

# **ST VINCENT'S CATHOLIC PRIMARY SCHOOL**



## **SAFEGUARDING AND CHILD PROTECTION POLICY**

**Policy Date: September 2023**  
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## **Mission Statement**

### **Caritas Christi Urget Nos**

***The love of Christ urges us to care for each other and strive for excellence in everything we do.***

**St Vincent's Catholic Primary School**

## **SAFEGUARDING AND CHILD PROTECTION INTRODUCTION AND STATEMENT**

Our school adopts a zero tolerance approach to abuse. All our children have a right to be safe and the health and safety and the well-being of all our children are the most important aspects of school life. In St. Vincent's, our children have the right to protection, regardless of age, gender, race, culture or disability.

Abuse is a form of maltreatment of a child which involves inflicting harm or failing to act to prevent harm. Children may be abused in a family, institutional or community setting by those known to them or, more rarely, by others, e.g. via the internet. Abuse of children and young people may take several forms, which are not mutually exclusive and often overlooked.

Our school is dedicated to safeguarding and promoting the welfare of its children. We foster a culture of safeguarding, which is consistently embedded in everything we do. It is the duty of all members of staff, teaching and non-teaching to play an active role in ensuring the welfare of all children. All members of staff are expected to be aware of and follow the safeguarding procedures. They need to be aware of their duty to report concerns, the guidance for identifying child abuse, and what to do if a child makes an allegation of child abuse and issues about confidentiality.

All staff need to have read and be aware of the DFE documents Keeping Children Safe in Education which came into force in September 2022.

<https://www.gov.uk/government/publications/keeping-children-safe-in-education>

This policy is one of a series in the school's integrated safeguarding portfolio. Our core safeguarding principles are:

The school's responsibility to safeguard and promote the welfare of children is of paramount importance.

Safer children make more successful learners.

Representatives of the whole-school community of pupils, parents, staff and governors will be involved in policy development and review. Policies will be reviewed annually, unless an incident or new legislation or guidance suggests the need for an interim review. Opportunities in PSHE curriculum will enable the children to develop the skills they need to recognise and stay safe from abuse.

This Safeguarding and Child Protection Policy has been written in conjunction with Keeping Children Safe in Education 2022 Document and statutory frameworks.

### Safeguarding

Safeguarding and promoting the welfare of children is defined as;

- Protecting children from maltreatment.
- Preventing impairment of children's mental health and physical health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes

## **1 Introduction**

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all pupils. We endeavour to provide a safe and welcoming environment where children are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice.

The procedures contained in this policy apply to all staff and governors and are consistent with those of the Local Safeguarding Children Board (LSCB) and should be read in conjunction with the Health and Safety Policy, Behaviour Policy, Special Education Needs and Inclusion Policy and E-Safety Policy.

At St Vincent's the Safeguarding Team and staff aim to ensure that they establish and maintain an environment where children feel secure so that they:

- Are encouraged to talk and are listened to.
- Know that there are adults in school whom they can approach if they are worried.
- Develop the skills, through the curriculum, they need to recognise in order to stay safe from abuse.

## **2 Statutory Framework**

In order to safeguard and promote the welfare of children, St Vincent's will act in accordance with the following legislation and guidance:

- The Children Act 1989
- The Children Act 2004
- Education Act 2002 (section 175)
- Working Together to Safeguard Children- A guide to inter-agency working to safeguard and promote the welfare of children (HM Government July 2018)
- Keeping Children Safe in Education – Statutory guidance for schools and colleges (DFE September 2022)
- London Child Protection Procedures March 2020
- Allegations against staff within the children's workforce in Barnet 2016
- The Education (Pupil Information) (England) Regulations 2005
- Dealing with Allegations of Abuse Against Teachers and Other Staff (DFE 2012)
- Safeguarding Children and Safer Recruitment in Education
- Coronavirus (COVID – 19): Safeguarding in schools, colleges and other provider's guidance.

Working Together to Safeguard Children (HM Government 2018) requires St Vincent's to follow the procedures for protecting children from abuse in line with government guidance.

- Welfare of the child is paramount.
- All children, regardless of age, gender, ability, culture, race, language, religion or sexual identity, have equal rights to protection
- All staff have an equal responsibility to act on any suspicion or disclosure that may suggest a child is at risk of harm

- Pupils and staff involved in child protection issues will receive appropriate support

### **3 Policy Aims**

- To support the child's development in ways that will foster security, confidence and independence.
- To provide all staff with the necessary information to enable them to meet their child protection responsibilities.
- To ensure consistent good practice and provide systematic means of monitoring children known or thought to be at risk of harm through structured procedures.
- To demonstrate the school's commitment with regard to safeguarding and child protection to pupils, parents and other partners through good levels of communication across the school.
- To contribute to the school's safeguarding portfolio.
- To continue to promote effective working relationships with other agencies especially Children's Social Services and the Police.

### **4 Designated Senior Lead**

The Designated Safeguarding Lead should take lead responsibility for safeguarding and child protection. The key role of the Designated Safeguarding Lead is to:

- manage referrals from school staff or any others from outside the school; providing as much contextual information as possible as part of the referral process;
- work with external agencies and professionals on matter of safety and safeguarding;
- undertake training;
- raise awareness of safeguarding and child protection amongst the staff and parents;
- ensure that child protection information is transferred to the pupil's new school.

The Safeguarding Team consists of 6 members who meet regularly to discuss children who have been brought to the attention of the DSP and meet the threshold for a MASH referral. These children are monitored closely and information is recorded on our CPOMS system and shared when relevant.

The DSL (Designated Safeguarding Lead) for Safeguarding and Child Protection is:

#### **Designated Safeguarding Lead in School - Marie Tuohy**

The DDSLs (Designated Deputy Safeguarding Leads) for Safeguarding and Child Protection are:

**Liz Wolfenden - Level 3 Trained**  
**Kerry Malone - Level 3 Trained**  
**Emma Doherty - Level 3 Trained**

**Emma Scelsi - Level 3 Trained**  
**Janice Doherty - Level 3 Trained**

Contact details: [office@stvincents.barnet.sch.uk](mailto:office@stvincents.barnet.sch.uk)

The designated safeguarding lead and any deputies should liaise with the three safeguarding partners and work with agencies in line with Working Together to Safeguard Children. NPCC-When to call the police should help designated safeguarding leads when they should consider calling the police and what to expect when they do.

The nominated Safeguarding & Child Protection Governor is:

**Liam Tierney - Level 3 Trained**  
**Contact Details: FAO Liam Tierney office@stvincents.barnet.sch.uk**

*In the absence of a member of the school's Designated Safeguarding Team please call the LADO Team in Barnet - 0208 359 6056*

## **5 Multi-Agency Working**

St Vincent's staff are aware that schools have a pivotal role to play in multi-agency safeguarding arrangements. Our Governing Body ensures that the school contributes to multi-agency working, in line with statutory guidance Working Together to Safeguard Children.

