# **Redbridge High School**



# **Child Protection Policy**

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# **Liverpool Schools' Safeguarding Charter**

#### All settings providing education to Liverpool children will:

- Work in partnership with other agencies to safeguard and promote the welfare of all children in keeping with the LSCB's 'Levels of Need Framework' to secure improved outcomes for young people
- Ensure that safer recruitment practices and safeguarding policies and procedures set out a culture of vigilance and challenge
- Provide induction and regular training that enable all adults to recognise signs of abuse and neglect; act in the interests of the child and maintain an attitude 'it could happen here'.
- Work collaboratively with other agencies to promote early help for young people and families before their needs escalate to a point where intervention would be needed via a statutory assessment.
- Challenge ourselves and others to ensure actions are completed in a timely way and press for reconsideration if the situation does not improve.
- Quality assure all safeguarding practices including maintaining support and oversight of the Designated Safeguarding Lead and Safeguarding Team, their actions and decisions and record keeping.
- Ensure all adults working with young people follow an agreed code of conduct that promotes safe working practices and makes responsibilities and expectations clear, including the understanding that anyone can make a referral.
- Complete any actions arising from the Local Authority's 175 Safeguarding Audit in order to ensure policies and procedures follow LSCB, Local Authority and statutory guidance.
- Implement any learning arising from serious case reviews, for example the need to listen and respond to the views of children, especially when assessing their needs.
- Provide students with a curriculum which promotes their safeguarding and enables them to maintain healthy relationships.

#### Section 1: Guidance for staff and volunteers

## 1.1 Definitions of abuse and neglect as defined by the DfE:

**Abuse**: 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. They may be abused by an adult or adults or another child or children.

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

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

**Sexual abuse**: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving 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.

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

# 1.2 Groups of children who are vulnerable to abuse and neglect

It is important to recognise that some children may be more vulnerable to abuse including:

- children with special educational needs
- children with disabilities
- children in care (looked after children)
  - children living in chaotic homes including where there is domestic violence,
     substance misuse or mental health concerns
- young carers
- · asylum seekers
- those vulnerable to prejudice and discrimination, isolation, social exclusion
  - those at risk of female genital mutilation (FGM), forced marriage and other forms of honour based violence
- children living away from home or moving home frequently
- children vulnerable to being bullied or to bullying others

# 1.3 Indicators of abuse and neglect

The following are possible signs of abuse or neglect and should be reported to the Designated Safeguarding Lead. It is important to consider all physical and behavioural changes in children. A child may:

- ask you if you will keep a secret before offering to tell you something
- talk about a friend who has a problem
- have unexplained or untreated injuries
- be severely bruised or injured
- talk of being in pain or discomfort
- be unwilling to change in front of other children for P.E.
- be unwilling to discuss injuries, marks or bruises
- always covering arms and legs even in hot weather
- be fearful of medical help or parents being contacted
- be left in unsafe situations or be involved in risk taking behaviour
- be afraid of parents or carers and unwilling to go home
- be fearful of particular adults
  - flinch when approached
  - continually run away
  - have sudden behavioural changes including becoming aggressive, irritable, lethargic or withdrawn
  - have low self-esteem, self-harm or feel suicidal
  - display extreme anger or sadness or depression, display aggression or attention seeking behaviour
  - have sudden changes in weight (loss or gain) or eating disorders
  - scavenge or scrounge food
  - be constantly hungry or tired
- have poor social relationships or be socially isolated
- display sudden speech disorders
- have punctuality or attendance issues including unexplained attendances
  - be frequently unclean, inappropriately or inadequately dressed
  - experience being constantly 'put down', insulted, sworn at or humiliated
  - display sexualised behaviour seemingly inappropriate for their age including sexualised behaviour towards others
  - present artwork, play or write displaying sexual themes
  - take on a parental role within the home
  - have unexplained amounts of money
  - take about terrifying dreams
  - soil or wet themselves or regress to other childhood behaviours including thumb sucking
  - begin or revisit rocking behaviour
  - have urinary infections
  - have soreness or bleeding in genital or anal areas or in the throat
  - misuse drugs or alcohol

# 1.4 What to do during a disclosure

#### During a disclosure:

- Stay calm, providing a safe place for the child to disclose
- Listen to the child without interrupting them
- Avoid becoming upset
- Give the child adequate physical space

## Things to say to a child during a disclosure:

- "What's happened is not your fault"
- "I'm glad you told me"
- "I am sorry this happened to you"
- "I will support you"

#### Never:

- promise to keep a secret
- · express shock or embarrassment
- question the truth of what is being said
- ask leading or probing questions
- take photographs of a mark or injury
- ask the child to write a statement (however the child may ask to write something down if they are embarrassed)
- ask a child to sign a statement you have written
- express anger towards abuser

