



# Safeguarding Policy

**EMMAUS SCHOOL**

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<b>KEY SAFEGUARDING PERSONNEL</b>			
<b>Role</b>	<b>Name</b>	<b>Tel.</b>	<b>Email</b>
<b>Headteacher</b>	Mrs M Wiltshire	01225 782684	headteacher@emmaus-school.org.uk
<b>Designated Safeguarding Lead (DSL) (Including EYFS)</b>	Mrs C Alsop	01225 782684	catrin.alsop@emmaus-school.org.uk
<b>Deputy DSL (DDSL)</b>	Mr M Richards Mr V Ramond		matthew.richards@emmaus-school.org.uk vincent.ramond@emmaus-school.org.uk
<b>Nominated Governor</b>	Mrs H Greenman	01225 782684	hannah.greenman@emmaus-school.org.uk
<b>Chair of Governors</b>	Mr K Wiltshire	01225 782684	kevin.wiltshire@emmaus-school.org.uk

**Children's Social Care referrals:**

Integrated Front Door (MASH/FD, Early Support Hub and Out of Hours Service):

**0300 456 0108 (Out of hours: 0300 456 0100)**

If you believe a child is at immediate risk of significant harm or injury, you must call the police on 999.

**Local Authority Designated Officer (LADO)**

**0300 456 0108 Select Option 6**

**Email: LADO@wiltshire.gov.uk**

## INTRODUCTION

The Bible teaches that all children are precious in the sight of God. Jesus says, "Let the little children come to me and do not hinder them, for the kingdom of God belongs to such as these." Matthew 19:14

However, we live in a fallen world and as such we have a responsibility to safeguard and promote the welfare of all the children in the school's care. The school, therefore, has a responsibility to protect children from things that cause harm.

This policy is applicable to all pupils, including those in the EYFS.

In this policy, staff refers to any one with contact to a child or young person, all teaching staff, non-teaching staff, governors, volunteers, supply staff, and extends to all supply/agencies used by the school for duties in school.

Safeguarding is a term which is broader than 'child protection' and relates to the action taken to promote the welfare of children and protect them from harm. Safeguarding is everyone's responsibility, and in order to fulfil this responsibility effectively they should consider, at all times, what is in the best interests of the child. In most circumstances the procedures outlined in this policy will be followed; however, **anyone may make a referral to social services, if necessary.**

Safeguarding children is defined as:

- providing help and support to meet the needs of children as soon as problems arise
- ensuring that children grow up with the provision of safe and effective care
- acting to enable all children to have the best life chances
- preventing impairment of children's mental and physical health or development and
- protecting children from maltreatment, whether that is within the home, outside the home or online.

The term 'safeguarding children' covers a range of measures including child protection procedures. It encompasses a whole-school preventative approach to keeping children safe, including online safety that incorporates pupil health and safety; school behaviour management and preventing child on child abuse; supporting pupils with medical conditions; Relationships, Sex and Health Education (RSE) and Personal, Social, Health and Economic (PSHE) education; providing first aid and site security.

This Safeguarding Policy forms part of a suite of documents and policies which relate to the safeguarding responsibilities of the school.

In particular, this policy should be read in conjunction with the Staff Recruitment and Employment Policy, Behaviour Policy, Staff Code of Conduct, Relationships and Sex Education Policy, Child on Child abuse Policy, E-Safety Policy, Discipline Policy, Whistleblowing Policy and Anti-Bullying Policy.

### **Purpose of a Safeguarding Policy**

To inform staff, parents, volunteers and governors about the school's and each individual's responsibilities for safeguarding children.

To enable everyone to have a clear understanding of how these responsibilities should be carried out.

## **Contextual Safeguarding**

At Emmaus School we use a contextual safeguarding approach.

Contextual Safeguarding can be defined as 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. Teachers are trained through internal measures to recognise how social contacts can have an impact on vulnerable children.

### **School Staff & Volunteers**

The school, the staff, and the volunteers are responsible for providing a safe environment in which children can learn.

All school staff and volunteers have a responsibility to identify children who may be in need of extra help, or who are suffering, or are likely to suffer significant harm. This is because school staff and volunteers are particularly well placed to observe outward signs of abuse, changes in behaviour and failure to develop because they have daily contact with children.

All school staff and volunteers will receive safeguarding children training, so that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse, exploitation and neglect and of the appropriate procedures to follow.

Temporary staff will be made aware of the safeguarding policies and procedures by the designated safeguarding lead (DSL). The school will ensure that all volunteer GCSE invigilators have a DBS check.

If any member of staff or volunteer is unsure about anything to do with this policy or with safeguarding in general they should speak to the DSL.

## **2. MISSION STATEMENT**

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to when they have a worry or concern.
- Establish and maintain an environment where school staff and volunteers feel safe, are encouraged to talk and are listened to when they have concerns about the safety and wellbeing of a child.
- Ensure children know that there are adults in the school whom they can approach if they are worried.
- Ensure that children who have been abused will be supported in line with a child protection plan, where deemed necessary.
- Gather pupil voice via forums and surveys to inform practice and policies.

### 3. STATUTORY FRAMEWORK

In order to safeguard and promote the welfare of children, the school will act in accordance with the following DfE guidance:

- Keeping Children Safe in Education (KCSIE) (September 2024)
- Working Together to Safeguard Children (2023)
- Prevent Duty Guidance: for England and Wales (2024)
- The procedures of the Wiltshire Safeguarding Vulnerable People Partnership
- Information sharing – Advice for practitioners providing safeguarding services to children, young people, parents and carers (2024) and in line with [LA 'Safeguarding records management, retention & transfer guidance' \(September 2024\)](#),

### 4. WHEN TO BE CONCERNED

**Definition of abuse:** a form of maltreatment of a child. Somebody may abuse, exploit and neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family, outside the home, in the local area, in an institutional/community setting by those known to them, or by others via the internet, for example. Abuse can take place wholly online and technology may be used to facilitate offline abuse. They may be abused by an adult or child (child on child abuse). Mental health problems can be a sign or indicator of abuse, neglect or exploitation.

All staff and volunteers should be aware that the main categories of abuse are:

**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 – It 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 in education and all staff should be aware of it and of their school or college's policy and procedures for dealing with it.**

**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 occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.**

Generally, in an abusive relationship the child may:

- Appear frightened of the parent/s or other household members e.g. siblings or others outside of the home
- Act in a way that is inappropriate to her/his age and development (full account needs to be taken of different patterns of development and different ethnic groups)
- Display insufficient sense of 'boundaries', lack stranger awareness
- Appear wary of adults and display 'frozen watchfulness'

See Appendix 1 for specific safeguarding concerns.

## **5. SCHOOL PROCEDURES FOR DEALING WITH CONCERNS ABOUT A CHILD**

If a child or young person has suffered or is likely to suffer significant harm this should be reported immediately to Wiltshire Multi-Agency Safeguarding Hub or phone 999.

**Non-emergency contact number for police: 101**

**NSPCC Emergency help line: 0808 800 5000**

### **5 (a) STAFF RESPONSIBILITIES**

All staff know how to recognise and are alert to the signs of neglect and abuse and wider safeguarding issues, including but not limited to child on child sexual violence and harassment, child on child abuse and exploitation. Definitions of abuse, set out in 'What to do if you're worried a child is being abused - Advice for practitioners' (2015), 'Keeping Children Safe in Education' (2024), along with notes from safeguarding training, are important reference documents for all staff. Every member of staff is provided with a copy of Part 1 or Annex A of KCSIE which they are required to read, and which also includes supporting guidance about several specific safeguarding issues. Staff who work directly with children are

also required to read Annex B and Part 5 of KCSIE (2024). All staff are also aware of their responsibility to maintain professional curiosity.

If any member of staff is concerned about a child he or she must inform the DSL. The member of staff must record information regarding the concerns on the same day. The recording must be a clear, precise, factual account of the observations.

