

Child Protection Policy

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1. Preface

Safeguarding children – the action we take to promote the welfare of children and protect them from harm – is everyone’s responsibility. Everyone who comes into contact with children and families has a role to play.

Safeguarding and promoting the welfare of children is defined for the purposes of this guidance as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing impairment of children’s mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children
- taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children’s Social Care National Framework*

Child protection is part of safeguarding and promoting the welfare of children and is defined for the purpose of this guidance as activity that is undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including online. Effective safeguarding means staff should understand and be sensitive to factors, including economic and social circumstances and ethnicity, which can impact children and families’ lives.

(Working Together to Safeguard Children 2023)

*The outcomes described in the National Framework are what children’s social care should achieve for the children, young people, and families they support. They reflect the core purpose of children’s social care. There are four outcomes:

- Outcome 1: children, young people and families stay together and get the help they need
- Outcome 2: children and young people are supported by their family network

- Outcome 3: children and young people are safe in and outside of their homes
- Outcome 4: children in care and care leavers have stable, loving homes.

2. Statement of Intent

Wilberforce Sixth Form College recognises that protecting and safeguarding children and young people is a shared responsibility and depends upon effective joint working between agencies and professionals that have different roles and expertise. Individual children and young people, especially some of the most vulnerable children and those at greatest risk of social exclusion, will need coordinated help from health, education and children's social care services. The voluntary sector and other agencies also have an important role in protecting and safeguarding children.

At Wilberforce College we aim to identify where early interventions are needed to support families in need by closely monitoring children and highlighting any emerging problems. Information is shared with other professionals to support early identification and assessment. In order to create early identification, intervention and support, the College:

- Use transitional information gathered from our feeder schools and through CPOMs
- Attend core group meetings focusing on vulnerable students
- Have a fortnightly support staff meeting
- Regularly review and monitor student attendance and behaviour.
- Liaise with external agencies
- Utilise the support of Targeted Youth Support (TYS) and other key groups when appropriate

Wilberforce Sixth Form College has a responsibility to protect and safeguard the welfare of children and young people they come into contact with. The need for guidelines and procedures is important to ensure that this is done with understanding and clarity with all actions taken in a timely manner. Children and young people are anybody under the age of 18. Any case of suspected abuse against any student aged 18 or over is treated as abuse of a vulnerable adult.

Wilberforce Sixth Form College will aim to protect and safeguard children and young people through the application of the procedures outlined in this policy.

We are an inclusive College and recognise our duty within the Equalities Act to ensure that all students have exactly the same human rights as anyone else and to be safe from abuse..

We actively try to remove any barriers to learning and participation that may disadvantage children. We acknowledge that children with SEND are especially vulnerable to all types of abuse and are statistically more likely to be targeted due to difficulties they may face in communicating what is happening to them. Therefore, we ensure that children with SEND are responded to carefully when they have, or show signs of concern.

We feel it is particularly important that all staff and volunteers are fully informed and adequately trained in order to protect all students and in particular vulnerable groups

This policy and related guidelines are readily available to staff, corporation, students and parents. The public and parents can access these through the College's website. Students are informed through tutorial and via information displayed around the College what to do should they want to speak to somebody about a safeguarding or child protection matter.

This policy constitutes part of the broader *Safeguarding Policy* for the College.

3. Responsibilities

These procedures lay out the actions to be taken by any member of staff at the College who becomes aware of any issues of child abuse/harm. Definitions of abuse are set out in section 9 of this policy.

All Staff

All staff have a duty to safeguard all students and to respond to signs of abuse or allegations, and ensure that the *Child Protection Procedure* is followed. Specific responsibilities are:

Principal

The Principal is responsible for ensuring that the *Child Protection Procedure* is complied with by all staff, students and members of the public.

The Designated Safeguarding Lead (DSL)

A Senior Manager has delegated responsibility for the implementation of the *Child Protection Policy*. This person is the DSL:

- Has ultimate lead responsibility for child protection and safeguarding
- Refers cases of suspected abuse to local authority children's social care
- Supports staff who make referrals to local authority children's social care
- Refers cases to the Channel programme where there is a radicalisation concern
- Refers cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service (DBS)
- Acts as a point of contact with the three safeguarding partners
- Refers cases where a crime may have been committed to the Police
- Liaises with the case manager and the designated officer at the local authority for child protection concerns
- Liaises with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies
- Acts as a source of support, advice and expertise for staff
- Ensures the college's child protection policies are known, understood and used appropriately
- Ensures the Child Protection Policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with the governing body regarding this
- Ensures the Child Protection Policy is available publicly
- Links with HSCP to make sure staff are aware of training opportunities and the latest local policies on safeguarding
- Liaises with staff (especially pastoral support staff, school nurses, IT Technicians, and SENCOs or the named person with oversight for SEN in a college) on matters of safety and safeguarding (including online and digital safety) and when deciding whether to make a referral by liaising with relevant agencies
- Liaises with the "case manager" and the designated officer(s) at the local authority for child protection concerns in cases that concern a staff member

- Liaises with the Principal to inform them of issues, especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations
- Ensures the college's child protection policies are known, understood and used appropriately
- Ensures staff and volunteers are aware of systems within the college that supports safeguarding, including:
 - The Child Protection Policy
 - Staff Code of Conduct Policy
 - Student Code of Conduct and Behaviour Policy
 - The role of the DSP and Lead person for Child Protection.

Deputy Designated Safeguarding Lead (DDSL)

The DDSL is the Student Services Manager and deputises for the DSL. The DDSL undergoes the same training as the DSL and supports the DSL in the following areas:

- Carrying out, when appropriate and reasonable, any delegated roles of the DSP, as above
- Matters of referral to Children's Social Care
- Providing support, advice, guidance and training to staff on child protection issues
- Maintaining positive working relationships with external partners.

Child Protection Officers (CPOs)

The College CPOs are:

- JBr (DDSL)
- CAP (Principal)
- SDE (Assistant Principal and DSL)
- SAF (Student Support Officer)
- HMR (Student Support Officer and Mental Health Lead)

Their role is to work with students and staff to ensure that allegations of abuse are handled appropriately. They have additional responsibility for decisions and actions concerning formal reporting of abuse. CPOs can refer to the appropriate external agencies, under the guidance of the DSL and/or DDSL. Staff will receive appropriate training at intervals advised by the Local Safeguarding Children Partnership (LSCP), every three years for CPOs and every two years for the DSL and DDSL.