#### **Following the Disclosure**

- Leave the child with another adult whilst you report your concerns immediately to the Designated Safeguarding Lead
- Record your concerns on the school's child protection/safeguarding concern form
- Use the child's own language and exact words and write down what the child tells you e.g. 'The child told me...'
- Differentiate between fact, opinion, interpretation, observation and allegation.
- Be accurate e.g. 'She showed me a burn mark on her right forearm. She told me her mother did this with a cigarette'
- Opinions should be clearly stated e.g. 'I thought this might be because...In my opinion...'
- Note down any witnesses or anyone who might corroborate your record
- Record the date and time of the incident and add your signature to the record.
- Place the child protection/child welfare form in the hand of the Designated Safeguarding Lead, Head Teacher or other senior member of staff
- Consider how best to manage your own feelings
- Following reporting your concerns remember that the disclosure not be discussed with other staff without the agreement of the Designated Safeguarding Lead

#### 1.5 Child Protection and Child Welfare Flowchart

If a member of staff or volunteer has concerns about a young person's welfare because the child has disclosed abuse towards them, or the member of staff is concerned by physical or behavioural changes in the child which may indicate abuse or neglect, they must report their concerns (without investigating the matter) immediately to the Designated Safeguarding Lead or a senior member of staff. Consideration should be given for the need to immediately protect the child by contacting the police or ensuring emergency medical treatment. The member of staff or volunteer should record their concerns in writing, describing exactly what the child has said and/or what they have observed. (All adults within the school must follow the School's Code of Conduct and attend regular safeguarding training. All adults must read Part 1 of the DfE guidance Keeping Children Safe in Education 2014).

Allegations or concerns about an adult working within the school should be shared with the headteacher or Designated Safeguarding Lead. Concerns about the headteacher should be reported to the Chair of Governors or Local Authority Designated Officer. (tel 0151 233 3700).



The Designated Safeguarding Lead will draw upon Liverpool Safeguarding Children's Board: 'Responding to Need Guidance and Levels of Need Framework' (www.liverpoolscb.org/) and ring Careline to share the school's concerns. This may lead the school to make a written referral to Children's Services. The Designated Safeguarding Lead will agree with Careline (tel 0151 233 3700) how the parent/carers will be informed, if that is appropriate. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Anybody can make a referral in exceptional circumstances such as an emergency or there is a genuine concern that appropriate action has not been taken. (tel 0151 233 3700). Given that 'concerns should always lead to help for the child at some point' the school should undertake, with other agencies, an Early Help Assessment when the child's level of need has not met the threshold for statutory assessment.

# 1.6 Child protection / child welfare concern form

Concerns should be reported **immediately** to the Designated Safeguarding Lead. Following verbally reporting your concerns complete this form and hand it to the Designated Safeguarding Lead. The school's child protection procedures should always be followed. It is important not to investigate concerns but for the school to report them to childrens services (and when necessary police).

Name of Student:						
Staff Name (printed):						
Signed:						
Date:	Time:					
Summary of disclosure or concern:						
(Differentiate between facts and opinions, use the child's own words)						

# **Actions taken and recorded by the Designated Safeguarding Lead:**

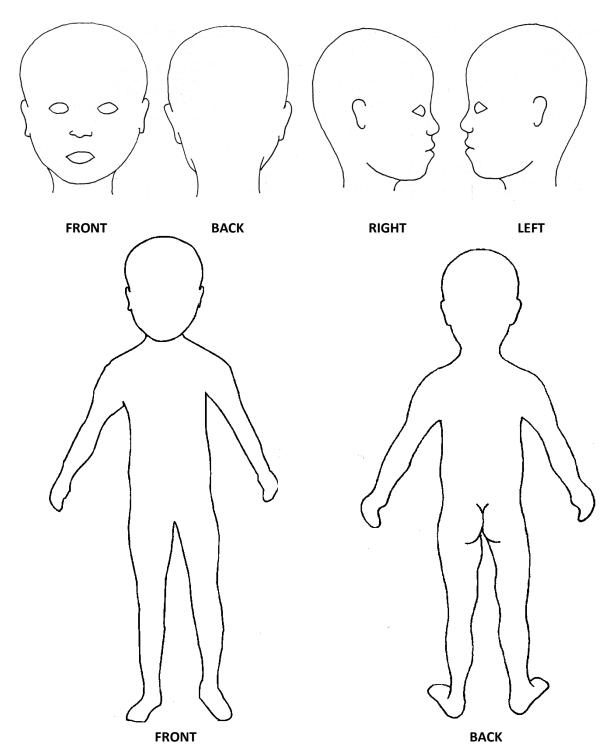
(include any names and contact details of those spoken to, the views of the child)

# **BODY MAP**

# Child' Name:

# Date and time of recording:

# Person completing this body map:



# 1.7 Specific guidance in relation to forced marriage, female genital mutilation, child sexual exploitation, children with disabilities and neglect

# Forced Marriage (FM) and Honour Based Violence (HBV) guidance

Cases of forced marriage and honour based violence can involve complex and sensitive issues. It is important to remember the 'Once Chance Rule' which reminds us to believe them and act immediately to protect them as we may only get one opportunity. Schools will find the following information will support them to understand their responsibilities. Schools should always contact Careline if they believe a child is at risk of harm or in significant need. They should contact police to provide immediate protection to the child.