The DSL will decide whether the concerns should be referred to Children's Services: Safeguarding and Specialist Services. If it is decided to make a referral to Children's Services: Safeguarding and Specialist Services this will be discussed with the parents, unless to do so would place the child at further risk of harm.

Particular attention will be paid to the attendance and development of any child about whom the school has concerns, or who has been identified as being the subject of a child protection plan and a written record will be kept.

If a pupil who is/or has been the subject of a child protection plan changes school, the DSL will inform the social worker responsible for the case and transfer the appropriate records to the DSL at the receiving school, in a secure manner, and separate from the child's academic file.

The DSL is responsible for making the senior leadership team aware of trends in behaviour that may affect pupil welfare. If necessary, training will be arranged.

## 5 (b) DEALING WITH A CONCERN/DISCLOSURE

The school uses flowcharts provided by the SVPP that set out the required procedure for staff to follow when they have a safeguarding concern about a child, and these are displayed in adult cloakrooms. In the event that a child makes a disclosure to you or you have a concern about a child, you would normally follow the procedures below. However, it is important to realise that anyone can make a referral to Social Services, if necessary.

### DO:

- Take the child to a private and safe place if possible
- Stay calm
- Reassure the child and stress that he/she is not to blame
- Listen to the child and reassure them that they were right to tell you
- Tell the child that you have to speak to someone who can help to keep them safe
- Do not interview the child, keep questions to a minimum and encourage the child to use his/her own words: questioning should only include TED questions:
  - **T**ell me
  - **E**xplain
  - **D**escribe
  - Or use the mirroring technique:  
i.e. "My dad hit me last night"; respond by "Your dad hit you last night?"

Record as soon as possible exactly what the child has said to you / what you have heard or what you saw, and any other relevant information by completing a SVPP 'Welfare and Child Protection Concern Form (see Staff Handbook) and hand it in to the DSL. Records should include instances where referrals were or were not made to another agency such

as local authority children's social care or the Prevent programme. The records must be signed and dated. The DSL should include outcomes and any agreed action that is to be taken.

**Immediately** inform the D/DSL (and nobody else) so that any appropriate action can be taken to protect the pupil if necessary. In the absence of the D/DSL, staff members should speak directly to the MASH/FD. In some circumstances, the D/DSL or member of staff seeks advice by ringing the MASH/FD for advice.

- In the case of FGM, teachers must report to the police cases where they discover that an act of FGM appears to have been carried out. Unless there is a good reason not to, teachers should discuss such a case with the DSL and involve children's social care as appropriate.

**DO NOT:**

- Investigate the issue yourself
- Take photographs of any injuries
- Ask the child to write down what they said or repeat it to another adult
- Record the conversation on any device
- Ask another adult to witness their disclosure – the child has chosen to tell you.
- Promise to keep the secret
- Approach or inform the alleged abuser

The D/DSL will provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and enable a contextual approach to address such harm.

- The D/DSL consistently monitors all children with concerns, whether a referral to MASH/FD has been made or not.
- The D/DSL provides feedback to any staff who share concern/s.

## 5 (c) CONFIDENTIALITY

Safeguarding children raises issues of confidentiality that must be clearly understood by all staff/volunteers in schools.

All staff, both teaching and non-teaching, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (Children's Services: Safeguarding and Specialist Services and the Police).

If a child confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality – instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe.

Staff/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

## 5 (d) COMMUNICATION WITH PARENTS

The school will undertake appropriate discussion with parents prior to involvement of another agency unless to do so would:

- place a child at increased risk of significant harm
- place an adult at increased risk of serious harm
- prejudice the prevention, detection or prosecution of a serious crime
- lead to unjustified delay in making enquiries about allegations of significant harm to a child, or serious harm to an adult

The school will ensure that parents have an understanding of the responsibilities placed on the school and staff for safeguarding children.

## 5 (e) RECORD KEEPING AND INFORMATION SHARING

The school:

- Requires all parents to complete an annual registration form before the start of the Autumn Term to ensure that contact details for both parents are up to date.
- Liaises with partner organisations (e.g. alternative provision settings, Wiltshire Council) to ensure any safeguarding records for learners are shared on transition and within 5 days for an in-year transfer or within 5 days of the start of a new term:
  - by the setting/school/organisation previously attended by the child.
  - by our DSL when the child leaves our school.
- For any child dual-registered with another school/setting/organisation, the school continues to be responsible for the safeguarding of the placed pupil thus the DSL will regularly liaise with the DSL at that base to ensure information is shared in the child's best interests. This includes contextual safeguarding information about relationships that young people form in their neighbourhoods, schools and online to enable assessment and intervention to happen within these extra-familial contexts.
- Keeps clear and comprehensive written records of all pupil safeguarding and child protection concerns using a standard recording form, with a body map, including how the concern was followed up and resolved as well as a note of any action taken, decisions reached and the outcome.
- Ensures all pupil safeguarding and child protection records are kept securely in a locked location.
- Ensures the records incorporate the wishes and views of the pupil.

The D/DSL acts in accordance with Information Sharing – Department for Education (DfE) (Updated 2024) and in line with the Wiltshire Council Record Keeping Guidance which includes details about file retention. Information about pupils at risk of harm is shared with members of staff in keeping with the seven golden rules to sharing information in the DfE guidance.

The school is committed to work in partnership with parents and carers, and in most situations will discuss initial concerns with them. However, the D/DSL will not share information where there are concerns that if so doing would:

- Place a child at increased risk of significant harm

- Place an adult at increased risk of serious harm
- Prejudice the prevention, detection or prosecution of a serious crime
- Lead to unjustified delay in making enquiries about allegations of significant harm to a child, or serious harm to an adult.

When the school becomes aware that a child is being privately fostered, the carer/parent is reminded of their legal duty to notify Wiltshire Children’s Social Care. The school follows this up by contacting Children’s Social Care directly.

## 6. CHILD ON CHILD ABUSE

All children have a right to attend school and learn in a safe environment. All child on child abuse is unacceptable and will be taken seriously.

In addition, the school has a zero-tolerance approach and will respond to all reports and concerns of child on child sexual violence and sexual harassment, including those that have happened outside of the school, and/or online.

Staff recognise that while both boys and girls can abuse their peers, it is more likely that girls will be victims and boys instigators of such abuse. Child on child abuse is not tolerated, passed off as “banter” or seen as “part of growing up”. The different forms of child on child abuse is likely to include, but not limited to:

- Bullying (including cyber bullying, prejudice-based and discriminatory bullying)
- Abuse in intimate personal relationships between peers
- Physical abuse which can include hitting, kicking, shaking, biting, hair pulling or otherwise causing physical harm
- ‘Upskirting’ or any picture taken under a person’s clothing without their permission or them knowing to obtain sexual gratification or cause humiliation, distress or alarm.
- Causing someone to engage in sexual activity without consent
- Initiation/hazing type violence and rituals.
- Consensual and non-consensual sharing of nudes and semi-nude images and/or videos including computer generated imagery (also known as sexting)
- Sexual violence and sexual harassment between children, as defined by Sexual offences act 2003 which considers rape, assault by penetration and sexual assault, all types of sexual violence. Sexual violence and sexual harassment can be between two children, or a group of children and can occur online and offline.

Consequently, child on child abuse is dealt with as a safeguarding issue, recorded as such and not managed through the systems set out in the school behaviour policy.

Any pupil who may have been victimised and/or displayed such harmful behaviours, along with any other child affected by child on child abuse, will be supported through the school’s pastoral system and the support will be regularly monitored and reviewed.

The school will address inappropriate behaviour (even if it appears to be relatively innocuous) as this can be an important intervention that may help prevent problematic, abusive and/or violent behaviour in the future.

It is recognised 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. Staff maintain an attitude of 'it could happen here' where safeguarding is concerned.

The school minimises the risk of child on child abuse by providing:

- A relevant, effective curriculum, that helps children to develop their understanding of acceptable behaviours, healthy relationships and keeping themselves safe. The curriculum is updated to reflect changes in legislation, and the mandatory teaching of Relationship Education, Relationship and Sex Education and Health Education
- Established/publicised systems for pupils to raise concerns with staff, knowing they will be listened to, supported and valued, and that the issues they raise will be taken seriously
- Training to all staff so they understand that child on child abuse can happen and are trained to be alert to any behaviours that could cause concern
- A clear procedure for all staff to report all incidents as a safeguarding concern to the school D/DSL.