The Mental Health Lead person under the responsibility of the DSL works to support students regarding mental health issues, signposting to relevant support including that of external agencies. Also to ensure mental health awareness is promoted throughout the college enabling students to know who they can report concerns to.

4. Procedure

All staff should identify children that may benefit from early help, which means providing support as soon as a problem emerges and may be required to share information with other professionals to support early identification. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to Children's Social Care immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff

member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point.

(Keeping Children Safe in Education, 2020)

Any allegation, disclosure or suspicion of abuse needs to be taken seriously and handled in a sensitive manner. Individual members of staff should never deal with child abuse disclosures in isolation, and should always refer to the DSL (SDE), or DDSL(JBR) or a nominated CPO when a disclosure is made. Information should be strictly limited to those who need to know.

The procedures for reporting allegations, suspicions of abuse or disclosures are presented here and in the accompanying flowchart (Appendix 1).

4.1 Managing a disclosure by a student

The member of staff to whom the disclosure is made must make it clear to the young person that they cannot make guarantees of confidentiality. If possible, they should inform the individual about this before they are given an opportunity to disclose.

It goes without saying that such discussions will be of a very delicate and sensitive nature and must be done in a thoughtful and considerate way, however, staff should also be aware of their own vulnerability in such circumstances and take appropriate measures to safeguard themselves from any possible allegations or misunderstandings. They should:

- Try, where possible, to take notes
- Listen carefully to what is being said
- Keep questions to a minimum; just to clarify what is being said
- Avoid leading comments
- Suspend their own judgement – remember that they are not investigating the matter
- Inform the young person of the actions that will follow the conversation and assure them that they will be kept informed of all developments

Use the *At Risk Recording Form* (Appendix 4) to record the following:

- Names of those present during the disclosure/allegation
- Date and time of the conversation
- Brief description of the allegation
- Any visible injuries and alleged injuries
- Young person's preferred action

The member of staff must then pass the completed *At Risk Recording Form* to the DSL or DDSL immediately.

All safeguarding and Child Protection concerns must be recorded on CPOMs.

4.2 Managing a disclosure by a student about another student

Allegations against another students; A student against whom an allegation of abuse has been made may be fixed term excluded from the College pending an investigation and the College's Student Conduct and Behaviour for Learning Policy or Fitness to Study Policy may apply. The College will take advice from Children's Social Care and/or the Police on the investigation of such allegations and will take appropriate action to ensure the safety and welfare of all

students involved. The College will ensure that, subject to the advice of the Children's Social Care and/or Police they inform parents/guardians as soon as possible and that all students will be supported throughout the process.

All Students are made aware of who and where they can go to raise any concerns about another student – this is completed within the first term through the Tutorial programme and reinforced through advertisements around the College.

The CPO, DSL or DDSL must follow the steps and guidance as identified in **4.1**.

4.3 Allegations against a teacher who is no longer teaching at the College

The CPO, DSL or DDSL must follow the steps and guidance as identified in **4.1** and report to the Police immediately. If appropriate to do so and as part of the colleges legal duty, refer to the DBS. Guidance must be sought from the Local Authority Designated Officer (LADO)

4.4 Managing students who self-harm

College staff can play an important role in preventing self-harm and also supporting staff, students, peers and parents currently engaging in self-harm.

Any member of staff who is aware of a student engaging in or suspected of being at risk of engaging in self-harm should always consult with the CPO, DSL or DDSL and must follow the steps and guidance as identified in **4.1**.

Students need to be made aware that it may not be possible for staff to offer complete confidentiality. If you consider a student to be at risk of seriously harming themselves then confidentiality cannot be kept.

The CPO, DSL or DDSL may refer to the Fitness to Study Policy.

4.5 Managing a concern without a disclosure

Take immediate steps to ensure that the young person is not in danger, including medical assistance if required.

If a member of staff suspects that a student is at risk, but no disclosure is made, then the member of staff should report his or her concerns immediately to Student Services who will make an appointment for the student to see a CPO or the DSL/DDSL by the close of the same working day.

The member of staff who meets with the student will record what the student has said on the *At Risk Recording Form* (Appendix 4) and will then liaise with the Lead Person (if over the next steps).

4.6 Referrals to external agencies

The DDSL, in discussion with the DSL, will consider the disclosure and decide upon further action, consulting with Children's Social Care as required. This may involve further discussion with the student. CPOs may refer, under the guidance of the DSL and/or DDSL.

It is not the role of the CPO/DDSL or DSL to undertake an investigation into the concerns or allegations of harm. It is the role of the CPO/DDSL or DSL to collate and clarify details of the concern or allegations and to provide this information to the Local Authority Early Help and Safeguarding Hub (EHaSH) Team, or Locality Team if Children's Social Care is already involved, whose duty it is to make enquiries in accordance with Section 47 of the Children Act 1989.

If it is considered by the CPO, DDSL or DSL, that they do not have enough information available or that the level of concern is not sufficient to warrant a referral into children's social care, then the CPO, DDSL or DSL will seek advice and/or information about how to proceed. This can be done anonymously, without mentioning the name of the young person. If the decision is made that the level of concern is not sufficient to proceed with a referral to children's social care, this will be recorded on CPOMs

Should a referral not be made, this does not mean that the young person may not benefit from support. This process is managed through Student Services.

In deciding whether or not to refer, the DSL and DDSL will follow guidelines issued by the LSCP (Appendix 3).

Dependent on the level of concern of the CPO, DSL or DDSL (in consultation with Children's Social Care where necessary) a decision will be made as to whether a referral to the EHaSH Team is appropriate. In this situation the LSCP guidance on making a referral will be followed see appendix 3.

Where a referral is deemed appropriate:

- Where possible and appropriate, any concerns about a young person will be discussed with their parents before making referrals to other agencies. This will only be done where such discussion will not place the young person or others at increased risk of significant harm.
- Following consultation, in the event of a decision to refer, the DSL/DDSL should inform the student of the proposed action and the reasons for this decision. Ideally this should happen before the appropriate agency is informed, unless doing so would place the young person at greater risk. The *Referral Form* should be completed (Appendix 5).
- The DDSL/CPO or DSL should contact EHaSH by telephone, in the first instance. The date and time of the contact and the duty officer's name should be recorded on the *Referral Form*. A written record of the suspicion/disclosure should be sent by the DSL/DDSL within 24 hrs of the initial call.
- The DDSL/DSL will support the student throughout the process as far as is appropriate.