We are aware that new safeguarding partners and child death review partner arrangements are now in place. Locally, the three safeguarding partners (Barnet Local Authority; a clinical commissioning group for an area within Barnet Local Authority; and the chief officer of police for an area (any part of which falls) within the Barnet Local Authority area) will make arrangements to work together with appropriate relevant agencies to safeguard and promote the welfare of local children, including identifying and responding to their needs.

St Vincent's School understands the importance of our role in the three safeguarding partner arrangements. The Governing Body and their senior leadership team, especially the designated safeguarding leads, are aware of and follow Barnet local arrangements.

The three safeguarding partners have a shared and equal duty to work together to safeguard and promote the welfare of children. St Vincent's is committed to working together with any relevant agencies. The relevant agencies are those

organisations and agencies whose involvement that the three safeguarding partners consider may be required to safeguard and promote the welfare of children with regard to local need. The three safeguarding partners will have set out in their published arrangements which organisations and agencies they will be working with and the expectations placed on any agencies and organisations by the arrangements.

The three safeguarding partners should make arrangements to allow all schools in the local area to be fully engaged, involved and included in safeguarding arrangements.

## **6 The Governing Body**

The Governing Body has overall responsibility for ensuring that there are sufficient measures in place to safeguard the children, staff and volunteers in the school community.

The Governing Body ensures that the school has:

- A DSL and DDSL for safeguarding and child protection who are all members of the senior leadership team and who have undertaken training in inter-agency working, in addition to basic child protection training.
- A Safeguarding and Child Protection policy and procedures that are consistent with LSCB requirements, reviewed annually and made available to parents on request.
- An updated Single Central Record which covers all staff, governors, volunteers, 3rd party providers and supply as a live document.
- Updated procedures for dealing with allegations of abuse made against members of staff including allegations made against the head teacher.
- Safer recruitment procedures that include the requirement for appropriate checks.
- A training strategy that ensures all staff, including the head teacher, receive child protection training, with refresher training at three-yearly intervals. The DSL and the DDSL should receive refresher training at two yearly intervals.
- Arrangements to ensure that all temporary staff and volunteers are made aware of the school's arrangements for child protection.
- Safe management of allegations.
- School badges for all visitors to the St Vincent's community which are worn throughout all visits to the school.
- A nominated governor to be responsible for liaising with the local authority and other agencies in the event of an allegation being made against the head teacher.
- A safeguarding audit which is carried out annually by the Safeguarding Team.

An annual report will be submitted to the local authority about how the governing body's duties have been carried out. Any weaknesses will be rectified without delay. All governors receive safeguarding and child protection training at induction and this is updated regularly.

## **7 School Procedures & Staff Responsibilities**

We will ensure that:

- We have designated members of staff.
- All members of staff develop their understanding of the signs and indicators of abuse and refresh their training every three years (DSL and DDSL every two years).
- All staff know if they have any concerns about a child's welfare, they should act on them *immediately*.
- All members of staff know how to respond to a pupil who discloses abuse

- using the appropriate forms.
- All parents/carers are made aware of the responsibilities of staff members with regard to child protection procedure (website/ newsletter, posters).
  - All staff will have read Part 1 of the government's guidance 'Keeping Children Safe in Education' September 2022 as part of their induction. This document provides link to further information on child sexual exploitation, female genital mutilation and preventing radicalization.
  - All staff will have read this policy and signed to confirm this.
  - Our procedures and policies will be regularly reviewed and updated.

Keeping Children Safe in Education September 2022 states:

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

## **8 Attendance and School Transfer**

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 and monitored.

If a pupil who is/or has been the subject of a child protection plan leaves the school, the Designated Senior Lead will inform the social worker responsible for the case and transfer the appropriate records to the Designated Senior Person at the receiving school as soon as possible, or within 5 days of an in year transfer or within the first 5 days of the start of a new term to allow the new school or college to have support in place for when the child arrives

## **9 Intimate Care Procedures**

If a young child needs the assistance of an adult to change their underwear or remove their underclothes due to wetting themselves or to investigate an injury, it must be done in the presence of another adult where possible.

## **10 Entrance FOBS**

Only staff are permitted to use the entrance fobs for the doors. Under no circumstances are they permitted to give the fobs to anyone else. The Head teacher will provide new members of staff with an entrance fob on their first working day.

## **11 Visitors**

Visitors must report to the School Office and sign in using our Visitor management book. All visitors are issued with a Child Protection and Safeguarding guide.

All visitors will be given a St Vincent's Visitor's badge which they must wear on the premises at all times and return to the School Office when signing out of the building.

If the individual is a weekly visitor, they are allowed to carry out their work independently as long as they have provided the office with their cleared DBS and relevant details.

Governors follow the same procedure as all visitors when entering the school.

Governors must sign in to our Visitor Management book on arrival; they will be given a Governor badge to wear during their visit before entry. Governors are requested to return their badge to the school office where they will be signed out by a member of the School Office on their departure.

## **12 Special Educational Needs and Disability**

Children and young people with special educational needs and disabilities can face additional safeguarding challenges because:

- There may be assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration.
- Children with SEN and disabilities can be disproportionately impacted by things like bullying without outwardly showing any signs; and difficulties may arise in overcoming communication barriers.
- At St Vincent's we identify pupils who might need more support to be kept safe or to keep themselves safe by:
  - Creating Behaviour Plans.
  - Pastoral Support and SEND meetings with the Child's parents.
  - A whole school approach and awareness.

## **13 Mobile Phones**

Staff members will not use personal mobile phones or cameras when pupils are present. They may use mobile phones on school premises outside of working hours when no pupils are present. Staff may use mobile phones in the staffroom during breaks and non-contact time. Mobile phones will be safely stored and in silent mode whilst pupils are present. Staff will use their professional judgement in emergency situations. Staff may take mobile phones on trips including the forest, but they must only be used in emergencies and should not be used when pupils are present.

Mobile devices will not be used to take images or videos of pupils or staff in any circumstances.

- The sending of inappropriate messages or images *from mobile devices is strictly prohibited.*
- Staff who do not adhere to this policy will face disciplinary action. · The school will adhere to the terms of the Online Safety Policy at all times. Photographs and videos of pupils will be carefully planned before any activity with particular regard to consent and adhering to the school's Data Protection Policy.
- The DPO (Data Protection Officer) will oversee the planning of any events where photographs and videos will be taken.
- Where photographs and videos will involve LAC pupils, adopted pupils, or

pupils for whom there are security concerns, the DSL will determine the steps involved.

- The DSL will, in known cases of a pupil who is an LAC or who has been adopted, liaise with the pupil's social worker, carers or adoptive parents to assess the needs and risks associated with the pupil.
- The school will adhere to its Acceptable User Policy at all times.

