



**EmpowerEd**

Unlocking potential, building futures

# **EmpowerEd Child Protection and Safeguarding Policy 2023 - 2024**

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## CHILD PROTECTION POLICY AND PROCEDURES 2023-2024

<b>Child Protection Policy and Procedures 2023-2024</b>	<b>2</b>
<b>Section 1: Introduction</b>	<b>3</b>
<b>Section 2: Purpose and Aims</b>	<b>5</b>
<b>Section 3: Links to other guidance</b>	<b>6</b>
<b>Section 4: Safer Recruitment</b>	<b>8</b>
<b>Section 5: Site Security</b>	<b>9</b>
<b>Section 6: Data Protection – Information and Records</b>	<b>9</b>
<b>Section 7: Definition of Safeguarding and Child Protection</b>	<b>10</b>
<b>Section 8: The four main forms of abuse</b>	<b>10</b>
<b>Section 9: Specific Safeguarding Issues</b>	<b>12</b>
<b>Section 10: Early Help</b>	<b>12</b>
<b>Section 11: Mental Health</b>	<b>14</b>
<b>Section 12: Children Looked After (CLA)</b>	<b>15</b>
<b>Section 13: Online Safety</b>	<b>15</b>
<b>Section 14: Children with Special Educational Needs or Disabilities (SEND) or certain health conditions</b>	<b>16</b>
<b>Section 15: Recognition/Signs of Abuse</b>	<b>17</b>
<b>Section 16: Role of the Designated Safeguarding Lead</b>	<b>18</b>
<b>Section 17: The Role of Individual Staff</b>	<b>23</b>
<b>Section 18: Training</b>	<b>23</b>
<b>Section 19: Confidentiality of Records</b>	<b>24</b>
<b>Section 20: Working with Children</b>	<b>24</b>
<b>Section 21: Allegations involving Centre Staff/Volunteers</b>	<b>25</b>
<b>Section 22: Allegations against other children</b>	<b>28</b>
<b>Section 23: Whistleblowing</b>	<b>29</b>
<b>Section 24: Role of the Responsible Adult</b>	<b>30</b>
<b>Section 25: Child Protection Procedures</b>	<b>32</b>
<b>Section 26: Definitions of Specific Safeguarding Issues</b>	<b>36</b>
<b>Appendix B</b>	<b>48</b>
<b>Appendix C</b>	<b>52</b>
<b>Appendix D</b>	<b>53</b>
<b>Appendix E</b>	<b>54</b>

## SECTION 1: INTRODUCTION

EmpowerEd are committed to safeguarding children and young people, and we expect everyone who works in our Centres to share this commitment. All adults in our Centres take all welfare concerns seriously and encourage children and young people to talk to us about anything that is worrying them.

Safeguarding and promoting the welfare of children is **everyone's** responsibility. **Everyone** who comes into contact with children and their families has a role to play. To fulfil this responsibility effectively, all practitioners should make sure their approach is child centred. This means that they should consider, always, what is in the **best interests** of the child.

No single practitioner can have a full picture of a child's needs and circumstances. If children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information, and taking prompt action. A contextual safeguarding approach (for risks outside of the home) must also be considered when looking at individual cases. All assessments should include this wider picture.

All staff must have read and understood:

- Part 1 of Keeping Children Safe in Education (September 2023)
- Empowered's Code of Conduct
- Behaviour Policy

All staff must also be aware of:

- The role of the designated lead (including the identity of the designated leads and any deputies)

Centre Managers/Directors and staff that work directly with children must have also read – Annex A of Keeping Children Safe in Education (September 2023).

### ***"THE WELFARE OF THE CHILD IS PARAMOUNT"***

The safety and welfare of our students is of the utmost importance, ensuring that they are protected from maltreatment, impairment of their mental and physical health or development and that they are growing up in circumstances consistent with the provision of safe and effective care. We take action to enable all children to have the best outcomes. We have created a culture of vigilance where students' welfare are actively promoted. Students are listened to and feel safe. We maintain an 'it could happen here' attitude.

We know children learn best when they are healthy, safe, and secure, when their individual

needs are met and when they have positive relationships with the people caring for them. We aim to have schools which are welcoming, safe, and stimulating and where children can enjoy learning and grow in confidence. All necessary steps are taken to keep children safe and well.

Because of the day-to-day contact with children, our staff are trained to identify when a student may be at risk of harm and abuse, and they report their concerns immediately. We have a duty to safeguard and promote the welfare of our students under the Education Act 2002 and Children Act 1989/2004 through identifying any child welfare concerns and taking action to address them in partnership with families and other agencies where appropriate.

Children are taught about safeguarding, including sensitive issues and online safety, through various teaching and learning opportunities, as part of providing a broad and balanced curriculum. We use the curriculum to ensure that children and young people understand how people with extreme views share these with others, especially using the internet. All children are taught to recognise when they are at risk and how to get help when they need it.

We are committed to ensuring that our students are taught a curriculum that aims to prepare them for life in modern Britain. Teaching the Centre's core values alongside the fundamental British Values supports quality teaching and learning, whilst making a positive contribution to the development of a fair, just and civil society.

## SECTION 2: PURPOSE AND AIMS

The elements in this policy and our procedures related to this aim to:

- Ensure safe recruitment practice in checking the suitability of all our staff and volunteers to work with children including the completion of risk assessments.
- Ensure staff are appropriately trained.
- Raise awareness of safeguarding/child protection issues amongst all staff, supply, agency, and volunteers and of what to do if they have concerns. This includes raising awareness of any current issues such as: Child abduction and community safety incidents; Child Criminal Exploitation (CCE); Child Sexual Exploitation (CSE); County lines; Children and the court system; Children missing from education; Children with family members in prison; Cybercrime; Domestic abuse; Homelessness; Mental health; Modern Slavery; Preventing radicalisation; The Prevent duty; Channel; Sexual violence and sexual harassment between children in school; Serious Violence; So-called 'honour'-based abuse; FGM; Forced marriage (see 'Keeping Children Safe in Education' ,*DfE, September 2023*).
- Ensure that any volunteers are appropriately supervised.
- Ensure that our procedures and expectations for identifying and reporting/recording cases, or suspected cases, of abuse to relevant agencies are robust.
- Ensure that our links with relevant agencies are effective and that we co-operate and work in a partnership regarding child protection matters, including attendance at case conferences and core group meetings.
- Ensure that our Centre's environment is safe and is one in which children feel secure and are encouraged to talk freely about anything that concerns them.
- Ensure that children know there are adults in the Centre who they can approach if they are worried about anything.
- Ensuring that students have a safe space to speak to a trusted adult, where they can raise concerns.
- Ensure that the curriculum and other provisions develop and equip our students with the skills needed to feel safe and adopt safe practices to help them recognise risks and stay safe from abuse.
- Ensure that we support students who have been abused or may be at risk of harm in accordance with any agreed child protection plan.
- Ensure that we respond appropriately to any concern or allegation about a member of staff or volunteer.
- Ensure that staff follow accepted "safe practice" principles when working with students.
- Ensure that students are protected from all forms of harm.
- Ensuring that the Centre creates an environment where staff are encouraged and feel confident to self-refer, where, for example, they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards.

If there are Child Protection concerns, the **London Child Protection Procedures** (*London Safeguarding Children Board, 7<sup>th</sup> edition, 2022 – last updated March 2023*) must be followed. This can be found at [www.londoncp.co.uk](http://www.londoncp.co.uk). The Local Safeguarding Children Partnership (LSCP) has adopted these procedures.

In addition to our overarching Safeguarding and Child Protection Policy and Procedures, the following policies should also be considered:

Induction, SEN, Pupil Premium, Equality, Health and Safety, Safer Recruitment, Attendance, Behaviour, Anti-bullying, Online Safety, Positive handling, Intimate Care, Drug and Alcohol, Medical, Healthy Relationships, Data Protection, Whistleblowing, Educational Visits and Online Safety (including the use of mobile devices).

### SECTION 3: LINKS TO OTHER GUIDANCE

**Although this list is not exhaustive, this policy and procedure also accords with:**

- Centre Code of Conduct
- Safeguarding Children and Safer Recruitment in Education (DFE April 2011 – Updated April 2012)
- Guidance for Safer Working Practice for Adults who work with Children and Young People in Education (February 2022)
- Working Together to Safeguard Children (July 2018 – Updated July 2022 – Currently under consultation)
- Keeping Children Safe in Education (September 2023)
- Inspecting Safeguarding in Early Years, Education and Skills settings (Updated September 2022)
- Disqualification under the Child Care Act 2006 (August 2018)
- Information sharing – Advice for practitioners providing safeguarding services to children, young people, parents, and carers (Updated July 2023)
- What to do if you think a child is being abused (DfE March 2015)
- Section 26 of the Counter Terrorism and Security Act (2015)
- Section 5B of the Female Genital Mutilation Act (2003) Section 74 of the Serious Crime Act 2015
- Female Genital Mutilation: Resource Pack (Updated February 2023)
- Regulated activity in relation to children (2012)
- Children Missing Education: Statutory Guidance for Local Authorities (September 2016)
- Child Sexual Exploitation – Definition, Guide and Annexes (DfE February 2017)
- Searching, screening and confiscation (DfE July 2022)
- The designated teacher for looked-after and previously looked-after children (DfE February 2018)
- Promoting the education of looked-after and previously looked-after children (DfE February 2018)
- Criminal Exploitation of children and vulnerable adults: County Lines guidance (Home Office, Feb 2020)
- General Data Protection Regulations (GDPR) (May 2018) and the latest Data Protection Act (2018)
- Data Protection Toolkit for Schools (Sept 2018)
- Mental Health and Behaviour in Schools (DfE November 2018)
- Safeguarding children and protecting professionals in early years settings: online safety guidance for practitioners (UK Council for Internet Safety, February 2019)
- Safeguarding children and protecting professionals in early years settings: online safety considerations for managers (UK Council for Internet Safety, February 2019)
- Governance Handbook (Updated October 2020)
- Education for a Connected World (June 2020)
- Reducing the need for restraint and restrictive intervention (June 2019)

- Positive environments where children can flourish (2018 – Updated October 2021)
- Safeguarding and remote education (Updated November 2022)
- When to call the police – Guidance for Colleges and Schools (NSPCC)
- Sharing nudes and semi-nudes: advice for education settings working with children and young people (23<sup>rd</sup> December 2020) Department for Digital, Culture, Media and Sport, UK Council for Internet Safety.
- Keeping children safe in out-of-school settings: code of practice - GOV.UK (October 2020)

#### **SECTION 4: SAFER RECRUITMENT**

The safe recruitment of staff in our Centres is the first step to safeguarding and promoting the welfare of the children in education.