4.7 Record keeping

All data is held in accordance to GDPR regulations.

The College records all safeguarding and Child Protection incidents on CPOMs.

4.8 Non-application of procedure

If it is your belief that the College is failing to follow appropriate procedures for child protection, and that this failure represents deliberate action which places children at risk, you should address your concerns to the DSL or if your concerns are with the DDSL, then this should be the College Principal. A whistleblowing policy is available on the college website.

5. National and Local Guidance

This *Child Protection Policy and Procedure* should be read in conjunction with the *Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges* and the *Local Safeguarding Children Partnership (LSCP) Guidelines and Procedures*. In accordance with the *Children Act 2004* it is a statutory responsibility for key agencies coming into contact with children and young people, to make arrangements to ensure that in discharging their functions, they have regard to the need to safeguard and promote the welfare of children (*Section 11, Children Act 2004*). Where private or voluntary organisations come into contact with or offer services to children they should, as a matter of good practice, take account of this guidance and follow it as far as possible.

Wilberforce Sixth Form College recognises that a number of other policies and procedures developed and operated by the College form part of the wider agenda for safeguarding and promoting students' welfare and this policy should be read in conjunction with the policies and procedures as identified on the college website.

6. Safeguarding and Promoting Welfare and Child Protection

6.1 Definition

Safeguarding and promoting the welfare of children is defined for the purposes of this guidance as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children
- taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework

(Working together to Safeguard Children)

6.2 Child protection

Everyone who comes into contact with children and their families has a role to play in safeguarding children. College staff are particularly important as they are in a position to identify concerns early and provide help for children, to prevent concerns from escalating. College staff have a responsibility to provide a safe environment in which children can learn. The College has a DSL, DDSL and CPOs who provide support to staff members to carry out

their safeguarding duties and who will liaise closely with other services, such as children's social care.

All College staff should identify children that may benefit from early help. Early help means providing support as soon as a problem emerges at any point in a child's life. In the first instance staff should discuss early help requirements with the DSL or DDSL. Staff may be required to support other agencies and professionals in an early help assessment.

Anyone who has a concern about a child's welfare should ensure a referral is made to children's social care. In the first instance staff should discuss concerns with the DSL or the DDSL, who in most instances will make a referral.

Children who are defined as 'in need', under section 17 of the Children Act 1989, are those whose vulnerability is such that they are unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired, without the provision of services. This includes those children with disability.

7. Vulnerable Students

All young people are potential targets of abuse and staff must be vigilant with all their students.

It is important that staff recognised that any child may benefit from early help, but should be particularly alert to the potential need for early help for a child who:

- is disabled or has certain health conditions and has specific additional needs
- has special educational needs (whether or not they have a statutory Education, Health and Care plan)
- has a mental health need
- is a young carer
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines
- is frequently missing/goes missing from education, home or care,
- has experienced multiple suspensions, is at risk of being permanently excluded from schools, colleges and in Alternative Provision or a Pupil Referral Unit.
- is at risk of modern slavery, trafficking, sexual and/or criminal exploitation
- is at risk of being radicalised or exploited
- has a parent or carer in custody, or is affected by parental offending
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- is misusing alcohol and other drugs themselves
- is at risk of so-called 'honour'-based abuse such as Female Genital Mutilation or Forced Marriage
- is a privately fostered child.

College managers and support staff monitoring specific groups of students and report any concerns to the DSL and the DDSL. We also recognise, in relation to sexual violence and sexual harassment, evidence shows girls, children with special educational needs and disabilities (SEND) and LGBT+ children are at greater risk.

8. Who Abuses Children?

All staff should be aware of the indicators of abuse, neglect and exploitation, understanding that children can be at risk of harm inside and outside of the college, inside and outside of home, and online. Exercising professional curiosity and knowing what to look for is vital for the early identification of abuse and neglect so that staff are able to identify cases of children who may be in need of help or protection.

9. What is Abuse and Neglect?

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear or experience its effects. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

(Keeping Children Safe in Education, 2023)

9.1 Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child *(Keeping Children Safe in Education, 2020)*.

9.2 Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone *(Keeping Children Safe in Education, 2020)*

9.3 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 (*Keeping Children Safe in Education, 2020*)

9.4 Sexual Violence and Sexual Harassment

It is important that all staff are aware of sexual violence and the fact children can, and sometimes do, abuse their peers in this way.

When referring to sexual violence we are referring to sexual violence offences under the Sexual Offences Act 2003, including:

- Rape
- Assault by penetration
- Sexual assault
- Causing someone to engage in sexual activity without consent

Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom.

Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

When referring to sexual harassment we mean 'unwanted conduct of a sexual nature' that can occur online and offline inside and outside of college.

When we reference sexual harassment, we do so in the context of child on child sexual harassment.

Sexual harassment is likely to violate a child's dignity and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

Sexual harassment can include: sexual comments, such as telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names; sexual "jokes" or taunting; physical behaviour, such as deliberately brushing against someone, interfering with someone's clothes and displaying pictures, photos or drawings of a sexual nature.

Online sexual harassment may be standalone or part of a wider pattern of sexual harassment and/or sexual violence. It may include:

- consensual and non-consensual sharing of nudes and semi-nudes images and/or videos - taking and sharing nude photographs of U18s is a criminal offence;
- sharing of unwanted explicit content;
- upskirting (a criminal offence);
- sexualised online bullying;
- unwanted sexual comments and messages, including on social media, sexual exploitation, coercion and threats.

It is essential inappropriate behaviours are challenged:, 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”; challenging physical behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, pulling down trousers, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them.

It is essential that all victims of sexual harassment and sexual violence are reassured that they are being taken seriously and that they will be supported and kept safe.

A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

Staff should be aware that some groups are potentially more at risk and evidence shows girls, children with special educational needs and disabilities (SEND) and LGBT children are at greater risk.

Incidents that occur online or outside of college will be treated in the same way and the college will take all reports and allegations seriously, referring and working with external agencies as necessary.