Staff will report any concerns about another staff member's use of mobile phones to the DSL, following the procedures outlined in the Child Protection and Safeguarding Policy and the Allegations of abuse against Staff Policy.

## **14 Dealing with a disclosure**

If a child discloses that he or she has been abused in some way, the member of staff/ volunteer should:

- Listen to what is being said without displaying shock or disbelief. Accept what is being said.
- Allow the child to talk freely.
- Reassure the child, but not make promises which it might not be possible to keep.
- Not promise confidentiality – it might be necessary to refer to Children's Services: Safeguarding and Specialist Services.
- Reassure him or her that what has happened is not his or her fault. · Stress that it was the right thing to tell.
- Listen, only asking questions when necessary to clarify.
- Not criticise the alleged perpetrator.
- Explain to the child what has to be done next and who has to be told. · Make a written record (see Record Keeping).
- Pass the information to the Designated Senior Person or a member of the Safeguarding Team without delay.
- Options for the Safeguarding Team will then include:
- Manage support for the child internally via the school's pastoral support processes.
- An early help assessment or a referral for statutory service for example as the child might be in need, is in need or suffering or likely to suffer harm.

## **15 Contextual Safeguarding**

All staff should be aware that safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside of this environment.

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

## **16 Diversity**

Although no culture sanctions extreme harm to a child, cultural variations in child

rearing patterns do exist. A balanced assessment must incorporate a cultural perspective but guard against being over-sensitive to cultural issues at the expense of promoting the safety and wellbeing of the child.

'Fear of being accused of racism can stop people acting when they otherwise would. Fear of being thought unsympathetic to someone of the same race can change responses.

Every organisation concerned with the welfare and protection of children should have mechanisms in place to ensure equal access to services of the same quality, and that each child, irrespective of colour or background, should be treated as an individual requiring appropriate care.' - (Victoria Climbié Inquiry Report).

Research also shows that children with special needs are at an increased risk of abuse. There are fewer signs and indicators and more possible explanations. Children with communication difficulties may be especially vulnerable.

Some children and young people may be more vulnerable to abuse due to particular circumstances such as:

- Young women subject to honour-based violence (where, for instance, they have transgressed the expectations of them as young women in their family and community).
- Children at risk of harm from abuse linked to a belief in spirit possession on the part of their parent, carer or wider community.
- Girls at risk of genital mutilation (usually being taken back to their country of origin for this procedure to be carried out).
- Children being trafficked into other families from abroad.
- Girls and/or boys at risk of being forced into marriage.

## **17 Support for Staff**

Child abuse is devastating for the child and can also result in distress and anxiety for staff who become involved. We will support pupils and their families and staff by:

- Taking all suspicions and disclosures seriously.
- Nominating a link person who will keep all parties informed and be the central point of contact.
- Where a member of staff is the subject of an allegation made by a pupil, separate link people will be nominated to avoid any conflict of interest. · Responding sympathetically to any request from pupils or staff for time out to deal with distress or anxiety.
- Maintaining confidentiality and sharing information on a need-to-know basis only with relevant individuals and agencies.
- Storing records securely.
- Offering details of helplines, counselling or other avenues of external support.
- Following the procedures laid down in our whistleblowing, complaints and disciplinary procedures.
- Cooperating fully with relevant statutory agencies.

## **18 Confidentiality**

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

All staff at St. Vincent's 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.

## **19 Record Keeping and Information Sharing**

When a child has made a disclosure, the member of staff/volunteer should:

- Make brief notes as soon as possible after the conversation.
- Not destroy the original notes in case they are needed by a court.
- Promptly add concerns to the "Cause for Concern" tag on CPOMS.
- On the logging a concern tab, record the date, time, place and any noticeable non-verbal behaviour and the words used by the child.
- On the logging a concern tab, record statements and observations rather than interpretations or assumptions.
- Where applicable draw a diagram to indicate the position of any injuries or describe in detail the location, size and appearance of any injury.
- Once a concern has been added to "Cause for Concern", it should be assigned to the DSL or in their absence one of the Safeguarding team and the case will be allocated accordingly.
- No paper copies of notes or paper recordings should be retained by the member of staff or volunteer.

At St Vincent's we identify and record low-level concerns, with a focus on early intervention to address concerns that arise.

The Designated Senior Lead will ensure that all safeguarding records are managed in accordance with the Education (Pupil Information) (England) Regulations 2005.

At St Vincent's the Governors are aware of the obligations under the Data Protection Act 2018 and the GDPR places on schools and individuals to process personal information fairly and lawfully and to keep the information we hold safe and secure.

It is important that staff have due regard to the relevant data protection principles, which allow them to share (and withhold) personal information, as provided for in the Data Protection Act 2018 and the GDPR.

Further details on information sharing can be found:

- in Chapter one of Working Together to Safeguard Children, which includes a myth- busting guide to information sharing
- at Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers. The seven golden rules for sharing information will be especially useful
- at The Information Commissioner's Office (ICO), which includes ICO GDPR FAQs and guidance from the department
- in Data protection: toolkit for schools - Guidance to support schools with data protection activity, including compliance with the GDPR

## **20 Allegations of Abuse made against Teachers, Other Staff including Supply Teachers and Volunteers.**

If staff have safeguarding concerns, or an allegation is made about another member of staff (including supply staff and volunteers) posing a risk of harm to children, then they should be referred to the Head teacher immediately.

An allegation is any information which indicates that a member of staff, supply teacher or volunteer may have:

- Behaved in a way that has, or may have harmed a child.
- Possibly committed a criminal offence against/related to a child.
- Behaved towards a child or children in a way which indicates s/he would pose a risk of harm if they work regularly or closely with children.
- Behaved or may have behaved in a way that indicates that they may not be suitable to work with children.

This applies to any child the member of staff, supply teacher or volunteer has contact within their personal, professional or community life.

The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification; it is important not to make assumptions. Confidentiality should not be promised and the person should be advised that the concern will be shared on a 'need to know' basis only.

Actions to be taken include making an immediate written record of the allegation using the informant's words - including time, date and place where the alleged incident took place, brief details of what happened, what was said and who was present. This record should be signed, dated and immediately passed on to the Head teacher. The Head teacher may then refer the concern to the Local Authority Designated Officer Shrimate Bissessar Tel No: 0208 359 7899 (LADO).

If the concerns are about the Head teacher, then the Chair of Governors should be contacted in writing via the school office in a sealed envelope marked: For the Chair of Governors, Philippa Weekes stamped CONFIDENTIAL. In the absence of the Chair the Safeguarding Governor Mr Liam Tierney should be contacted.

The recipient of an allegation must not unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.

The Head teacher will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Local Authority Designated Lead. If the allegation meets any of the three criteria set out at the start of this section, contact should always be made with the Local Authority Designated Officer (LADO) without delay.

