- **Support:** The Brooke Weston Trust ethos provides structured systems of support for all students. This includes teaching students, as part of the curriculum, to keep themselves safe from all forms of abuse and appointing appropriately qualified and experienced staff (DSLs and DepSL's) to provide advice, training and support around safeguarding concerns.
- **Working with parents and external agencies:** The Brooke Weston Trust will work closely with parents to ensure appropriate communications and actions are undertaken. The Brooke Weston Trust will develop and maintain links with relevant external agencies in all matters relating to safeguarding and child protection. All academies assess the risks and issues in the wider community as part of the safeguarding curriculum.
- **Commitment:** The Brooke Weston Trust expects that everyone to share this commitment, creating a culture of vigilance.

4. What are the principles behind this policy?

- 4.1 The Trust recognises that the welfare and safety of a student is always of paramount consideration and will work together with parents, carers and other agencies to safeguard and promote the welfare of the child.
- 4.2 The Trust recognises that all children regardless of age, special needs or disability, racial or cultural heritage, religious belief, gender or sexual orientation have the right to be protected from ill treatment and neglect and to experience a good standard of care.
- 4.3 The Trust recognises that all children have the right to be heard and that the wishes and feelings of the child should be sought and influence the decision making.
- 4.4 All incidents and allegations of suspicious or poor practice or abuse will be taken seriously, listened to and responded to appropriately. This includes allegations raised through the whistleblowing procedures.

- 4.5 There is a consistent understanding of acceptable behaviour of young people towards other young people and staff within the Trust.

5. Who does this policy apply to?

- 5.1 Safeguarding and promoting the welfare of children is **everyone's responsibility** – it is the duty of all staff and volunteers at Brooke Weston Trust to accept and understand their responsibilities for safeguarding. This policy extends to all governors, visitors and contractors who come into any Academy building.
- 5.2 Regular training and updates for all members of staff and volunteers and prominent signage throughout the academies will be provided to ensure that anyone who comes into contact with children understands their responsibility to observe, identify and report any concerns in line with the academies' reporting procedures.
- 5.3 The Brooke Weston Trust maintains an attitude of 'it could happen here.'

6. Who is responsible for carrying out this policy?

- 6.1 It is the duty of all staff employed by the Brooke Weston Trust to accept and understand their responsibilities for safeguarding and to follow the agreed principles and procedures outlined in this policy. It is the duty of all staff employed by the Brooke Weston Trust to attend all statutory training as deemed appropriate (see paragraph 9).
- 6.2 The Board of Directors**
- 6.2.1 The Board of Directors will determine and keep under review the Trust's safeguarding policy.
- 6.2.2 The Board of Directors will ensure that an effective organisation is created for the management of safeguarding and child protection concerns and will ensure that the Trust promotes the correct attitude towards safeguarding and child protection with staff, volunteers and visitors.
- 6.2.3 The Board of Directors will monitor and evaluate the effectiveness of the academies' safeguarding practices and procedures.
- 6.3 Chief Executive Officer**
- 6.3.1 The Chief Executive Officer, as delegated by the Board of Directors, is accountable for the safeguarding of children across Brooke Weston Trust and responsible for the implementation of this policy across the Trust's academies. This will be undertaken through the support of the Safeguarding Review Group.
- 6.3.2 The Chief Executive Officer reports to the Board of Directors on all safeguarding matters.
- 6.4 Safeguarding Review Group**
- 6.4.1 The core purpose of the Safeguarding Review Group is to initiate improvements in the Trust's working practices, systems and procedures to support effective safeguarding practice in schools' statutory and regulatory roles to protect young persons from potential or actual harm.
- 6.4.2 It is the responsibility of the Safeguarding Review Group to ensure implementation of the Trust's safeguarding policies, monitoring the effectiveness and impact of the policies and recommend and implement improvements where needed.
- 6.4.3 The Chair of the Safeguarding Review Group provides a (brief and by exception) written report to each Board meeting to report on risk in this area.
- 6.5 Local Governing Bodies**
- 6.5.1 It is the overarching responsibility of the local governing bodies to ensure that the Brooke Weston Trust's Safeguarding and Child Protection policy and procedures are in place at academy level and are operating effectively.

- 6.5.2 The local governing body must appoint a nominated Safeguarding Governor to monitor the academies' implementation of the policy in more depth and report back to the Local Governing Body.
- 6.5.3 All governors are expected to attend all relevant training and development provided by the Trust, including the annual safeguarding refresher training and Prevent training. It is the responsibility of all governors to ensure they have read and understood the KCSIE document (Part 1 and Annex A) and this policy and have signed a declaration confirming this has been undertaken.

6.6 Executive Principals

- 6.6.1 The Executive Principals have strategic responsibility for the standards in Trust schools as defined by the Ofsted framework. It is the responsibility of the Executive Principals to ensure that a suitable organisation within each academy is in place to satisfy the duties and arrangement as outlines in this policy, including ensuring that appropriate staffing with the required time, funding, resources and support is in place.
- 6.6.2 In co-ordination with the Principal, ensure that all relevant Senior Managers are capable and competent in their given roles and provided with suitable and sufficient information and instruction.
- 6.6.3 The Executive Principals are responsible for ensuring each academy has a nominated Safeguarding Governor.

6.7 Principal/Associate Principal

- 6.7.1 Principals/Associate Principals are accountable for the effective safeguarding of children in their academies.
- 6.7.2 It is the responsibility of the Principal/Associate Principal to implement this and all related policies and procedures within the academy, ensuring that the outcomes are monitored.
- 6.7.3 It is the responsibility of the Principal/Associate Principal to ensure a senior person is appointed for handling Child Protection and Safeguarding matters for the academy (DSL) and that deputies are in place (DepSL's)). The name and the responsibilities of these people are known to all staff.
- 6.7.4 It is the responsibility of the Principal/Associate Principal with the support of senior managers, to ensure that all staff are aware of and understand the Trust's policy on safeguarding and are provided with regular appropriate training to support them in their responsibilities for reporting safeguarding concerns.
- 6.7.5 It is the responsibility of the Principal/Associate Principal to promote and ensure effective use of the Child Protection Online Management System (CPOMS) amongst staff. This is the system by which safeguarding referrals are made to and managed by the DSL's and DepSL's. The Principal/Associate Principal delegates the management of CPOMS to the DSL.
- 6.7.6 It is the responsibility of the Principal/Associate Principal to promote an environment in which students feel safe and are listened to and this includes ensuring that the curriculum includes safeguarding and how to keep safe.
- 6.7.7 It is the responsibility of the Principal/Associate Principal to ensure that the Brooke Weston Trust's whistle blowing policy and procedures have been disseminated to all staff and that any allegations against staff are responded to appropriately.
- 6.7.8 It is the responsibility of the Executive Principal/Principal/Associate Principal or CEO to respond to any safeguarding allegations or concerns about staff appropriately implementing the appropriate disciplinary and appeals procedures as required.
- 6.7.9 The Principal/Associate Principal is to ensure safe recruitment practice is followed when recruiting to posts.

6.8 Designated Safeguarding Leads (DSL)

- 6.8.1** As defined within KCSIE the DSL takes lead responsibility for safeguarding and child protection (including online safety). This should be explicit in their job description. Additionally the DSL is responsible for dealing with allegations of abuse, in accordance with local and statutory procedures. The DSL must ensure that all cases of suspected or actual concerns associated with child protection are referred to the appropriate agency, ensuring the Principal is apprised of the situation.
- 6.8.2** It is the responsibility of the DSL to ensure that all staff in the academy receive initial training and appropriate regular update training via whole staff training or bulletins on safeguarding, including how to recognise the signs and symptoms of abuse. This includes provision of training on how to report a safeguarding concern through the academy's CPOMS safeguarding referral system.
- 6.8.3** It is the responsibility of the DSL to ensure that all staff must have an understanding of child abuse, neglect and exploitation and their main indicators, including for looked after children and additional vulnerabilities of children with special educational needs and disabilities.
- 6.8.4** It is the responsibility of the DSL to ensure that parents and carers are informed of the safeguarding procedures by a statement in the Academy prospectus, access to the policy and procedures on the Academy website and reminders via newsletters.
- 6.8.5** It is the responsibility of the DSL to be aware and up to date with latest national and local guidance and requirements, ensuring this is shared with all key personnel.
- 6.8.6** It is the responsibility of the DSL to ensure that they attend accredited enhanced training as required for fulfilling the role.
- 6.8.7** The DSL is responsible for ensuring effective communication between the academy and other relevant agencies where there is a safeguarding concern.
- 6.8.8** The DSL is responsible for ensuring relevant records are passed on appropriately when students transfer to other schools or are being educated at alternative provision or off-site education.
- 6.8.9** It is the responsibility of the DSL to ensure effective communication takes place between the academy and other external agencies in respect of safeguarding.
- 6.8.10** It is the responsibility of the DSL to ensure that local governing bodies are briefed and informed of their responsibilities in safeguarding and how to support academy staff in their safeguarding role.
- 6.8.11** It is the responsibility of the DSL to ensure that safe recruitment checks are carried out and that the academy's Single Central Record is up to date in line with statutory requirements, as set out in KCSIE
- 6.8.12** It is the responsibility of the DSL to be aware of students who have a social worker and help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues with teachers and school and college leadership staff.
- 6.8.13** If the DSL is unavailable or absent the nominated Deputy Safeguarding Lead (DepSL) will act as the DSL.
- 6.8.14** The role of the DSL is set out in Annex B in Keeping Children Safe in Education.

6.9 All Staff

- 6.9.1 All staff must attend all relevant training and development provided by Brooke Weston Trust and the academy in which they are based.
- 6.9.2 It is the responsibility of all staff to ensure they have read and understood Part 1 and Annex A of KCSIE document and this policy and have signed a declaration confirming this has been undertaken.
- 6.9.3 All staff must be aware of who the DSL and DDSL’s are within the academy and have their contact details.
- 6.9.4 It is the responsibility of all staff to be aware of how to deal with a disclosure made by a student, in line with this policy. All staff must also be alert to the signs of harm and abuse.
- 6.9.5 All staff must be vigilant at all times for signs of safeguarding and child protection concerns and report them as soon as possible using CPOMS.