In our recruitment and selection of staff and volunteers we will always adhere to the government guidance contained within “*Working Together to Safeguard Children*” (July

2018 – Updated July 2022 – currently under consultation) and 'Keeping Children Safe in Education (DfE 2023).

We will ensure that:

- For good practice, our interview panel includes at least one member who has completed safer recruitment training,
- that we always follow up gaps in previous employment,
- that we always require specific references from employers for the last 5 years
- that for all posts, paid and voluntary, the appropriate Disclosure and Barring Service (DBS) information has been received.
- In addition to obtaining the DBS certificate, anyone who is employed to teach will undergo an additional check to ensure that they are not prohibited from teaching.
- We consider carrying out online checks for shortlisted candidates and have updated our Safer Recruitment Policy to reflect this. This may help identify any incidents or issues that have happened, and are publicly available online, which the Centre might want to explore with the applicant at interview. Schools and colleges should inform shortlisted candidates that online searches may be done as part of due diligence checks.

**(Please refer to our Safer Recruitment Policy for further information).**

#### **SECTION 5: SITE SECURITY**

All people at our Centres must adhere to the guidelines within this policy. Laxity can cause potential safeguarding issues to arise. Therefore:

- The Centre's front centre gate is always padlocked with only staff members being aware of the code.
- All Exit Doors should be closed to prevent intrusion.
- For visitors who are attending in a professional capacity, their ID will be checked, and assurance will be sought that the visitor has had the appropriate DBS check (or that the visitor's employers have confirmed that their staff have appropriate checks).
- Children will only be allowed home with adults with parental responsibility or confirmed permission.
- Children should never be allowed to leave the Centre alone during sessions, and if collected by an adult, are signed out.
- Should a child leave the Centre without permission then staff have been informed never to chase after a child, but rather to report immediately to the Centre Director. Then parents and police will be informed of the circumstances.
- All visitors are required to sign in at the main reception where they will be given a visitor's badge. This will be returned to the main reception on departure.

#### **SECTION 6: DATA PROTECTION – INFORMATION AND RECORDS**



The Data Protection Act 2018 and GDPR do not prevent or limit the sharing of information for the purposes of keeping children safe. This includes allowing practitioners to share information without consent.

All staff must maintain records and obtain and share information (with parents, carers, other professionals working with the child, police, social services, and Ofsted as appropriate) to ensure safe and efficient management of the Centre, and to help ensure the needs of all children are met. All staff must enable a regular two-way flow of information between parents and centre.

Confidential information and records about children are held securely and only accessible and available to those who have a right or professional need to see them. The Centre Manager is aware of responsibilities under the latest Data Protection Act in England, including those imposed under the General Data Protection Regulation (GDPR) passed by the European Union. As a Centre we believe that protecting the data we hold about our children is a fundamental part of our safeguarding process and treats this information with as much importance as protecting the child themselves.

All staff understand the need to protect the privacy of the children in their care as well as the legal requirements that exist to ensure that information relating to the child is handled in a way to ensure confidentiality. Parents and carers are given access to all records about their child provided that no relevant exemptions (information which could cause harm to the child or any other individual) apply to their disclosure under the DPA.

The GDPR imposes more stringent requirements on entities that deal with people's personal data. In the Centre, this applies to all personally identifiable information held on staff, children, and parents. We are fully committed to ensuring that it upholds the new rights granted to a person under the GDPR. Parents and carers should be aware that there are legal requirements that supersede data protection regulations. The Centre is required to share data with certain agencies under legal obligations.

For more information:

[Information sharing advice for safeguarding practitioners - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

## SECTION 7: DEFINITION OF SAFEGUARDING AND CHILD PROTECTION

**Safeguarding:** is about every child

In relation to children and young people, safeguarding and promoting their welfare is defined in Keeping Children Safe in Education (September 2023) as:

- protecting children from maltreatment
- preventing impairment of children's mental or physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes

**Child Protection:** relates to any child or young person (i.e., under 18 years of age) who has suffered from, or may be at risk of abuse: physical, emotional, sexual, neglect.

## SECTION 8: THE FOUR MAIN FORMS OF ABUSE

**All Centre staff should be aware that abuse, neglect, and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases multiple issues will overlap with one another.**

**Abuse:** 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. 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.

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

**Emotional abuse:** the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child 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 a child's developmental capability as well as overprotection and limitation of exploration and learning or preventing the child from 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, although it may occur alone.

**Sexual abuse:** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue (also known as Child-on-Child Abuse) in education and all staff should be aware of it and of the Centre's policy and procedures for dealing with it.

***(Following the end of the work of the Independent Inquiry into Child Sexual Abuse, the obligation to 'preserve records' for the inquiry has now been removed).***

**Neglect:** 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 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 caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

[LSCB NeglectPracticeToolkit\\_A4.pdf \(suttonscop.org.uk\)](https://www.suttonscop.org.uk/LSCB_NeglectPracticeToolkit_A4.pdf)

[Experiences of neglect by Howarth's classifications - A3 Poster.pdf \(suttonscop.org.uk\)](https://www.suttonscop.org.uk/Experiences_of_neglect_by_Howarth's_classifications_-_A3_Poster.pdf)

For more information, go to: <https://tacklechildabuse.campaign.gov.uk>

## SECTION 9: SPECIFIC SAFEGUARDING ISSUES

Safeguarding action may be needed to protect children and learners from specific safeguarding issues such as:

- Child abduction and community safety incidents;
- Child Criminal Exploitation (CCE);
- Child Sexual Exploitation (CSE);
- County lines;
- Children and the court system;
- Children missing from education;
- Children with family members in prison;
- Cybercrime;
- Domestic abuse;
- Homelessness;
- Mental health;
- Modern Slavery;
- Preventing radicalisation;
- The Prevent duty;
- Channel;
- Sexual violence and sexual harassment between children in Centre;
- Serious Violence;
- So-called 'honour'-based abuse;
- FGM;
- Forced marriage

***Please note this is not an exhaustive list – but are an indicator of some of the key issues of which staff may become aware.***

**See: Appendix A for further safeguarding definitions**

## SECTION 10: EARLY HELP

Every family can go through difficult or challenging times at some point during their lives. If you are aware of a family that is experiencing problems, they may require support to help them to deal with difficult situations and make things better. Early Help services and support should be offered as soon as a problem or difficulty starts. This is to stop things from getting worse, and to make sure that the family gets the help that they need. The Early Help Assessment Tool (EHAT) is used to find out about the family so that we can understand the difficulties that they may be experiencing. The EHAT is used when a family would like support to help them with a difficulty; when a professional working with a family recognises that they may require extra support; when a family have lots of professionals working with them and services and information needs to be organised to help make things clearer for them, where the needs of the family are unknown or unmet. The EHAT is entirely consent based and the family can decide at any point that they no longer wish to engage with the process. An EHAT is confidential except where there is a risk of serious harm to a child or young person.

Early Help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to the teenage years.

**All Centre staff** should be prepared to identify children who may benefit from **Early Help**. Early Help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to the teenage years. In the first instance staff should discuss early help requirements with the designated safeguarding lead. Staff may be required to support other agencies and professionals in an early help assessment.

Any child may benefit from early help, but all Centre staff 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 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 care or from home.
- is at risk of modern slavery, trafficking, sexual or criminal exploitation.
- is at risk of being radicalised or exploited.
- has a family member in prison 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 drugs or alcohol themselves.
- has returned home to their family from care.
- is at risk of 'honour'-based abuse such as Female Genital Mutilation or Forced Marriage.
- is a privately fostered child; and
- is persistently absent from education, including persistent absences for part of the Centre day.
- [Early Help for families and professionals - Sutton Council](#)
- [Schools EHC list](#)
- [Eligibility Criteria for Targeted Early Help Support in Sutton.docx](#)

**Signposting for families in times of need is vital, especially with the impact of the cost-of-living crisis. For further support please visit: [Together for Sutton - Together for Sutton](#)**

## SECTION 11: MENTAL HEALTH

We aim to promote positive mental health and wellbeing for our whole Centre community; students, staff, parents, and careers, and recognise how important mental health and emotional wellbeing is. We recognise that children's mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. Through a whole-Centre approach, we actively seek to promote emotional health and wellbeing by helping students to understand their feelings and the feelings of others.

Our role in the Centre is to help our students to succeed and reach their potential by supporting them to be resilient and mentally healthy. We also have a role to ensure that students learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues and where they can go if they need help and support.

All staff should also be 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. If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken by speaking to the designated safeguarding lead or a deputy.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Staff, however, are well placed to observe children day-to-day and identify those whose behavior suggests that they may be experiencing a mental health problem or be at risk of developing one.

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood.

Centres have an important role to play in supporting the mental health and wellbeing of their students.

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. Governing bodies and proprietors should ensure they have clear systems and processes in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems.

Centres can access a range of advice to help them identify children in need of extra mental health support, this includes working with external agencies.

**If you have a concern regarding the Mental Health of a child, contact your Designated Safeguarding Lead immediately to enable the required support to be put in place as soon as possible.**

**See: Appendix B for further definitions**

## SECTION 12: CHILDREN LOOKED AFTER (CLA)

The designated lead staff is also responsible for Children Looked After. All children looked after have a Personal Education Plan (PEP), which is part of the child's care plan. This is reviewed termly. Advice and support are available through the virtual school and virtual head teacher.