**The Law:** Forcing someone to marry against their will is now a criminal offence. The maximum penalty for the new offence of forced marriage is seven years imprisonment. Law enforcement agencies will also be able to pursue perpetrators in other countries where a UK national is involved under new powers defined in legislation. The new criminal offences will work alongside existing civil legislation (Forced Marriage Protection Orders - FMPOs) allowing victims to pursue a civil or criminal option.

#### **Definitions:**

**An Arranged Marriage:** Whilst both the spouses' families take a lead role to arrange the marriage the choice to accept the arrangements remains with the individuals themselves.

**A Forced Marriage:** Duress is often involved to force someone in to marriage against their wishes. This can include someone with learning difficulties who is unable to consent. Duress can include physical, financial, sexual or emotional pressure.

**Honour Based Violence:** 'Honour' based violence is a crime which is committed to protect or defend the perceived honour of the family and/or community.

Both Forced Marriage and Honour Based Violence is a fundamental abuse of someone's human rights.

# What are the justification behind Forced Marriage and so called honour killings/violence?

- As a response to a perceived "dishonour"
- Controlling unwanted behaviour and sexuality
- Preventing unsuitable relationship outside, for example ethnic, culture, religious or caste group
- Strengthen family links
- Ensuring land, property and wealth remain within the family
- Cultural/religious belief
- Issues related to immigration
- Peer and family pressure

**Communities: Anyone** can be at risk of forced marriage and honour based violence, but some communities are more at risk than others including Pakistan, Bangladesh, India, Africa, Turkey, Afghanistan, Iran and Iraq.

If you become aware of cases of forced marriage and honour based violence consider the following advice. Do the following:

- See them immediately in a secure and private place where the conversation cannot be overheard.
- See them on their own even if they attend with others
- Consider the need for immediate protection and placement away from family
- Refer them to Careline (follow the Liverpool forced marriage protocol on www.liverpoolscb.org)
- Remember if a child is at risk you cannot keep a secret but must refer them to Careline and Police

**Never:** mediate with the family, fail to report, under estimate the risk, use a family member as an interpreter or send the child way

#### **Useful Contacts:**

#### **National Support**

- Forced Marriage Unit 0207008 015,fmu@fco.gov.uk
- Child Helpline: 0800 1111 www.childline.org.uk
- Karma Nirvana Helpline: 0800 5999 247
- NSPCC:080 8800 5000
- Iranian/Kurdish Women's Right Organisation 0207 9206460

#### **Local Contacts:**

- Merseyside Forced Marriage & HBV Protocol: www.liverpoolscb.org
- Savera Liverpool (DAS for BAMER Communities): 07716 266 484
- http://www.saveraliverpool.co.uk/
- Amadudu (BME Refugee): 0151 734 0083
- South Liverpool DVS; 0151 494 2222
- LDAS 0151 263-7474
- Irish Community Care: 0151 237 3987
- ABC DVP: 0151 482 2484
- WHISC: 0151 707 1826
- Liverpool Domestic Abuse service: 0151 263 7474

#### **Useful Words**

You may overhear some of the following words which may raise your concerns. Equally knowledge of these words may build trust with the victim.

Izzat - mainly used in South Asian families meaning Honour

**Namus** – used very often in Middle Eastern Context – interested as honour as it directly relates to women's virtue and overall sexual integrity

**Ird** (Bedouin) – code of honour for women, linked to sexual integrity "protected by men" and linked to Sharaf

**Sharaf** – general honour code which includes responsibility for protecting Ird

**Sharam** – used mainly in South Asian communities meaning 'shame'

**Diss** – used mainly in Western urban context taken from the meaning 'disrespect'

#### **Female Genital Mutilation:**

The World Health Organisation (WHO) defines 'Female Genital Mutilation', also referred to as 'Female Genital Cutting' and 'Female Circumcision' as: all procedures that involve partial or total removal of the external female genitalia or other injury to the female genital organs for non medical reasons.

According to the WHO, between 100 and 140 million girls and women worldwide have undergone some sort of FGM and each year a further 2 million girls are at risk.

The International Centre for Reproductive Health estimates that in the UK 279,500 women have undergone FGM, and approximately 22,000 girls under the age of 18 are at risk each year.

FGM is practised in more than 28 countries across Africa, Asia and the Middle East Burkina Faso, Djibouti, Egypt, Eritrea, Ethiopia, The Gambia, Guinea, Liberia, Mali, Mauritania, Sierra Leone, Somalia and Sudan. UK communities most at risk include Kenyan, Somali, Sudanese, Sierra Leoni, Egyptian, Nigerian and Eritrean as well as non-African communities including Yemeni, Afghani, Kurdish, Indonesian and Pakistani.