6.10 Trust Safeguarding Lead and Safeguarding Advisor(s)

- 6.10.1 The Trust Safeguarding Advisor will work in an advisory capacity across the Trust, providing support and guidance to Principals, DSL’s and DDSL’s on all safeguarding related matters.
- 6.10.2 The main areas of responsibility include:
 - Strategic oversight of developing safeguarding and child protection ensuring statutory compliance and development of this area
 - Provision of advice, guidance and support to schools on complex safeguarding cases
 - Sharing of best practice through DSL networking sessions across BWT academies
 - Manage the safeguarding and Prevent audit processes to ensure sufficient quality assurance of safeguarding systems within schools
- 6.10.3 Each academy Principal will retain accountability for all safeguarding-related matters within their academy.

7. Definitions

- 7.1 Paragraph 4 in KCSIE states that safeguarding and promoting the welfare of children is defined as: protecting children from maltreatment;
- preventing impairment of children’s mental and physical health or development;
 - ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
 - taking action to enable all children to have the best outcomes.’

The new emphasis here in on the *mental* health and development as well as the physical.

Child abuse is covered by the term “significant harm” and is defined in the Adoption and Children Act 2002 in the following way;

- “harm” means ill-treatment or the impairment of health or development
- “development” means physical, intellectual, emotional, social or behavioural development
- “health” means physical or mental health
- “ill-treatment” includes sexual abuse and forms of ill-treatment which are not physical

- 7.2 All Academy staff have the responsibility to act if they have any concerns about the behaviour of an individual towards a student. All staff should be aware of the main categories of abuse:
- Physical
 - Emotional
 - Sexual

- Neglect
- Female Genital Mutilation
- Child Sexual Exploitation
- Domestic abuse

All staff should be concerned about a student if he/she presents with indicators of possible significant harm ([Appendix 1 – Signs and Symptoms of Possible Significant Harm](#)).

- 7.3** All staff should have an understanding and awareness of safeguarding incidents and/or behaviours associated with factors outside the academy. These should be considering the context within which such incidents or behaviours occur, known as ‘contextual safeguarding’ (definition included in [Appendix 2](#)).
- 7.4** Key safeguarding issues that staff should be aware of (see Appendix 2 for further information):
- 1) Children and the court system
 - 2) Children missing from education (CME)
 - 3) Children with family members in prison
 - 4) Child Criminal Exploitation (CCE)
 - 5) Child Sexual Exploitation (CSE)
 - 6) County Lines
 - 7) Domestic Abuse
 - 8) Homelessness
 - 9) So-called honour-based abuse including Female Genital Mutilation and Forced Marriage
 - 10) Britishness
 - 11) Preventing radicalisation: Extremism, Radicalisation and Terrorism
 - 12) The Prevent duty and Channel
 - 13) Peer on peer/child on child abuse
 - 14) Sexual violence and Sexual harassment
 - 15) Up skirting (see paragraph 8.4)
 - 16) Drug and Substance misuse
 - 17) Contextual safeguarding
 - 18) Serious violence
 - 19) Mental Health
 - 20) Children with a Social Worker
 - 21) Other safeguarding issues as relevant
 - Sexting and inappropriate images
 - Trafficking
 - Fabricated illness
 - Private fostering

7.5 Key areas where staff should have a heightened awareness of safeguarding:

- Student's Health and Safety
- Bullying, including cyber-bullying (by text message, sexting, social networking sites etc)
- Racist abuse
- Harassment and discrimination
- Use of physical intervention
- Meeting the needs of students with medical conditions (outlined in The Child and Families Act 2014)
- Providing First Aid
- Intimate care
- Teenage relationship abuse
- Faith abuse
- Self-Harm
- Educational visits
- Road Safety
- School mobility (admissions and removal from roll)
- Young Carers

8. Procedures for Reporting**8.1 Reporting a Concern**

- 8.1.1** If a child discloses that he or she has been abused in some way, the member of staff/volunteer should:
- Listen to what is being said without displaying shock, disbelief or other emotion
 - Accept what is being said
 - Allow the child to talk freely
 - Reassure the child, but not make promises which might not be possible to keep
 - Not promise confidentiality – it might be necessary to refer to Children’s Services: Safeguarding and Specialist Services
 - Reassure them that what has happened is not their fault
 - Stress that it was the right thing to tell
 - Listen, only asking questions when necessary to clarify
 - Not criticise the alleged perpetrator
 - Explain what has to be done next and who has to be told
 - Make a written record (see Record Keeping), informing the child that you are doing so
 - Pass the information to the DSL and DDSL without delay, either in person (for immediate, priority cases) or through the use of CPOMS (lower-level concerns) depending on the nature of the concern.
- 8.1.2** Staff should use the online system CPOMS to record these early concerns and alert the DSL and or DepSL within 30 minutes of receiving this information. If the student does begin to reveal that they are being harmed, staff should follow the advice below. Following an initial conversation with the student, if the member of staff remains concerned, they should discuss their concerns with the DSL.
- 8.1.3** Any member of staff that suspects or has evidence of child abuse must **immediately** contact the DSL or the DepSL within the Academy for handling these issues. They must not start their own investigation. Contact must also be made with the DSL if a member of staff has any suspicion or act of child abuse or neglect reported to them.
- 8.1.4** From this point on, the DSL or the DepSL will keep a confidential record of all comments, actions and observations. These records will be filed, kept securely and access will only be given to the DSL, the DepSL and the Executive Principal/Principal/Associate Principal.
- 8.1.5** The DSL or the DepSL will automatically inform the Executive Principal/Principal/Associate Principal of any new cases and from that point on, any further developments. The DSL or the DepSL will then advise on the next step or steps and liaise with any external agencies outside Academy that may be necessary
- 8.1.6** The academy will normally seek to discuss any concerns about a student with their parents. This must be handled sensitively and the DSL or the DepSL will make contact with the parent in the event of a concern, suspicion or disclosure.
- 8.1.7** However, if the DSL or the DepSL believes that notifying parents could increase the risk to the child or exacerbate the problem, advice will first be sought from children’s social care/Multi Agency Safeguarding Hub (MASH)
- 8.1.8** If the DSL or the DepSL believes that “a child is experiencing or may have already experienced abuse or neglect” or “is at risk of suffering significant harm” either now or in the future then the academy will comply with the procedures of the Local Safeguarding Children Board.

8.2 Responding and Referring

8.2.1 The first step outlined in these procedures is for the DSL to contact the local Social Care Department/MASH after which a course of action will be agreed and the guidance of Social Care will be followed. If it is advised that a referral should take place the process shall be as follows:

- The referral shall be made to the relevant Children and Young People Service (CYPS) through MASH
- The referral will be made initially by telephone contact to prevent any delay placing the child at further risk of harm. This will be followed up with online referral as an evidence trail.
- Where practical, concerns will be discussed with the family and notified that a referral to the CYPS referral team will be made, unless MASH advise that contact should not be made by the academy. This will be recorded on the inter-agency form.
- The academy will be guided by MASH as to the appropriate outcome e.g. complete an Early Help Assessment (EHA) or refer to a relevant specialist agency.
- All Child Protection records will be maintained in a confidential file at the academy. The protocols as outlined in the Data Protection Policy must be followed.

8.3 Allegations Against Members of Staff

8.3.1 The Brooke Weston Trust recognises the possibility that adults working in the school may harm children, including governors, volunteers, supply teachers and agency staff.

8.3.2 The guidance in KCSIE (Part Four) should be followed where it is alleged that anyone working in the school or college that provides education for children under 18 years of age, including supply teachers and volunteers has:

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

8.3.3 Staff who are concerned about the conduct of a colleague towards a student may worry that they have misunderstood the situation and may wonder whether a report could jeopardise their colleague's career. All staff must remember that the welfare of the child is paramount. The Brooke Weston Trust's Whistleblowing policy (TPO/STA/19) and Dealing with Allegations of Abuse Against Staff Policy (TPO/STA/21) enables staff to raise concerns or allegations in confidence and for a sensitive enquiry to take place.

8.3.4 All concerns of poor practice or possible child abuse by colleagues should be reported to the Principal/Associate Principal. Complaints about the Principal/Associate Principal or Governors should be reported to the CEO. Alternatively, staff are able to report the concern through the Trust whistleblowing procedure or directly to the Designated Officer. Further detail is provided in the Dealing with Allegations of Abuse Against Staff Policy (TPO/STA/21).

8.4 Peer on Peer Abuse

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

8.4.2 Peer on peer abuse can also include 'upskirting'. 'Upskirting' typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or

buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. This is now a criminal offence.

- 8.4.3 All concerns relating to peer on peer abuse should be reported as a safeguarding concern in line with paragraph 8.1 of this policy.