[Sutton Virtual School – Cognus](#)

## SECTION 13: ONLINE SAFETY

All staff are aware that technology has a significant component in many safeguarding and wellbeing issues. Children are at risk of abuse and other risks online as well as face to face. In many cases abuse and other risks will take place concurrently both online and offline. Children can also abuse other children online, this can take the form of abusive, harassing, and misogynistic/misandrist messages, the non-consensual sharing of indecent images, especially around chat groups, and the sharing of abusive images and pornography to those who do not want to receive such content.

EmpowerEd believes that Online Safety is an essential part of safeguarding and acknowledges its duty to ensure that all students and staff are protected from potential harm online.

EmpowerEd identifies that the issues classified within Online Safety are considerable, but can be broadly categorised into four areas of risk:

- Content: being exposed to illegal, inappropriate or harmful material

- Contact: being subjected to harmful online interaction with other users
- Conduct: personal online behaviour that increases the likelihood of, or causes, harm.
- Commerce: risks such as online gambling, inappropriate advertising, phishing and or financial scams.

EmpowerEd identifies that the internet and associated devices, such as computers, tablets, mobile phones and games consoles, are an important part of everyday life. EmpowerEd believes that students should be empowered to build resilience and to develop strategies to manage and respond to risk online.

We will regularly monitor internet use and evaluate Online Safety mechanisms to ensure that this policy is consistently applied.

To ensure they have oversight of Online Safety, the Designated Safeguarding Lead, will be informed of Online Safety concerns, as appropriate.

Any issues identified via monitoring will be incorporated into our action planning.

The Designated Safeguarding Lead (DSL) has lead responsibility for Online Safety. The ultimate lead responsibility for safeguarding and child protection, including Online Safety remains with the DSL.

EmpowerEd recognises that all members of the community have important roles and responsibilities to play with regards to Online Safety.

### **Training and Engagement with Staff**

We will:

- provide and discuss the Online Safety policy and procedures with all members of staff as part of induction
- provide up-to-date and appropriate Online Safety training for all staff on a regular basis, with at least annual updates - this will cover the potential risks posed to students (Content, Contact and Conduct) as well as our professional practice expectations
- recognise the expertise staff build by undertaking safeguarding training and managing safeguarding concerns and provide opportunities for staff to contribute to and shape Online Safety policies and procedures
- make staff aware that our IT systems are monitored, and that activity can be traced to individual users; staff will be reminded to behave professionally and in accordance with our policies when accessing our systems and devices
- make staff aware that their online conduct outside of the setting, including personal use of social media, could have an impact on their professional role and reputation
- highlight useful educational resources and tools which staff should use, according to the age and ability of the students
- ensure all members of staff are aware of the procedures to follow regarding Online Safety concerns affecting students, colleagues or other members of the community

***Please refer to our Online Safety Policy for further details***

## **SECTION 14: CHILDREN WITH SPECIAL EDUCATIONAL NEEDS OR DISABILITIES (SEND) OR CERTAIN HEALTH CONDITIONS**

Children with special educational needs or disabilities (SEND) or certain health conditions can face additional safeguarding challenges. Additional barriers can exist when

recognising abuse and neglect in this group of children. These can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration.
- these children being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children.
- the potential for children with SEND or certain medical conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs; and
- communication barriers and difficulties in managing or reporting these challenges

In our Centre we identify students who might need more support to be kept safe or to keep themselves safe. We do this in the following ways:

- Children will have a familiar adult to support with communication through simple language.
- Extra support is considered for children with SEN and disabilities.
- Use of visual aids and sign language to support understanding where required.
- Use of a familiar Speech and Language therapist to ensure that questioning and answers are put in a manner accessible to the child.
- Children are carefully monitored and observed to provide a full picture of their behaviour and mannerism so that any changes are noted, and a comparison can be made.
- The use of body maps, visuals and sign language are used to allow children to communicate their needs or concerns.
- The use of social stories is regularly used to support appropriate and inappropriate behaviour – such as bullying and keeping safe.
- Intervention groups teach children how to communicate and explain appropriate and inappropriate behaviour.

When required to use reasonable force to calm a situation, 'reasonable' means 'using no more force than is needed'. Individual plans for vulnerable children will be drawn up to reduce the use of force.

**For further support and guidance:**

<https://suttoninformationhub.org.uk/pages/send-local-offer>

## SECTION 15: RECOGNITION/SIGNS OF ABUSE

The first indication of concern about a student's welfare is not necessarily the presence of a serious injury. Many other signs, could be an indication of abuse, these may include:

- Children whose behaviour changes – they may become aggressive, challenging, disruptive, withdrawn, or clingy, or they might have difficulty sleeping or start wetting the bed
- Children with clothes which are ill-fitting and/or dirty
- Children with consistently poor hygiene



- Children who make strong efforts to avoid specific family members or friends, without an obvious reason
- Children who don't want to change clothes in front of others or participate in physical activities
- Children who are having problems at Centre, for example, a sudden lack of concentration and learning or they appear to be tired and hungry
- Children who change friendships or have relationships with older individuals or groups
- Children who have a significant decline in performance
- Children who show signs of self-harm or a significant change in wellbeing
- Children who show signs of assault or unexplained injuries
- Children who have unexplained gifts or new possessions
- Children who talk about being left home alone, with inappropriate carers or with strangers
- Children who fail reach developmental milestones, such as learning to speak or walk, late, with no medical reason
- Children who are regularly missing from the Centre or home
- Children who are missing from education
- Children who are reluctant to go home after the Centre
- Children with poor Centre attendance and punctuality, or who are consistently late being picked up
- Parents who are dismissive and non-responsive to practitioners' concerns
- Parents who collect their children from Centre when drunk, or under the influence of drugs
- Children who drink alcohol regularly from an early age
- Children who are concerned for younger siblings without explaining why
- Children who talk about running away
- Children who shy away from being touched or flinch at sudden movements.

## **SECTION 16: ROLE OF THE DESIGNATED SAFEGUARDING LEAD**

(See Appendix D for Designated Staff Details)  
 (See Annex C of KCSIE, 2023 for more information)

Safeguarding is a standing item on all Centre meetings. The Senior Designated Safeguarding Lead (SDSL) and Designated Safeguarding Lead (DSL) meet termly.

The Designated Safeguarding Lead has a responsibility for Safeguarding and Child Protection – their key role is:

### **Manage referrals**

The designated safeguarding lead (or deputies) will refer cases:

- of suspected abuse and neglect to the local authority children’s social care as required and support staff who make referrals to local authority children’s social care.
- to the Channel programme where there is a radicalisation concern as required and support staff who make referrals to the Channel programme.
- where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required; and
- where a child is thought to be in immediate danger, to the Police as required.
- [LSCP\\_Sutton\\_Threshold\\_Guidance\\_Oct\\_2020.pdf \(suttonlscp.org.uk\)](https://www.suttonlscp.org.uk/wp-content/uploads/2020/10/LSCP_Sutton_Threshold_Guidance_Oct_2020.pdf)

### **Working with others**

The designated safeguarding lead (or deputies) will:

- act as a source of support, advice, and expertise for all staff.
- act as a point of contact with the safeguarding partners.
- liaise with the Centre Manager inform him or her of issues- especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations. This includes being aware of the requirement for children to have an Appropriate Adult.
- as required, liaise with the “case manager” and the local authority designated officer(s) (LADO) for child protection concerns in cases which concern a staff member.
- liaise with staff on matters of safety and safeguarding and welfare (including online and digital safety) and when deciding whether to make a referral by liaising with relevant agencies so that children’s needs are considered holistically.
- promote supportive engagement with parents and/or carers in safeguarding and promoting the welfare of children, including where families may be facing challenging circumstances.
- work with the Centre Manager and relevant strategic leads, taking lead responsibility for promoting educational outcomes by knowing the welfare, safeguarding and child protection issues that children in need are experiencing, or have experienced, and identifying the impact that these issues might be having on children’s attendance, engagement, and achievement at the Centre. This includes:
  - ensuring that the Centre knows who its cohort of children who have or have had a social worker are, understanding their academic progress and attainment, and maintaining a culture of high aspirations for this cohort; and,
  - supporting teaching staff to provide additional academic support or reasonable adjustments to help children who have or have had a social worker reach their potential, recognising that even when statutory social care intervention has ended, there is still a lasting impact on children’s educational outcomes.

- o The Centre Manager has a responsibility to promote the education of children who have a social worker and regular conversations should be had to share the relevant information and to enable every opportunity for the child to reach their full potential.

### **Information sharing and managing the child protection file**

The designated safeguarding lead is responsible for ensuring that child protection files are kept up to date.

Information should be kept confidential and stored securely. Concerns and referrals will be kept in a separate child protection file for each child.

Records will include:

- a clear and comprehensive summary of the concern.
- details of how the concern was followed up and resolved.
- a note of any action taken, decisions reached and the outcome.

The file will only be accessed by those who need to see it.

Where children leave the Centre (including in year transfers) the designated safeguarding lead will ensure their child protection file is transferred to the new centre, school or college as soon as possible, and within 5 days for an in-year transfer or within the first 5 days of the start of a new term. The child protection file will be transferred separately from the main student file, ensuring secure transit, and confirmation of receipt should be obtained.

Receiving schools and colleges should ensure key staff such as designated safeguarding leads and SENCOs or the named person with oversight for SEN in colleges, are aware as required.

In addition to the child protection file, the designated safeguarding lead will also consider if it would be appropriate to share any additional information with the new school or college in advance of a child leaving to help them put in place the right support to safeguard this child and to help the child thrive in the school or college.

### **Raising Awareness**

The designated safeguarding lead (or deputies) will:

- ensure each member of staff has access to, and understands, the Centre's child protection policy and procedures, especially new and part-time staff.
- ensure the Centre's child protection policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with relevant bodies or proprietors regarding this.
- ensure the child protection policy is available publicly and parents and carers are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the Centre in this.
- link with the safeguarding partner arrangements to make sure staff are aware of any training opportunities and the latest local policies on local safeguarding arrangements; and

- help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues that children who have or have had a social worker are experiencing with teachers and Centre leadership staff.