#### **National Legislation**

In England, Wales and Northern Ireland all forms of FGM are illegal under the Female Genital Mutilation Act 2003. A person is guilty of an offence if he/she, excises, infibulates or otherwise mutilates the whole or any part of a girl's labia majora, labia minora or clitoris except for operations performed on specific physical and mental health grounds by registered medical or nursing practitioners. It is also an offence to assist a girl to mutilate her own genitalia. FGM is an offence which extends to acts performed outside of the UK and to any person who advises, helps or forces a girl to inflict FGM on herself. Any person found guilty of an offence under the Female Genital Mutilation Act 2003 will be liable to a fine or imprisonment of up to 14 years, or both.

FGM is considered to be a form of child abuse as it is illegal and is performed on a child whom is unable to resist or give informed consent.

#### At what age is FGM carried out?

The age at which FGM is carried out varies greatly. It can be carried out any time from shortly after birth up to adulthood. Girls between 4 and 14 years of age are most at risk. In adults FGM may be carried out immediately before marriage and immediately after child birth.

FGM is usually carried out by an older woman in a practicing community, for whom it is a way of gaining prestige. It can also be a lucrative source of income.

The procedure is normally carried out by several women unexpectedly approaching a girl and holding her down on the floor. Hazards include lack of medical expertise, lack of anaesthesia and lack of hygiene. Instruments used can include unsterilized household knives, razor blades, broken glass and stones.

#### Types of FGM

FGM has been classified by the World Health Organisation into 4 types:

- Type 1 (Sonna) Cutting away the clitoral hood, with or without the removal of the clitoris
- Type 2 (Excision) Removal of the clitoris with partial or total removal of the labia minora
- Type 3 (Infibulation) Removal of the clitoris, labia minora and labia majora with stitching of the vaginal opening

Type 4 -Involves tribal cutting or burning of the vaginal orifice or the use of corrosives to narrow the vaginal passage. This may include pricking, piercing, incision and scraping.

#### Justifications used by those who practice FGM

In reality, there is no social, moral or religious justification for FGM. However, those who support FGM may use the following reasons or 'myths' to try to explain the practice. They may say FGM:

- Is part of being a woman;
- Is a rite of passage;
- Gives a girl social acceptance, especially for marriage;
- Gives the girl and her family a sense of belonging to the community;
- Fulfils a religious requirement mistakenly believed to exist;
- Perpetuates a custom / tradition;
- Helps girls and women to be clean and hygienic;
- Is mistakenly believed to make childbirth safer for the infant.

HM Government (2011) Female genital mutilation: multi-agency practice guidelines indicate:

#### Signs, symptoms or indicators of a young person at risk of FGM

- Being withdrawn by parents/carers from sex education lessons
- A child talking about a special ceremony
  - A family arranging a long holiday abroad
  - Knowledge that an older sibling has undergone FGM
  - A child belonging to one of the high risk communities listed above
- A young person talking of getting ready for marriage, becoming a women or being
  out
  - A young person becoming withdrawn and anxious

 A young person being concerned about a forthcoming holiday or a visit by a relative

#### Signs, symptoms or indicators of children who may have been subject to FGM

- Prolonged absence from school
- Changes in behaviour following a holiday e.g. becoming more secretive
- Becoming more withdrawn or subdued or isolating themselves from others
- Looking uncomfortable or finding it difficult to sit still
- Complaining about pain in their groin
- Menstrual problems or bladder/urinary tract infections
- Talking about having to keep a secret
- Avoiding physical activity

Professionals should be aware of the ONE CHANCE RULE whereby a young person may say something that suggests they are at risk.

#### What schools should do:

- Listen to the child alone
- Contact Careline and the police without delay

#### What schools should NEVER do:

- Delay sharing information
- Attempt to mediate with the family or the community
- Inform the parents they have made a referral without the consent of police and Children's Services

**Remember:** The parents may believe they are doing the right thing by their child and informing them may put the child at risk because they may act to silence her or bring forward their plans to take her abroad or undertake FGM.

We must remember that FGM is gender based violence and not a cultural practice or celebration of a girl's development.

NSPCC FGM Helpline:0800 028 3550 Email: fgmhelp@nspcc.org.uk

The Same services listed at the end of the Forced Marriage, can be contacted for support and advice for FGM.

# **Child Sexual Exploitation**

Schools should follow the Pan-Merseyside protocol and pathway available on the LSCB website: <a href="http://www.liverpoolscb.org/">http://www.liverpoolscb.org/</a>

Child Sexual Exploitation is largely a 'hidden problem'. The law defines anyone below the age of 18 as children. Legally a child below the age of 13 is not capable of consenting to sex. Whilst the legal age that someone can consent to sex is 16 years of age, consensual non-exploitative sex between children of similar age below 16 is unlikely to lead to a prosecution. However it is clear children are unable to freely consent to sexual activity when threatened by violence, when there is an imbalance in power or when they are under the influence of alcohol or drugs. Sadly there is evidence that too many professionals and communities describe the victims as making 'life style choices by engaging in risky behaviour' and even 'promiscuous', 'prostituting themselves' or 'liking the glamour'. Here there is a clear failure to acknowledge the initial manipulative grooming process or the threats or actual violence. Unfortunately these children's own challenging behaviours and criminal activities are seen ahead of the underlying causes, even when sexual exploitation is recognised. It is evident that poor assessments do not always lead to sexual exploitation even being identified. In addition, isolation from friends and family and a growing dependence on abusers is a characteristic of child exploitation cases.