9. Training and Development

- 9.1 Brooke Weston Trust ensures all staff complete safeguarding and child protection training as part of their induction. The DSL or the DepSL will ensure that there are additional opportunities for such training throughout the academic year for mid-year starters.
- 9.2 Brooke Weston Trust commits to providing regular refresher training on safeguarding and child protection to all staff and governors. It is compulsory for all staff and governors to attend the annual training, held at the beginning of each academic year and update training and advice (email updates, e-bulletins, staff meetings) provided throughout the year to ensure that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse and neglect and of the appropriate procedures to follow. Such training will include updates on relevant local issues as flagged by the Local Children Safeguarding Board. Temporary staff and volunteers will be made aware of the safeguarding policies and procedures by the DSL or the DepSL.
- 9.3 In the event that a governor of a Brooke Weston Trust academy has been unable to attend safeguarding training sessions by the specified date for completion, their position as a governor will be reviewed by the Chair of Governors in discussion with the Principal of the academy.
- 9.4 Brooke Weston Trust expects on all members of staff and Governors across the Trust to have read the Keeping Children Safe in Education document, the Trust Safeguarding Policy and undertaken the on-line Channel Prevent training or any other package deemed appropriate by the Safeguarding Review Group. An annual record will be maintained of attendance at safeguarding training by each individual Academy.
- 9.5 The Principal/Associate Principal will ensure that all nominated staff (DSL and DepSL) receive specialised training on safeguarding and child protection which is updated annually at the beginning of an academic year. The DSL and DepSL will attend Local Authority and other training courses as necessary.
- 9.6 The DSL and DepDSL will attend Prevent training (WRAP) as provided by the Home Office.
- 9.7 All members of the Academy Senior Management team and the Chief Executive will be trained in Safer Recruitment.

10. Recruitment and Selection of Staff

- 10.1 Brooke Weston Trust recognises that safe recruitment practices are an essential part of creating a safe environment for children and young people. Consequently, we will ensure that staff and volunteers working at the academy are suitable to do so, therefore, they do not pose any kind of risk to our students.
- 10.2 The recruitment and selection of all employees will be made on merit and in accordance with the provisions of Employment Law, the Education Act 2011, the School Staffing (England) Regulations 2009 and the statutory guidance, *Safeguarding Children and Safer Recruitment in Education Settings* and the Academy’s equal opportunities policy. See also <https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006/disqualification-under-the-childcare-act-2006>
- 10.3 Safer recruitment should be reflected in every stage of the process and safeguarding judgements need to be made, in differing degrees, in relation to all those that a student in school may come into contact with, as they may be perceived to be safe and trustworthy adults.

- 10.4** The Trust will ensure that its recruitment and selection procedures include clear systems to vet all applicants before they are placed at a school including:
- All advertisements for vacancies across the Trust will make reference to the Trust's commitment to safeguarding children and young people
 - An Academy application form is completed for all applicants
 - Following up two professional references, including at least one who can comment on the applicant's suitability to work with children
 - Requesting copies of original qualifications
 - Ensuring appropriate police checks are made and enhanced DBS disclosures obtained
 - Reference to and awareness of safeguarding issues is addressed during the interview process
 - Please refer to the Recruitment Policy (TPO/STA/27) for further information, including a checklist of pre-employment checks.
- 10.5** The Trust will ensure that members of the Senior Management team have received training in Safer Recruitment and that all interview panels have a member of trained staff on them. Safer recruitment training should be renewed at least every 5 years.
- 10.6** Where the Trust recruits temporary or supply staff through an agency, the Trust will ensure the following through the relevant agency:
- References from the most recent placements
 - Right to work documentation
 - Ensuring appropriate police checks and an enhanced DBS disclosure is in place
 - Documentary evidence of the candidate's identity
- 10.7** Each academy will ensure that the following procedures are followed for contractors on site:
- Contractor to provide original and valid DBS certificate and photo ID to school/site for scrutiny. If approved then proceed to step 2, if rejected then refuse entry to contractor (notwithstanding option to provide escort)
 - Acceptance by school/site of documentation.
 - Site inserts copy of documentation into an "approved visitors" folder with register at reception. NB all documentation must be destroyed on completion of project.
 - Contractor "signed into/onto" site and given formal site induction by Site Manager and safeguarding lead who outlines Safeguarding Policy/practice at earliest opportunity.
 - Contractor issued with an "approved visitor" badge.
 - Contractor conducts work.
 - On departure signs out, returns badge and visit duration is recorded in approved visitor register.
 - On subsequent visits contractor shows photo ID and signs in at reception. Reception refers to approved visitor register and records and alerts contractor to any known issues/risks/events.
 - Site staff notified accordingly by reception staff.
 - Approved visitor granted access to site to undertake work task.

11. Single Central Record

- 11.1** Each academy will maintain a single central record of all Academy employees, agency staff, consultants, volunteers (including governors), contractors and any others involved in regulated activity. This record will include:
- An identity check
 - Barred list check
 - An enhanced DBS check for those appointed after 2006
 - Prohibition from teaching check
 - Prohibition from management check, including section 128
 - Checks on people living or working outside the UK
 - Previous employment history checks
 - Two written references
 - Information regarding past disciplinary actions or allegations
 - Disclosure and Barring Service (DBS) checks as appropriate to their role
 - Evidence of qualifications
 - Evidence of permission and suitability to work with children and young people for staff who are not nationals of an (European Economic Area) EEA country
- 11.2** The SCR will be overseen and directly managed by the Principal, who is responsible for safeguarding in the academy and the academy safeguarding leadership team. It is the responsibility of the HR Administrator/equivalent within the academy to maintain the information on the single central record. Audits will be conducted by the Designated Senior Lead on a termly basis.
- 11.3** A SCR will be maintained centrally for all Central Team and Trust-wide members of staff and Directors/subcommittee members. This will be shared with all Brooke Weston Trust academies as and when it is updated.
- 11.4** For further information about DBS checks, please refer to the Trust's Disclosure and Barring Service Checks Policy (TPO/STA/03).

12. The Curriculum

- 12.1** Through the curriculum, staff will raise students' awareness and build their confidence and resilience so that they have a range of contacts and strategies to ensure their own protection and that of others, recognising that students need opportunities to develop the skills they need to stay safe from abuse.
- 12.2** There should be opportunities within the curriculum for students to develop the skills they need to recognise and stay safe from abuse. All students, through the curriculum, should be encouraged to be healthy, to stay safe, to enjoy and achieve, to make a positive contribution and to achieve economic wellbeing. There should also be opportunities for students to learn about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum.

13. Looked After Children and Previously Looked After Children

- 13.1** All staff must be aware of the issues regarding safeguarding for looked after and previously looked after children which is identified as a vulnerable group. Leaders must ensure that staff possess the necessary skills, knowledge and understanding to keep looked after children safe.
- 13.2** All appropriate staff will hold the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. They will also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her. The designated safeguarding lead should have details of the child's social worker and the name of the virtual school head in the authority that looks after the child.

- 13.3** When dealing with looked after children Brooke Weston Trust academies commits to work closely with all relevant agencies to ensure that prompt action is taken when necessary to safeguard these children.
- 13.4** The Principal of each academy must appoint a designated teacher. Designated teachers have the responsibility to promote the educational achievement of children who are looked after and previously looked after (as outlined in the DfE statutory guidance, *The designated teacher for looked after and previously looked-after children*, 2018). They must be appropriately qualified and experienced to fulfil this role.
- 13.5** Virtual school heads receive Pupil Premium Plus additional funding based on the latest published numbers of children looked after in the authority. Each Academy's Designated Teacher for looked after and previously looked after children will work with the virtual school head to monitor the child's welfare and discuss how funding can be best used to support the progress of the child and meet the needs identified in the child's personal education plan.

14. Children with Special Educational Needs and Disabilities

- 14.1** Brooke Weston Trust fully recognises the importance of awareness around additional vulnerabilities of children with special educational needs (SEN) and disabilities with regards to additional safeguarding challenges.
- 14.2** Staff at each academy will be supported through training and development in order that they are aware that additional barriers can exist when recognising abuse and neglect in this group of children. These barriers can include:
- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration
 - Being more prone to peer group isolation than other children
 - Students with SEN and disabilities can be disproportionately impacted by things like bullying - without outwardly showing any signs
 - Communication barriers and difficulties in overcoming these barriers

All academies identify students who might need more support to be kept safe or to keep themselves safe and put support in place.

15. Alternative Provision

- 15.1** All academies are responsible for the safeguarding of their students when they have placed in an alternative provision. Academies should obtain a written statement from the provider that they have completed all the vetting and barring checks that are necessary on their staff. An annual QA check should take place, along with random spot and planned visits. It is essential that all students on the academy roll have their attendance checked daily and their progress and attainment at least once a half term. Regular contact with parents must be maintained.

16. Record Keeping, Confidentiality and Information Sharing

- 16.1** Any member of staff receiving a disclosure of abuse from a child or young person or noticing signs or symptoms of possible abuse in a child or young person, will record the notes as soon as possible (within half an hour of the disclosure), writing down as exactly as possible using the child's own words, what was said or seen, putting the scene into context, and giving the time and location. Dates and times of events should be recorded as accurately as possible, together with a note of when the record was made.
- 16.2** All records must be uploaded onto Child Protection Online Management System (CPOMS), the safeguarding referral system (or in hard copy where this system is not accessible) – all records should be signed and dated clearly. Children will not be asked to make a written statement themselves or to sign any records.

- 16.3** Hard copies of any concern forms and other written information will be stored in a locked facility and any electronic information will be password protected and only made available to relevant individuals.
- 16.4** Every effort will be made to prevent unauthorised access, and sensitive information should not be stored on laptop computers, which, by the nature of their portability, could be lost or stolen. If it is necessary to store child protection information on portable media, such as a CD or flash drive, these items will also be kept in locked storage. Child protection information will be stored separately from the student's school file and the school file will be 'tagged' to indicate that separate information is held.
- 16.5** Staff have the professional responsibility to share relevant information about the protection of children with the DSL and Principal and potentially external investigating agencies under the guidance of the DSL.
- 16.6** The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 is in place to protect the personal information of individuals. It does not prohibit information about children being shared with specific authorities if it is for the purposes of safeguarding children and individuals at risk. Information that could be relevant to keeping a child safe should be shared so that informed decisions can be made about a child's welfare. We have a duty of care for our students and safeguarding is of upmost importance to us. GDPR does not 'trump' safeguarding. Processing safeguarding data is necessary for compliance with our legal obligation to which Brooke Weston Trust is subject. Therefore, consent is not needed for the effective sharing of safeguarding information between an academy and relevant authorities.
- 16.7** The Trust will uphold confidentiality at all times in line with the Data Protection Act Principles to ensure that information is:
- Processed for limited purposes
 - Adequate, relevant and not excessive
 - Accurate
 - Kept no longer than necessary
 - Processed in accordance with the data subject's rights
 - Secure
- 16.8** Upon receipt of any request regarding direct access to academy documentation on a Child Protection file, the Principal and DSL will be informed and a decision taken on the appropriate way forward in accordance with the Data Protection Policy.
- 16.9** In the event of a student who is being dealt with under the academy's child protection procedures transferring to another school, the academy will:
- Find out the name of the receiving school (and, where appropriate the Local Authority)
 - Contact the relevant member of staff at that school to discuss the transfer
 - Securely send all information relating to the student to the receiving school (and where relevant the Local Authority)
 - Check with the receiving school that the student has actually arrived there on the expected day; and inform all relevant agencies of the transfer.
- 16.10** Any external individual or organisation contracted by the academies to work with academy students must report any child protection incidents or disclosures from students to the Principal or DSL at the earliest opportunity. Such bodies will, as part of their contractual arrangements with the academies, be required to work in accordance with the Trust's child protection and safeguarding policy.