The DSL will follow local and national guidance when there has been a report of sexual violence and harassment between children. This will include liaising with other professionals to develop robust risk assessments and multi-agency safety planning with appropriate specialist targeted work for pupils who are identified as posing a potential risk to other children. This is done using a Contextual Safeguarding approach to ensure assessments consider risks posed by any wider environmental factors present in a child's life.

The NSPCC has a dedicated helpline 0800 136 663 to provide children who are victims of sexual abuse in schools with appropriate support and advice. The helpline also provides support to parents and professionals.

Further information and support 'Addressing child on child abuse: a resource for schools and colleges' (Farrer & Co) (Sept 2023)

## **6 (a) MANAGING AN ALLEGATION OF CHILD ON CHILD ABUSE**

All allegations of child on child abuse will be handled in line with the procedures set out in the school's Child on child abuse Policy.

## **6 (b) SAFEGUARDING AND SUPPORTING THE VICTIM**

The following principles are based on effective safeguarding practice and will help the decision-making process regarding safeguarding and supporting the victim.

The school will:

- Consider the age and the developmental stage of the victim, the nature of the allegations and the potential risk of further abuse

- Consider the needs and wishes of the victim. The victim will be listened to and acknowledged. It is important they feel in as much control of the process as is possible. Where a pupil feels able to deal with the incident on their own or with support of family and friends, the pupils will continue to be monitored and offered support should they require it in the future
- Ensure that the victim will never be made to feel they are the problem for making a report or made to feel ashamed for making a report
- Consider interventions that target a whole class or year group e.g. work on cyberbullying/relationship abuse etc.
- Support the child in improving peer group relationships where bullying is a factor in the abuse and consider restorative justice work with all those concerned
- Identify the possible impact to siblings in cases of intra familial harms and provide support following any incidents.

## **6 (c) SAFEGUARDING AND SUPPORTING THE ALLEGED INSTIGATOR**

The following principles are based on effective safeguarding practice and will support the decision-making process regarding safeguarding and supporting the alleged instigator. In relation to this the school will consider:

- How to provide the alleged instigator with an education, safeguarding support as appropriate and implement any disciplinary sanctions. If there is any form of criminal investigation ongoing it may be that this young person cannot be educated on site until the investigation has concluded. In which case, the young person will need to be provided with appropriate support and education whilst off site. Even following the conclusion of any investigation, the behaviour that the pupil has displayed may continue to pose a risk to others in which case, an individual risk assessment may be required. This should be completed via a multi-agency response to ensure that the needs of the young person and the risks towards others are measured by all the agencies involved including the pupil and their parents.
- The age and developmental stage of the alleged instigator and nature of the allegations. Any child will likely experience stress as a result of them being the subject of allegations and/or negative reactions by their peers to the allegations made against them.
- The proportionality of the response. Support (and sanctions) will be considered on a case-by-case basis. An alleged instigator may potentially have unmet needs (in some cases these may be considerable) as well as potentially posing a risk of harm to other children. Harmful sexual behaviour in young children may be a symptom of either their own abuse or exposure to abusive practices or materials. Advice will be sought, as appropriate, from the Safeguarding Hub, the Police and any other agencies or specialist services in order to commission the right support for the child/children concerned.

## **7. CONCERNS/ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS**

The school follows the procedure set out by the SVPP 'Allegations against adults' flowchart which is displayed in adult cloakrooms for easy reference.

Where anyone in the school has a concern about the behaviour of an adult (including online behaviour) who works or volunteers at the school, including supply staff and contractors, and those from

organisations or individuals using the school premises, they must immediately consult the Headteacher who will refer to the local authority Local Authority Designated Officer (LADO).

Any concern or allegation against the Headteacher will be referred to the local authority Local Authority Designated Officer (LADO).

All staff must remember that the welfare of a child is paramount and must not delay raising concerns for fear a report could jeopardise their colleague's career. The school promotes an open and transparent culture in which all concerns about adults working in or on behalf of the school (including supply teachers, volunteers and contractors) are dealt with promptly and appropriately.

Any allegation of abuse will be dealt with in a fair and consistent way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

In addition to the concern/allegation management process, the school's DSL will also refer suspected abuse to the MASH/FD as described in 'responding to a concern.'

All members of staff and volunteers have read and signed to confirm they have understood the Schools's Staff Behaviour Policy (for safer working practice), all supply staff and contractors are made aware of expectations of their behaviour.

Concerns and allegations reported relating to supply staff and contractors will be notified to their employers for investigation and potential referral to the LADO.

The School will appoint a 'case manager' to lead any investigation where the reported allegation does not meet the allegations threshold to consider a referral to the LADO. This is the Headteacher or where the Headteacher is the subject of an allegation, a capable person who is not closely connected to the school.

### **Managing low-level concerns about adults**

The school operates a 'low-level' concerns policy in accordance with KCSIE. 'Low-level' refers to behaviour that is: inconsistent with expectations set out in the Staff Behaviour Policy, including inappropriate conduct outside of work, and/or does not meet the allegations threshold, or is otherwise not considered serious enough to consider a referral to the LADO.

All low-level concerns will be reported to the Headteacher; low-level concerns about the Headteacher will be reported to the DSL.

The school will:

- Ensure all staff are clear about what appropriate behaviour is (as set out in the Staff Behaviour Policy), and are confident in distinguishing expected and appropriate behaviour from concerning, problematic or inappropriate behaviour, in themselves and others;
- Empower staff to share any low-level safeguarding concerns;
- Provide a responsive, sensitive and proportionate handling of such concerns when they are raised, for both the child/ren and the adult; and,

- Respond to reports of low-level concerns in accordance with our HR conduct procedures by addressing unprofessional behaviour and support the individual to correct it at an early stage. If the concern has been raised via a third party, the Headteacher will 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.

Reporting low-level concerns helps to create and embed a culture of openness, trust and transparency in which the school's values and expected behaviour are constantly lived, monitored and reinforced by all staff.

Staff are encouraged to self-refer where 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.

All low-level concerns will be recorded in writing, retained and reviewed to help recognise any weakness in the school safeguarding system so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.

## 7 (a) MAKING A DISCLOSURE TO THE DISCLOSURE & BARRING SERVICE (DBS)

There is a legal duty for schools to make a referral to the DBS where they have permanently removed a person from regulated activity through dismissal or permanent transfer (or would have done so if the person had not left, resigned, retired or been made redundant); and the person has carried out one of the following:

- Been cautioned or convicted of a relevant (automatic barring) offence
- Engaged in relevant conduct in relation to children that has harmed a child or put them at risk of harm
- Satisfied the Harm Test in relation to children (i.e. no action or inaction occurred but the present risk that it could was significant). To satisfy the harm test there needs to be credible evidence of risk of harm to children such as statements made by an individual regarding conduct/behaviour etc.

Such a referral is made using the DBS Referral Form which can be found at the following website: <https://www.gov.uk/government/publications/dbs-referrals-form-and-guidance>

The school should consider making a referral to the Teaching Regulation Agency (TRA) where a teacher have been dismissed for professional misconduct (or would have done so if the person had not left, resigned, retired or been made redundant), as a prohibition order may be appropriate.

Further information can be found here:

<https://www.gov.uk/government/collections/teacher-misconduct>

## 8. EARLY HELP ASSESSMENT

Early Help means providing support as soon as a problem emerges, which can be at any point in a child's life, from early childhood to the teenage years. Early help can prevent further problems arising, for example, if it is provided as part of a support plan where a child has returned home to their family from care.