#### A definition of sexual exploitation:

'Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.' National Working Group

Research by Barnardo's (Puppet on a String: The urgent need to cut children free from sexual exploitation, 2011) indicates that there are different forms of sexual exploitation:

1. Inappropriate relationships which usually involve an older perpetrator who has power or control over the young person (physical, emotional or financial). The young person may believe they are in a loving relationship or may simply be expected to have sex for food and shelter.

- 2. The 'Boyfriend' model is where the perpetrator grooms the young person to believe they are in a relationship before coercing or forcing them to have sex with friends and others. Barnardo's report a rise in this type of peer activity which is sometimes linked to gang activity.
- 3. Organised/networked sexual exploitation or trafficking. This is undertaken by networks of serious organised criminals who organise sex parties and prostitute young girls and boys. This may involve girls being traded and moved around the country. Young boys and girls will also be forced into recruiting other victims.

#### Barnardos provides the following key guidance:

#### Who is most at risk?

Young people who are socially, emotionally and economically vulnerable are at particular risk of sexual exploitation.

#### The following are typical vulnerabilities in children prior to abuse:

- Living in a chaotic or dysfunctional household (including parental substance use, domestic violence, parental mental health issues, parental criminality).
- History of abuse (including familial child sexual abuse, risk of forced marriage, risk of 'honour'-based violence, physical and emotional abuse and neglect).
- Recent bereavement or loss.
- Gang association either through relatives, peers or intimate relationships
- Attending school with young people who are sexually exploited.
- Learning disabilities.
  - Unsure about their sexual orientation or unable to disclose sexual orientation to their families.
- Friends with young people who are sexually exploited.
- Homeless.
- Lacking friends from the same age group.
- Living in a gang neighbourhood.
- Living in residential care.
- Living in a hostel, bed and breakfast accommodation or a foyer.
- Low self-esteem or self-confidence.
- Young carer.
- Excluded from school

# The following signs and behaviour are generally seen in children who are already being sexually exploited:

- Associating with significantly older men
- Getting into cars of an unknown male, including being picked up at school or care home
- Having keys to unknown premises or having hotel keys/key cards
- Unusual association with taxi drivers/firms
- Missing from home or care, absence from school.
- Regularly returning home late or going missing overnight or for several days
- Knowledge of different towns or cities
- Being defensive about where they have been and what they have been doing
- Physical injuries and having marks or scars on the body which they try to conceal
- Drug or alcohol misuse.
- Involvement in criminal offending behaviour
- Becoming disruptive at home or school

- Repeat sexually-transmitted infections, pregnancy and terminations.
  - Change in physical appearance including looking tired or ill and sleeping during the day
  - Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites.
- Disclosure of a sexual assault which is later withdrawn
- Estranged from their family and being hostile and aggressive with parents/carers
  - Receipt of gifts from unknown sources. (e.g. money, mobile phones, clothes, jewellery)
- Having multiple mobile phones and/or sim cards
- Overt sexualised dress, Sexting
- Changes in physical appearance (more/less make up, poor self image)
- Recruiting others into exploitative situations.
- Poor mental health.
- Self-harm or thoughts of or attempts at suicide
- Displaying sexually inappropriate or harmful behaviours

#### Adults and young people should be aware of the grooming process which involves:

#### **Targeting Stage:**

 Observing and identifying a vulnerable young person and befriending them and gaining their trust.

#### **Friendship Forming Stage:**

- Making the young person feel special
- Spending time alone with them
- Giving gifts, compliments, food, shelter
- Listening and remembering
- · Keeping secrets and being a listening 'ear'
- Offering support and protection
- Pretending 'to understand them'
- Testing out physical contact e.g. accidental touching

#### **Loving Relationship Stage**

- Establishing a sexual relationship
- Becoming their boyfriend/girlfriend
- Lowering their inhibitions e.g. by showing them pornography
- Engaging in forbidden activities e.g. night clubs, alcohol and drugs
- Being inconsistent by building up hope and then punishing them

#### **Abusive Relationship Stage**

- Becomes 'an unloving' sexual relationship
- Withdrawal of love and friendship
- Isolating them from family and friends
- Manipulating the young person by suggesting that the young person 'owes them'
- Threatening behaviour
- Physical and sexual assaults
- Giving them drugs and alcohol
- Making them have sex with other people

- Reinforcing dependency by stating to the young person they are 'damaged goods'
- Developing feelings of guilt, shame and fear within the young person

# **Extremism and Radicalisation**

#### Context:

The expectation that schools can help to protect children from extremism and violent views is not a new one, however the Counter-Terrorism and Security Act 2015 places a duty upon local authorities and educational providers to 'have due regard to the need to prevent people from being drawn into terrorism'. The DfE has provided statutory guidance for schools and child care providers: 'The Prevent Duty' (June 2015). This guidance summarises the requirements on schools and child care providers in terms of four general themes: risk assessment, working in partnership, staff training and IT policies. School leaders and governors should read the detail of the statutory guidance, however this briefing note should provide a useful summary for all staff.