The College may have a difficult balancing act to consider. On one hand, we need to safeguard the victim (and the wider student body) and on the other hand provide the alleged perpetrator(s) with an education, safeguarding support as appropriate and implement any disciplinary sanctions. Taking disciplinary action and still providing appropriate support are not mutually exclusive actions. They can, and should, occur at the same time if necessary.

When incidents or alleged incidents occur, we will consider the age and the developmental stage of the alleged perpetrator(s), the nature of the allegations and frequency of allegations. Any child will likely experience stress as a result of being the subject of allegations and/or negative reactions by their peers to the allegations against them and offer support as appropriate.

It is important that the College consider the proportionality of the response. Support (and sanctions) will be considered on a case-by-case basis. The alleged perpetrator(s) may potentially have unmet needs (in some cases these may be considerable) as well as potentially posing a risk of harm to other children.

The College will consider other relevant policies including the Exclusion and Student Conduct and Behaviour for Learning Policies, whilst also seeking guidance from external agencies and invoke any actions as deemed necessary.

9.5 Child on Child Abuse (inc Student on Student)

Children and young people are capable of abusing their peers. Allegations of Child on Child abuse will be investigated and dealt with by the DSL and/or the DDSL following the same guidelines as any allegations of abuse, liaising with appropriate external agencies and where appropriate utilising the Student Conduct and Behaviour Management Policy and Exclusion Policy. All staff must be aware that; abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up”.

Victims of Child on Child abuse and alleged perpetrator/s will be supported through the Colleges Student Services and liaison with appropriate external agencies if appropriate.

Child on Child Abuse may include, but may not be limited to:

- bullying (including cyberbullying)
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm
- sexual violence, such as rape, assault by penetration and sexual assault
- sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be stand-alone or part of a broader pattern of abuse
- upskirting, which 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
- sexting (also known as youth produced sexual imagery)
- initiation/hazing type violence and rituals.

9.6 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 (*Keeping Children Safe in Education, 2020*)

This is not an exhaustive list and it must be recognised that it is not the role of staff to make an assessment of whether children or young people have suffered harm. All staff have a duty to report any concerns about harm in accordance with the *Local Safeguarding Children Partnership Guidelines and Procedures*. (Keeping Children Safe in Education, 2019 and in particular in annex A.)

9.7 Mental Health

Our college plays a key role in helping all students build resilience and develop good mental health and wellbeing. We understand that children and young people go through ups and downs during life, but with the right support, nurture and education these difficulties can be overcome. It is acknowledged that there are occasions when some students may face significant life challenges or events, which could have a profound impact on their emotional wellbeing and cause mental ill health. In addition, we are aware that mental health problems can sometimes be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

We fully understand that only medical professionals can make a formal diagnosis of a mental health condition, but staff must still remain vigilant to any warning signs, which indicates a

student is experiencing mental health or emotional wellbeing issues. Any signs should always be taken seriously and concerns reported to a Child Protection Officer no later than the end of the working day, in order to determine the necessary course of supportive action (e.g. referrals to specialist services). If staff fear that the student is in danger of immediate harm, the normal child protection procedures should be followed and the DSP or Lead Person for Child Protection informed immediately.

Possible warning signs include:

- Becoming socially withdrawn
- Changes in mood, behaviour or activity
- Physical signs of harm that are repeated or appear non-accidental
- Talking or joking about self-harm or suicide
- Expressing feelings of failure, uselessness or loss of hope
- Repeated physical pain or sickness with no evidence
- Changes in eating or sleeping habits
- An increase in lateness or absenteeism.

9.8 Online safety

It is essential that students are safeguarded from potentially harmful and inappropriate online material.

The breadth of issues classified within online safety is considerable, but can be categorised into four areas of risk:

- Content: being exposed to illegal, inappropriate or harmful content, for example pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation and extremism.
- Contact: being subjected to harmful online interaction with other users, for example peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.
- Conduct: personal online behaviour that increases the likelihood of, or causes harm, for example making, sending and receiving explicit images (e.g consensual and non-consensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying); and
- Commerce: risks such as online gambling, inappropriate advertising, phishing and or financial scams. If anyone believes a student is at risk, please report it to the Anti-Phishing Working Group (<https://apwg.org/>).

Online safety is a running and interrelated theme implemented through our policies and procedures. We ensure students are educated on the risks associated with online use, including the use of mobile technology, through the tutorial programme and who they can report concerns to. We utilise opportunities to share information/advice and educate our students throughout the curriculum and also through our internal communications channels.

To limit students' exposure to the above risks from the College's IT system, the College has filtering and monitoring systems in place, which is regularly reviewed for effectiveness. The

DSP and Deputy DSP work closely with the College's IT department and ensure systems are reviewed and staff are aware of how to escalate concerns when identified.

When applying IT filters the College considers the age of the students, those who are potentially at greater risk of harm, how often they access the IT system and how/where they access IT systems.

The DSP has the role and responsibility to manage filtering and monitoring systems and to ensure filtering and monitoring provisions are reviewed at least annually.

We ensure that the College has a process to block harmful and inappropriate content without unreasonably impacting teaching and learning.

9.9 Female Genital Mutilation

Female Genital Mutilation (FGM) is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death.

FGM is illegal in the UK. For the purpose of the criminal law in England and Wales, FGM is mutilation of the labia majora, labia minor or clitoris. FGM is an unacceptable practice for which there is no justification. It is child abuse and a form of violence against women and girls.

Where a teacher discovers that an act of FGM appears to have been carried out on a girl who is under 18, there will be a statutory duty on that individual to report it to the police. Those failing to report such cases (via a disclosure by the victim or through visible signs) will face disciplinary sanctions. All staff must report any disclosures of FGM to the DSL or DDSL as soon as possible. The DSL will support the member of staff in reporting such a disclosure.

10. Recognition of Harm

The harm or possible harm of a child may come to your attention in a number of possible ways:

1. Information given by the child, his/her friends, a family member or close associate.
2. The child's behaviour may become different from the usual, be significantly different from the behaviour of their peers, be bizarre or unusual or may involve 'acting out' a harmful situation in play.
3. An injury which arouses suspicion because:
 - It does not make sense when compared with the explanation given
 - The explanations differ depending on who is giving them (e.g. differing explanations from the parent/carer and child)
 - The child appears anxious and evasive when asked about the injury
4. Suspicion being raised when a number of factors occur over time, for example, the child fails to progress and thrive in contrast to his/her peers.