17. Abuse of Trust

17.1 Inappropriate behaviour by staff towards students is unacceptable. Under the Sexual Offences Act 2003, it is an offence for a person over the age of 18 to have a sexual relationship with a person under the age of 18, where that person is in a position of trust, even if the relationship is consensual. This means that any sexual activity between a member of staff and a student under 18 may be a criminal offence, even if that student is over the age of consent. Other examples of inappropriate behaviour can be found in the Professional and Safe Conduct policy (TPO/STA/10). Such offences will be handled in line with the Dealing with Allegations of Abuse Against Staff (TPO/STA/21).

18. Complaints

18.1 The Brooke Weston Trust's complaints procedure will be followed where a student or parent raises a concern about poor practice towards a student that initially does not reach the threshold for child protection action. Complaints are managed by senior staff, the Principal/Associate Principal and governors and in exceptional circumstances the Chief Executive. Complaints from staff are dealt with under the school's complaints and disciplinary and grievance procedures (TPO/QA/02).

19. Use of physical interventions

19.1 There is an absolute ban on the use by any member of staff of any form of corporal punishment. This includes any physical contact which is deliberately intended to punish a student, or which is primarily intended to cause pain, injury or humiliation.

19.2 It is important to allow children to do what they can for themselves, but depending on age and circumstances it may be necessary for some physical contact to take place; (e.g. a child who is hurt, who needs instruction in the use of a particular instrument/piece of equipment, safety issues such as the need to prevent a child hurting themselves, running into the road etc.).

19.3 Section 93 of the Education and Inspections Act 2006 enables school staff to use 'reasonable force' to prevent a student from:

- committing any offence (or, for a student under the age of criminal responsibility, what would be an offence for an older student) ;
- causing personal injury to, or damage to the property of, any person (including the student themselves); or
- prejudicing the maintenance of good order and discipline at the school or among any students receiving education at the school, whether during the teaching session or otherwise.

19.4 School staff may also be empowered to carry out physical searches for weapons, illegal drugs, pornography etc. Actions by school staff must at all times be in accordance with guidance and procedures. In the event of searches or physical restraint being needed, parents will be informed the same day.

20. Online Safety

20.1 The Brooke Weston Trust is committed to promote the welfare and safety of our students when using digital technologies. With reference to the DfE Teaching Online Safety in Schools guidance, the Brooke Weston Trust recognises the importance of the contribution it can make to protecting and supporting students across its Academies in their use of these technologies. Please see the Online Safety policy (TPO/STU/12) for further information.

When students use the school's network to access the internet, students are protected from inappropriate content by our filtering and monitoring systems. However, many students are able to access the internet using their own data plan. To minimise inappropriate use each school has an ICT Acceptable Use Policy. Please see this policy for details about how students will be kept safe when they are accessing 'online learning' whilst out of school.

21. Early Years Settings within Academies

- 21.1 As an early year's provider delivering the Early Years Foundation Stage (EYFS), all Brooke Weston Trust academies aim to meet the specific safeguarding and child protection duties set out in the Childcare Act 2006 and related statutory guidance ([Statutory framework for the early years foundation stage, April 2017](#)).
- 21.2 All Brooke Weston Trust academies will ensure that all children in the nursery and reception classes, and/or two-year old provision, are able to learn, develop, be safe and healthy by providing;
- A safe secure learning environment;
 - A member of staff who holds a current, paediatric first aid certificate is available on the premises at all times, and accompanies children on school trips
 - A designated key worker who liaises with parents and carers;
 - Routine monitoring of health and safety practices, to promote children's safety and welfare;
 - Appropriate staffing, ratios and qualifications comply with statutory guidance and can meet the needs of all children;
 - An environment where children can be seen and heard at all times;
 - A member of staff responsible for leading on safeguarding within the early years; and
 - Training and development for all staff so they are able to take appropriate action where there are safeguarding or child protection concern

22. Policy Review

- 22.1 This policy will be reviewed annually or as required by legislature changes. In the current global pandemic, Coronavirus, this policy will be continually reviewed in light of government guidance as the situation changes. Any amendments will be added as an Annex.

APPENDIX 1 – SIGNS AND SYMPTOMS OF POSSIBLE SIGNIFICANT HARM**PHYSICAL ABUSE**

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

Indicators in the child**a) Bruising**

It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non-accidental unless there is evidence or an adequate explanation provided:

- Bruising in or around the mouth
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally, for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Linear bruising at any site, particularly on the buttocks, back or face
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks to the upper arms, forearms or leg
- Petechae haemorrhages (pinpoint blood spots under the skin.) Commonly associated with slapping, smothering/suffocation, strangling and squeezing

b) Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a child will have had a fracture without the carers being aware of the child's distress.

If the child is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement

Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.

Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the child will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

c) Mouth Injuries

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

d) Poisoning

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

e) Fabricated or Induced Illness

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

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

- Attendance at various hospitals, in different geographical areas
- Development of feeding / eating disorders, as a result of unpleasant feeding interactions
- The child developing abnormal attitudes to their own health
- Non organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause
- Speech, language or motor developmental delays
- Dislike of close physical contact
- Attachment disorders
- Low self esteem
- Poor quality or no relationships with peers because social interactions are restricted
- Poor attendance at school and under-achievement

f) Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.

A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite.

g) Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded.

Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid.

Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

The following points are also worth remembering:

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

h) Scars

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

Emotional/behavioural presentation

- Refusal to discuss injuries
- Admission of punishment which appears excessive
- Fear of parents being contacted and fear of returning home
- Withdrawal from physical contact
- Arms and legs kept covered in hot weather
- Fear of medical help
- Aggression towards others
- Frequently absent from school
- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury

Indicators in the parent

- May have injuries themselves that suggest domestic violence
- Not seeking medical help/unexplained delay in seeking treatment
- Reluctant to give information or mention previous injuries
- Absent without good reason when their child is presented for treatment
- Disinterested or undisturbed by accident or injury
- Aggressive towards child or others
- Unauthorised attempts to administer medication
- Tries to draw the child into their own illness
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
- Parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids
- Observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care
- May appear unusually concerned about the results of investigations which may indicate physical illness in the child
- Wider parenting difficulties may (or may not) be associated with this form of abuse
- Parent/carer has convictions for violent crimes

Indicators in the family/environment

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

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Indicators in the child

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Aggressive behaviour towards others
- Child scapegoated within the family
- Frozen watchfulness, particularly in pre-school children

- Low self-esteem and lack of confidence
- Withdrawn or seen as a 'loner' - difficulty relating to others
- Over-reaction to mistakes
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
- Self-harm
- Fear of parents being contacted
- Extremes of passivity or aggression
- Drug/solvent abuse
- Chronic running away
- Compulsive stealing
- Air of detachment – ‘don’t care’ attitude
- Social isolation – does not join in and has few friends
- Depression, withdrawal
- Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention
- Fearful, distressed, anxious
- Poor peer relationships including withdrawn or isolated behaviour

Indicators in the parent

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

Indicators of in the family/environment

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

NEGLECT

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

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

- ***provide adequate food, clothing and shelter (including exclusion from home or abandonment);***
- ***protect a child from physical and emotional harm or danger;***
- ***ensure adequate supervision (including the use of inadequate care-givers); or***
- ***ensure access to appropriate medical care or treatment.***

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

Indicators in the child

- a) Physical presentation**
- Failure to thrive or, in older children, short stature

- Underweight
- Frequent hunger
- Dirty, unkempt condition
- Inadequately clothed, clothing in a poor state of repair
- Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold
- Swollen limbs with sores that are slow to heal, usually associated with cold injury
- Abnormal voracious appetite
- Dry, sparse hair
- Recurrent / untreated infections or skin conditions e.g. severe nappy rash, eczema or persistent head lice / scabies/ diarrhoea
- Unmanaged / untreated health / medical conditions including poor dental health
- Frequent accidents or injuries

b) Development

- General delay, especially speech and language delay
- Inadequate social skills and poor socialization

c) Emotional/behavioural presentation

- Attachment disorders
- Absence of normal social responsiveness
- Indiscriminate behaviour in relationships with adults
- Emotionally needy
- Compulsive stealing
- Constant tiredness
- Frequently absent or late at school
- Poor self esteem
- Destructive tendencies
- Thrives away from home environment
- Aggressive and impulsive behaviour
- Disturbed peer relationships
- Self-harming behavior

Indicators in the parent

- Dirty, unkempt presentation
- Inadequately clothed
- Inadequate social skills and poor socialisation
- Abnormal attachment to the child e.g. anxious
- Low self-esteem and lack of confidence
- Failure to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene
- Failure to meet the child’s health and medical needs e.g. poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods
- Wider parenting difficulties, may (or may not) be associated with this form of abuse

Indicators in the family/environment

- History of neglect in the family
- Family marginalised or isolated by the community.
- Family has history of mental health, alcohol or drug misuse or domestic violence.
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

- Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
- Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating
- Lack of opportunities for child to play and learn

SEXUAL ABUSE

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

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

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).