## **Training, knowledge, and skills**

The designated safeguarding lead (and any deputies) will undergo training to provide them with the knowledge and skills required to carry out the role. The designated safeguarding lead will undertake Prevent awareness training. Training should provide designated safeguarding leads with a good understanding of their own role, how to identify, understand and respond to specific needs that can increase the vulnerability of children, as well as specific harms that can put children at risk, and the processes, procedures, and responsibilities of other agencies, particularly children's social care, so they:

- understand the assessment process for providing early help and statutory intervention, including local criteria for action and local authority children's social care referral arrangements.
- have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so.
- understand the importance of the role the designated safeguarding lead has in providing information and support to children social care to safeguard and promote the welfare of children.
- understand the lasting impact that adversity and trauma can have, including on children's behaviour, mental health, and wellbeing, and what is needed in responding to this in promoting educational outcomes.
- are alert to the specific needs of children in need, those with special educational needs and disabilities (SEND), those with relevant health conditions and young carers.
- understand the importance of information sharing, both within the Centre, and with the safeguarding partners, other agencies, organisations, and practitioners.
- understand and support the Centre with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation.
- are able to understand the unique risks associated with online safety and be confident that they have the relevant knowledge and up to date capability required to keep children safe whilst they are online at the centre.
- can recognise the additional risks that children with special educational needs and disabilities (SEND) face online, for example, from online bullying, grooming and radicalisation and are confident they have the capability to support children with SEND to stay safe online.
- obtain access to resources and attend any relevant or refresher training courses; and,
- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the Centre may put in place to protect them.

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

[Event List : Safeguarding \(event-booking.org\)](#)

[Bitesize Safeguarding Training Videos and Accompanying Slides – Cognus](#)

[Commonly asked questions – Cognus](#)

[Child Safeguarding Toolkit](#)

### **Providing support to staff**

Training will support the designated safeguarding lead in developing expertise, so they can support and advise staff and help them feel confident on welfare, safeguarding and child protection matters. This includes specifically to:

- ensure that staff are supported during the referrals processes; and
- support staff to consider how safeguarding, welfare and educational outcomes are linked, including to inform the provision of academic support.

### **Understanding the views of children**

It is important that children feel heard and understood. Therefore, designated safeguarding leads should be supported in developing knowledge and skills to:

- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, and in any measures the Centre may put in place to protect them; and
- understand the difficulties that children may have in approaching staff about their circumstances and consider how to build trusted relationships which facilitate communication.

### **Holding and sharing information**

The designated safeguarding lead will be equipped to:

- understand the importance of information sharing, both within the Centre, and with other schools and colleges on transfer including in-year and between primary and secondary education, and with the safeguarding partners, other agencies, organisations, and practitioners.
- understand relevant data protection legislation and regulations, especially the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR); and
- be able to keep detailed, accurate, secure written records of concerns and referrals and understand the purpose of this record-keeping.
- The most important consideration is whether sharing information is likely to safeguard and protect a child. The Data Protection Act 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe. This includes allowing practitioners to share information without consent where there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner.
- **The Data Protection Act 2018 and UK GDPR do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children.**

If the DSL is not available, staff should speak to a member of the SLT/take advice from local children's social care and/or contact a member of the Education Safeguarding Team.

## SECTION 17: THE ROLE OF INDIVIDUAL STAFF

### The Role of Individual Staff

***All Centre staff have a responsibility to provide a safe environment in which children can learn. All staff should be prepared to identify children who may benefit from early help.***

All Centre staff should be aware of systems within the Centre which support safeguarding, and these will be explained to them as part of staff induction. This includes: the Centre's child protection policy (including the policy and procedures to deal with Child-on-Child Abuse); the behaviour policy (including measures to prevent bullying, including cyberbullying, prejudice-based and discriminatory bullying); staff behaviour policy (sometimes called a code of conduct); safeguarding response to children who go missing from education; and the role of the designated safeguarding lead (including the identity of the designated safeguarding lead and any deputies).

All staff will receive appropriate safeguarding and child protection training (including online safety) at induction. The training should be regularly updated. In addition, all staff will receive safeguarding and child protection (including online safety) updates (for example, via email, e-bulletins, and staff meetings), as required, and at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

All members of staff should be aware of their local early help process and understand their

role in it.

All staff should be aware of the process for making referrals to children's social care and for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) that may follow a referral, along with the role they might be expected to play in such assessments.

All staff should know what to do if a child tells them he/she is being abused, exploited, or neglected. Staff should know how to manage the requirement to maintain an appropriate level of confidentiality. This means only involving those who need to be involved, such as the designated safeguarding lead (or a deputy) and children's social care. Staff should never promise a child that they will not tell anyone about a report of any form of abuse, as this may ultimately not be in the best interests of the child.

All staff should be able to reassure victims 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 abuse, sexual violence, or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

## **SECTION 18: TRAINING**

Induction training is mandatory and must also include:

- the Safeguarding and Child Protection policy and procedures.
- the Behaviour Policy.
- the Staff Code of Conduct.
- the safeguarding response to children who go missing from education; and
- the role of the designated safeguarding lead (including the identity of the designated safeguarding lead and any deputies).

All staff will receive regular safeguarding and child protection updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. All staff also receive training in data protection matters to ensure that they are kept up to date with their duties and obligations to protect information about the children in the Centre.

Safer Recruitment training is available to all relevant staff who are involved in the recruitment process.

A record is kept of staff training – type of training and dates which is recorded alongside the single central register (SCR)

The SCR should be checked regularly by a member of the Senior Leadership Team.

## **SECTION 19: CONFIDENTIALITY OF RECORDS**

Our students and their parents/carers have the right to expect that all staff will deal sensitively and sympathetically with their situation. It is important that information is only available to those who need to know it. Parents/carers and where appropriate students

should be told their right to confidentiality may be breached if information comes to light suggesting possible harm to a child. Safeguarding/Child Protection issues relating to individual cases **must not** be subject to open discussion in the staff room or elsewhere in the Centre.

All personally identifiable information will be kept securely, following the Centre's obligations under the latest Data Protection Act in England and the General Data Protection Regulations (GDPR) set down by the European Union.

Members of staff should also remember not to promise to students to keep "secrets" (see *procedure below*).

## SECTION 20: WORKING WITH CHILDREN

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

- the content of the curriculum.
- the Centre ethos which promotes a positive, supportive, and secure environment and gives students a sense of being valued.
- the Centre behaviour policy which is aimed at supporting vulnerable students in the Centre - the Centre will ensure the student knows that some behaviour is unacceptable, but they are valued and not blamed for any abuse which has occurred.
- liaison with other agencies that support the student such as social services, the child and adolescent mental health service, and the educational psychology service; and
- ensuring that, where a student with a child protection plan leaves the Centre, their information is transferred to any new school immediately and that the social worker is informed.

## SECTION 21: ALLEGATIONS INVOLVING CENTRE STAFF/VOLUNTEERS

- Allegations or concerns about a member of staff, worker or volunteer must immediately be notified to the Centre Manager (or the Centre Director if the concern is about the Centre Manager). This guidance should be followed where it is alleged that anyone working in the Centre including tutors and volunteers:
  - behaved in a way that has harmed a child, or may have harmed a child and/or;
  - possibly committed a criminal offence against or related to a child and/or;



- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.
- The Centre Manager (or Centre Director) will always consult the Designated Officers (in Sutton, this person is still known as the Local Authority Designated Officer or LADO) within one working day. The LADO will conduct any investigation, convene an Allegations Against Staff/Volunteers Meeting (ASV) and involve other agencies as appropriate
- Following consultation, the Centre Manager (or Centre Director) will decide on appropriate action, which may include consideration of disciplinary proceedings
- It is important to bear in mind that although the concern may relate to an individual student, other students may also be at risk
- The Centre will promote an open and transparent culture in which all concerns about all adults working in or on behalf of the Centre (including volunteers) are dealt with promptly and appropriately. This should encourage an open and transparent culture; enable the Centre to identify concerning, problematic or inappropriate behaviour early; minimise the risk of abuse; and ensure that adults working in or on behalf of the Centre are clear about professional boundaries and act within these boundaries, and in accordance with the ethos and values of the Centre.

### **Allegations or concerns about an adult working in the Centre whether as a tutor, supply supply, other staff or volunteers**

We recognise the possibility that adults working in the Centre may harm children, including volunteers, supply tutors and agency staff. Any concerns about the conduct of other adults in the Centre should be taken to the Centre Manager without delay; any concerns about the Manager should go to the Centre Director who can be contacted by email or phone.

Any concerns about the conduct of a member of staff, tutors or volunteers or contractors should be reported to the Centre Manager.

### **Keeping Children Safe during Community activities, after school clubs and Tuition Oct 2020**

This is non-statutory guidance from the Department for Education (DfE). It aims to: help providers of out-of-school settings (OOSS) understand best practice for creating a safe environment for children in their care and give parents and carers confidence that their child is in a safe activity or learning environment.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/940872/Keeping\\_children\\_safe\\_code\\_of\\_practice.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/940872/Keeping_children_safe_code_of_practice.pdf)

Concerns may come from various sources, for example, a suspicion; complaint; or disclosure made by a child, parent, or other adult within or outside of the organisation; or as a result of vetting checks undertaken.

The Centre Manager must decide whether the concern is an allegation or low-level concern, and this should be done in consultation with the LADO. The term 'low-level' concern does not mean that it is insignificant, it means that the behaviour towards a child does not meet the threshold for referral to the Local Authority Designated Officer (LADO) (see below). By having a discussion with the LADO, you are able to get assurance that the necessary action has been taken.