The D/DSL uses:

- Wiltshire's Integrated Front Door (MASH/FD and Early Support Hub)
- The Digital Assessment and Referral Tool as appropriate as part of a holistic assessment of the child's needs.
- The Multi-Agency Thresholds guidance for Safeguarding Children on the Safeguarding Vulnerable People Partnership (SVPP) website about suitable action to take when a pupil has been identified as making inadequate progress or having an unmet need, and various resources to identify and respond to harmful sexual behaviour.
- Liaises with The Wiltshire SEND service
- Various resources to identify and respond to harmful sexual behaviour

Any child may benefit from early help, but all staff should be particularly alert to the potential need for early help for a child who:

- is disabled and has specific additional needs
- has specific educational needs (whether or not they have a statutory Education Health and Care Plan)
- has a mental health need
- is a young carer
- is showing signs of being drawn in to anti-social or criminal behaviour
- 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 which presents challenges for the child (e.g. drug/alcohol abuse, adult mental health problems and/or domestic abuse)
- is misusing drugs or alcohol
- has returned home to their family from care
- is at risk of honour based abuse, FGM or forced marriage
- is privately fostered
- is persistently absent from school

## 9. STAFF BEHAVIOUR IN SCHOOL

### 9 (a) TIME ALONE WITH CHILDREN

Other than for individual tuition, time alone with children needs to be kept to a minimum and handled with the utmost care. If it is necessary for a teacher to be alone with a child, other members of staff should know of the meeting. If a school activity extends beyond normal school hours, then two adults should be on the premises until all the children have been collected. When transporting pupils, teachers should, where at all possible, avoid being alone with a pupil in the car. Where this is unavoidable, the pupil should be in the back of the car.

### 9 (b) TOUCH

- Everything should be kept public. A hug in the context of a group is very different from a hug behind closed doors.
- Touch should be related to the child's needs and not the worker's.
- Touch should be age appropriate and generally initiated by the child rather than the adult.
- Any physical activity that is, or may be thought to be, sexually stimulating to the adult or child must be avoided.
- Children have the right to decide how much physical contact they have with another person, except in exceptional circumstances when they need medical attention or restraint for safety reasons.
- Staff members should monitor one another in the area of physical contact. They should be free to help each other by pointing out anything which could be misunderstood.

## 9 (c) COMMUNICATIONS

Any form of communication with a child or young person which could be interpreted as sexually suggestive or provocative i.e. verbal comments, letters, notes, email, phone calls, texts, social media should be avoided.

## 9 (d) USE OF CAMERAS AND MOBILE PHONES

**See also E-safety policy and Staff Code of Conduct**

As stipulated in the Staff Code of Conduct, photographs documenting the learning and activities of children, including those in the EYFS, are taken for valid reasons. These photographs will be taken on a school camera, which is stored securely in the school only. Photographs will not be taken by staff, volunteers or visitors on a personal camera or mobile phone. Staff will ensure children are appropriately dressed and encourage children to report if they are worried about any photographs taken of them. Parental permission will be sought before using pictures of children in any promotional material, including the school website. All teachers, including those in the EYFS, should switch their phones off and put in a personal bag during contact time with pupils.

Staff should not take images in one to one situations and take images of pupils for their personal use.

As stipulated in the Online Safety Policy, pupils' use of mobile phones is restricted during school hours. Pupils' phones should be switched off and kept in school bags at all times, both on school premises and on school trips, unless otherwise instructed by a teacher. Mobile phones have access to the internet via 3G, 4G and 5G access, and this is one of the reasons that phones are not allowed to be used during the school day.

## 9 (d) ALCOHOL AND STAFF MEDICATION

Staff must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If staff are taking medication which may affect their ability to care for children, they should seek medical advice. Schools must ensure that staff only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member's ability to look after children properly.

Staff medication on the school premises must be stored securely and out of reach of children at all times.

## 10 (a) WHISTLE BLOWING

See also separate Whistle Blowing Policy

All staff and pupils can raise concerns about poor or unsafe practice and potential failures in the school safeguarding regime. Our whistleblowing procedures, (including our child friendly whistleblowing mechanisms), which are reflected in staff training and our Staff Behaviour Policy, and shared with pupils, are in place for such concerns to be raised with the Headteacher.

Systems are in place and well promoted so that children can confidently report concerns or abuse, knowing their concerns will be treated seriously and knowing they can safely express their views and given feedback.

If a staff member feels unable to raise an issue with the Headteacher or feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them:

- The NSPCC whistleblowing helpline  
Staff can call: 0800 028 0285 from 08:00 to 20:00, Monday to Friday, or email [help@NSPCC.org.uk](mailto:help@NSPCC.org.uk).
- A member of the governing body: Mr Richard Haddow

## 10 (b) ESCALATION OF CONCERNS

Effective working together depends on an open approach and honest relationships between colleagues and between agencies.

Staff must be confident and able to professionally disagree and challenge decision-making as an entirely legitimate activity; a part of our professional responsibility to promote the best safeguarding practice. Staff are encouraged to press for re-consideration if they believe a decision to act/not act in response to a concern raised about a child is wrong. In such cases the SVPP Case Resolution Protocol is used if necessary.

## 11. SAFER RECRUITMENT

See separate Safer Recruitment Policy

- All staff are subject to safer recruitment processes and checks, and we follow the guidance as set out in Part 3 of KCSIE (2024) and, where applicable, new staff are asked to complete a 'Declaration of Disqualification' as detailed in the 2018 childcare disqualification regulations and the Childcare Act 2006.
- All applications for paid or voluntary posts are scrutinised, shortlisted candidates attend an interview and appropriate checks through the Disclosure and Barring Service (DBS) are made.
- As part of the shortlisting process, an online search is carried out on shortlisted candidates to help identify any incidents or issues that have happened and are publicly available online, and which might be discussed with the applicant at interview.
- We maintain a single central register (SCR) of the essential checks as set out in KCSIE that have been carried out and certificates obtained. The SCR applies to all staff (including supply staff and teacher trainees) on salaried routes who work at the school and all governors.
- Volunteers who work at the school are also checked in line with current legislation and Local Authority guidance.

- Assurances are sought for contractors who are required on site, including identification checks on arrival.
- Appropriate vetting checks are carried out by the school for self-employed individuals.
- At least one person on any appointment panel has undertaken 'Safer Recruitment Training', which is updated once every 5 years as a minimum.
- The governors monitor the school's safer recruitment practice, including the Single Central Register
- For off site visits, written assurances are obtained from any alternative provision providers that appropriate safer recruitment checks have been completed and safeguarding policies and procedures are in place.

## 12. MANAGEMENT OF SAFEGUARDING

### 12 (a) THE DESIGNATED SAFEGUARDING LEAD

The D/DSL uses:

- The Digital Assessment and Referral Tool as appropriate as part of a holistic assessment of the child's needs.
- The Multi-Agency Thresholds for Safeguarding Children on the SVPP website about suitable action to take when a pupil has been identified as making inadequate progress or having an unmet need.

The DSL takes the **lead responsibility** for safeguarding and child protection. The DDSL supports with the activities of the DSL and is trained to the same level.