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

Indicators in the child**a) Physical presentation**

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

b) Emotional/behavioural presentation

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

c) Indicators in the parents

- Comments made by the parent/carer about the child.
- Lack of sexual boundaries

- Wider parenting difficulties or vulnerabilities
- Grooming behaviour
- Parent is a sex offender

d) Indicators in the family/environment

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

APPENDIX 2 – FURTHER GUIDANCE

These definitions are an extract of those included within the Keeping Children Safe in Education document and include links where more detail can be found. These are included to ensure that staff and governors are aware of potential safeguarding risks and what signs to look out for. If in any doubt, refer all concerns or queries to the academy DSL or deputy DSL who will be able to provide advice and guidance.

1) Children and the court system

Children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. There are two age appropriate guides to support children:

- [5-11 year olds](#)
- [12-17 year olds](#)

These guides explain each step of the process, support and special measures that are available. There are diagrams illustrating the courtroom structure and use of video links is explained.

Making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. Please refer to the online [child arrangements information tool](#) (Ministry of Justice) for clear and concise information on the dispute resolution service.

2) Children Missing from Education (CME)

All staff should be aware that children going missing, particularly repeatedly, can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect, which may include sexual abuse or exploitation and child criminal exploitation. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation or risk of forced marriage. Early intervention is necessary to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future. Staff should be aware of their academy's unauthorised absence and children missing from education procedures.

Knowing where children are during school hours is an extremely important aspect of Safeguarding. Missing school can be an indicator of abuse and neglect and may also raise concerns about others safeguarding issues, including the criminal exploitation of children.

All academies:

- monitor attendance carefully and address poor or irregular attendance without delay.
- always follow up with parents/carers when students are not at school.
- need to have a least two up to date contacts numbers for parents/carers. Parents should remember to update the school as soon as possible if the numbers change.

In response to the guidance in KCSIE (2020) all schools have:

- Staff who understand what to do when children do not attend regularly
- Appropriate policies, procedures and responses for students who go missing from education (especially on repeat occasions)
- Staff who know the signs and triggers for travelling to conflict zones, FGM and forced marriage.
- Procedures to inform the Local Authority when we plan to take students off-roll when they:
 - leave school to be electively home educated;
 - move away from the school's location;
 - move to another school as an in year admission or managed move;
 - remain medically unfit beyond compulsory school age;
 - are in custody for four months or more (and will not return to school afterwards); or
 - are permanently excluded.

Students who are expected to attend the school, but fail to take up the place will be referred to the Local Authority.

When a student leaves the school, robust records are maintained including the name of the student's new school and their expected start date wherever possible.

Further information

DfE statutory guidance – [Children Missing Education](#), 2016

3) Children with family members in prison

Approximately 200,000 children in England and Wales have a parent sent to prison each year. These children are at risk of poor outcomes including poverty, stigma, isolation and poor mental health. [NICCO](#) provides information designed to support professionals working with offenders and their children, to help mitigate negative consequences for those children.

4) Child Criminal Exploitation (CCE)

The definition of Child Criminal Exploitation, which can be found on KCSIE (2020) page 83, is:

“CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence.

The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.

Some of the following can be indicators of CCE:

- *children who appear with unexplained gifts or new possessions;*
- *children who associate with other young people involved in exploitation;*
- *children who suffer from changes in emotional well-being;*
- *children who misuse drugs and alcohol;*
- *children who go missing for periods of time or regularly come home late; and*
- *children who regularly miss school or education or do not take part in education.”*

CCE is a geographically widespread form of harm that is a typical feature of county lines criminal activity, drug networks or gangs grooming 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 age 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
- It 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.

Further Information

Home Office Guidance – [County Lines: criminal exploitation of children and vulnerable adults](#)

5) Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of child sexual abuse.

The definition, which can be found on KCSIE (2020) page 84, is:

“CSE occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology. CSE can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person’s immediate knowledge (e.g. through others copying videos or images they have created and posted on social media).

CCE indicators can also be indicators of CSE, as can:

- children who have older boyfriends or girlfriends; and
- children who suffer from sexually transmitted infections or become pregnant.”

Further information:

CSE is when children and young people receive something (such as food, accommodation, drugs, alcohol, cigarettes, affection, gifts, or money) as a result of performing, and/or others performing on them, sexual activities. Child sexual exploitation can occur through the use of the internet or on mobile phones. In all cases, those exploiting the child or young person have power over them because of their age, gender, intellect, physical strength and/or resources. For victims, the pain of their ordeal and fear that they will not be believed means they are too often scared to come forward.

CSE can:

- affect any child/young person under the age of 18 years including 16-17 year olds who can legally consent to sex
- Still be abused even if the sexual activity appears consensual
- Include both contact (penetrative and non-penetrative acts) and non-contact sexual activity
- Be typified by the term of power imbalance in favour of those perpetrating the abuse.

Although the following vulnerabilities increase the risk of child sexual exploitation, it must be remembered that not all children with these indicators will be exploited. CSE can occur without any of these issues.

- Having a prior experience of neglect, physical and/or sexual abuse;
- Lack of a safe/stable home environment, now or in the past (domestic abuse or parental substance misuse, mental health issues or criminality, for example);
- Recent bereavement or loss;
- Social isolation or social difficulties;
- Absence of a safe environment to explore sexuality;
- Economic vulnerability;
- Homelessness or insecure accommodation status;
- Connections with other children and young people who are being sexually exploited;
- Family members or other connections involved in adult sex work;
- Having a physical or learning disability;
- Being in care (particularly those in residential care and those with interrupted care histories); and
- Sexual identity.

Indicators of CSE may include:

- Acquisition of money, clothes, mobile phones, etc. without plausible explanation;
- Gang-association and/or isolation from peers/social networks;
- Exclusion or unexplained absences from school, college or work;
- Leaving home/care without explanation and persistently going missing or returning late;
- Excessive receipt of texts/phone calls;
- Returning home under the influence of drugs/alcohol;
- Inappropriate sexualised behaviour for age/sexually transmitted infections;
- Evidence of/suspicious of physical or sexual assault;
- Relationships with controlling or significantly older individuals or groups;
- Multiple callers (unknown adults or peers);
- Frequenting areas known for sex work;
- Concerning use of internet or other social media;
- Increasing secretiveness around behaviours;
- Self-harm or significant changes in emotional well-being;
- Associating with other young people involved in exploitation;
- Changes in eating pattern; and
- Economic vulnerability.

Consent

Even where a child/young person is old enough to legally consent to sexual activity, the law states consent is only valid where they make a choice and have the freedom and capacity to make that choice. If the child/young person does not have a meaningful choice, i.e. under the influence of harmful substances/fearful of outcome if not compliant, consent cannot be legally given whatever the age.

Risks faced by children?

- Children at risk of sexual exploitation are some of the most vulnerable in our society. Many have experienced abandonment or have suffered from physical and mental abuse. They need help but don't know where to look. The risk is deemed higher when children "go missing" or are placed in the care of the Local Authority, as well as children with Learning Disabilities.
- Perpetrators of these crimes are becoming increasingly sophisticated, using the internet to protect their identity and trafficking children around the country to avoid detection.
- Sexual violence in intimate relationships
- Abusive images and their distribution
- Immigration-related offences

The statutory definition of Child Sexual Exploitation (CSE) can be found in the guidance document [Child sexual exploitation: Definition and a guide for practitioners](#) (DfE 2017)

Additional Support

- **NSPCC 24 Hour Child Protection Helpline - 0808 800 5000**
- www.barnados.gov.uk
- [Serious organised crime strategy 2013](#)

6) County lines

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs (primarily crack cocaine and heroin) into one or more importing areas [within the UK], using dedicated mobile phone lines or other form of “deal line”.

Exploitation is an integral part of the county lines offending model with children and vulnerable adults exploited to move [and store] drugs and money. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including schools, further and higher educational institutions, Pupil Referral Units, special educational needs schools, children’s homes and care homes.

Children are often recruited to move drugs and money between locations and are known to be exposed to techniques such as ‘plugging’, where drugs are concealed internally to avoid detection. Children can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

One of the ways of identifying potential involvement in county lines are missing episodes (both from home and school), when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism¹⁰³ should be considered. If a child is suspected to be at risk of or involved in county lines, a safeguarding referral should be considered alongside consideration of availability of local services/third sector providers who offer support to victims of county lines exploitation.

7) Domestic Abuse

As defined by the Home Office, domestic abuse is:

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

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

- Psychological
- Physical
- Sexual
- Financial
- Emotional

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

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

**This definition includes so called ‘honour’ based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.*

Who is at risk?

Research shows that domestic violence is most commonly experienced by women and perpetrated by men. Any woman can experience domestic violence **regardless of race, ethnic or religious group**, class, disability or lifestyle. Domestic violence can also take place in **lesbian, gay, bi-sexual and transgender** relationships, and can involve other family members, including children.

Why does it happen?

All forms of domestic abuse - psychological, economic, emotional and physical - come from the abuser's **desire for power and control** over other family members or intimate partners. Although every situation is unique, there are **common factors** involved.

What are the signs of domestic abuse?