## **Allegations**

It is an allegation if the person\* has:

- behaved in a way that has harmed a child, or may have harmed a child and/or;
- possibly committed a criminal offence against or related to a child and/or;
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children (also includes behaviour outside the Centre).

(\*Person could be anyone working in the Centre or a college that provides education for children under 18 years of age, including supply teachers, volunteers, and contractors.)

Allegations should be reported to the LADO 'without delay'.

Before contacting the LADO, the Centre should conduct basic enquiries in line with local procedures to establish the facts to help them determine whether there is any foundation to the allegation, being careful not to jeopardise any future police investigation.

The LADO's role is not to investigate the allegation, but to ensure that an appropriate investigation is carried out, whether that is by the police, children's social care, the Centre, or a combination of these.

## **Low-level Concerns**

Concerns may be graded low-level if the concern does not meet the criteria for an allegation; and the person\* has acted in a way that is inconsistent with the staff code of conduct, including inappropriate conduct outside of work.

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, contrary to the Centre policy
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door, or
- humiliating children.

If the Centre Manager in any doubt as to whether the information which has been shared about a member of staff as a low-level concern in fact meets the harm threshold, they should consult with their LADO. We would suggest calling the LADO to talk your concern through for support and assurance purposes in all cases.

If the concern has been raised via a third party, the Centre Manager should collect as much evidence as possible by speaking:

- directly to the person who raised the concern unless it has been raised anonymously.
- to the individual involved and any witnesses.

Reports about supply staff and contractors should be notified to their employers, so any potential patterns of inappropriate behaviour can be identified.

Staff should be encouraged and feel confident to self-refer, where, for example, they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards.

Low-level concerns should be recorded in writing, including:

- name\* of individual sharing their concerns
- details of the concern
- context in which the concern arose
- action taken

(\* if the individual wishes to remain anonymous then that should be respected as far as reasonably possible)

Records must be kept confidential, held securely, and comply with the Data Protection Act 2018. Centres should decide how long they retain such information, but it is recommended that it is kept at least until the individual leaves their employment.

Records should be reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.

If a concerning pattern of behaviour is identified and now meets the criteria for an allegation, then the matter should be referred to the LADO.

The records' review might identify that there are wider cultural issues within the Centre that enabled the behaviour to occur. This might mean that policies or processes could be revised, or extra training delivered to minimise the risk of it happening again.

**See also Developing and implementing a low-level concerns policy (Farrer & Co):**

<https://www.farrer.co.uk/globalassets/clients-and-sectors/safeguarding/low-level-concerns-guidance-2020.pdf>

- The procedures in 'Keeping Children Safe in Education' (*DfE, September 2023*), 'Working Together to Safeguard Children' (*HM Government, July 2018 – amended 2022 – currently under consultation*) and the Sutton Local Safeguarding Children Partnership procedures will be followed in all such cases
- When appropriate (*see guidance above*), consideration will be given to referral of a member of staff to the DBS for consideration of the case
- If a member of staff believes a reported allegation or concern is not being dealt with appropriately, they should report the matter to the Local Authority Designated Officer (LADO) to give support and direction on how to proceed
- [LADO Protocol 2022 \(suttonlsc.org.uk\)](https://www.suttonlsc.org.uk)

**For further training on the role of the LADO:**

## SECTION 22: ALLEGATIONS AGAINST OTHER CHILDREN

- If an allegation of abuse is made against other children by children, then this must be reported immediately, in accordance with this policy.
- This will then be reported to the Children's First Contact Service (CFCS) by a designated person or deputy designated person.
- Abuse or concerns about a risk of abuse or harm by other children/young people is subject to the same safeguarding procedures as in respect of children or young people being abused by an adult.
- Professionals responding should be alert to the risk a child/young person may pose to children/young people other than any 'current' victim; and
- Children or young people who harm others are likely to have considerable needs themselves (e.g., they may have been subjected to abuse, witnessed domestic violence, or committed criminal offences).

## SECTION 23: WHISTLEBLOWING

All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the Centre's safeguarding regime and know that such concerns will be taken seriously by the Senior Management Team.

Where there are concerns about the way that safeguarding is carried out in the Centre, staff should refer to the Whistle-blowing Policy.

A whistleblowing disclosure must be about something that affects the general public such as:

- a criminal offence has been committed, is being committed or is likely to be committed
- a legal obligation has been breached
- there has been a miscarriage of justice
- the environment has been damaged
- information about any of the above has been concealed.

Where a staff member feels unable to raise an issue with their employer, or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them:

The NSPCC whistleblowing helpline is available as an alternative route for staff that do not feel able to raise concerns regarding child protection failures internally or have concerns about the way a concern is being handled by their Centre.

Staff can call 0800 028 0285 – line is available from 8:00am to 8:00pm, Monday to Friday or email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk).

## SECTION 24: ROLE OF THE RESPONSIBLE ADULT

### **Police and Criminal Evidence Act (1984) – Code C**

The Designated Safeguarding Lead (and deputy) are aware of the requirement for children to have an appropriate adult when in contact with Police officers who suspect them of an offence.

PACE states that anyone who appears to be under 18, shall, in the absence of clear evidence that they are older, be treated as a child for the purposes of this Code and any other Code.

PACE also states that If at any time an officer has any reason to suspect that a person of any age may be vulnerable, then that person is entitled to be accompanied by an appropriate adult at any point.

The Designated Safeguarding (or deputy) will communicate any vulnerabilities known by the Centre to any police officer who wishes to speak to a student about an offence they may suspect. This communication will be recorded (**state where, for example, on MyConcern/CPOMS**).

If having been informed of the vulnerabilities, the designated safeguarding lead (or deputy) does not feel that the officer is acting in accordance with PACE, they should ask to speak with a supervisor or contact 101 to escalate their concerns.

A person whom there are grounds to suspect of an offence must be cautioned<sup>1</sup> before questioned about an offence<sup>2</sup>, or asked further questions if the answers they provide the grounds for suspicion, or when put to them the suspect's answers or silence, (i.e., failure or refusal to answer or answer satisfactorily) may be given in evidence to a court in a prosecution.

A Police Officer must not caution a juvenile or a vulnerable person unless the appropriate adult is present. If a child or a vulnerable person is cautioned in the absence of the appropriate adult, the caution must be repeated in the appropriate adult's presence.

**The appropriate adult' means, in the case of a child:**

1. the parent, guardian or, if the juvenile is in the care of a local authority or voluntary organisation, a person representing that authority or organisation.
2. a social worker of a local authority
3. failing these, some other responsible adult aged 18 or over who is not:
  - a. a police officer;
  - b. employed by the police;
  - c. under the direction or control of the chief officer of a police force; or
  - d. a person who provides services under contractual arrangements (but without being employed by the chief officer of a police force), to assist that force in relation to the discharge of its chief officer's functions,

Further information can be found in the Statutory guidance - [PACE Code C 2019](#).

<https://www.gov.uk/government/publications/pace-code-c-2019/pace-code-c-2019-accessible>

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<sup>1</sup> The police caution is: *"You do not have to say anything. But it may harm your defence if you do not mention when questioned something which you later rely on in Court. Anything you do say may be given in evidence."*

<sup>2</sup> A person need not be cautioned if questions are for other necessary purposes, e.g.: (a) solely to establish their identity or ownership of any vehicle; to obtain information in accordance with any relevant statutory requirement; in furtherance of the proper and effective conduct of a search, e.g. to determine the need to search in the exercise of powers of stop and search or to seek co-operation while carrying out a search; or to seek verification of a written record.

## When a child discloses, or you are aware there is a safeguarding issue

### Do not delay

- Tell the Designated Safeguarding Lead as soon as you can – it may be necessary to interrupt a lesson to do this – do not leave notes in the Designated Safeguarding Lead's pigeonhole as they may not get back to check their post until the end of the day once the student has gone home.
- Early referral gives more time to offer help to the student and family before the situation becomes more serious.
- When the matter is already severe or serious, early referral gives more time for others to protect the student.
- The Designated Safeguarding Lead may consult the Children's First Contact Service (CFCS).

### Make written notes

#### In Summary

**Receive** – listen to what the student wants to tell you

**Reassure** – that they are believed, and their concern will be followed up

**React** – ask open questions and then speak to the DSL

**Record** – make a written record of the conversation and pass it to the DSL

**Refer** – via the DSL and using the local referral process

It is important to remember that students may not find it easy to tell staff about their abuse verbally. Children can show signs or act in ways that they hope adults will notice and react to. In some cases, the victim may not make a direct report. For example, a friend may make a report, or a member of Centre staff may overhear a conversation that suggests a child has been harmed or a child's own behaviour might indicate that something is wrong.

**If staff have any concerns about a child's welfare, they should act on them immediately rather than wait to be told.**

### Referral Process

Any member of staff can make a referral to the Children's First Contact Service (CFCS) or the Police, but they should always consult the Designated Safeguarding Lead wherever possible.

The designated staff may contact the Children's First Contact Service (CFCS) to make a referral or take advice or contact the child's social worker (if allocated).

If staff are concerned that the child or family involved have been exposed to radicalisation or extremist behaviour, then they will make a Prevent referral. The referral form for Prevent can be found here:

[Statutory Prevent Duty - Sutton Council](#)

## Remember

- If in doubt, consult.
- Do not ignore concerns, even if these are vague.
- The first responsibility of staff is to the student.
- If you need help or support to manage your own feelings, this can usually be provided.

## Contact with the family

Contact with the family **should always** be discussed with the Designated Safeguarding Lead, who may consult the Children's First Contact Service (CFCS) or the Education Safeguarding Team.

In cases where a minor physical injury causes concern, then the Centre's policy for dealing with accidents should be followed. If the explanation suggests a non-accidental cause for the injury (or a failure to protect the student from harm), advice must be taken immediately from the Children's First Contact Service (CFCS).

In cases of possible neglect or emotional abuse, the concern may have built up over a period of time. There may have been discussion previously between Centre staff and the family about sources of help, but if concerns persist, the Designated Safeguarding Lead will need to refer to the Children's First Contact Service and will normally advise the family of this unless specifically told otherwise.