5. Contact with individuals who pose a 'risk to children' relates to an individual that that has been identified as presenting a risk or potential risk of harm to children. This can be someone who has been convicted of an offence listed in *Schedule One of the Children and Young Person's Act 1933 (Sexual Offences Act 2003)*, or someone who has been identified as continuing to present a risk to children.
6. The parent's behaviour before the birth of a child may indicate the likelihood of significant harm to an unborn child, for example substance misuse, or previous children removed from their carers – this is where the Safeguarding Board stops.
7. Young carers can be particularly vulnerable. Children and young people under 18 who provide care assistance or support to another family member are called young carers. They carry out on a regular basis, significant or substantial caring tasks and assume a level of responsibility, which would usually be associated with an adult. The person receiving care is often a parent but can be a sibling, grandparent or other relative who is disabled, has some chronic illness, mental health problem or other condition connected with a need for care, support or supervision.
8. Substance misuse – the potential for a child to be harmed as a result of the excessive use of alcohol, illegal and controlled drugs, solvents or related substances may occur during a young person's life. The use of drugs or other substances by parents or carers does not in itself indicate child neglect or abuse, and there is no assumption that a child living in such circumstances will automatically be considered under the child protection procedures. It is important to assess how parental substance use impacts upon the children or young people in the family.
9. Mental health – Mental illness in a parent or carer does not necessarily have an adverse effect on the child or young person but it is important to assess its implications for any children involved in the family. The adverse effects of parental mental illness on the child are less likely when parental problems are mild, last for a short period of time, are not associated with family disharmony, and where there is another parent or family member who can respond to the child's needs and offer protection. Where mental illness is accompanied by problem alcohol use, domestic violence or associated with poverty and social isolation, children are particularly vulnerable. The potential impact of a parental mental illness and the child's ability to cope with it is related to age, gender and individual personality
10. Domestic violence – The Home Office (2009) defines domestic violence as 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality' (*HM Government 2010: page 262, paragraph 9.17*). Domestic violence affects both adults and children in the family. Children and young people can suffer directly and indirectly if they live in a household where there is domestic violence. It is likely to have a damaging effect on the health and development of children. The amendment made in *section 120 of the Adoption and Children Act 2002* to the *Children Act 1989* clarifies the meaning of harm to include, for example, impairment suffered from seeing or hearing the ill-treatment of another. This can include children witnessing violence in the home. Domestic violence has an impact in a number of ways:
 - It can pose a threat to the physical well-being of an unborn child, if a mother is kicked or punched

- Children may suffer injuries as a result of being caught up in violent episodes
- Children become distressed by witnessing the physical and emotional suffering of a parent
- The physical and psychological abuse suffered by the adult victim can have a negative impact upon their ability to look after their children
- The impact of domestic violence is exacerbated when the violence is combined with problematic alcohol or drug use

People working with children should also be alert to the frequent inter-relationship between domestic violence and the abuse and neglect of children.

11. Bullying – This can be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from activities and social acceptance of their peer group). The damage inflicted by bullying (including bullying via the internet) can frequently be underestimated. Bullying can be through the use of electronic communication, e.g. text or social network sites, and is commonly known as cyberbullying. Bullying can cause considerable distress, to the extent that it can affect health and development and at the extreme significant harm. All settings in which children are provided with services or are living away from home should have in place rigorously enforced anti-bullying strategies. The College's *Anti Bullying: Guidance and Policy* document can be found in SharePoint and provides further information on bullying and instructions to staff on how to respond.

12. Youth violence and gang involvement – Children and young people who become involved in gangs are at risk of violent crime and as a result of this involvement are deemed vulnerable. Agencies and professionals have a responsibility to safeguard these children and young people and to prevent further harm both to the young person and other potential victims. Risks associated with gang activity include access to weapons (including firearms), retaliatory violence and territorial violence with other gangs. Other risks include increased likelihood of involvement in knife crime, sexual violence and substance misuse.

The Home Office guidance Preventing youth violence and gang activity advises that agencies should follow the referral process in *Working Together to Safeguard Children 2018* when they have concerns about a child's safety and welfare. In relation to those children and young people who may be affected by youth violence and gang involvement concerns may be raised that a child or young person is:

- not involved in gangs but vulnerable to, or at risk of, becoming involved in a gang
- non-gang-involved and at risk of harm from gang members
- gang-involved and at risk of harm through their own gang-related activities

Indicators, which may signal that children are at risk from, or are involved with serious violent crime:

- increased absence from college
- 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.
13. Radicalisation and Extremist behaviour – At Wilberforce College we assist our students to become more resilient to the messages of violent extremists through creating an environment where all young people learn to understand others, value and appreciate diversity and develop skills to be able to debate. Through the balanced curriculum we offer we will help young people to learn and explore the values of different faiths in culture. Where a member of staff has concerns regarding radicalisation or extremist behaviour, they must inform the DSL or DDSL who will refer the concern to either to the Police or EHaSH.
14. Child Criminal Exploitation – County Lines – The term County Lines describes gangs and organised criminal networks involved in exporting illegal drugs in to other areas of the country, often small rural and coastal towns, using dedicated mobile phone lines or another form of ‘deal line’ which can be a person. They are likely to exploit children to move and store the drugs and money and will often use coercion, intimidation, violence (including sexual violence) and weapons.

At Wilberforce College we will treat any student who is criminally exploited as a victim first and refer to Children’s Social Care and/or Humberside Police immediately.

Indicators that a student may be at risk of criminal exploitation:

- Increase in ‘missing episodes’. Victims may be missing for days and drug run in other countries.
- Having unexplained amounts of money, new high cost items and multiple mobile phones.
- Increased social media and phone/text use, almost always secretly.
- Having injuries that are unexplained and unwilling to be looked at.
- Increase in aggression and violence.
- Carrying weapons.
- Travel receipts that are unexplained.
- Parents concerns and significant changes in behaviour.

11. Allegations Made Against Staff/Volunteers

The Principal manages safeguarding allegations made against any adult officially present on the College site. In the absence of the Principal, this responsibility is delegated to the DSP for child protection. In the event that a student should disclose to a member of staff, that member of staff must follow procedures as laid out in section 4 of the College's *Child Protection Policy*. He or she should not personally investigate the matter but will record what the student has said on the *At Risk Recording Form*. The matter should then be referred immediately to the Principal or, in his absence, the DSL.