- **Destructive criticism and verbal abuse:** shouting/mocking/accusing/name calling/verbally threatening
- **Pressure tactics:** sulking, threatening to withhold money, disconnect the telephone, take the car away, commit suicide, take the children away, report you to welfare agencies unless you comply with their demands regarding bringing up the children, lying to your friends and family about you, telling you that you have no choice in any decisions.
- **Disrespect:** persistently putting you down in front of other people, not listening or responding when you talk, interrupting your telephone calls, taking money from your purse without asking, refusing to help with childcare or housework.
- **Breaking trust:** lying to you, withholding information from you, being jealous, having other relationships, breaking promises and shared agreements.
- **Isolation:** monitoring or blocking your telephone calls, telling you where you can and cannot go, preventing you from seeing friends and relatives.
- **Harassment:** following you, checking up on you, opening your mail, repeatedly checking to see who has telephoned you, embarrassing you in public.
- **Threats:** making angry gestures, using physical size to intimidate, shouting you down, destroying your possessions, breaking things, punching walls, wielding a knife or a gun, threatening to kill or harm you and the children.
- **Sexual violence:** using force, threats or intimidation to make you perform sexual acts, having sex with you when you don't want to have sex, any degrading treatment based on your sexual orientation.
- **Physical violence:** punching, slapping, hitting, biting, pinching, kicking, pulling hair out, pushing, shoving, burning, strangling.
- **Denial:** saying the abuse doesn't happen, saying you caused the abusive behaviour, being publicly gentle and patient, crying and begging for forgiveness, saying it will never happen again.

Is it a crime?

Domestic abuse may comprise a number of different behaviours and consequences, so there is **no single criminal offence** of "domestic abuse". However, many forms of domestic abuse are crimes – for example, harassment, assault, criminal damage, attempted murder, rape and false imprisonment. Being assaulted, sexually abused, threatened or harassed by a partner or family member is just as much a crime as violence from a stranger, and often more dangerous.

Not all forms of domestic abuse are illegal, however; for example, some forms of emotional abuse are not defined as crimes. Nevertheless, these types of violence can also have a serious and lasting impact on an adult's or child's sense well-being and autonomy.

Further Information

Home Office – [Domestic Abuse: Various Information/Guidance](#)

DfE advice – [Faith-based Abuse: National Action Plan](#)

Home Office – [Relationship Abuse: disrespect nobody](#)

8) Homelessness

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The DSL (and any deputies) should be aware of contact details and referral routes into the Local Housing Authority so they can 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 a property. Whilst referrals and/or discussion with the Local Housing Authority should be progressed as appropriate, and in accordance with local procedures, this does not, and should not, replace a referral into children's social care where a child has been harmed or is at risk of harm.

9) So-Called Honour-Based Abuse (HBA)

So-called HBA 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 wider 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 HBA are abuse (regardless of the motivation) and should be handled and escalated as such.

Female Genital Mutilation (FGM)

FGM is a collective term for all procedures involving the partial or total removal of external female genitalia for cultural or other nontherapeutic reasons. The procedure is typically performed on girls aged between infancy and 15 years, but in some cases is performed on new born infants or on young women before marriage or pregnancy. The age at which girls undergo FGM varies according to the community. It is illegal in the UK and classed as child abuse and has no health benefits for girls or women; generally, the risks increase with increasing severity of the procedure (physical, psychological and sexual harm). It is also illegal to take a child abroad to undergo FGM.

Risk factors for FGM include:

- low level of integration into UK society
- mother or a sister who has undergone FGM
- girls who are withdrawn from PSHE
- visiting female elder from the country of origin
- being taken on a long holiday to the country of origin
- talk about a 'special' procedure to become a woman

Symptoms of FGM:

FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out-of-school to visit an 'at-risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM. Staff should not assume that FGM only happens outside the UK.

Indications that FGM may have already taken place may include:

- difficulty walking, sitting or standing and may even look uncomfortable.
- spending longer than normal in the bathroom or toilet due to difficulties urinating.
- spending long periods of time away from a classroom during the day with bladder or menstrual problems.
- frequent urinary, menstrual or stomach problems.
- prolonged or repeated absences from school or college, especially with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return
- reluctance to undergo normal medical examinations.
- confiding in a professional without being explicit about the problem due to embarrassment or fear.
- talking about pain or discomfort between her legs

FGM mandatory reporting duty for teachers

Section 5B of the Female Genital Mutilation Act 2003 places a statutory duty upon teachers to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence and they should not be examining students, but the same definition of what is meant by “to discover that an act of FGM appears to have been carried out” is used for all professionals to whom this mandatory reporting duty applies. Further information on how to report can be found at: [Mandatory reporting of female genital mutilation procedural information](#).

Further information

Home Office – [Female Genital Mutilation](#)

Multi-agency advice – [Multi-agency statutory guidance on female genital mutilation](#), 2016

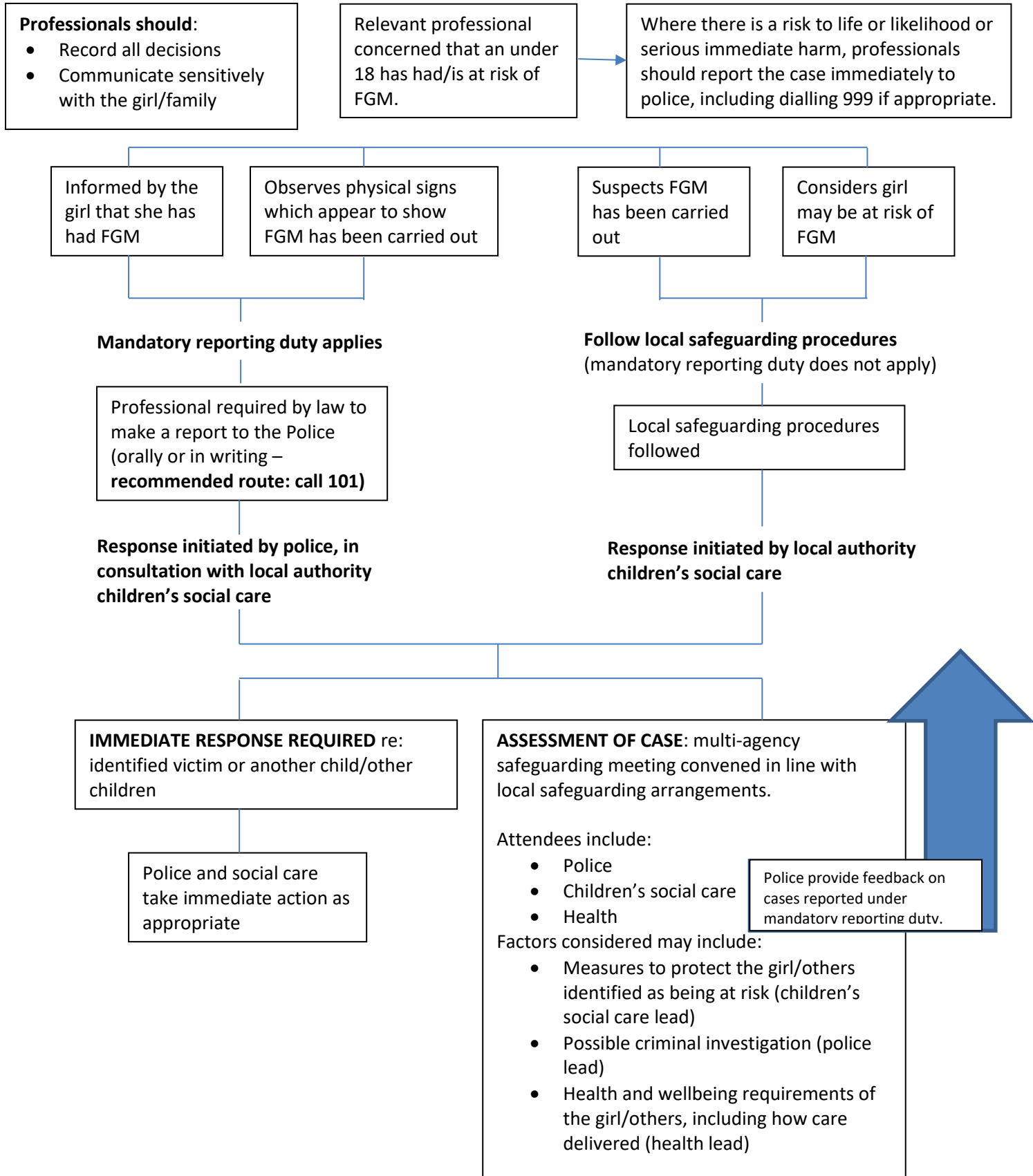
Forced marriage

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 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.

The Right to Choose: Multi-agency statutory guidance for dealing with forced marriage, June 2014

Forced Marriage Unit – 020 7008 0151 / fmu@fco.gov.uk

FGM Reporting Process Map



10) Britishness

Brooke Weston Trust is committed to ensuring that 'British' values underpin all aspects of the education and curriculum offered to its students. Britishness can be taken as 'referring to a sense of national identity of the British people.' However, it is difficult to create or devise a definition that is agreeable by all. In many respects, Britishness has a fluidity to it, given the ever-changing nature of the multi-cultural mix of people who occupy the British Isles. Therefore, the Trust strongly adheres to a view that irrespective of faith, gender, ethnicity or colour, all students are given the same equal opportunity to education. All students are given the opportunity to enhance their life chances. Every student is encouraged to become a well-rounded citizen, armed with the skills necessary to survive in an ever-changing workplace and be capable of making sound moral and ethical decisions.

The following aspects of Britishness are promoted:

- Freedom and democracy
- Tolerance of different faiths and beliefs
- Respect of law and order
- Belief in personal and social responsibility
- Respect for British institutions, including the Government and the monarchy
- The welfare state
- Mutual Respect
- Individual liberty
- An awareness and understanding of the constitution, as laid down in Magna Carta
- An understanding of Britain's global position

Please refer to the Brooke Weston Trust British Values Statement for further information.

11) Preventing Radicalisation

The Brooke Weston Trust has a statutory duty under The Counter-Terrorism and Security Act 2015 and the statutory Prevent Guidance 2015 to have due regard to the need to prevent people from being drawn into terrorism. Extremism is defined as vocal or active opposition to fundamental values of our society, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. Radicalisation is defined as the act or process of encouraging extremist views or actions in others, including forms of extremism leading to terrorism. There are a number of behaviours which may indicate a child is at risk of being radicalised or exposed to extremist views which could include becoming distant or showing loss of interest in friends and activities or possession of materials or symbols associated with an extremist cause.