**In cases where there are suspicions of sexual abuse or physical chastisement, the Designated Safeguarding Lead will unpick with the child first and then seek immediate advice from the Children's First Contact Service before discussing this with the family.**

## Recording

- Where there are concerns about a student, our electronic files have an appropriate flag to indicate concern.
- All records relating to child welfare concerns will be kept on the student's child protection file and the file will be kept secure - a chronology of concern will be kept by the designated teacher.
- Written records of any concerns about students are kept, even where there is no need to refer the matter immediately.
- Information from records will only be accessed on a "need to know" basis; access is strictly controlled by the designated teacher.
- Key staff will need to know when a student is subject to a Child Protection Plan, so they can monitor the student's welfare.



- Records relating to the student's welfare will remain on the student's file as long as the student is a student at the Centre.
- When the student leaves the Centre, the new Centre or school will be informed that the Centre's records contain information about child protection concerns even where these are no longer current. Records should be sent to the new Centre/school in a way that is lawful in terms of data protection requirements.
- Records will be kept until the child is 18 years old by primary schools and 25 years old for secondary schools.

### **Working with other agencies**

- All Centre staff have a legal duty to assist local authority Children 's Social Care or the Police when they are making enquiries about the welfare of students and students.
- Information about a student must therefore be shared on a "need to know" basis with other agencies.
- When telephone requests for information are received, **always** maintain security by checking the telephone number listing for the caller and calling back to a switchboard number **before** giving information or confirming the student is on the Centre roll.
- Always advise the designated teacher about such requests for information.
- Requests for attendance at meetings about individual students (e.g., child protection conferences) should be notified to the designated teacher, who will arrange preparation of a report and attendance at the meeting.
- Reports should contain information about the child's:
  - o academic progress
  - o attendance
  - o behaviour
  - o relationships with children and adults
  - o family
  - o any other relevant matter.
- Reports should be objective, distinguishing between fact, observation, allegation, and opinion.
- Unless you specify otherwise, reports will normally be made available to the student's family.

### **Students subject to a Child Protection Plan**

- The Centre will be told by the relevant local authority when a student is subject to a Child Protection Plan.
- The name of the key social worker must be clearly recorded on the student's record.
- The Centre will participate fully in the work of Core Groups for these students, to assist with the objectives of the Child Protection Plan for the student.
- When a student is subject to a Child Protection Plan, the centre will report all unexplained absences even if only of a day.
- When a pupil is subject to a Child Protection Plan, the centre will report all behavioural changes or other concerns to the key social worker.

### **Child's need for a social worker**

Local authorities should share the fact a child has a social worker, and the designated safeguarding lead should hold and use this information so that decisions can be made in the best interests of the child's safety, welfare, and educational outcomes. This should be considered as a matter of routine. There are clear powers to share this information under existing duties on both local authorities and schools and colleges to safeguard and promote the welfare of children.

Where children need a social worker, this should inform decisions about safeguarding (for example, responding to unauthorised absence or missing education where there are known safeguarding risks) and about promoting welfare (for example, considering the provision of pastoral and/or academic support, alongside action by statutory services).

**All staff must always observe the above policy and procedure. They will be reviewed annually and as required in line with changes in local (LSCP) or national guidance.**

**SECTION 26: DEFINITIONS OF SPECIFIC SAFEGUARDING ISSUES**

**DEFINITIONS OF SPECIFIC SAFEGUARDING ISSUES**

**Bullying**

Bullying may 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 four main types of bullying are: physical (e.g. hitting, kicking, theft), verbal (e.g. racist or homophobic remarks, threats, name calling), social (e.g. isolating an individual from the activities, lying and spreading rumours, damaging someone's reputation and carrying out acts behind a person's back to cause humiliation) and cyber (e.g. sending abusive or hurtful texts, emails, posts, images or videos, deliberately excluding others online, spreading gossip or rumours and imitating others online or using their log-in details).

**Child Sexual Exploitation (CSE) and Criminal Exploitation (CCE)**

Both CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual or criminal activity. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors, including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources. In some cases, the abuse will be in exchange for something the victim needs or wants and/or will be to the financial benefit or other advantage (such as increased status). Of the perpetrator or facilitator. The abuse can be perpetrated by individuals or groups.

**Child Sexual Exploitation (CSE)**

CSE occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child 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).

## **Child Criminal Exploitation (CCE)**

CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into 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.

CCE can include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country (county lines), forced to shoplift or pickpocket, or to threaten other young people.

### **Child Exploitation – what to look out for:**

[https://www.childrensociety.org.uk/what-we-do/our-work/child-criminal-exploitation-and-county-lines/spotting-signs?gclid=EALalQobChMlz8u9\\_LnK-wIVxd\\_tCh1kugvxEAAYBCAAEgKjhPD\\_BwE](https://www.childrensociety.org.uk/what-we-do/our-work/child-criminal-exploitation-and-county-lines/spotting-signs?gclid=EALalQobChMlz8u9_LnK-wIVxd_tCh1kugvxEAAYBCAAEgKjhPD_BwE)

## **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, student referral units, special educational needs schools, children's homes, and care homes. Children are often recruited to move drugs and money between locations.

### **Defining County Lines:**

<https://www.nationalcrimeagency.gov.uk/what-we-do/crime-threats/drug-trafficking/county-lines>

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

Female Genital Mutilation (FGM) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK. FGM typically takes place between birth and around 15 years old; however, it is

believed that most cases happen between the ages of 5 and 8.

The Serious Crime Act 2015 sets out a duty on professionals (including teachers) to notify police when they discover that FGM appears to have been carried out on a girl under 18. The duty does not apply in relation to at risk or suspected cases.

[Sutton FGM Booklet.pdf \(suttonlscp.org.uk\)](https://www.suttonlscp.org.uk/Sutton_FGM_Booklet.pdf)

### **So-called 'honour-based' abuse (including FGM and forced marriage)**

So-called honour-based abuse encompasses 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. All forms of so-called honour-based violence are abuse (regardless of the motivation) and should be handled and escalated as such. Where staff are concerned that a child might be at risk of honour-based abuse, they must contact the Designated Safeguarding Lead as a matter of urgency.

**In addition, since February 2023 it has also been a crime to carry out any conduct whose purpose is to cause a child to marry before their eighteenth birthday, even if violence, threats or another form of coercion are not used. As with the existing forced marriage law, this applies to non-binding, unofficial 'marriages' as well as legal marriages.**

### **Radicalisation and Extremism**

Radicalisation and extremism Under section of the Counter Terrorism and Security Act 2015, schools have a duty to 'prevent people being drawn into terrorism'. This has become known as the 'Prevent Duty'. Where staff are concerned that children and young people are developing extremist views or show signs of becoming radicalised, they should discuss this with the Designated Safeguarding Lead.

Children and young people are **susceptible to being drawn into** extremist ideology and radicalisation. Similar to protecting children from other forms of harms and abuse, protecting children from this risk should be part of a schools' or colleges' safeguarding approach.

Terrorism: is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes 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.

All staff will undertake Prevent awareness training.

[LSCB GUIDANCE PREVENT DUTY 2016.pdf \(suttonlscp.org.uk\)](https://www.suttonlscp.org.uk/LSCB_GUIDANCE_PREVENT_DUTY_2016.pdf)

**KCSIE (2023) now talks about children and young people who are 'susceptible' to being drawn into terrorism, rather than being 'vulnerable' to being drawn into terrorism.**

**Further resources:**

[Educate Against Hate - Prevent Radicalisation & Extremism](#)

[The Prevent duty: safeguarding learners vulnerable to radicalisation - GOV.UK](#)

[www.gov.uk](http://www.gov.uk)

[Prevent duty self-assessment tool for schools - GOV.UK \(www.gov.uk\)](#)

[Prevent duty training - GOV.UK \(www.gov.uk\)](#)

[Prevent duty guidance - GOV.UK \(www.gov.uk\)](#)

## **Child-on-Child Abuse/Harms**

Staff should be aware that safeguarding issues can manifest themselves via Child-on-Child Abuse/harm. This is most likely to include, but not limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying).
- abuse in intimate personal relationships between peers.
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse).
- sexual violence, such as rape, assault by penetration and sexual assault; (this may include an online element which facilitates, threatens and/or encourages sexual violence).
- sexual harassment, such as sexual comments, remarks, jokes, and online sexual harassment, which may be standalone or part of a broader pattern of abuse.
- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.
- consensual and non-consensual sharing of nudes and semi nudes' images and or videos (also known as sexting or youth produced sexual imagery).
- up skirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm; and
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

Abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up” as this can lead to a culture of unacceptable behaviours and an unsafe environment for children.

Child-on-Child Abuse/harm can be a one-off serious incident or an accumulation of incidents. It can involve physical, emotional, or sexual abuse. Child-on-Child Abuse/harm involves someone who abuses a ‘vulnerability’ or power imbalance to harm another and have the opportunity or be in an environment where this is possible. While perpetrators of Child-on-Child Abuse/harm pose a risk to others, they are often victims of abuse themselves.

We recognise that even if there are no reported cases of Child-on-Child Abuse, such abuse may still be taking place and is simply not being reported.

We recognise that it is more likely that girls will be victims and boys’ perpetrators, but that all Child-on-Child Abuse is unacceptable and will be taken seriously.

We are clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up

We will minimise the risk of peer on peer/child on child abuse by:

- Prevention
- Taking a whole EmpowerEd community approach to safeguarding & child protection
- Providing training to staff
- Providing a clear set of values and standards, underpinned by EmpowerEd’s behaviour policy and pastoral support; and by a planned programme of evidence-based content delivered through the curriculum.
- Engaging with specialist support and interventions.
- Responding to reports of sexual violence and sexual harassment

Children making any report of sexual violence or sexual harassment including “upskirting” (The Voyeurism Offences Act 2019) will be taken seriously, kept safe and be well supported.

Staff taking the report will inform the DSL or the Deputy DSL immediately. Staff taking a report will never promise confidentiality.