### **Volunteers and Supply Teachers**

Where the school is not the employer of an individual, they still have responsibility to ensure allegations are dealt with appropriately and they liaise with the relevant parties. It is essential any allegation of abuse is dealt with very quickly in a fair and consistent way which protects the child and supports the person who is the subject of the allegation.

Where the allegation is against a supply teacher the school must not cease to use the supply teacher without finding out the facts and liaising with the (LADO) to determine a suitable outcome. The school should discuss with the 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 Supply Agency should be fully involved and cooperate with the School, the LADO and any other professionals.

St Vincent's will inform the agency of its process for managing allegations and will refer them to this policy and the KCSiE 2020 document.

### **21 Whistleblowing**

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

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

- A criminal offence has been committed, is being committed or is likely to be committed.
- A legal obligation has been breached.
- There has been a miscarriage of justice.
- The health or safety of any individual has been endangered.
- The environment has been damaged.
- Information about any of the above has been concealed.

The NSPCC's [What you can do to report abuse](#) dedicated helpline is available as an alternative route for staff who do not feel able to raise concerns regarding child protection failures internally or have concerns about the way a concern is being handled by their school. Staff can call 0800 028 0285 – line is available from 8am

to 8pm Mon to Fri and email [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

## **22 Safer Recruitment**

Our school endeavours to ensure that we do our utmost to employ 'safe' staff by following the guidance in Safeguarding Children and Safer Recruitment in Education (pp33-36) together with the local authority and the school's individual procedures.

## **23 Recruitment and Appointment of Workers and Volunteers**

Further details can be referred to in our safer recruitment policy for staff recruitment. In recruiting and appointing workers, we will be responsible for following Barnet HR Service, Recruitment and selection guide for schools. A summary of pertinent points follows:

- We will make sure that we measure the application against the selection criteria
- All applicants need to sign a declaration stating that there is no reason why they should be considered unsuitable to work with children.
- The Rehabilitation of Offenders Act (1974) requires that people applying for positions which give them "substantial, unsupervised access on a sustained or regular basis" to children under the age of 18 must declare all previous convictions which are then subject to police checks.
- They can then only be offered a job subject to a successful police check. This includes potential employees, volunteers and self-employed people such as sports coaches. They are also required to declare any pending case against them. It is important that your applicant in this particular category understands that all information will be dealt with confidentially and will not be used against them unfairly.
- We will ask for photographic evidence to confirm the identity of the applicant e.g. their passport & proof of address.
- We will request to see documentation of any qualifications detailed by the applicant.
- We will always interview our candidates for a job.
- We will have at least two people from our organisation at the interview. panel one of whom must have successfully completed the NCSL / CWDC safer recruitment training.
- We will request two written references from previous employers. We will ask the referee to also comment on their suitability for working with children. If necessary, we will also try to follow up written references with a telephone call.
- The same principles apply to ex-pupils who have been involved with the organisation and have become volunteers.
- We will ensure that our successful applicant obtains an Enhanced Criminal Record Certificate (ECRC) from the Criminal Records Bureau. We will need to see the ECRC before we confirm them in post and record details on our Single Central Register.
- St Vincent's school will inform shortlisted candidates that online searches may be done as part of pre-recruitment checks.

## 24 Single Central Record

The Single Central record must cover all staff who work at the school and those who work in regular contact with children in the school including volunteers, supply, extra-curricular staff, kitchen staff and governors. This is the responsibility of the Office Manager – Samantha Petriccia and Admin Assistant Cathy O’Shea, and is monitored by the Head teacher and the Safeguarding Governor as part of the annual Safeguarding Monitoring programme.

The information recorded on these individuals is whether the following checks have been carried out or certificates obtained and the date on which the checks were completed: -

- An identity check
- A barred list check
- An enhanced DBS (Disclosure and Barring Services) check
- A prohibition from teaching check
- Further checks on people living or working outside the UK
- A check of professional qualifications
- A check to establish the person’s right to work in the UK

Prohibition: With effect from April 2014, it has been a statutory requirement to check on appointment that a teacher is not prohibited from teaching. A prohibition order is separate and different to the barred list (old list 99) check. The requirement to check teachers relates to appointments taken up on or after the 1 April 2014 so there is no need to retrospectively check teachers who commenced their current employment prior to 1 April 2014.

DBS: Disclosure and Barring Service. Up until November 2012 - these were called Criminal Records Bureau checks. (CRB) The DBS is responsible for administering three types of checks

- Standard: a check of the Police National Computer (PNC) records of convictions, cautions, reprimands and warnings;
- Enhanced: a check of the PNC records as above, plus other information held by the police that is considered relevant by the police; and
- Enhanced with barred list information: for people working in regulated activity with children. This adds checks of the DBS Children’s Barred List to the enhanced check.

When the DBS has completed its check of an applicant’s PNC record and, if appropriate, whether or not they are on the barred list, the relevant information will be recorded on a certificate (the DBS certificate) that is sent to the applicant. The applicant must show the DBS certificate to the Head teacher before they take up the post or as soon as practicable afterwards. If the Head teacher allows an individual to start work in regulated activity before the DBS certificate is available, then they should ensure that the individual never works alone and is appropriately supervised by a member of staff with who has the required clearance. The individual at this stage must have all the other checks listed above, including a completed separate barred list check.

A DBS renewal will be undertaken every 5 years unless there has been a change in circumstances.

External Providers will be asked to provide a list of the staff along with their DBS numbers and issue dates. We will request a photo ID for our files. The provider will be asked to confirm via email if all the necessary checks have been carried out before staff are permitted on site.

In Recruiting and Appointing Volunteers, we will be Responsible for the following:

- All long-term volunteers will be asked to provide a brief written application confirming their details, experience, etc. and will be interviewed.
- A risk assessment will be carried out.
- All volunteers with regular contact with children will have enhanced DBS checks carried out.
- All volunteers should receive an induction and be given clear written guidance on responsibilities, acceptable behaviour and limits to their role.

**Schools do not have to keep copies of DBS certificates, to fulfil the duty of maintaining the single central record.**

'External Providers will be asked to provide a list of the staff along with their DBS numbers and issue dates. We will request a photo ID for our files. The provider will be asked to confirm via email if all the necessary checks have been carried out before staff are permitted on site'.

## **25 Sports clubs and extracurricular activities**

Clubs and extracurricular activities hosted by external bodies, e.g. charities or companies, will work in collaboration with the school to effectively safeguard pupils and adhere to local safeguarding arrangements.

Paid and volunteer staff running sports clubs and extracurricular activities are aware of their safeguarding responsibilities and promote the welfare of pupils. Paid and volunteer staff understand how they should respond to child protection concerns and how to make a referral to CSCS or the police, if necessary.

All national governing bodies of sport that receive funding from either Sport England or UK Sport, must aim to meet the Standards for Safeguarding and Protecting Children in Sport.