If an allegation is made against the Principal, this should be referred directly to the DSL. He or she will then immediately inform the matter to the Chair of Governors who will then follow the procedures outlined below (assuming the role of the Principal).

In responding to the allegation, the Principal may initiate an investigation in to the matter at the earliest opportunity and will follow procedures and guidance laid out by the LSCP and the DFE. There may be reasons at this stage for the Principal not to speak directly to the accused person (see below). When dealing with an allegation, the Principal will consider whether the adult 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.

If there is an incident where a member of staff or volunteer has to be dismissed because they have harmed a child or vulnerable adult, or would have been if they had not left, the College will notify the DBS.

Should the Principal decide that the allegation meets any of the above criteria, then he/she will inform the Local Authority within one working day. This referral will be made the Local Authority Designated Officer (LADO). The LADO is responsible for overseeing cases, providing advice and guidance to employers and voluntary organisations, liaising with police and other agencies and monitoring the progress of cases to ensure that they are dealt with as quickly as possible, consistent with a fair and thorough process. If the Principal decides that the allegation is particularly serious, then a referral may be made immediately to the police or social care, or both.

The Principal will inform the accused person about the allegation as soon as possible after consulting the Local Authority. However, where the LADO decides that a local authority strategy discussion is needed, or it is clear that police or social care may need to be involved, that should not be done until those agencies have been consulted and have agreed what information can be disclosed to the person. For example, in cases where vital evidence may be lost to an investigation, such as computer records, it may be that the Principal does not alert the accused person at this stage but informs the police so that the evidence can be secured.

There are up to three elements in the initial considerations of an allegation:

- A police investigation of a possible criminal offence
- Assessment of whether a student needs protection or services
- Consideration by the College of disciplinary action

The LADO will decide whether to convene a strategy meeting to consider the next steps. This meeting will include representatives from Children's Social Care, police, the College Principal and other relevant bodies as appropriate.

The decision to suspend a member of staff can only be taken by the Principal (or the Chair of the Corporation if the allegation is against the Principal). Suspension can be recommended but cannot be required by the local authority, police or Children's Social Care. In deciding whether or not to suspend a member of staff, the Principal will consider:

- Is there a cause to suspect that a student is at risk of significant harm?
- Does the allegation warrant investigation by the police?
- Is the allegation so serious that there may be grounds for dismissal?

The role of the LADO in the case of suspension is to support and advise the Principal and to ensure that investigations are resolved as quickly as possible and in manner which is fair and thorough to all parties.

In undertaking this role, the LADO will ensure that:

- the relevant agencies engage effectively in progressing enquiries
- strategies and plans are reviewed as required
- obstacles to the process are identified and resolved
- processes are compliant with guidance, procedures and legislation.

If the allegation is substantiated, the Principal will decide on the outcome and will liaise with the LADO.

If the allegation is determined to be unfounded, the Principal can refer the matter to Children's Social Care to determine whether the student concerned is in need of support services. If the allegation is shown to have been deliberately invented or malicious, the police may be asked to consider whether any action might be appropriate against the persons responsible. The Principal may also consider taking disciplinary action against the student if their behaviour is deemed to be in conflict with the Core Values and ethos of the College.

Disclosures and concerns regarding staff or volunteers can also be made by staff or volunteers and should follow the same protocols as above and report concerns to the Principal.

11.1 Raising concerns regarding adults working in or on behalf of the college (Low Level Concerns)

As part of our whole-college approach to safeguarding we promote an open and transparent culture in which all concerns about all adults working in or on behalf of the college (including supply teachers, volunteers and contractors) are dealt with promptly and appropriately. Creating a culture in which all concerns about adults are shared responsibly and with the right person, recorded and dealt with appropriately is critical.

It is important to identify concerning, problematic or inappropriate behaviour early to ensure that adults working in or on behalf of the college are clear about professional boundaries and act within these boundaries.

What is a low-level concern?

The term 'low-level' concern does not mean that it is insignificant. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' – that an adult working in or on behalf of the college may have acted in a way that:

- is inconsistent with the Staff Code of Conduct, including inappropriate conduct outside of work
- does not meet the harm threshold or is otherwise not serious enough to consider a referral to the LADO.

Examples of such behaviour could include, but are not limited to:

- being over friendly with children
- having favourites
- taking photographs of children on their mobile phone
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- using inappropriate sexualised, intimidating or offensive language.

Any concerns regarding a member of staff should be raised with the Principal straight away, with no delay. Allegations made against the Principal should be directed towards the DSL.

With regards to 'Low level Concerns' staff will be directed to fill out a Staff Concerns Log (see Appendix 7). The Principal will, having considered the information, follow the process as outlined in section 11 above. It may not be necessary to inform the LADO, but it may be that the staff disciplinary procedure is invoked.

11.2 Supporting those involved

Employers have a duty of care to their employees. The College will act to manage and minimise the stress inherent in the allegations process. Support for the individual is vital to fulfilling this duty. Individuals will be informed of concerns or allegations as soon as possible and given an explanation of the likely course of action, unless there is an objection by the Children's Social Care services or the Police. The individual will be advised to contact their trade union representative, if they have one, or a colleague for support. They will also be given access to welfare counselling or medical advice where this is provided by the employer.

11.3 Staff protection

Adherence to guidelines on self-protection for staff and volunteers working with children and young people can avoid vulnerable situations where false allegations can be made.

- When listening to a student disclosure, avoid situations where you are on your own with a student. Make sure that the discussion takes place in a room with windows and where possible leave the door ajar to ensure that both the student and the staff member feel safe whilst maintaining confidentiality. And privacy.
- In the event of an injury to a student, accidental or not, the member of staff who reported the injury should ensure that it is recorded in the college's accident book. This is kept in the front office.
- Keep written records of any allegations a child makes against staff and volunteers and report in line with section 11 of this policy.

- If a young person touches a staff member or volunteer inappropriately, record what happened immediately and inform the DSP.
- Adhere to the College's policy on behaviour management, a copy of which can be found on SharePoint.
- Staff should not engage in conversations with students online, unless using official college systems in the context of work of the college. This means that personal texting, e-mailing or interactions on social networking sites is forbidden.