#### 1. Risk assessment

Schools and child care providers should have a general understanding of the risks affecting young people and have a specific understanding of how to identify individual young people who may be of risk of radicalisation and what to do to support them. School staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionally.

#### 2. Working in partnership

The school should be aware of its need to work in partnership with other agencies and follow Local Safeguarding Children's Board procedures. They should draw upon the advice of the local Prevent Co-ordinator.

#### 3. Staff training

Schools should consider accessing WRAP training from the prevent co-ordinator (workshop to raise awareness of Prevent). Schools can also access an on-line general awareness training module on Channel, which is a programme providing early support to someone identified as being vulnerable. Our local authority has a channel police officer.

#### 4. IT policies

Schools should ensure suitable filtering is in place in their own setting and provide advice and guidance to children and families to stay safe on-line at all times.

#### What schools should do:

Schools should take account of the four areas above.

- Ensure their designated safeguarding lead and safeguarding team understand how to refer concerns to Careline.
- Ensure the PHSE curriculum provides pupils with the time to explore sensitive or controversial issues and helps them to recognise and manage risk, make safer choices and recognise when pressure from others threatens their personal safety and well being.
- Schools should take account of the DfE guidance, supporting young people to live in modern Britain: 'Advice on Promoting Fundamental British Values in Schools' (DfE 2014)
- Provide staff with additional guidance (see below) so they can recognise children who may be more vulnerable or displaying indicators that they are at risk.
- Schools are not expected to have an additional policy as the school's child protection policy will cover the responsibilities of schools.

#### Children who may be at risk of extremism and radicalisation:

There is no single profile of a young person, however the following may lead to a child becoming involved in extremism and radicalisation:

- The child may experience social isolation.
- They may be searching for answers to questions about identity, faith and belonging.
- They may be distanced from their cultural/religious heritage and experiences.
- They may experience local community tensions.
- They may be vulnerable because of their own low self-esteem.
- They may have experienced bereavement or loss.
- They may feel aggrieved by experiences of racism, discrimination or government policy.
- They may have special educational needs.
- They may have perceptions of injustice.
- They may have little understanding of the consequences of their actions or little awareness of the motivations of others.
- They may experience a feeling of failure.
- They may be driven by a need for identity, social network and support.
- They may be driven by a desire for adventure, excitement or a change in their status.

#### Possible indicators that a child may be becoming radicalised:

- Use of inappropriate language.
- Adopt a 'them and us' approach.
- Possess extremist literature.
- Significant changes in appearance and/or behaviour.
- Identifying with a group or ideology.
- Accessing extremist websites and social networking sites.
- Advocating violence to resolve political and social situations.

- Greater degree of personal social isolation, alongside greater association with known extremists.
- Making contact with known extremist recruiters.
- Seeking to recruit others to their extremist ideology.
- Drawing pictures or symbols, including in their exercise books.
- Unwilling to engage in class activities.
- Displaying racist and homophobic language.
- Changes in dress, tattoos, badges on clothing.
- Change in vocabulary.
- Prone to outbursts.
- Asking unusual/concerning questions.
- Other changes in behaviour associated with neglect and a change in someone's emotional wellbeing.

#### Referral Mechanism

School staff and Designated Safeguarding Leads should follow the normal safeguarding procedures and act to protect children who are immediately at risk by ringing the Police. Other children will need to be referred to Careline. In addition, schools can seek advice from:

Special.Branch@Merseyside.pnn.police.uk or Tel: 0151-777-8505

Clive.Finch@liverpool.gov.uk or Tel: 0151-233-7015

#### **Resources:**

The forthcoming Safeguarding Briefings will discuss resources available to schools.

- Advice on Promoting Fundamental British Values in Schools' (DfE 2014)
- The Prevent Duty (Statutory Guidance for Schools and Childcare Providers DFE 2015)
- How Social Media is used to encourage travel to Syria and Iraq (Briefing Note to Schools, DFE 2015)
- Confidential Anti-Terrorist Hotline 0800 789 321
- My Former Life Project foundation4peace.org
- www.got.uk.net/
- www.preventforschools.org
- Safer Internet Centre Website
- WRAP training provided by Clive Finch
- CHANNEL general awareness training module
- Think u know website

# The DFE offer the following reasons why disabled children are more vulnerable to abuse:

- Many disabled children are at an increased likelihood of being socially isolated, with fewer outside contacts than non disabled children
- Their dependency on parents and carers for practical assistance in daily living, including intimate personal care, increases their risk of exposure to abusive behaviour
- They have an impaired capacity to resist or avoid abuse
- They may have speech, language and communication needs which may make it difficult to tell others what is happening
- They often do not have access to someone they can trust to disclose that they have been abused
- They are especially vulnerable to bullying and intimidation
- Looked after disabled children are not only vulnerable to the same factors that exist for all children living away from home, but are particularly susceptible to possible abuse because of their additional dependency on residential and hospital staff for day-to-day physical care needs.