Staff are expected to be vigilant in protecting students from the threat of radicalisation and refer any concerns to the Designated Senior Manager. Staff will receive appropriate training to ensure they have the knowledge and confidence to identify students at risk, challenge extremist ideas and know where and how to refer concerns.

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
2. Extremism is defined by the Government in the Prevent Strategy as:
Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
3. Terrorism is an action that endangers or causes serious violence to a person or people; causes serious damage to property or seriously interferes with or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

4. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.
5. There is no single way of identifying if a child is likely to become susceptible to extremist ideology. Students may become susceptible to radicalisation through a range of social, personal and environmental factors. It is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.
6. Indicators of vulnerability include:
 - Identity Crisis – the student is distanced from their cultural/religious heritage and experiences discomfort about their place in society;
 - Personal Crisis – the student may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
 - Personal Circumstances – migration; local community tensions; and events affecting the student’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
 - Unmet Aspirations – the student may have perceptions of injustice; a feeling of failure; rejection of civic life;
 - Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement/reintegration;
 - Special Educational Need – students may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.
7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.
8. More critical risk factors could include:
 - Being in contact with extremist recruiters;
 - Accessing violent extremist websites, especially those with a social networking element;
 - Possessing or accessing violent extremist literature;
 - Using extremist narratives and a global ideology to explain personal disadvantage;
 - Justifying the use of violence to solve societal issues;
 - Joining or seeking to join extremist organisations; and
 - Significant changes to appearance and / or behaviour;
 - Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.
9. What does the Prevent guidance expect schools to do?
 - a) **Assess the local risk of extremism** – schools should assess the risk of children being drawn into terrorism. This assessment should be carried out alongside key partners of the school and based on the local environment. Clearly the degree of risk will differ from area to area; those schools in areas of high risk will be expected to do more than schools in areas of low risk.
 - b) **Work in partnership** – schools should consider the approach of their Safeguarding Partnership Board/s (Northamptonshire and Cambridgeshire/Peterborough) when putting measures in place to safeguard students. Schools will need to evidence that they are working closely with the police and local Prevent co-ordinator/s by keeping appropriate records and documenting any action taken.
 - c) **Staff training** – all staff should have training to ensure they understand radicalisation and extremism and what measures are available to help prevent students from becoming drawn into terrorism. Staff

should have the confidence to identify children at risk and to challenge extremist ideas and should know where and how to refer children and for further help.

- d) **Internet safety** - schools should help children stay safe online by ensuring proper filtering/security settings are in place. This could include the use of spy software which identifies key words commonly used amongst terrorist organisations. Internet safety policies should be reviewed as part of the process.
- e) **Sharing information** - personal information may need to be shared to ensure a student at risk of radicalisation is given appropriate support. Information-sharing should be assessed on a case by case basis considering proportionality, consent and confidentiality and taking into account data protection legislation and any information sharing protocols.

Designated safeguarding leads and other senior leaders must be familiarised with the revised [Prevent duty guidance: for England and Wales](#), especially paragraphs 57-76, which are specifically concerns with schools.

Further information

The DfE has published advice for schools on the [Prevent duty](#).

[Educate Against Hate](#) is available to support schools with information, tools and resources (including on the promotion of fundamental British values) to help recognise and address extremism and radicalisation in young people.

Channel

This is a programme which focuses on providing support at an early state 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. Guidance on Channel is available [here](#). All members of staff and governors are required to complete the Channel awareness e-learning programme [here](#).

13) Peer on peer abuse

Children can abuse other children. This is generally referred to as peer on peer abuse and can take many forms. This can include (but is not limited to):

- abuse within intimate partner relationships
- bullying (including cyberbullying);
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence and sexual harassment;
- gender-based violence
- sexting (also known as youth produced sexual imagery); and
- initiation-type violence and rituals.

Abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up”. Different gender issues can be prevalent when dealing with peer on peer abuse. This could for example include girls being sexually touched/assaulted or boys being subject to initiation-type violence.

The Brooke Weston Trust believes that all children have a right to attend school and learn in a safe environment. Children should be free from harm by adults in the school and other students. It is recognised that some students will sometimes negatively affect the learning and wellbeing of others and their behaviour will be dealt with under the school’s Behaviour Policy.

Occasionally, allegations may be made against students by others in the school, which are of a safeguarding nature. Safeguarding issues raised in this way may include physical abuse, emotional abuse, sexual abuse and sexual exploitation. It is likely that to be considered a safeguarding allegation against a student, some of the following features will be found:

The allegation:

- is made against an older student and refers to their behaviour towards a younger or a more vulnerable student
- is of a serious nature, possibly including a criminal offence
- raises risk factors for other students in the school
- indicates that other students may have been affected by this student
- indicates that young people outside the school may be affected by this student

Victims of peer on peer abuse will be supported by the Student Care team.

14) Sexual violence and harassment

Sexual violence refers to a criminal act – “assault by penetration, rape and sexual assault” as defined by the Sexual Offences Act 2003. Sexual harassment is defined as “unwanted conduct of a sexual nature”.

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. Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physically and verbally) and are never acceptable. It is important that schools and colleges are aware of sexual violence and the fact children can, and sometimes do, abuse their peers in this way.

There is an emphasis on seeing sexual violence and sexual harassment in the context of developing a whole-school safeguarding culture, where sexual misconduct is seen as unacceptable, not just “banter”. Groups at particular risk include girls, LGBTQ students and students with SEND, while recognising the serious implications upon all students’ mental health and wellbeing.

Staff should be aware of the importance of:

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

Further Information

Additional information can be found in the DfE Guidance, *Sexual violence and sexual harassment between children in schools and colleges Advice for governing bodies, proprietors, headteachers, principals, senior leadership teams and designated safeguarding leads*, May 2018.

Useful links:

Department for Education – Sex and Relationship Education Guidance

www.internetmatters.org

www.nspcc.org.uk – Harmful Sexual Behaviour

15) Up skirting

The Voyeurism (Offences) Act, which is commonly known as the Upskirting Act, came into force on 12 April 2019. ‘Upskirting’ is where someone takes a picture under a person’s clothing (not necessarily a skirt) without their permission and or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress or alarm. It is a criminal offence. Anyone of any gender, can be a victim.

16) Substance Abuse

Substance abuse can simply be defined as a pattern of harmful use of any substance for mood-altering purposes. Drug abuse can be defined as "the use of illicit drugs or the abuse of prescription or over-the-counter drugs for purposes other than those for which they are indicated or in a manner or in quantities other than directed."

17) Contextual Safeguarding

Contextual Safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.

Therefore children's social care practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices.

Further Information:

<https://contextualsafeguarding.org.uk/about/what-is-contextual-safeguarding>

18) Serious Violence

There are a series of indicators which may indicate that children are at risk from or involved with serious violent crime. Indicators could include: increased absence from school, a change in friendships or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs.

All staff should be aware of these indicators and report any concerns in accordance with the procedures set out in this policy.

Further Information:

Home Office Guidance – [Preventing youth violence and gang involvement](#) and its Criminal exploitation of children and vulnerable adults: county lines guidance

19) Mental Health

The Brooke Weston Trust is aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

School staff are not expected or trained to diagnose mental health conditions or issues, but may notice behaviours that may be of concern.

Where staff have a mental health concern about a child that may also be a safeguarding concern, they should raise the issue by recording this on CPOMS.

20) Children with a Social Worker

The Brooke Weston Trust recognise that when a child has a Social Worker, it is an indicator that the child is more at risk than most students. This may mean that they are more vulnerable to further harm, as well as facing educational barriers to attendance, learning, behaviour and poor mental health.

These needs are taken into account when making plans to support students who have a Social Worker.

21) Other safeguarding issues:

Sexting

In cases of 'sexting' The Brooke Weston Trust follows guidance given to schools and colleges by the UK Council for Child Internet Safety (UKCCIS) published in 2017: 'Sexting in schools and colleges, responding to incidents, and safeguarding young people'.

Trafficking

Article 3 of the Palermo Protocol To Prevent, Suppress And Punish Trafficking In Persons, Especially Women And Children, Supplementing the United Nations Convention Against Transnational Organised Crime to the UN Convention (2000) (ratified by the UK on 6 February 2006) defines trafficking as:

- a) "Trafficking of persons" shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs;
- b) The consent of a victim of trafficking in persons to the intended exploitation set forth in sub-paragraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used;
- c) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered "trafficking in persons" even if this does not involve any of the means set forth in subparagraph (a) of this article;
- d) "Child" shall mean any person under eighteen years of age.

The Palermo Protocol establishes children as a special case. Any child transported for exploitative reasons is considered to be a trafficking victim, whether or not they have been forced or deceived. This is partly because it is not considered possible for children to give informed consent. Even when a child understands what has happened, they may still appear to submit willingly to what they believe to be the will of their parents or accompanying adults. It is important that these children are protected too

Further Information

Home Office and DfE Guidance – [Safeguarding children who may have been trafficked](#)

Fabricated Illness

The fabrication or induction of illness in children is a relatively rare form of child abuse. Where concerns exist about fabricated or induced illness, it requires professionals to work together, evaluating all the available evidence, in order to reach an understanding of the reasons for the child's signs and symptoms of illness. The management of these cases requires a careful medical evaluation which considers a range of possible diagnoses. At all times professionals need to keep an open mind to ensure that they have not missed a vital piece of information.

Further Information

Home Office and DfE Guidance – [Safeguarding Children in whom illness is fabricated or induced](#)

Private Fostering

A private fostering arrangement is one that is made privately (without the involvement of a local authority) for the care of a child under the age of 16 years (under 18, if disabled) by someone other than a parent or close relative, in their own home, with the intention that it should last for 28 days or more.

A close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins.