It is the role of the DSL for Child Protection to:

- Decide upon the appropriate level of response to specific concerns about a child, e.g. discuss with parents, offer an assessment under the Common Assessment Framework (CAF) or refer to Wiltshire MASH/FD or relevant Children's Services in cases of possible abuse and to the LADO, within 24 hours, in cases of allegations against staff, trustees or volunteers. The DSL will act as a focal point for staff to discuss any concerns and will support staff who make referrals to the local authority children's social care.
- Refer cases to the Channel programme where there is a radicalisation concern as required. Supporting staff who make referrals to the Channel programme.
- Refer cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required.
- Ensure that s/he receives refresher training at two yearly intervals
- Keep his or her knowledge and skills up to date, including on-line safety
- Ensure that new staff receive a safeguarding children induction within 7 working days of commencement of their contract
- Ensure that all staff who work with children undertake appropriate training to equip them to carry out their responsibilities for safeguarding children effectively and that this is kept up to date by refresher training at three yearly intervals

- Ensure that temporary staff and volunteers are made aware of the school's arrangements for safeguarding children within 7 working days of their commencement of work
- Ensure that all staff and volunteers read Part 1, Annex B and Part 5 of the latest edition of KCSIE.
- Ensure that the school operates within the legislative framework and recommended guidance
- Develop effective working relationships with other agencies and services
- Liaise and work with Children's Services: Safeguarding and Specialist Services over suspected cases of child abuse
- Be a point of contact to external agencies, including the police when they wish to contact schools regarding incidences of domestic violence
- Provide advice and support to other members of staff and volunteers on protecting children from the risk of radicalisation
- Ensure that accurate safeguarding records relating to individual children are kept separate from the academic file in a secure place, marked 'Strictly Confidential' and are passed securely should the child transfer to a new provision
- Submit reports to the relevant agencies, ensure the school's attendance at child protection conferences and contribute to decision making and delivery of actions planned to safeguard the child
- Ensure that the school effectively and consistently monitors children about whom there are concerns, including notifying Children's Services: Safeguarding and Specialist Services when there is an unexplained absence of more than two days for a child who is the subject of a child protection plan
- Be aware of the protocols to be followed (as outlined by the Local Authority) in the event that a child is not collected from school as expected and that parents have been informed of the protocol to be followed
- Provide guidance to parents, children and staff about obtaining suitable support
- Ensure the child's wishes and feelings are taken into account when determining what action to take and what services to provide to protect individual children through ensuring there are systems in place for children to express their views and give feedback.
- Discuss with new parents the role of the DSL and the role of safeguarding in the school. Make parents aware of the safeguarding procedures used and how to access the Safeguarding Policy.
- Support staff in liaising with other agencies and setting up an inter-agency assessment as applicable, if early help is appropriate. The case should be kept under constant review and consideration given to a referral to Children's Social Care if the child's situation does not appear to be improving.
- Take responsibility for online safety in the school
- Be aware of the protocols to be followed in the event that a child is not collected from school as expected and that parents have been informed of the protocol to be followed

- Ensure all staff who are legally required to complete a 'Declaration of Disqualification Form' do so annually.

## 12 (b) THE GOVERNING BODY

The Governing Body has overall responsibility for ensuring that there are sufficient measures in place to safeguard the children in their establishment. It is recommended that a nominated governor for child protection is appointed to take lead responsibility.

In particular the Governing Body must ensure:

- Child protection policy and procedures are established and implemented
- Safe recruitment procedures are established and implemented
- Appointment of a DSL who is a senior member of staff
- Relevant safeguarding children training for school staff/volunteers is attended
- Safe management of allegations
- Deficiencies or weaknesses in safeguarding arrangements are remedied without delay
- The LADO is nominated to be responsible in the event of an allegation of abuse being made against the Headteacher
- Safeguarding policies and procedures are reviewed annually and also updated as issues emerge and lessons are learned.
- The nominated governor (NG) for safeguarding collaborates with the Headteacher and the D/DSL to complete an annual safeguarding audit return to the local authority.

The head teacher must ensure that the policies and procedures adopted by the governing body (particularly those concerning referrals of cases of suspected abuse and neglect: are understood and followed by all staff and should be easily understood by staff, children and parents.

All governors and trustees receive appropriate safeguarding and child protection (including online) training at induction. Governors are also encouraged to attend whole school safeguarding and child protection training.

## 13. STAFF TRAINING

All staff must read at least Part One of KCSIE and Annex B, and staff must be updated each time KCSIE is updated by the DfE. School leaders should read Part 5 of KCSIE, and staff should be aware of the contents of Part 5.

The DSL will receive updated child protection training at least every 2 years, which will include local inter-agency protocols and training in the SVPP's approach to *Prevent* duties. In addition to their formal training their knowledge and skills will be updated during each year via meeting other designated safeguarding leads and giving time to read and digest safeguarding developments.

All staff will be trained in child protection every 3 years, in line with advice from the SVPP and *Prevent* awareness training will be part of this. In addition to this all staff will receive an annual update/refresher training on safeguarding. In the normal course of events this will take place in September at the beginning of each academic year. Also all staff members will receive safeguarding and child protection updates via

e mail and staff meetings as required to provide them with relevant skills and knowledge.

All staff will be trained in online safety as part of the annual update/refresher training

The school will endeavour to ensure staff, are familiar with; having processes in place to identify, report, monitor specific safeguarding issues including:

- Bullying including cyber bullying
- Child abduction and community safety incidents
- Child Sexual Exploitation (CSE)
- Children at risk of criminal exploitation (CCE)
- Children in the court system
- County lines
- Domestic Abuse
- Drugs
- Fabricated or induced illness
- Faith abuse
- Female Genital Mutilation (FGM)
- Breast Ironing
- Forced Marriage
- Gangs and Youth Violence
- Gender based violence/Violence against women and girls (VAWG)
- Hate
- Homelessness
- Mental Health
- Private Fostering
- Preventing Radicalisation
- On line abuse/Sexting
- Teenage Relationship abuse
- Trafficking
- Missing children and vulnerable adults
- Child sexual abuse within the family
- Poor parenting, particularly in relation to babies and young children  
[Keeping children safe in education 2024 \(publishing.service.gov.uk\)](https://www.gov.uk/government/publications/keeping-children-safe-in-education-2024)

All new staff, including temporary staff and volunteers, must be provided with induction training that includes:

- The school 's Safeguarding Policy
- Safeguarding Training
- Prevent Training
- The staff code of conduct
- Whistleblowing procedures
- The identity of the DSLs
- A copy of Part 1 of KCSIE

- A copy of Annex B of KCSIE
- A copy of Part 5 of KCSIE
- Attendance Policy and Children Missing in Education Policy
- Discipline Policy
- Online safety, including how to respond to the sharing of images of nudes and semi-nudes
- The role of Operation Compass in supporting children who experience domestic abuse
- procedures to be followed in case of an allegation being raised against an adult

## 14. EMOTIONAL/MENTAL HEALTH AND WELLBEING

All staff should also be aware that mental health problems may be an indicator that a child has suffered, or is at risk of suffering abuse, neglect or exploitation. Staff are well placed to observe children day-to-day and identify those whose behaviour 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, adolescence and into adulthood. It is key that staff are aware of how these children's experiences, can impact on their mental health, behaviour and education.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health concern. However, the school will provide information about local mental health services to children and parents, and include the teaching of emotional health and wellbeing to children in the curriculum.

If staff have a mental health concern about a child, the school will inform parents/carers and seek ways to support the child in and out of school.

The school will contact the local School Community Advisor for advice:

<https://www.oxfordhealth.nhs.uk/camhs/contacts/wilts/>

If a child is at risk of serious immediate harm and/or suicide, the school will seek urgent advice from the urgent CAMHS services and/or seek medical intervention.

01865 903 777.

Other useful sources of support:

[On Your Mind](#)

## 15. SUPPLY/AGENCY STAFF

As part of the induction process, all work experience and student teachers must read this Safeguarding Policy and other policies deemed relevant for them to carry out their duties, safely and consistently.

The allegations against professionals, volunteers and carers will apply to supply/agency teachers. Whilst this school is not the employer of supply/agency teachers, allegations will be dealt with according to the procedures in this policy.

The Governing body will discuss with the supply agency whether it is appropriate to suspend the supply teacher, or redeploy them to another part of the school, whilst they carry out their investigation.

The school will be fully involved and co-operate in any enquiries from the LADO, police and/or children's social services.

## 16. ALTERNATIVE PROVISION

We seek written assurances from any alternative provision providers that appropriate safer recruitment checks have been completed and safeguarding policies and procedures are in place.

We request alternative provision providers update us on any changes that might put the child at risk, for example staff changes, so the school can make sure appropriate safeguarding checks have been carried out.

- Schools should always know where a child is based during school hours. This includes maintaining records of the address of the AP and any sub-contracted provision or satellite sites the child might attend
- The school regularly reviews AP placements, at least half-termly, in order to provide assurance that:
  - a. The child is regularly attending
  - b. The placement continues to be safe and meets the child's needs
- Where safeguarding concerns arise, the placement should be immediately reviewed and terminated if necessary, unless or until those concerns have been satisfactorily addressed

## 17. VISITORS

All visitors complete a signing in/out process, wear a school ID badge and are provided with key safeguarding information including the contact details of safeguarding personnel in school.