## **Examples:**

- A bruise in a site that might not be of concern on an ambulant child, such as the shin, might be of concern on a non-mobile child
- Not getting enough help with feeding, leading to malnourishment
- Poor toileting arrangements
- Lack of stimulation
- Unjustified and/or excessive use of restraint
- Rough handling, extreme behaviour modification e.g. deprivation of liquid, medication, food or clothing
- Unwillingness to try to learn a child's means of communication
- Ill-fitting equipment e.g. callipers, sleep boards, inappropriate splinting
- misappropriation of a child's finances
- Invasive procedures which are unnecessary or are carried out against the

child's will.

# **Neglect**

# 'Child neglect in 2011 - An annual review by Action for Children in partnership with the University of Stirling':

Neglect is extremely damaging to children in the short and long term. The experience of neglect affects physical, cognitive and emotional development; friendships, behaviour and opportunities. For many people, the most obvious form of neglect is poor physical care. It is certainly very damaging for children's health and development to be inadequately fed and clothed. But neglect can also take many other forms, not all of them accompanied by the obvious physical signs of being severely under- or over-weight, dirty and scruffy.

#### Some sign, symptoms and indicators of neglect:

- being left alone in the house or in the streets for long periods of time
- lack of parental support for school attendance
- being ignored when distressed, or even when excited or happy
- lack of proper healthcare when required
- having no opportunity to have fun with their parents or with other children
- speech and language delay
- missed/failed development checks
- learning difficulties or poor educational progress
  - poor attendance, including nursery
  - general development delay
  - young children picked up late from nursery/school
  - poorly supervised both within and outside the home, enabling the child to engage in risk taking behaviour
  - caring for young siblings
  - frequent accidents or minor injuries/bruising
  - poor dental care
  - recurrent infections, nappy rash, head lice, skin conditions
  - not registered with a GP or Children's Centre
  - delay in seeking medical help, missing medical appointments, inadequate immunisations
  - not agreeing to assessments or referrals for the child's behaviour or mental health
  - failure to follow up a child's hearing or sight problems
  - weight loss or gain, gross obesity
  - lack of height gain
  - excessively hungry, hoarding or stealing food, feeding problems
  - inadequate unbalanced diet
  - inappropriately dressed for the weather, inappropriate clothes for age, gender or size
  - the child or their clothes are unclean or smell
  - lack of parental stimulation
  - poor parental attachment to the child
  - parent ignores child's emotional needs and fails to provide appropriate stimulation
  - lack of age appropriate boundaries set for the child
  - child has behavioural difficulties, under stimulation, cries excessively, seeks attention or is withdrawn
  - poor concentration or finds it difficult to settle in
  - destructive or aggressive
  - child socially isolated from peers, absence of friends

## 1.8 Model safer working practices code of conduct for adults

Our school is committed to safeguarding children and promoting children's welfare and expects all staff, governors, volunteers and visitors to share this commitment and maintain a vigilant and safe environment. It is our willingness to work in a safe manner and challenge inappropriate behaviour that underpins this commitment. Everyone is expected to adhere to this 'Code of Conduct' and the DfE's 'Guidance for Safer Working Practice for Adults who work with Children and Young People in Educational Settings (updated in 2015 by The Safer Recruitment Consortium) which is available on the school's website. Everyone must also read part one of Keeping Children Safe in Education (DfE 2015). This code of conduct aims to support adults so they don't work in a manner which might lead to an allegation against them. Equally it aims to reduce the opportunity for any adult intent on grooming or harming a young person. It encourages you to work in an open and transparent way that should avoid someone questioning your motives, intentions or suitability to work with young people. It is a key principle of this code of conduct that everyone understands their responsibility to share without delay any concerns they may have about a child's welfare or an adult's behaviour towards a young person. In addition, everyone has a responsibility to escalate their concerns to the Local Authority Designated Officer (Liverpool Careline 0151 233 3700 or 233 8101) if they feel that safeguarding concerns they have raised about a child or adult working at the school are not being addressed by the school.