Parents or carers should usually be informed (unless this would put the child at greater risk)

Following a report, the DSL will make an immediate risk and needs assessment on a case-by-case basis.

The risk assessment will consider;

- The victim, especially their protection and support.
- The alleged perpetrator, their support needs and any discipline action.
- All other children at EmpowerEd.
- The victim and the alleged perpetrator sharing classes.
- The risk assessment will be recorded and kept under review.

Where there has been other professional intervention and/or other specialist risk assessments, these professional assessments will be used to inform EmpowerEd's approach to supporting and protecting children.

Action: The DSL will consider

- The wishes of the victim.
- The nature of the incident including whether a crime has been committed and the harm caused.
- Ages of the children involved.
- Developmental stages of the children.
- Any power imbalance between the children.
- Any previous incidents.
- Ongoing risks.
- Other related issues or wider context.

Options:

- Manage internally
- Early Help intervention
- Request for support to the C-SPA
- Report to the Police

Ongoing Response:

The DSL will manage each case individually and will ensure the risk assessment is reviewed regularly with relevant partner agencies, for example the Police and Children's Social Care.

Where there is a criminal investigation into a rape, assault by penetration or sexual assault, the alleged perpetrator should be removed from any classes they share with the victim.

The DSL will consider how best to keep the victim and perpetrator a reasonable distance apart on EmpowerEd sessions and on transport where appropriate.

Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, EmpowerEd will take suitable action. In all but the most exceptional of circumstances, the rape or assault is likely to constitute a serious breach of discipline and may lead to the view that allowing the perpetrator to remain in the same setting would seriously harm the education or welfare of the victim (and potentially themselves and other children).

Where a criminal investigation into sexual assault leads to a conviction or caution, EmpowerEd will, if it has not already, consider any suitable sanctions in light of their behaviour policy, which may include consideration of permanent exclusion. Where the perpetrator is going to remain at EmpowerEd, the Director should continue keeping the victim and perpetrator in separate classes and continue to consider the most appropriate way to manage potential contact on EmpowerEd settings and transport. The nature of the conviction or caution and wishes of the victim will be especially important in determining how to proceed in such cases.

The victim, alleged perpetrator and any other children & adults affected will receive appropriate support and safeguards on a case-by-case basis.

EmpowerEd will take any disciplinary action against the alleged perpetrator in accordance with EmpowerEd behaviour policy.



EmpowerEd recognises that taking disciplinary action and providing appropriate support are not mutually exclusive actions and will occur at the same time if necessary.

### **Up skirting Voyeurism (Offences) Act 2019**

The Voyeurism (Offences) Act, which is commonly known as the Up-skirting Act, came into force on 12<sup>th</sup> April 2019. Up skirting typically involves taking a picture under a person's clothing (not necessarily a skirt) without their permission 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.

### **Private Fostering**

The phrase 'private fostering' is often misunderstood. There is local authority fostering and fostering by private agencies. However, in law 'Private Fostering' is quite different.

From a safeguarding perspective, many private fostering arrangements are 'hidden' and, it appears, are rarely brought to the attention of local authorities, even though it is an offence not to inform them. The penalty for non-reporting is a maximum £5,000 fine, but it seems that convictions are extremely rare.

### **What is Private Fostering?**

A private fostering arrangement is one that is made privately (without the involvement of a local authority (or a private sector agency)) 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. (\*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).

The local authority should be notified of the arrangement, at least six weeks before it starts and not to do so is a criminal offence.

Once the local authority has been notified, children's services have a duty to visit and speak to the child, the parent and the foster carer; and everyone in the foster carers household. Children's services will then undertake a range of suitability checks including DBS checks on everyone in the household over the age of 16.

[Sutton Local Safeguarding Children Partnership - Private Fostering \(suttonlscp.org.uk\)](http://suttonlscp.org.uk)

### **Breast Ironing**

Breast Ironing is practiced in some African countries, notably Cameroon. Girls aged

between 9 and 15 have hot pestles, stones or other implements rubbed on their developing breasts to stop them growing further. Breast Ironing is usually carried out by mothers or other women to protect girls from men. It is believed that the reason they carry out this procedure is to reduce the risk of sexual harassment, rape, kidnap and forced marriage. Indicators that Breast Ironing has been carried out are chest pains or other discomfort, changes in behaviour and fear of undressing.

## **Disguised Compliance**

Parents who appear to cooperate to avoid professionals getting too close or asking too many questions. There is a tendency by professionals to confuse participation with cooperation. Indicators include parents that put little effort into making changes, limited improvement despite significant input, conflicting views of child and parent, parents align with certain professionals and only engage with part of the plan. The risks of disguised compliance are that cases may drift and lack focus, significant issues may be missed, risks may increase, cases may be closed too early, and the child remains at risk of harm. It is important to keep an open mind, use an investigative approach and effective questioning. As professionals we must look beyond the obvious.

## **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. This may have an impact on them in a number of different ways and they may need emotional support.

## **Children with family members in prison**

Approximately 200,000 children have a parent sent to prison each year. These children are at risk of poor outcomes including poverty, stigma, isolation, and poor mental health. This may have an impact on them in a number of different ways and they may need emotional support.

## **Domestic Abuse**

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial, or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse). All of which can

have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

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

Transform Sutton - 020 8092 7569 / [transformsutton@cranstoun.org.uk](mailto:transformsutton@cranstoun.org.uk)

### [Not Alone in Sutton](#)

#### National Domestic Abuse Helpline:

Refuge runs the National Domestic Abuse Helpline, which can be called free of charge and in confidence, 24 hours a day on 0808 2000 247. Its website provides guidance and support for potential victims, as well as those who are worried about friends and loved ones. It also has a form through which a safe time from the team for a call can be booked.

#### Operation Encompass:

Operation Encompass operates in the majority of police forces across England. It helps police and schools work together to provide emotional and practical help to children. The system ensures that when police are called to an incident of domestic abuse, where there are children in the household who have experienced the domestic incident, the police will inform the key adult (usually the designated safeguarding lead) in school before the child or children arrive at school the following day. This ensures that the school has up to date relevant information about the child's circumstances and can enable support to be given to the child according to their needs. Police forces not signed up to operation encompass will have their own arrangements in place. **Operation Encompass is currently under review in Sutton.**

## **Homelessness**

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

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

## **Fabricated or Induced Illness**

Fabricated or induced illness (FII) is a rare form of child abuse. It occurs when a parent or carer, usually the child's biological mother, exaggerates or deliberately causes symptoms of illness in the child.

## **Adverse Childhood Experiences (ACEs)**

1 in 3 diagnosed mental health conditions in adulthood are directly related to adverse childhood experiences. ACEs can include maltreatment, violence and coercion, adjustment, prejudice, family adversity, inhumane treatment, adult responsibilities and bereavement and survivorship. If you have witnessed or experienced any of the following before the age of 18 you have suffered an adverse childhood experience: domestic violence, sexual abuse, alcohol abuse, physical abuse, parental separation, drug abuse, verbal abuse, mental ill-health, or imprisonment.

### **Protective factors:**

1. Positive and supportive family
2. Safe relationships with peers
3. Access to a supportive community
4. Ability to regulate emotions
5. Acquisition of problem-solving skills
6. Compassionate, professional response
7. Early intervention from services
8. Trauma-informed systems

When talking to someone who has suffered an ACE, don't ask, what is wrong with you?  
But, what has happened to you?

## **Trauma and Attachment**

A significant number of children are exposed to traumatic life events. A traumatic event is one that threatens injury, death, or the physical integrity of self or others and also causes fear, terror, or helplessness at the time it occurs. Traumatic events include sexual abuse, physical abuse, domestic violence, community and school violence, medical trauma, car accidents, acts of terrorism, war experiences, natural and human-made disasters, suicides, and other traumatic losses.

If a child has experienced trauma, they are likely to develop other related behaviours.

These include:

1. the development of new fears
2. separation anxiety (particularly in young children)
3. sleep disturbance, nightmares
4. sadness

5. loss of interest in normal activities
6. reduced concentration
7. decline in Centrelwork
8. anger
9. somatic complaints
10. Irritability

## **Contextual Safeguarding**

All staff, but especially the designated safeguarding lead (and deputies) should consider whether children are at risk of abuse or exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual abuse (including harassment and exploitation), domestic abuse in their own intimate relationships (teenage relationship abuse), criminal exploitation, serious youth violence, county lines, and radicalisation.

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.

Therefore, children's social care practitioners, child protection systems and wider safeguarding partnerships 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. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse beyond their front doors.

All staff should be aware that safeguarding incidents and/or behaviours can be associated with factors outside the centre and/or can occur between children outside of these environments. All staff but especially the designated safeguarding lead (and deputies) should consider whether children are at risk of abuse or exploitation in situations outside of their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation, and serious youth violence.

[LSCP Protocol Safeguarding Adolescents.pdf \(suttonlscp.org.uk\)](https://www.suttonlscp.org.uk/LSCP_Protocol_Safeguarding_Adolescents.pdf)

[9b. Contextual Safeguarding Briefing.pdf \(suttonlscp.org.uk\)](https://www.suttonlscp.org.uk/9b.Contextual_Safeguarding_Briefing.pdf)

## **Serious Violent Crime**

All staff should be aware of the indicators, which may signal children are at risk from, or are involved with serious violent crime. These may include increased absence from the Centre, 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 and may be at risk of criminal exploitation.

All staff should be aware of the range of risk factors which increase the likelihood of involvement in serious violence, such as being male, having been frequently absent or permanently excluded from school, having experienced child maltreatment and having been involved in offending, such as theft or robbery. Advice for schools and colleges is provided in the Home Office's Preventing youth violence and gang involvement and its Criminal exploitation of children and vulnerable adults: county lines guidance.