Scheduled visitors in a professional role (eg fire officer, police, NSPCC staff) are asked to provide evidence of their role and employment details (usually an identity badge) upon arrival at school. Careful consideration is given to the suitability of any external organisations. School complete an assessment of the education value, the age appropriateness of what is going to be delivered by the scheduled visitor prior to booking a visit.

If the visit is unscheduled and the visitor is unknown to the school, we will contact the relevant organisation to verify the individual's identity, if necessary.

## 18. STUDENTS/WORK PLACEMENTS

During induction, work experience and student teachers must read this Safeguarding Policy and other policies deemed relevant for them to carry out their duties, safely and consistently.

If the student/teacher is over 18 years of age, the allegations against professionals, volunteers, and carers criteria will be applied in the event that any concerns arise.

If the student on placement is under 18 years of age, the DSL will determine any next steps, which may

mean using the local safeguarding procedures.

## 19. TEACHING CHILDREN HOW TO KEEP SAFE

Emmaus School pupils access a broad and balanced curriculum that promotes their spiritual, moral, cultural, mental and physical development, and prepares them for the opportunities, responsibilities and experiences of life.

The school provides opportunities for pupils to develop skills, concepts, attitudes and knowledge that promote their safety, and well-being. The PSHE and citizenship curriculum, incorporating Relationships, Sex and Health Education (RSE) specifically includes the following objectives:

- Developing pupil self-esteem and communication skills
- Developing strategies for self-protection including online safety
- Developing a sense of the boundaries between appropriate and inappropriate behaviour in adults and within peer relationships (positive relationships and consent)

Appropriate levels of filtering will be applied to protect children from accessing, amongst other things, extremist and terrorist material whilst using the internet.

## 20. ONLINE SAFETY

For the school's online safety procedures and protocols see Online Safety policy.

Online safety is a running and interrelated theme which is reflected in the school's policies and procedures. Children are taught about safeguarding, including online safety. Online safety is considered as part of a whole school safeguarding approach and wider staff training and curriculum planning. A personalised or contextualised approach is taken for more vulnerable children, victims of abuse and some children with SEND.

The school acknowledges the fact many children have unlimited and unrestricted access to the internet via mobile phone networks, the school will follow its policy on the use of mobile and smart technology in school to safeguard children and will follow child on child abuse procedures when mobile phones are used by a child whilst in school to sexually harass their peers via their mobile and smart technology, share indecent images: consensually and non-consensually (often via large chat groups), and view and share pornography and other harmful content.

The school will also ensure that parents and carers are made aware of what their children are being asked to do online, including the sites they will be asked to access and be clear who from the school or college (if anyone) their child is going to be interacting with online.

The school adheres to the DfE Filtering and Monitoring standards and the Cyber Security Standards (2024), and our online safety mechanisms are reviewed annually.

## 21. REMOTE EDUCATION

If the school is required to change the way provision to children is offered due to exceptional circumstances e.g. during a pandemic lockdown, self-isolation, staff responsibilities to remain alert to the signs and risks of abuse to children will continue to apply. In such circumstances:

The DSL will:

- Work closely with social care and partner agencies to support children in these circumstances and to identify children who may be at risk for the first time and/or benefit from additional support
- Use specific local and national guidance about safeguarding in such circumstances to inform practice eg UK Safer internet centre guidance, DfE safeguarding and remote education and will ensure staff, children, and families are provided with written:
  - amended DSL arrangements as required (names, location and contact details)
  - temporary changes to procedures for working with children eg online.
  - amended procedures for reporting concerns
  - safeguarding training arrangements
  - timescales for such changes so that all children, families and staff understand when such arrangements will end, and arrangements revert to those in place prior to the events leading to the need for the temporary changes.

We will ensure the curriculum we offer during such circumstances, continues to promote learners' spiritual, moral, cultural, mental and physical development.

## **22. ARRANGEMENTS FOR REVIEWING SAFEGUARDING POLICIES AND PROCEDURES**

The Safeguarding Policy and the effectiveness of procedures will be reviewed by the Governing Body annually. If there are any changes in legislation throughout the year, the Safeguarding Policy must be updated as soon as possible. The safeguarding governor and DSLs will meet 3 times per year to review policies and procedures and will report to the Governing Body at each full Governors' Meeting.

If there has been any substantiated allegation against a member of staff, the school must work with the LADO to determine whether there are any improvements to be made to the school's procedures or practice to help prevent similar events in the future.

## **APPENDIX 1. SPECIFIC SAFEGUARDING CONCERNS**

### **CHILD CRIMINAL EXPLOITATION**

Child criminal exploitation (CCE) is a form of abuse where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into criminal activity. It may involve an exchange for something the victim needs or wants, and/or for the financial or other advantage of the perpetrator or facilitator, and/or through violence or the threat of violence.

The abuse can be perpetrated by males or females, and children or adults. It can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse.

The victim can be exploited even when the activity appears to be consensual. It does not always involve physical contact and can happen online. For example, young people may be forced to work in cannabis

factories, coerced into moving drugs or money across the country (county lines), forced to shoplift or pickpocket, or to threaten other young people.

Indicators of CCE can include a child:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Suffering from changes in emotional wellbeing
- Misusing drugs and alcohol
- Going missing for periods of time or regularly coming home late
- Regularly missing school or education
- Not taking part in education

If a member of staff suspects CCE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

## CHILDREN MISSING IN EDUCATION

All children, regardless of their circumstances, are entitled to a full time education, which is suitable to their age, ability, aptitude and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area.

Children who are poor or irregular attenders at school are, in many cases, more likely to be vulnerable and a child going missing from education is a potential indicator of abuse, exploitation and neglect.

### Unaccounted absence

Staff report immediately to the D/DSL, if they know of any child who may be:

- Missing – whereabouts unknown or
- Missing education – (compulsory school age (5-16) with no school place and not electively home educated)

## CHILD SEXUAL EXPLOITATION (CSE)

- Child sexual exploitation (CSE) is a form of child sexual abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity. It may involve an exchange for something the victim needs or wants and/or for the financial advantage or increased status of the perpetrator or facilitator. It may, or may not, be accompanied by violence or threats of violence
- Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the instigator or facilitator. It may, or may not, be accompanied by violence or threats of violence. The victim may have been sexually

exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. For further information about possible indicators of sexual exploitation, see Annex A, KCSIE, Part 1.

The DSL will share any unauthorised/unexplained absence of children who have an allocated social worker within 24 hours.

Where there is unauthorised/unexplained absence, and

- After reasonable attempts have been made to contact the family without success, the DSL follows the SVPP (Safeguarding Vulnerable People Partnership) procedure and consults/refers to the MASH/FD team as appropriate.
- There are no known welfare concerns about a pupil, we follow our procedures for unauthorised absence and report concerns to the Education Welfare Service.

School attendance registers are carefully monitored to identify any trends. The school will inform both the local authority where the school sits and the local authority where the child is normally resident of any pupil who fails to attend school regularly, or has been absent without the school's permission for a continuous period of 10 school days or more.

The school will inform the local authority of any pupil who is going to be added to or deleted from the school's admission register at non-standard transition points in accordance with the requirements of the Education (Pupil Registration) (England) Regulations 2006 (as amended). This will assist the local authority to:

- a) fulfil its duty to identify children of compulsory school age who are missing from education; and
- b) follow up with any child who might be in danger of not receiving an education and who might be at risk of abuse, neglect or radicalisation.

The school will also refer to the MASH/FD team any child being withdrawn from school with the intent to be electively home educated where there are safeguarding concerns.

## **DOMESTIC ABUSE**

Domestic abuse is any behaviour that is abusive, including any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been personally connected to each other, intimate partners or family members regardless of gender or sexuality. The abuse can include psychological, physical, sexual, financial, violent or threatening, controlling or coercive, economical abuse and emotional harm.