Parents and private foster carers both have a legal duty to inform the relevant local authority at least six weeks before the arrangement is due to start; not to do so is a criminal offence.

Whilst most privately fostered children are appropriately supported and looked after, they are a potentially vulnerable group who should be monitored by the local authority, particularly when the child has come from another country. In some cases privately fostered children are affected by abuse and neglect, or be involved in trafficking, child sexual exploitation or modern-day slavery.

Schools have a mandatory duty to report to the local authority where they are aware or suspect that a child is subject to a private fostering arrangement. Although schools have a duty to inform the local authority, there is no duty for anyone, including the private foster carer or social workers to inform the school. However, it should be clear to the school who has parental responsibility.

School staff should notify the DSL when they become aware of private fostering arrangements. The DSL will speak to the family of the child involved to check that they are aware of their duty to inform the local authority. The school itself has a duty to inform the local authority of the private fostering arrangements.

On admission to the school steps will be taken to verify the relationship of the adults to the child who is being registered.

APPENDIX 3 – Main Issues within Our Locality				
Academy / Local Authority	Main issues identified in the area	How our curriculum addresses these issues	Training staff have received to address these issues	How our Academy promotes positive messaging about tackling these issues with key stakeholders
Beanfield Primary Academy Northamptonshire	<ul style="list-style-type: none"> • Neglect • Domestic Violence • Parental Mental Health. • Alcohol and Drug Misuse 	Contact with local services and professionals i.e. school nurses, NSPCC, PHSE lessons, assemblies, wellbeing week. Protective Behaviours. Mentoring of identified children.	Tea break Guides distributed, annual training, DSL specialist training, regular DDSL/DSL meetings, regular updates to staff, regular training for staff.	Letters home, information sharing on social media, website, and open door policy for all to talk though any issues.
Compass Primary Academy Northamptonshire	County Lines Homelessness Mental Health Issues Poverty Substance Abuse <ul style="list-style-type: none"> • Domestic Abuse 	Assembly Schedule has planned opportunities to address these. Protective Behaviours session delivered to all year groups. Rainbow Room provision to support vulnerable students. PSHE scheme of work	Statutory Safeguarding Training refresher and DSL. Explicit training for each of the issues identified. Weekly Safeguarding updates for all staff. Annual programme of training for staff.	Parents into School Website Facebook page Twitter Weekly 'updates' via social media and parent mail (a mini newsletter more regularly).
Gretton Primary Academy Northamptonshire	<ul style="list-style-type: none"> • Online messaging, children having unrestricted access to the internet and gaming at home. • Parents with mental health issues. 	PSHE lessons, E Safety week, assemblies, newsletters, parent workshops, support for parents from pastoral support assistant	Safeguarding training, DSL specialist training, regular item on staff briefings. Participation in TAMHS project.	e.g. Social media, website, newsletter, parent workshops.

<p>Oakley Vale Primary School Northamptonshire</p>	<p>The main issue in the area are: - Internet safety – children accessing material that is not age appropriate. - Unsafe use of social media especially risk of cyber bullying and peer on peer abuse. - Lack of parenting skills. - Cultural expectations. - Physical chastisement.</p>	<p>OVPs engage well with external agencies especially NSPCC and TARGET who provide support for both students and parents / teachers through their workshops and assemblies. Keeping safe online is covered through the PSHE and the Computing programme of study as part of the whole school curriculum. Individualised bespoke support is given to students through 1 to 1 interventions led by the trained wellbeing team and where appropriate access to a play therapist.</p>	<p>Designated Safeguarding leads (DSLs) receive regular refresher training to ensure safeguarding practice in up to date. Staff have received training through whole school annual safeguarding training. Work with TARGET –focus around of internet safety especially social media and keeping personal information safe. The wellbeing team have received a range of training including Drawing and Talking and Protective Behaviours. As well as attending CAMHS and Service Six Target conferences.</p>	<p>We use ditto to keep our parents up to date o internet safety. Governors are updated termly with a safeguarding report. We meet regularly with our nominated Safeguarding Governor so that he is aware of any issues as and when they arise. Our website offers links to other agencies and we use our school twitter account to keep parents and staff aware of any new developments.</p>
<p>Peckover Primary School Cambridgeshire</p>	<ul style="list-style-type: none"> ● Neglect ● Domestic violence ● Substance and alcohol abuse ● Adult mental health issues ● Online bullying/grooming ● County lines ● CSE 	<p>PSHE curriculum, Annual talk form NSPCC ‘PANTS’ agenda, regular e-safety updates and information evenings for parents, newsletters with latest information, pastoral base for children to drop in, nurture sessions to raise self-esteem and resilience, Forest schools and gardening for mental well-being</p>	<p>Safeguarding training, DSL specialist training, regular staff briefings, trained pastoral team, regular LA training updates for DSL’s on emerging issues such as County Lines, CSE, our own designated Early Intervention family worker</p>	<p>Social media, website, weekly newsletters, regular information meetings for parents</p>

Brooke Weston Academy Northamptonshire	Domestic Violence	Personal Development lessons on healthy relationships, Women’s aid input, School nurse workshops on RSE	Safeguarding training, DSL specialist training, regular staff briefings	Assemblies Safeguarding briefings
	Drugs and Alcohol	Lessons on Drugs and Alcohol awareness are delivered through the academy’s personal development curriculum. School nurse also delivers targeted sessions.	Drugs/Alcohol awareness is part of whole staff safeguarding training which is delivered twice a year.	PCSO delivers assemblies on local risks related to drugs and alcohol. Target also deliver awareness workshops. Website signposts students and parents to Ngage with Aquarius support and drop in Think for The Future Mentor.
	County lines/gangs	As part of the academy’s Personal Development Curriculum the PCSO delivers workshops around the dangers of county lines and gangs. Explains the risks/harm associated with this and provides advice on where to get support from and how to stay safe in the community.	County Lines/Gangs awareness is part of whole staff safeguarding training which is delivered twice a year.	PCSO delivers specialist assemblies on risks/harm/support.
	E-safety	Personal Development Curriculum/IT Curriculum	E-safety awareness is part of whole staff safeguarding training which is delivered twice a year. In addition to this, tutors are kept up to date with the dangers of certain social media apps	Personal Development lessons. IT lessons, Target assemblies and targeted workshops and PCSO sessions. Website signposts students and parents to E-safety sites.
	British Values	Personal Development Curriculum/ History	Prevent Training and staff safeguarding training on contextualised issues.	Personal Development Lessons, History Lessons. Prevent Workshops

<p>Corby Business Academy Northamptonshire</p>	<p>County Lines, Domestic Abuse Drug and Alcohol misuse Gang culture, Sexting, Grooming Self-Harm Online Safety</p>	<p>PSHE Lessons, Assemblies, Newsletters, Workshops</p>	<p>Safeguarding training, Protective Behaviours training, DSL specialist training, regular staff briefings, CPD, E-bulletins, Student Safeguarding Profiles Whole school safeguarding RAG (HoY)</p>	<p>Social media, website. Open evenings Reception posters and leaflets PCSO Communication with parents Meetings</p>
<p>Corby Technical School Northamptonshire</p>	<p>Online safety</p>	<p>As part of the schools' RSCS curriculum students study modules relating to this issue.</p> <p>Online safety workshops are also provided to students from service 6.</p> <p>Target ambassadors programme with trained students who will be deployed to support peers.</p>	<p>All staff have been trained using KCSIE 2019 on all safeguarding matters.</p>	<p>Through the taught curriculum. School work has been more widely promoted through Service 6. The web-site contains useful support for parents and students.</p>
	<p>Drug and alcohol misuse</p>	<p>As part of the schools' RSCS curriculum students study modules relating to this issue.</p> <p>New confidential drop-in service in place for 2019-20 with Aquarius to support early intervention and prevention.</p>	<p>All staff have been trained using KCSIE 2019 on all safeguarding matters.</p>	<p>The web-site contains useful support for parents and students.</p>
	<p>Child Criminal Exploitation</p>	<p>Year 10 students attended workshops delivered by Northamptonshire Police (local PCSO).</p>	<p>All staff have been trained using KCSIE 2020 on all safeguarding matters. In addition, all staff were trained by Northamptonshire Police in September 2019.</p>	<p>PCSO will deliver workshops to students over to raise awareness.</p>
	<p>Knife Crime Awareness</p>	<p>As part of the schools' RSCS curriculum students study</p>	<p>All staff have been trained using KCSIE 2020 on all safeguarding matters.</p>	<p>School participates yearly in the Northamptonshire</p>

		modules relating to this issue. During 2018-2019 all students in Year 9 and 10 attended workshops delivered by Northamptonshire Police (local PCSO).		County Schools Challenge. During 2018-2019 the topic was knife crime. As winners' the school continues to develop the educational resource.
Kettering Science Academy Northamptonshire	Domestic Abuse Mental Health Neglect CSE/CCE County lines and gangs Knife crime Peer on peer abuse Online safety	PSHE lessons, assemblies English lesson knife crime Workshops with external agencies Protective Behaviours 5 Ways to wellbeing Nurture Dog Wellbeing intervention School Counsellor and School Nurse Anti-bullying programme Stonewall School TAMHS	Safeguarding training, DSL specialist training, regular staff briefings and information in staff bulletin. Individual training delivered by specialists e.g. Police, NGAGE and CIRV. Protective Behaviours Young Carers Mental Health	Social media, website, working with county initiatives such as CIRV, NCC KSA Food Bank Uniform Bank Think for the Future
Thomas Clarkson Academy Cambridgeshire	Neglect Mental Health	PSHE lessons Assemblies Newsletters School web site Pastoral specific support	Safeguarding training, LA: DSL specialist training Weekly staff briefing Staff quick reference booklet Safeguarding Staff weekly drop in clinic Mental Health Lead Person at TCA	Social media, Website Display Boards (Public Viewing) LGB agenda item Parental text message service