12. Recruitment and Selection

It is important when recruiting paid staff, volunteers and contractors to adhere to the recruitment policy. This will ensure potential staff and volunteers are screened for their suitability to work with children and young adults.

Staff recruitment procedures are consistent with the discharge of the College's responsibility for providing a safe environment for students as set out in *Keeping Children Safe in Education*. Details of employment check procedures and record keeping are available from the college's HR department.

A person who is barred from working with children or vulnerable adults will be breaking the law if they work or volunteer, or try to work or volunteer with those groups. If the College knowingly employs someone who is barred to work with those groups we will also be breaking the law.

The College has a strict visitors and contractors policy, which also covers risk assessing guest speakers.

13. Staff Training

The College adheres to local and national guidelines to ensure that all staff are fully conversant with the College's safeguarding policies and local and national developments.

In addition to basic child protection training, the DSL and DDSL undertake training in inter-agency working, and refresher training at two-yearly intervals..

CPOs receive appropriate training by the LSCP and undertake refresher training at two-yearly intervals. A strategic specialised training programme is provided to the team of CPOs to ensure expertise across the team in various aspects of child protection.

The Principal, College governors and all other staff who work with children, undertake appropriate training to equip them to carry out their responsibilities for child protection effectively, that is kept up to date by refresher training at three-yearly intervals. All new staff and volunteers undertake initial training, including familiarisation and understanding of with the child protection policy and procedures, as part of their induction.

The DSL ensures:

- All staff receive annual basic training in child protection issues and be aware of the college's child protection procedures.
- At least part one of *Keeping children safe in education*: is read and understood by all staff and volunteers.

- All staff and volunteers are aware of systems within the college that supports safeguarding, including:
 - The Child Protection Policy
 - Staff Code of Conduct Policy
 - Student Code of Conduct and Behaviour for Learning Policy
 - The role of the DSL..

All staff and volunteers undergo safeguarding and child protection training (including online safety) at induction, with training regularly updated throughout the academic year. Induction and training is in line with any advice from the LSCP and other relevant safeguarding partners. In addition, all staff receive regular safeguarding and child protection updates, including online safety (for example, via email, e-bulletins, staff meetings) as required, and at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

We also have regard to the Teachers’ Standards, which set out the expectation that all teachers manage behaviour effectively to ensure a good and safe educational environment and requires teachers to have a clear understanding of the needs of all students.

We ensure opportunities to teach safeguarding, including online safety, are embedded within the tutorial programme, throughout the curriculum and in regular communications with students. We recognise that a one size fits all approach may not be appropriate for all students, and a more personalised or contextualised approach for more vulnerable children, victims of abuse and some SEND children might be needed as appropriate.

14. Contacts

Hull

Children’s Social Care (Local Authority)
(01482) 448879

- Immediate Help (outside office hours) (01482) 300304
- Early Help and Safeguarding Hub (EHaSH Team) (01482) 448879
- Emergency Duty Team (01482) 788080
- LADO (01482) 790933

Police non-emergency 101

Child in immediate danger 999

Hull Safeguarding Children Partnership (01482) 379090

Young Witness Service (01482) 379091

Email: hscp@hullcc.gov.uk

East Riding

East Riding Safeguarding Children Partnership

- Contact during office hours (01482) 395500
- Contact out of office hours (01482) 393939