### **25 (i) Organisations or Individuals using school premises**

As with all safeguarding allegations, organisations or individuals using our school premises should follow safeguarding policies and procedures, including informing the Local Authority Designated Officer (LADO) of any incidents.

## **26 Extended School and Off-Site Arrangements**

- We will aim to protect children from abuse and our team members from false allegations by adopting the following guidelines in line with the school's Safer Working Practices Policy and Code of Conduct:

- We will keep a register of all children attending our activities.
- We will keep a register of all staff / outside providers (both paid staff members and volunteers).
- Registers will include arrival and departure times.
- Staff will record any safeguarding concerns on CPOMS or on 'Logging Concern' form.
- Written consent from a parent or guardian will be obtained for every child attending our activities.
- Where possible staff / outside providers should not be alone with a child, although we recognise that there may be times when this may be necessary or helpful.
- Staff / outside providers should not be alone in a closed room with a child.
- Staff / outside providers may escort children to the toilet but they should not go into the toilets. They are not expected to be involved with toileting, unless the child has a special need that has been brought to our attention by the parent/guardian, and a procedure for this has been agreed.
- Physical contact should be avoided unless required for the child's safety and wellbeing or the safety and wellbeing of others. However, our team members will be discouraged from this in circumstances where an adult or child are left alone.
- All team members should treat all children with dignity and respect in both attitude, language and actions.

**27 Children potentially at greater risk of harm. Children who need a social worker (Child in Need and Child Protection Plans)** Children may need a social worker due to safeguarding or welfare needs. Children may need help due to abuse, neglect and complex family circumstances. A child 's experiences of adversity and trauma can leave them vulnerable to further harm, as well as educationally disadvantaged in facing barriers to attendance, learning and mental health.

At St Vincent's where a child has a social worker, we will be extremely vigilant and prompt when making decisions about safeguarding; for example, acting upon lateness, unauthorised absences or missing in education. We will also ensure there are provisions for pastoral and academic support alongside any statutory services.

If a child is a Child in Need or has a Child Protection Plan, the DSL or DDSL will attend all conferences to share any relevant information.

The safeguarding team is responsible for ensuring that the school participates appropriately in any Child Protection Plan.

Information will be shared with staff on a need-to-know basis but key personnel working with a child will have sufficient information to support them in their work with the child.

#### When to be concerned

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

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

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.**

Generally, in an abusive relationship the child may:

- Appear frightened of the parent/s, carers, family members 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).

## **28 Children Requiring Mental Health Support**

Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

At St Vincent's all staff are aware of their responsibilities for identifying children who may have possible mental health problems. They have been provided with the link to the document Mental Health and "Behaviour in Schools Guidance" to support them in identifying children with these needs. All concerns must be reported via CPOMS or the Logging a Concern form. The Safeguarding Team and the Senior Mental Health Lead will ensure there is support in place in school and make any necessary referrals to outside agencies.

Only appropriately trained professionals are able to make a diagnosis of a mental health problem. Staff, however, are in a position to observe children and identify any unusual behaviours and report it to the safeguarding team.

## **29 Online Safety**

As schools increasingly work online, it is essential that our children are safeguarded from potentially harmful and inappropriate online material. As such, St Vincent's must ensure appropriate filters and appropriate monitoring systems are in place both at school and for any home online learning.

### **Filtering and Monitoring children online.**

All staff will receive training in the autumn term on the expectations, applicable

roles and responsibilities in relation to filtering and monitoring. The designated safeguarding lead takes responsibility for understanding the filtering and monitoring systems and processes in place. Information on school child protection policies include information on appropriate filtering and monitoring on school devices and school networks.

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

Child criminal exploitation is defined as a form of abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into taking part in criminal activity, for any of the following reasons:

- In exchange for something the victim needs or wants
- For the financial advantage or other advantage of the perpetrator or facilitator
- Through violence or the threat of violence
- Specific forms of CCE can include:
  - Being forced or manipulated into transporting drugs or money through county lines.
  - Working in cannabis factories.
  - Shoplifting or pickpocketing.
  - Committing vehicle crime.
  - Committing, or threatening to commit, serious violence to others.

The school will recognise that pupils involved in CCE are victims themselves, regardless of whether they have committed crimes, and even if the criminal activity appears consensual. The school will also recognise that pupils of any gender are at risk of CCE.

School staff will be aware of the indicators that a pupil is the victim of CCE and act accordingly if a risk or suspected case is identified by reporting directly to the DSL and following our schools reporting procedures.

### **31 Child sexual exploitation (CSE)**

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 (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. Sexual exploitation typically involves an individual or group of adults taking advantage of the vulnerability of an individual or groups of children or young people, and victims can be boys or girls. Children and young people are often unwittingly drawn into sexual exploitation through the offer of friendship and care, gifts, drugs and alcohol, and sometimes

accommodation. Sexual exploitation is a very serious crime and can have a long-lasting adverse impact on a child's physical and emotional health. It may also be linked to child trafficking.

Indicators of child sexual exploitation may include:

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

Where CSE, or the risk of it, is suspected, staff will discuss the case with the DSL. If after discussion a concern remains, local safeguarding procedures will be triggered, including referral to MASH. The LA and all other necessary authorities will then handle the matter to conclusion. The school will cooperate as needed.

### **32 Signs and Symptoms of Female Genital Mutilation (FGM)**

Female genital mutilation refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK. FGM typically takes place between birth and around 15 years old; however, it is believed that the majority of cases happen between the ages of 5 and 8.

Risk factors for FGM include:

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

Symptoms of FGM

FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out-of-school to visit an 'at-risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM.

Indications that FGM may have already taken place may include:

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

The Serious Crime Act 2015 sets out a duty on professionals (including teachers) to notify police when they discover that FGM appears to have been carried out on a girl under 18. In schools, this will usually come from a disclosure.

Staff with teaching responsibilities have a specific legal duty to act with regards to concerns about female genital mutilation but all staff should speak to the DSL where there are concerns. Teachers must personally report to the police cases where they discover that an act of FGM appears to have been carried out; and discuss any such cases with the safeguarding lead and children's social care.

### **33 Honour-Based Abuse**

So-called 'honour-based' abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing.

Abuse committed in the context of "preserving" honour often involves a wider network of family or community and can include multiple perpetrators. It is important for staff to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. Any form of so-called HBA is abuse regardless of the motivation and should be handled and escalated as such. It is important to be vigilant especially during times leading up to holidays. Where staff are concerned that a child might be at risk of HBV, they must report their concerns to the Designated Safeguarding Lead as a matter of urgency.

### **34 Children Absent From Education**

St Vincent's school acknowledge and understand that being absent, as well as missing, from education can be warning sign of a range of safeguarding concerns, including neglect, sexual abuse, sexual exploitation or child criminal exploitation.