Domestic abuse has a significant impact on children. Staff are to be alert to the fact that children are victims in their own right if they see, hear or experience the effects of abuse.

When police are called to an incident of domestic abuse and have informed the DSL because children in the household have experienced the domestic incident, the DSL will ensure the school receives up to date, relevant information about the child's circumstances and will ensure key staff provide emotional and practical support to the child according to their needs.

## FEMALE GENITAL MUTILATION (FGM)

FGM (sometimes referred to as female circumcision) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies. FGM causes severe pain and has several immediate and long-term health consequences, including difficulties in childbirth also causing dangers to the child. It is practised by families for a variety of complex reasons, but often in the belief that it is beneficial for the girl or woman. The girls may be taken to their countries of origin so that FGM can be carried out during the summer holidays, allowing them time to "heal" before they return to school. Some girls may have FGM performed in the UK. FGM is illegal in the UK; it is child abuse and a form of violence against women and girls.

The school will:

- Engage with staff and volunteers in training opportunities to raise awareness of signs of abuse especially with regards to FGM, and the issue of Child Sexual Exploitation radicalisation;
- Contact relevant authorities in any suspected cases in recognition of FGM as a serious form of abuse (from October 2015 it is mandatory for teachers report to the police any cases where they discover FGM has taken place).
- Recognise the mandatory duty to refer to the police any case of when "an act of FGM appears to have been carried out" (KCSIE) in a child under 18 years of age, bearing in mind that staff must not engage in examining girls for this purpose.

Guidance is provided by the Department of Health and is available at:

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

See also:

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

## FORCED MARRIAGE

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage.

Since February 2023 it has 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 existing forced marriage law, this applies to non-binding, unofficial 'marriages' as well as legal marriages.

Staff will inform the D/DSL immediately if they suspect a child is at risk of a forced marriage.

## HONOUR BASED VIOLENCE

So-called Honour Based Violence (HBV) is a term used to describe violence committed within the context of the extended family which are motivated by a perceived need to restore standing within the

community, which is presumed to have been lost through the behaviour of the victim. Most victims of HBV are female, although males may also be at risk.

Women and girls may lose honour through expression of autonomy, particularly if this autonomy occurs within the area of sexuality. Men may be targeted either by the family of a woman who they are believed to have dishonoured in which case both parties may be at risk, or by their own family if they are believed to be homosexual.

Some common triggers for HBV include:

- Refusing an arranged marriage
- Having a relationship outside the approved group
- Loss of virginity
- Pregnancy
- Spending time without the supervision of a family member
- Reporting of domestic violence

## PREVENTING RADICALISATION – ‘Prevent’

The *Prevent* Leads at Emmaus School are the DSLs. Protecting children from the risk of radicalisation is seen as part of schools’ wider safeguarding duties, and is similar in nature to protecting pupils from other forms of harm and abuse. Young people can be exposed to extremist influences or prejudiced views, in particular via the internet and other social media. Schools can help to protect children from extremist and violent views in the same way that they help to safeguard children in other behavioural contexts.

**Radicalisation** refers to the process of a person legitimising support for, or use of, terrorist violence

**Extremism** is the promotion or advancement of an ideology based on violence, hatred or intolerance, that aims to:

- Negate or destroy the fundamental rights and freedoms of others; or
- Undermine, overturn or replace the UK’s system of liberal parliamentary democracy and democratic rights; or
- Intentionally create a permissive environment for others to achieve the results outlined in either of the above points

**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 of terrorism 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.

Example indicators that an individual is engaged with an extremist group, cause or ideology include:

- spending increasing time in the company of other suspected extremists;
- changing their style of dress or personal appearance to accord with the group;

- their day-to-day behaviour becoming increasingly centred around an extremist ideology, group or cause;
- loss of interest in other friends and activities not associated with the extremist ideology, group or cause;
- possession of material or symbols associated with an extremist cause (e.g. the swastika for far right groups);
- attempts to recruit others to the group/cause/ideology; or communications with others that suggest identification with a group/cause/ideology.

Example indicators that an individual has an intention to use violence or other illegal means include:

- clearly identifying another group as threatening what they stand for and blaming that group for all social or political ills;
- using insulting or derogatory names or labels for another group;
- speaking about the imminence of harm from the other group and the importance of action now;
- expressing attitudes that justify offending on behalf of the group, cause or ideology;
- condoning or supporting violence or harm towards others; or plotting or conspiring with others.

Example indicators that an individual is capable of contributing directly or indirectly to an act of terrorism include:

- having a history of violence; being criminally versatile and using criminal networks to support extremist goals;
- having occupational skills that can enable acts of terrorism (such as civil engineering, pharmacology or construction);
- having technical expertise that can be deployed (e.g. IT skills, knowledge of chemicals, military training or survival skills).

The examples above are not exhaustive and vulnerability may manifest itself in other ways.

In order to meet its obligations under *Prevent*, the school will:

- Train DSLs in *Prevent* issues
- Highlight the issues involved in *Prevent*, including spotting signs of radicalisation or extremism and ensuring staff awareness of the appropriate use of the Channel system through training
- Maintain vigilance about pupil/student attendance such that any child missing from education can be reported to the authorities immediately
- Be vigilant about detecting abusive or derogatory language in the pupils, which may indicate vulnerability to radicalisation and extremism, or an unhealthy attitude to the issue at large in our society, checking especially for racist, homophobic or disability discriminatory language
- At any sign of vulnerability in any of its students, make contact with relevant authorities possibly making a referral to the local Channel Panel or using the DfE dedicated helpline – such referrals do not require parental consent, but consultation may be judged to be helpful
- Check that any visiting speaker is always suitably supervised especially if invited to speak by pupils and member of staff must always take responsibility for knowing beforehand the profile of the visitor and take responsibility for the visit.

- Reiterate in the IT Policy the particular danger of radicalisation and vulnerability to extremism posed by social media

There is no single route to extremism nor is there a simple profile of those who become involved. Thus, attempts to derive a 'profile' can be misleading. It must not be assumed that particular characteristics and experiences will necessarily lead to individuals becoming radicalised, or that these indicators are the only source of information required to make an appropriate assessment about vulnerability. Further information is contained in the statutory guidance for Channel Panel members and partners of local panels, Channel Duty Guidance: Protecting vulnerable people from becoming involved with or supporting terrorism.

<https://www.gov.uk/government/publications/channel-guidance>

If you have a concern there are several ways you can seek advice:

- Speak to your Designated Safeguarding Lead (if applicable)
- Call DfE dedicated helpline and mail box 020 7340 7264  
[counter.extremism@education.gov.uk](mailto:counter.extremism@education.gov.uk)
- Call 101 and state you would like some advice or make a Prevent referral
- If you see or hear something that could be terrorist related call the anti-terrorist hotline on 0800 789 321
- If you require urgent police assistance dial 999
- Email: [channelsw@avonandsomerset.pnn.police.uk](mailto:channelsw@avonandsomerset.pnn.police.uk)

## PRIVATE FOSTERING

Under certain conditions, a child might be cared for, as part of a private arrangement, by someone who is not their parent or a 'close relative'. This constitutes private fostering when the following conditions are met:

- a child is under 16 years of age – 18 if they have a disability
- the arrangement is for 28 days or longer
- the child's new carer does not have parental responsibility for the child and is not a close relative.

Close relatives are defined as step-parents, grandparents, brothers, sisters, uncles or aunts (whether of full blood, half blood or marriage/affinity).

By law parents and carers must notify the local authority of private fostering arrangements to safeguard and protect the child's welfare as well as ensuring the child, carer and parent are receiving appropriate support and help.

As a school, if we do become aware that a child or young person is being privately fostered, we will inform the carer/parent of their legal duty to notify Wiltshire Children's Social Care; we will follow this up by contacting Children's Social Care directly.