Email: safeguardingchildrenshub@eastriding.gov.uk

LADO@eastriding.gov.uk

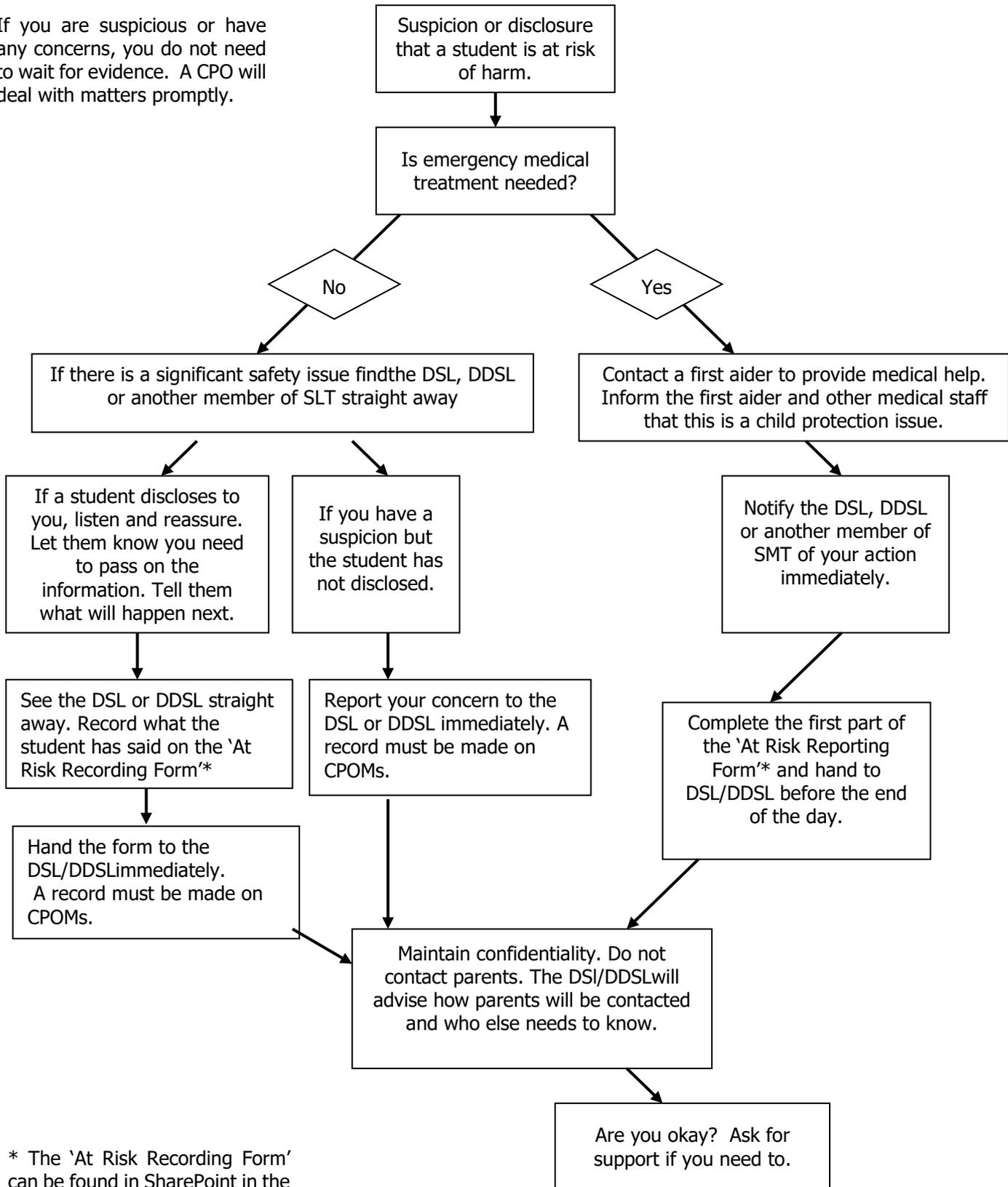
15. Resources and Internet Links

This section acts as a guide, rather than an exhaustive list. Its aim is to provide you with some useful resources and links.

1. HM Government (2025) *Working Together to Safeguard Children: A Guide to Inter-agency Working to Safeguard and Promote the Welfare of Children*.
2. DFE (2024) Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges.
3. Ofsted Common Inspection Framework for further education and skills.
4. HM Government (2015) Prevent Duty Guidance: for England and Wales
5. CEOP Website - Think U Know: awareness and advice. Internet link: <http://www.thinkuknow.co.uk/>
6. Safe Network: www.safenetwork.org.uk
7. Preventing youth violence and gang involvement
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/418131/Preventing_youth_violence_and_gang_involvement_v3_March2015.pdf
8. Guidance for safer working practice for those working with children and young people in education settings

Appendix 1 – Procedure for Staff Responding to Disclosures or Suspicions of Abuse

If you are suspicious or have any concerns, you do not need to wait for evidence. A CPO will deal with matters promptly.



* The 'At Risk Recording Form' can be found in SharePoint in the appendix to the Child Protection Policy (appendix 4)

Appendix 2 – Seeking Consent for a Referral

Referrals can be made by any staff member as outlined in section 4 Procedure.

Working Together to Safeguard Children (HM Government 2018) states that professionals should seek in general to discuss any concerns with the family (including the child where appropriate) and where possible seek their agreement to making referrals to the Local Authority Access and Assessment Team. This should only be done where such discussion and agreement seeking will not place the child at an increased risk of significant harm.

So in general where concerns about a child relate to Section 17 children 'in need' (*Children Act 1989*) consent should be sought from the parents, carer or children where appropriate prior to a referral being made.

It should be noted that parents, carers or child may not agree to information being shared, but this should not prevent referrals where child protection concerns persist. The reasons for dispensing with consent from the parents, carer or child should be clearly recorded.

In cases where an allegation has been made against a family member living in the same household as the child and it is your view that discussing the matter with the parent would place the child at risk of harm, or where discussing it may place a member of staff/volunteer at risk, consent does not have to be sought prior to the referral being made.

If you are unsure about whether to seek parental consent prior to a referral being made then seek advice from the duty social worker at the relevant Local Authority Access and Assessment Team.

If, at any point, there is a risk of immediate serious harm to a child a referral should be made to the Police and Children's Social Care immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point.

Appendix 3 – Making a Referral

Referrals can be made by any staff member, under guidance from the DSL/DDSL, or directly by the DDSLin consultation with the DSL as outlined in section 4 of the procedure.

If, at any point, there is a risk of immediate serious harm to a child a referral should be made to the Police and children's social care immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point.

Referrals of all children in need, including those where there are child protection concerns will be made to:

- **Hull** – To Children's Social Care – EHASH Team or Police Public Protection Unit
- **East Riding** – By telephoning the Call Centre/Children's Social Care or Police Family Protection Team
- **Out of Hours** – To the relevant Emergency Duty Team

All referrals made by telephone need to be followed up in writing within 48 hours.

The referrer should be prepared, where possible, to give the following information:

- The nature of your concerns / allegation
- Whether the child will need immediate action to ensure their safety
- Are the parents aware of the concerns? Has consent for the referral been sought? If not, the reasons for this?
- Factual information about the child and family, including other siblings
- The nature of your involvement with the family
- Other professionals involved with the family
- The source of your referral, is it based on your own assessment of the needs of the child, a reported allegation or disclosure, or has the concern been reported to you by another person, if so who?
- Child's current whereabouts and when they were last seen
- If you consider the child suffering or at risk of suffering significant harm, who is the source of that harm and their current whereabouts?

<i>Notes</i>	<i>Staff Involved</i>	<i>Date</i>

Appendix 5

Confidential

Referral Form

Child Protection Notification

Name of student:

Date of birth:

Address:

.....

Post code:

Parental responsibility:

.....

Time & date of referral:

.....

External agency to which the referral is made:

.....

Brief summary of reason for referral:

Signed:

Date:

Appendix 6 – Information Sharing: Practitioner’s Guide

Information sharing: Guidance for practitioners and managers’ (DfE, 2015).

It can be especially useful in supporting early intervention and preventative work where decisions about information sharing may be less clear than in safeguarding of child protection situations. Below are 7 golden rules of information sharing that this guidance recommends.

Seven key points on information sharing:

1. Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately refer to the colleges GDPR regulations. This can be accessed via the appropriate member of the Senior Management Team.
2. Be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice if you are in any doubt, without disclosing the identity of the person where possible.
4. Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgements on the facts of the case.
5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.
6. Necessary, proportionate, relevant, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up to date, is shared in a timely fashion, and is shared securely.
7. Keep a record of your decision and the reason for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Appendix 7 – Staff Low Level Concern Log

Please tick one of the following:

Informal Concern

Formal Complaint

Staff member who the concern is with reference to:

Staff member with the concern/making the complaint:

Are you happy for your name to be shared with the staff member this log is relating to?

YES NO

Date:

Nature of concern (e.g. inappropriate language, unprofessional behaviour):

Outline of incident (continue on additional sheets if necessary):

Preferred/expected outcome (what actions would you like SLT to take):

--

Actions taken and by who:

--

Name (printed):	
Signature:	

Date handed to Designated Safeguard Lead/Principal for filing:	
--	--

Principal additional comments/actions:

--