We monitor attendance carefully and address poor or irregular attendance without

delay. In response to the guidance in Keeping Children Safe in Education (2023) the school has:

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

We will ensure that pupils who are expected to attend the school, but fail to take up the place will be referred to the local authority. When a pupil leaves the school, we will record the name of the pupil's new school and their expected start date.

### **35 Preventing Radicalisation. Counter terrorism and Security.**

#### **PREVENT Duty**

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

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

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

Terrorism is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

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

However, it is possible to protect vulnerable people from extremist ideology and intervene to prevent those at risk of radicalisation being radicalised. As with other safeguarding risks, staff should be alert to changes in children's behaviour, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead (or deputy) making a Prevent referral.

St Vincent's Designated Safeguarding Lead and the Deputies are aware of local procedures for making a Prevent referral.

As part of the Counter Terrorism and Security Act 2015, schools have "due regard" to 'prevent people being drawn into terrorism'. This has become known as the Prevent Duty.

Where staff are concerned that children and young people are developing extremist views or show signs of becoming radicalised, they should discuss this with the Designated Safeguarding Lead.

The Designated Safeguarding Leads, Deputy Safeguarding Leads and staff have annual training about the Prevent Duty and tackling extremism and are to identify and express any concerns they may have.

We use the curriculum to ensure that children and young people understand how people with extreme views share these with others, especially using the internet. Our whole school approach prepares our pupils for life in modern Britain and creates a culture of zero tolerance for sexism, misogyny/misandry, homophobia, biphobic and sexual violence/harassment...These will be underpinned by the school/college's behaviour policy and pastoral support system, as well as by a planned programme of evidence-based RSE delivered in regularly timetabled lessons and reinforced throughout the whole curriculum.

Early indicators of radicalisation or extremism may include:

- showing sympathy for extremist causes
- glorifying violence, especially to other faiths or cultures
- making remarks or comments about being at extremist events or rallies outside school
- evidence of possessing illegal or extremist literature
- advocating messages similar to illegal organisations or other extremist groups
- out of character changes in dress, behaviour and peer relationships (but there are also very powerful narratives, programmes and networks that young people can come across online so involvement with particular groups may not be apparent.)
- secretive behaviour
- online searches or sharing extremist messages or social profiles
- intolerance of difference, including faith, culture, gender, race or sexuality graffiti, art work or writing that displays extremist themes.
- attempts to impose extremist views or practices on others

- verbalising anti-Western or anti-British views
- advocating violence towards others

### **36 Child on Child Abuse (includes Sexting and Up skirting)**

Children may be harmed by other children or young people. Staff will be aware of the harm caused by bullying and will use the school's anti-bullying procedures where necessary. However, staff recognise that children can abuse their peers and should be clear about the school's policy and procedures regarding peer on peer abuse. All peer on peer abuse is unacceptable and will be taken seriously. Staff are aware that technology is a significant component in many safeguarding and wellbeing issues, and that children are at risk of online abuse (as well as face to face) and are aware that children can abuse their peers online. All staff have a duty of care and should be prepared to respond to any disclosures a pupil could willingly or hesitantly come forward to make.

Child on child abuse can take many forms, including:

- physical abuse such as biting, hitting, kicking or hair pulling
- Up skirting – taking a picture under a person's clothing without their permission.
- sexually harmful behaviour/sexual abuse such as inappropriate sexual language, touching, sexual assault or rape
- sexting, including pressuring another person to send a sexual imagery or video content
- teenage relationship abuse - defined as a pattern of actual or threatened acts of physical, sexual or emotional abuse, perpetrated against a current or former partner
- initiation/hazing - used to induct newcomers into an organisation such as sports team or school groups by subjecting them to a series of potentially humiliating, embarrassing or abusing trials which promote a bond between them.
- prejudiced behaviour - a range of behaviours which causes someone to feel powerless, worthless or excluded and which relates to prejudices around belonging, identity and equality, in particular prejudices linked to disabilities, special educational needs, ethnic, cultural and religious backgrounds, gender and sexual identity.

All allegations of child on child abuse should be passed to the DSL immediately. They will then be investigated and dealt with in accordance with our school procedures and acted upon in accordance with the guidance set out in Keeping Children Safe in Education (2021). At St Vincent's, we will support the victims and perpetrators of child on child abuse by providing them with support from the Mental Health Lead after a full investigation by the Safeguarding Team. This may also lead to a referral to an outside agency such as CAMHS.

## Sexting

In cases of 'sexting' (also known as youth produced sexual imagery) we follow guidance given to schools and colleges by the UK Council for Child Internet Safety (UKCCIS) published in August 2016: 'Sexting in schools and colleges, responding to incidents, and safeguarding young people'.

## **37 Domestic Abuse**

All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Domestic abuse can be psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse). All of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn."

Staff must upload any concerns immediately onto CPOMS if they have any suspicions of a child who may be witnessing or experiencing domestic abuse.

## **38 Private Fostering Arrangement**

A private fostering arrangement is one that is made privately (without the involvement of a local authority) for the care of a child under the age of 16 years (under 18, if disabled) by someone other than a parent or close relative, in their own home, with the intention that it should last for 28 days or more. A close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins.

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

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

Schools have a mandatory duty to report to the local authority where they are aware or suspect that a child is subject to a private fostering arrangement.

Although schools have a duty to inform the local authority, there is no duty for anyone, including the private foster carer or social workers to inform the school. However, it should be clear to the school that has parental responsibility. School staff should notify the designated safeguarding lead when they become aware of private fostering arrangements. The designated safeguarding lead will speak to the family of the child involved to check that they are aware of their duty to inform the LA. The school itself has a duty to inform the local authority of the private fostering

arrangements. On admission to the school, we will take steps to verify the relationship of the adults to the child who is being registered.

### **39 Forced Marriage**

A “forced marriage” is defined as a marriage that is 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 the marriage. Forced marriage is classed as a crime in the UK.

As part of HBV, staff will be alert to the signs of forced marriage including, but not limited to, the following:

- Becoming anxious, depressed and emotionally withdrawn with low self-esteem.
- Showing signs of mental health disorders and behaviours such as self-harm or anorexia.
- Displaying a sudden decline in their educational performance, aspirations or motivation.
- Regularly being absent from school.
- Displaying a decline in punctuality.
- An obvious family history of older siblings leaving education early and marrying early.

If staff members have any concerns regarding a child who may have undergone, is currently undergoing, or is at risk of, forced marriage, they will speak to the DSL or any member of the Safeguarding Team and local safeguarding procedures will be followed – this could include referral to MASH, the police or the Forced Marriage Unit.

The references to forced marriage guidance has been clarified with a link to [https://www.gov.uk/guidance/forced-marriage.\(KCSEI 2021\)](https://www.gov.uk/guidance/forced-marriage.(KCSEI 2021))

### **40 County Lines Criminal Activity and Serious Violent Crime**

County lines criminal activity refers to drug networks or gangs grooming and exploiting children to carry drugs and money from urban areas to suburban areas, rural areas and market and seaside towns. In some cases, children are known to be exposed to techniques such as plugging where drugs are concealed internally to avoid detection.