## **Modern Slavery**

Modern Slavery and the National Referral Mechanism Modern slavery encompasses human trafficking and slavery, servitude and forced or compulsory labour. Exploitation can take many forms, including sexual exploitation, forced labour, slavery, servitude, forced criminality and the removal of organs. Further information on the signs that someone may be a victim of modern slavery, the support available to victims and how to refer them to the NRM is available in the Modern Slavery Statutory Guidance. Modern slavery: how to identify and support victims - GOV.UK ([www.gov.uk](http://www.gov.uk))

## **Cyber Crime**

Cybercrime is criminal activity committed using computers and/or the internet. It is broadly categorised as either 'cyber-enabled' (crimes that can happen off-line but are enabled at scale and at speed on-line) or 'cyber dependent' (crimes that can be committed only by using a computer). Cyber-dependent crimes include • unauthorised access to computers (illegal 'hacking'), for example accessing a Centre's computer network to look for test paper answers or change grades awarded; • denial of Service (Dos or DDoS) attacks or 'booting'. These are attempts to make a computer, network, or website unavailable by overwhelming it with internet traffic from multiple sources; and • making, supplying, or obtaining malware (malicious software) such as viruses, spyware, ransomware, botnets, and Remote Access Trojans with the intent to commit further offence, including those above. 128 Children with skill and interest in computing and technology may inadvertently or deliberately stray into cyber-dependent crime. If there are concerns about a child in this area, the designated safeguarding lead (or a deputy), should consider referring into the Cyber Choices programme. This is a nationwide police programme supported by the Home Office and led by the National Crime Agency, working with regional and local policing. It aims to intervene where young people are at risk of committing, or being drawn into, low level cyber-dependent offences and divert them to a more positive use of their skills and interests. Note that Cyber Choices does not currently cover 'cyber-enabled' crime such as fraud, purchasing of illegal drugs on-line and child sexual abuse and exploitation, nor other areas of concern such as on-line bullying or general on-line safety.

Additional advice can be found at: Cyber Choices, 'NPCC- When to call the Police' and National Cyber Security Centre - NCSC.GOV.UK.

**(Please refer to Annex B of KCSIE, 2023 for further information)**

## Section 27: Mental Health Definitions

**All staff** should also be 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.

### Anxiety

Anxiety problems can significantly affect a child's ability to develop, to learn or to maintain and sustain friendships.

Children and young people may feel anxious for several reasons – for example because of worries about things that are happening at home or at the Centre, or because of a traumatic event. Symptoms of anxiety include feeling fearful or panicky, breathless, tense, fidgety, sick, irritable, tearful, or having difficulty sleeping. If they become persistent or exaggerated, then specialist help, and support will be required.

Clinical professionals refer to several diagnostic categories:

- Generalised anxiety disorder (GAD) – a long-term condition which causes people to feel anxious about a wide range of situations and issues, rather than one specific event.
- Panic disorder – a condition in which people have recurring and regular panic attacks, often for no obvious reason.
- Obsessive-Compulsive Disorder (OCD) – a mental health condition where a person has obsessive thoughts (unwanted, unpleasant thoughts, images or urges that repeatedly enter their mind, causing them anxiety) and compulsions (repetitive

behaviour or mental acts that they feel they must carry out to try to prevent an obsession coming true).

- Specific phobias – the excessive fear of an object or a situation, to the extent that it causes an anxious response, such as panic attack.
- Separation Anxiety Disorder (SAD) – worry about being away from home or about being far away from parents/carers, at a level that is much more than normal for the child's age.
- Social Phobia – intense fear of social or performance situations.
- Agoraphobia – a fear of being in situations where escape might be difficult, or help wouldn't be available if things go wrong.

## **Depression**

Feeling low or sad is a common feeling for children and adults, and a normal reaction to experiences that are stressful or upsetting. When these feelings dominate and interfere with a person's life, it can become an illness.

Depression can significantly affect a child's ability to develop, to learn or to maintain and sustain friendships.

Clinicians making a diagnosis of depression will generally use the categories major depressive disorder (MDD – where the person will show a number of depressive symptoms to the extent that they impair work, social or personal functioning) or dysthymic disorder (DD – less severe than MDD but characterised by a daily depressed mood for at least two years).

## **Hyperkinetic Disorders**

(e.g., disturbance of activity and attention)

Although many children are inattentive, easily distracted, or impulsive, in some children these behaviours are exaggerated and persistent, compared with other children of a similar age and stage of development. When these behaviours interfere with a child's family and social functioning and with progress at the Centre, they become a matter for professional concern.

Attention Deficit Hyperactivity Disorder (ADHD) is a diagnosis used by clinicians. It involves three characteristic types of behaviour – inattention, hyperactivity, and impulsivity. Whereas some children show signs of all three types of behaviour (this is called 'combined type' ADHD), other children diagnosed show signs only of inattention or hyperactivity/impulsiveness.

Hyperkinetic disorder is another diagnosis used by clinicians. It is a more restrictive diagnosis but is broadly like severe combined type ADHD, in that signs of inattention, hyperactivity and impulsiveness must all be present. These core symptoms must also have been present before the age of seven and must be evident in two or more settings.

## **Attachment disorders**

Attachment is the affectionate bond children have with special people in their lives that lead them to feel pleasure when they interact with them and be comforted by their



nearness during times of stress. Researchers generally agree that there are four main factors that influence attachment security: opportunity to establish a close relationship with a primary caregiver; the quality of caregiving; the child's characteristics; and the family context. Secure attachment is an important protective factor for mental health later in childhood, while attachment insecurity is widely recognised as a risk factor for the development of behaviour problems.

## **Eating disorders**

The most common eating disorders are anorexia nervosa and bulimia nervosa. Eating disorders can emerge when worries about weight begin to dominate a person's life. Someone with anorexia nervosa worries persistently about being fat and eats very little. They lose a lot of weight and if female, their periods may stop. Someone with bulimia nervosa also worries persistently about weight. They alternate between eating very little, and then bingeing. They vomit or take laxatives to control their weight. Both eating disorders affect girls and boys but are more common in girls.

## **Deliberate self-harm**

Self-harm is a serious public health problem and is the reason behind many admissions to accident and emergency departments every year. Self-harm and suicidal threats by a child/young person put them at risk of significant harm and should always be taken seriously and responded to without delay.

Common examples of deliberate self-harm include 'overdosing' (self-poisoning), hitting, cutting, or burning oneself, pulling hair or picking skin, or self-strangulation. The clinical definition includes attempted suicide, though some argue that self-harm only includes actions which are not intended to be fatal. It can be a coping mechanism, a way of inflicting punishment on oneself and a way of validating the self or influencing others.

Self-harming is NOT attention seeking behaviour, it is attention NEEDING behaviour.

The Centre will follow the Sutton Self-Harm protocol in responding to concerns about self-harm [LSCP MANAGEMENT OF YOUNG PEOPLE WHO SELF-HARM OR HAVE SUICIDAL IDEATION \(suttonlscp.org.uk\)](https://www.suttonlscp.org.uk)

## **Post-traumatic stress**

If a child experiences or witnesses something deeply shocking or disturbing, they may have a traumatic stress reaction. This is a normal way of dealing with shocking events and it may affect the way the child thinks, feels and behaves. If these symptoms and

behaviours persist, and the child is unable to come to terms with what has happened, then clinicians may make a diagnosis of post-traumatic stress disorder (PTSD).

## Section 28: Sexual violence and sexual harassment

The Centre will follow the guidance in 'Keeping Children Safe in Education' (DfE, September 2023): **Responding to reports of sexual violence and sexual harassment.**

**All Centre staff** should be aware that students may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. For example, they may feel embarrassed, humiliated, or being threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent staff from having a professional curiosity and speaking to the DSL if they have concerns about a child. It is also important that staff determine how best to build trusted relationships with children and young people which facilitate communication.

**All centre staff**, but especially the designated safeguarding lead (and deputies) should consider whether children are at risk of abuse or exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual abuse (including harassment and exploitation), domestic abuse in their own intimate relationships (teenage relationship abuse), criminal exploitation, serious youth violence, county lines, and radicalisation.

**Section 29: Designated Staff Information**

The Senior Designated Safeguarding Lead (SDSL) is: Elizabeth Mills  
Contact details: email: [beth@empowered-education.co.uk](mailto:beth@empowered-education.co.uk)  
Telephone: 020 4542 4329

The Designated Safeguarding Lead (DSL) is: Cristian Vasquez  
Contact details: email: [chris@empowered-education.co.uk](mailto:chris@empowered-education.co.uk)  
Telephone: 020 4542 4329

The person to liaise with the Local Authority Designated Officer (LADO) re any allegations about EmpowerEd is: Elizabeth Mills  
Contact details:  
email: [beth@empowered-education.co.uk](mailto:beth@empowered-education.co.uk)

## Section 30: Key Contacts

### Sutton

Children's First Contact Service (CFCS) – 020 8770 6001  
[childrensfirstcontactservice@sutton.gov.uk](mailto:childrensfirstcontactservice@sutton.gov.uk)

Social Care - Out of Hours – Emergency Duty Team – 0208 770 5000 x9

Sutton Local Safeguarding Children's Partnership: 020 8770 4879  
[suttonlscp@sutton.gov.uk](mailto:suttonlscp@sutton.gov.uk)

Website: [www.suttonlscp.org.uk](http://www.suttonlscp.org.uk)

Sutton LA LADO (Local Authority Designated Officer – complaints against staff) –  
0208 770 4776 ([LADO@sutton.gov.uk](mailto:LADO@sutton.gov.uk))

LBS Prevent and Hate Crime Manager – 0208 649 0672

Education Safeguarding Manager – 07736 338 180

Escalation procedures - [Sutton LSCB Escalation Policy September 2015.pdf](#)  
([suttonlscp.org.uk](http://suttonlscp.org.uk))

[Child Death Review – Operating Protocol and Guidance](#)

### General Contacts:

- Ofsted 0300 123 1231
- Ofsted whistle blowing line – 0300 123 3155
- Police 999
- NSPCC 0808 8005000
- NSPCC whistle blowing helpline number – 0800 028 0285
- ChildLine 0800 11 11