## THE USE OF 'REASONABLE FORCE' IN SCHOOL

There are circumstances when it is appropriate for staff to use reasonable force to safeguard children. The term 'reasonable force' covers the broad range of actions used by staff that involve a degree of physical contact to control or restrain children. This can range from guiding a child to safety by the arm, to more extreme circumstances such as breaking up a fight or where a young person needs to be restrained to prevent violence or injury. 'Reasonable' in these circumstances means 'using no more force than is needed'. The use of force may involve either passive physical contact, such as standing between pupils or blocking a pupil's path, or active physical contact such as leading a pupil by the arm out of the classroom.

All staff will follow our behaviour policy and all pupils are encouraged to follow these expectations to reduce the need for the need for 'use of reasonable force.' Staff will work in collaboration with pupils and parents/carers to plan positive, proactive behaviour support which may include support plans, referral to specialist agencies and agreeing actions to reduce the occurrence of challenging behaviour.

## LEARNERS WITH SEN AND DISABILITIES or physical health issues

Learners with special educational needs and disabilities (SEND) or certain health conditions have additional safeguarding vulnerabilities. They are at greater risk of abuse, (including child on child abuse), and significant barriers can exist to their safeguarding and wellbeing when recognising abuse, exploitation and neglect in this group, including:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration
- Pupils being more prone to peer group isolation or bullying (including prejudice-based bullying) than other pupils
- The potential for pupils with SEN, disabilities or certain health conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs
- Communication barriers and difficulties in managing or reporting these challenges
- Cognitive understanding – being unable to understand the difference between fact and fiction in online content and then repeating the content/behaviours in schools or colleges or the consequences of doing so

Understanding a child's needs, building on their strengths, overcoming the barriers and developing innovative solutions for meeting the challenges will provide learning that will be of benefit for them and also non-disabled children. Children with SEND or physical health issues have an equal right to protection from abuse.

Wiltshire Council provides targeted support services for children with SEND who need additional support:

**SEND Service: 01225 712620**

## APPENDIX 2. INDICATORS OF HARM

### PHYSICAL ABUSE

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocation or otherwise causing physical harm. This also includes fabricating the symptoms of or inducing illness. Specifically this includes Female Genital Mutilation (FGM). Everyone in the school needs to be alert to the possibility of a girl being at risk of FGM or already having suffered FGM. (See paragraph 4 (d))

#### Indicators in the child:

##### **Bruising**

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

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

##### **Fractures**

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

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

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.
- Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually

witnessed, the child will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

### **Mouth Injuries**

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

### **Poisoning**

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

### **Fabricated or Induced Illness**

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

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

### **Bite Marks**

- Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.
- A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite.

### **Burns and Scalds**

- It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded.
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

The following points are also worth remembering:

- A responsible adult checks the temperature of the bath before the child gets in.
- A child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.
- A child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks
- Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid.
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

### **Scars**

- A large number of scars or scars of different sizes or ages, or on different parts of the body, or unusually shaped, may suggest abuse.
- Emotional/behavioural presentation
- Refusal to discuss injuries
- Admission of punishment which appears excessive
- Fear of parents being contacted and fear of returning home
- Withdrawal from physical contact
- Arms and legs kept covered in hot weather
- Fear of medical help
- Aggression towards others
- Frequently absent from school
- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury

### **Indicators in the parent**

- May have injuries themselves that suggest domestic violence
- Not seeking medical help/unexplained delay in seeking treatment
- Reluctant to give information or mention previous injuries
- Absent without good reason when their child is presented for treatment
- Disinterested or undisturbed by accident or injury
- Aggressive towards child or others

- Unauthorised attempts to administer medication

## **EMOTIONAL ABUSE**

The persistent emotional maltreatment of a child such as to cause severe and adverse effects of a child's emotional development. This impacts on the wider duties of the school to seek to prevent children and young people from becoming involved in or supporting terrorism.

### **Indicators in the child**

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Aggressive behaviour towards others
- Child scapegoated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a 'loner' - difficulty relating to others
- Over-reaction to mistakes
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
- Self-harm
- Fear of parents being contacted
- Extremes of passivity or aggression
- Drug/solvent abuse
- Chronic running away
- Compulsive stealing
- Tries to draw the child into their own illness.
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
- Parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids
- Observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care.
- May appear unusually concerned about the results of investigations which may indicate physical illness in the child

- Wider parenting difficulties, may (or may not) be associated with this form of abuse.
- Parent/carer has convictions for violent crimes.
- Has a parent or carer in custody (previously it was 'family member in prison'), or is affected by parental offending
- Has experienced multiple suspensions and is at risk of, or has been permanently excluded from schools
- Is frequently missing/goes missing from education, home or care (the word 'education' has been added)

### **Indicators in the family/environment**

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

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

- FGM is a form of physical abuse and is a criminal act. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person.
- Victims of FGM are likely to come from a community that is known to practice it. The following may be warning signs that a girl is at risk of FGM:
- The position of the family and the level of integration within UK society.
- Any girl born to a woman who has been subjected to FGM or who has a sister already subjected to FGM is at risk.
- Any girl withdrawn from PSHE may be at a risk.
- Any girl taken out of the country for a prolonged period.
- There are a number of indicators that a girl has already been subjected to FGM:
- Difficulty walking or sitting. When standing she may even look uncomfortable.
- Making more frequent trips and spending longer than normal in the toilet due to difficulty urinating.
- Frequent urinary, menstrual or stomach problems.
- Prolonged or repeated absences from school.
- A prolonged absence with noticeable behaviour changes on the girl's return.
- Reluctance to undergo a medical examination.
- Asking for help but not being explicit about the problem due to embarrassment or fear.

- Talking about pain or discomfort between the legs.
- Low self-esteem
- Air of detachment – ‘don’t care’ attitude
- Social isolation – does not join in and has few friends
- Depression, withdrawal
- Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention
- Low self-esteem, lack of confidence, fearful, distressed, anxious
- Poor peer relationships including withdrawn or isolated behaviour

#### **Indicators in the parent**

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

#### **Indicators of in the family/environment**

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

### **NEGLECT**

The persistent failure to meet a child’s basic physical and/or psychological needs.

Emotional and sexual abuse can take place online including cyber bullying and online exploitation.

All staff and volunteers should be concerned about a child if he/she presents with indicators of possible significant harm – see Appendix 1 for details.

#### **Indicators in the child**

##### **Physical presentation:**

- Failure to thrive or, in older children, short stature
- Underweight

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

### **Development**

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

### **Emotional/behavioural presentation**

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

### **Indicators in the parent**

- Dirty, unkempt presentation
- Inadequately clothed
- Inadequate social skills and poor socialisation

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

### **Indicators in the family/environment**

- History of neglect in the family
- Family marginalised or isolated by the community.
- Family has history of mental health, alcohol or drug misuse or domestic violence.
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.
- Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
- Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating
- Lack of opportunities for child to play and learn

### **SEXUAL ABUSE**

The forcing or enticing of a child to take part in sexual activities. This does not necessarily involve violence. This includes Child Sexual Exploitation (CSE) where a child receives something as a result of engaging in sexual activities. What marks out CSE is an imbalance of power in a relationship. It also includes sexual violence and harassment of children by children, as well as child on child abuse and exploitation.

### **Indicators in the child**

#### **Physical presentation**

- Urinary infections, bleeding or soreness in the genital or anal areas
- Recurrent pain on passing urine or faeces
- Blood on underclothes
- Sexually transmitted infections

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

### **Emotional/behavioural presentation**

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

### **Indicators in the parents**

- Comments made by the parent/carer about the child.
- Lack of sexual boundaries
- Wider parenting difficulties or vulnerabilities
- Grooming behaviour
- Parent is a sex offender

### **Indicators in the family/environment**

- Marginalised or isolated by the community.
- History of mental health, alcohol or drug misuse or domestic violence.
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.
- Family member is a sex offender.

## **SERIOUS VIOLENCE**

Indicators of serious violence include:

- Marks on the body
- Poor attendance/punctuality
- Looking for new groups of friends/older friends
- Change in attitude and appearance
- New possessions