All staff need to know the indicators that may signal that children are at risk from, or are involved with, serious violent crime. This may be trafficking for the purpose of transporting drugs. Indicators are:

- Unexplained gifts/new possessions - these can indicate children have been approached by/involved with individuals associated with criminal networks/gangs.
- Increased absence from school.

- Change in friendship/relationships with others/groups.
- Significant decline in performance.
- Signs of self-harm/significant change in wellbeing.
- Signs of assault/unexplained injuries.

Staff members who suspect a pupil may be vulnerable to, or involved in, this activity will immediately report all concerns to the DSL or any member of the Safeguarding Team.

The Safeguarding Team will consider referral to the National Referral Mechanism on a case-by-case basis.

Indicators that a pupil may be involved in county lines activity include the following:

- Persistently going missing or being found out of their usual area.
- Unexplained acquisition of money, clothes or mobile phones.
- Excessive receipt of texts or phone calls.
- Relationships with controlling or older individuals or groups.
- Leaving home without explanation.
- Evidence of physical injury or assault that cannot be explained.
- Carrying weapons.
- Sudden decline in school results.
- Becoming isolated from peers or social networks.
- Self-harm or significant changes in mental state.
- Parental reports of concern.

All staff have a requirement to look out for the indicators which may show that children are at risk from or involved with serious violent crime. Schools have a duty and responsibility to protect their pupils. Schools to focus on children being pulled into criminal networks and gangs. Specific details of this can be found in the Keeping Children Safe in Education 2021 document.

#### **41 Pupils with Family Members in Prison**

Pupils with a family member in prison will be offered pastoral support as necessary. They will receive a copy of '[Are you a young person with a family member in prison](#)' from Action for Prisoners' Families where appropriate and allowed the opportunity to discuss questions and concerns.

#### **42 Pupils Required to give Evidence in Court and Police Investigations.**

Pupils required to give evidence in criminal courts, either for crimes committed against them or crimes they have witnessed, will be offered appropriate pastoral support.

We will ensure pupils will be provided with the booklet '[Going to Court](#)' from HM Courts and Tribunals Service (HMCTS) where appropriate and allowed the opportunity to discuss questions and concerns.

When a pupil is part of a police investigation or enquiries under section 47 of the Children Act 1989 the DSL will ensure the child has an appropriate adult present to advise and assist the child. Further information can be found in the statutory guidance - PACE Code C 2019

### **43 Homelessness**

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The designated safeguarding lead and deputies should be aware of details and referral routes to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity. This does not replace a referral into children's social care where a child has been harmed or is at risk of harm.

### **44 Alternative Provision**

The school will remain responsible for a pupil's welfare during their time at an alternative provider.

When placing a pupil with an alternative provider, the school will obtain written confirmation that the provider has conducted all relevant safeguarding checks on staff.

### **Monitoring and Evaluation of this policy**

The Curriculum Committee will, in consultation with the Headteacher/Deputy Headteacher monitor and evaluate the implementation of this policy. It will be reviewed at least every year to ensure it reflects current practice.

Member of staff with Lead Responsibility for this policy:	Marie Tuohy and Safeguarding Team
Date of Policy:	September 2023
Date for Review:	September 2024

## **INDICATORS OF HARM**

### **PHYSICAL ABUSE**

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

#### *In relation to Female Genital Mutilation (FGM)*

Female genital mutilation comprises all procedures involving partial or total removal of the external female genitalia or any other injury to the female organs for non-medical reasons.

The term female genital circumcision or cutting are not appropriate terms. The most widely used label is Sunnah.

There are four types of FGM. They increase in severity with each level. There are many side effects and complications both short and long term.

FGM is practiced across all social classes and many different religions. 30 Million girls worldwide are at risk of FGM, from a few days old to just before marriage.

Reasons for FGM:

- Culture and Tradition: "everyone does it, why wouldn't I?" · Religion: seen as a religious obligation
- Purity, chastity & marriage: families ensure daughters remain chaste · Honour: duty of women for family honour.
- Aesthetics', hygiene, health: normal vulva considered unclean · Gender identity: what is expected of a 'good woman'

24,000 girls are at risk in the UK. FGM is illegal in the UK. It is everyone's responsibility to look out for signs of FGM.

Signs include:

- Taking a long time in the toilet, it can take up to 15 minutes to urinate.
- Children requesting to be excused from PE/swimming
- Chronic period pain

#### Physical Abuse 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
- Petechial 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 caused in major trauma such as in a road traffic accident, a severe shaking injury, a fall 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 diffused 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.

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

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

The following points are also worth remembering:

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

### Scars

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

- Emotional/behavioural presentation
- Refusal to discuss injuries

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

### Indicators in the parent

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

### Indicators in the family/environment

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

## **EMOTIONAL ABUSE**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional

development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

### **In Relation to Child Exploitation & Child Trafficking**

"If you see something, say something". We are all collectively responsible for Child Protection, not just the designated leads in school. Grooming and trafficking does not only mean moving from city to city or city to country but can be from one area to another. Where a child is taken away from their home area and moved elsewhere for the purposes of abuse or exploitation is trafficking.

Some perpetrators can spend up to a year grooming a young person, this means that they are emotionally attached to the abuser and may fail to see or recognise what is happening to them.

The majority of children are now contacted via SOCIAL MEDIA. It is really important to realise that this is not a virtual world to many children, but actually it is their reality. Children who are at home gaming whilst their parents are out at work or busy elsewhere in the home can be at risk, there should always be adult supervision.

Child exploitation is all about power and balance. The person that holds the power can often get children or young people to do what they want.

We need to be aware of the harm caused by sexting; this is not a secondary problem. The age of those involved is getting lower and lower. Be aware for signs of self-harm, blackmail, depression.

Boys are especially vulnerable; they can often get themselves into difficult situations.

Witchcraft is another form of control and power and young people can be led to believe that bad luck will be brought upon their families.

Young people will normally only tell if they have been asked. Communities need to get involved, many boxing and football clubs are working with the National Working Party to raise awareness of child exploitation.

### Emotional Abuse 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
- 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
- Low self-esteem
- Air of detachment – 'don't care' attitude
- Social isolation – does not join in and has few friend
- 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 surgeries in parents and/or siblings of the family
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

### **NEGLECT**

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

substance abuse. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others.”

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.

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

### **SEXUAL ABUSE**

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

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

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

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

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

**APPENDIX 2**  
**Safeguarding & Child Protection Procedures**

**Confirmation of Receipt of Safeguarding Policy**

Name \_\_\_\_\_

Date of joining school: \_\_\_\_\_

Post: \_\_\_\_\_

Date of induction: \_\_\_\_\_

Name and designation of staff member responsible for  
induction:

\_\_\_\_\_

- I confirm that I have received and read the school child protection policy.
- I have been made aware of my duty to safeguard and promote children’s welfare.
- The procedure for reporting concerns about a pupil has been explained to me.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

***Please sign and return this form to the designated senior***

***person:***

\_\_\_\_\_

**APPENDIX 3**

**KEEPING CHILDREN SAFE SEPTEMBER 2020**

## **Disqualification by Association**

A change in the law means that Disqualification by Association will only apply on domestic premises. However, Disqualification under the Childcare Act 2006, still applies to staff themselves.

Schools must no longer ask about cautions or convictions of someone living or working in their household.

### Main Points

Disqualification by Association now only applies in domestic settings, not schools. Disqualification under the Child Care Act still applies to staff themselves who work in child care capacity, whether paid, volunteer or are on work placements.

Relevant staff are those working in child care, or in a management role because they are: working with reception age children at any time; or working with children older than reception until age eight, outside school hours.

*Keeping Children safe in Education 2020 states "For staff who work in childcare provision or who are directly concerned with the management of such provision, the school needs to ensure the appropriate checks are carried out to ensure that individuals are not disqualified under the Childcare (Disqualification) regulations 2009"*

As a means of making staff aware of their duty to provide such information we will make staff aware of the changes made in the appendix of this Safeguarding Policy which will be emailed to them individually. The Office Manager will record the date all staff are informed.

The Office Manager will review any historic data collected and destroy any information which is no longer required. She will also identify and record which staff are covered by Disqualification under the Childcare Act 2006 (including volunteers and people on work placements).

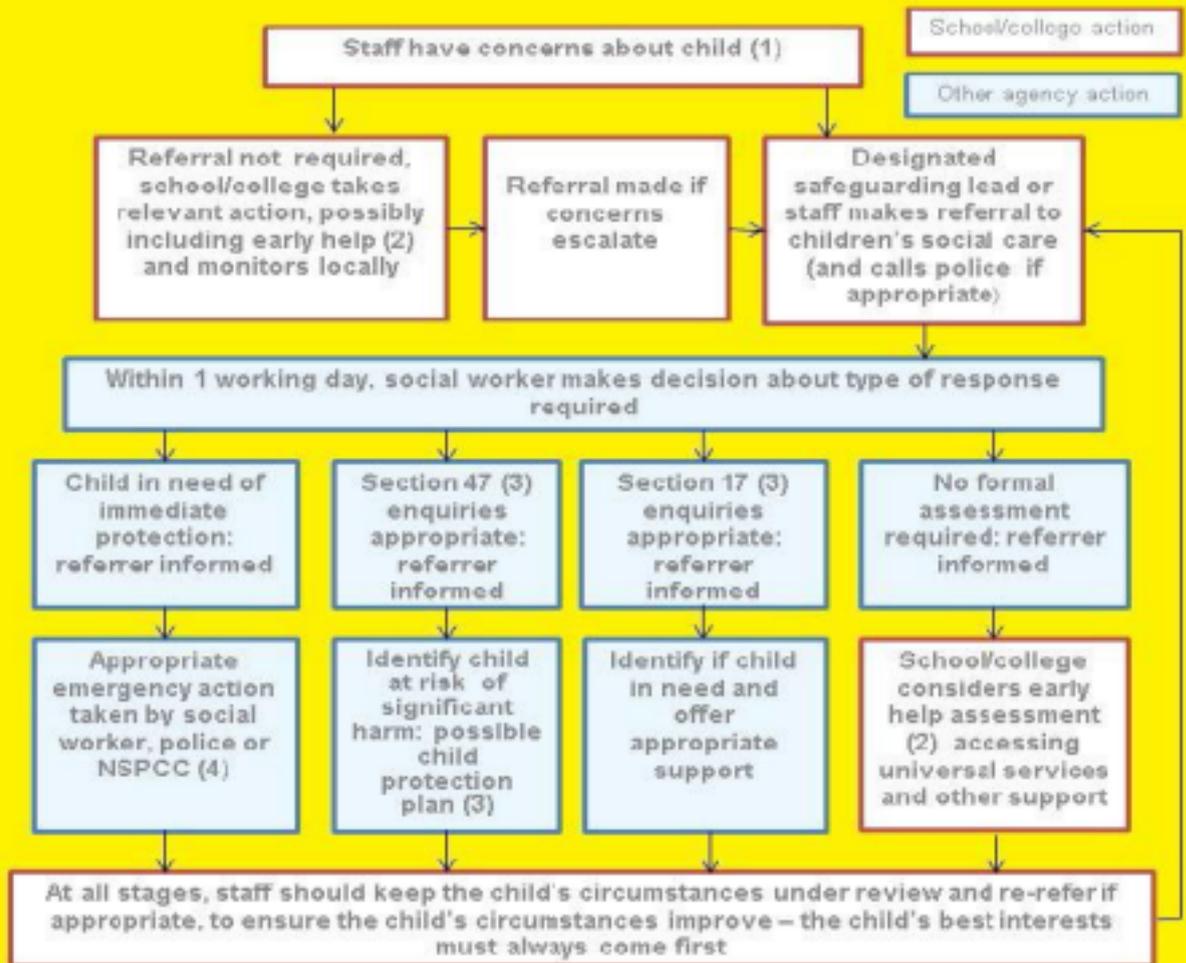
The Head teacher will ask relevant staff to self-declare that they are not disqualified under the Childcare Act 2006. She will also remind staff about the expectation to inform the school where their relationships and associations, both within and outside of the workplace (including online), may have implications for the safeguarding of children in the school. Staff will be asked in an email and at the annual Safeguarding training to inform the school if their circumstances change. These self-declarations will be kept on the Single Central Register.

*Further government guidance can be found here*

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

**APPENDIX 4**  
**CONCERN AND DISCLOSURE FLOW CHART**  
(Keeping Children Safe in Education Document)

## Actions where there are concerns about a child



### 46. Essential Contacts

Name & Role	Contact Details
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School designated lead	Marie Tuohy
Head teacher	Marie Tuohy
Nominated Safeguarding Governor	Liam Tierney
Deputy designated lead	Elizabeth Wolfenden
Chair of Barnet Safeguarding Partnership	Simon Corkhill 020 8359 6056
Local Authority Human Resources	Pauline Broadhurst 020 8359 7899
Children's Services MASH	0208 359 4066
Crime stoppers	0800 555 111
CEOP	<a href="http://www.ceop.gov.uk">www.ceop.gov.uk</a>
LADO	Shrimatie Bissessar 020 8359 4528
Schools Safeguarding and Exclusion Children Missing in Education-EWT	Jane Morris 020 8359 7288 Mo Hooper 0208 359 78
NSPCC Helpline	0800 800 500
NSPCO Whistleblowing helpline	0800 028 0285