#### **Code of Conduct:**

- If you have any concerns that a child is being harmed, abused or neglected you must share your concerns immediately both verbally and in writing with the school's Designated Safeguarding Lead or if they are absent, another member of the school's Leadership Team. Always listen carefully to the child and record what they tell you in the child's own words. Never promise to keep a secret.
- If you receive an allegation against an adult working in the school or observe behaviour that concerns you, you must discuss your concerns without delay with the Headteacher or Designated Safeguarding Lead. Concerns regarding the Headteacher should be directed to the Chair of Governors or Local Authority Designated Officer.
- Anyone (in emergencies or if they need to) can make a referral about their concerns for child to Liverpool Careline (tel: 0151 233 3700)

#### You should:

- dress appropriately according to your role, ensuring that clothing is not likely to be viewed as offensive or revealing and that it is absent of any political or other contentious slogans or images.
- act as an appropriate role model, treating all members of the school community with respect and tolerance.
- ensure gifts given or received are recorded and discussed with your Line Manager.
- respect others' confidentiality unless sharing information is appropriate to ensuring their welfare.
- adhere to the school's policies, particularly those related to safeguarding including child protection, behaviour, attendance, physical intervention, intimate care, antibullying, equal opportunities, health and safety and e-safety (acceptable user policy).
- report any behaviour or situations which you may feel give rise to a complaint or misunderstanding in respect of your own actions. Also share situations with your Line Manager if you feel your actions might have sat outside this code of conduct.

 share with your Line Manager or Headteacher any behaviour of another adult in the school where it gives you cause for concern or breaches this code of conduct or the school's safeguarding policies. Your intervention may allow for their practice to be supported and developed and/or prevent a child from being harmed.

#### Never:

- make, encourage or ignore others, making personal comments which scapegoat, demean or humiliate any member of the school community.
- use your position to intimidate, bully, humiliate, coerce or undermine any member of the school community. This includes shouting in anger and aggressively to punish them rather than raising your voice to be heard or avoid danger.
- develop 'personal' or sexual relationships with children and young people, including
  making sexual remarks or having inappropriate sexual banter. In addition, the Sexual
  Offences Act 2003 makes it clear that all members of staff are in a position of trust
  and would therefore be committing a criminal offence to have a sexual relationship
  with a young person in full time education/below the age of 18, even if that pupil is
  over the age of consent.
- engage in inappropriate conversations with students or share inappropriate personal information about yourself or others.
- discriminate favourably or unfavourably towards a child.
- give personal contact details to pupils or communicate outside of school using social networks, email, text, twitter etc or meet a young person out of school unless part of a planned school activity with the knowledge of your Line Manager.
- have conversations on social networking sites that make reference to children, parents or other colleagues at the school or be derogatory about the school. Never make any statements or post images on social networking sites that might cause someone to question your suitability to act as a role model to young people or bring your own or the school's reputation into disrepute. You should never communicate with parents through social network sites and you are strongly advised to declare any existing friendships/relationships to your Line Manager.
- use personal equipment to photograph children (always use the school's equipment) and ensure any photographs are only stored on the designated secure place on the school's network and not on portable equipment.
- use your personal mobile phone in areas used by children unless in emergencies or under an agreed protocol set out by the headteacher
- undertake 'one to one' activities out of the sight of others unless it is a planned activity with the knowledge of your Line Manager and in keeping with your particular responsibilities.
- transport children unsafely, for example by driving whilst using your mobile phone, consuming alcohol, failing to ensure that seat belts are worn or driving without appropriate insurance. Any trips should be planned and with the knowledge of your Line Manager. Unforeseen events should be reported to your Line Manager. It is good practice to have another adult to act as an escort during the journey
- have physical contact with young people that might be misconstrued or considered indecent or harmful. Ensure you are always able to give an account of the reasons for physical contact or physical intervention. Where physical contact is required it is good practice for it to be within the sight of others. Any physical contact with a child that was needed to control or restrain a child should be the minimum required.

All school employees should have a clear understanding of their responsibilities under this code of conduct. It aims to help them avoid poor working practices that *may* lead to their behaviour being *investigated* and the *consideration* of disciplinary procedures.

## 1.9 Additional safeguarding advice for visitors and volunteers

Our school is committed to safeguarding children and promoting children's welfare and expects all staff, governors, volunteers and visitors to share this commitment and maintain a vigilant and safe environment. It is our willingness to work in a safe manner and challenge inappropriate behaviour that underpins this commitment.

By signing in and out of the visitors' book you are agreeing to follow the advice within this leaflet. All visitors must wear the visitor's badge provided by reception. An adult without a badge will be accompanied to the school's reception to confirm they have signed in.

#### Visitors must be accompanied at all times by a member of the school staff.

**Unsupervised visitors:** If your visit involves unsupervised contact with young people you will be asked to show the photographic ID badge provided by your employer and written confirmation that appropriate DBS checks have been made. Depending on your role and the organisation you are from you may be required to show your Enhanced DBS Certificate. We will note down the DBS number and date issued but will not make a copy of it. You will also need to read the school's Code of Conduct for Adults and Part 1 of the DFE's Guidance, 'Keeping Children Safe in Education' (2015). The school's Child Protection Policy is available on the school's website.

# If you have ANY concerns about a child's welfare or well being or have a concern about the behaviour of any adult within the school towards a child:

- discuss your concerns without delay with the Designated Safeguarding Lead or the Headteacher or a member of the safeguarding team.
- Remember it is important to share your concerns even if you are unsure.
- Anyone (in emergencies or if they need to) can make a referral to Liverpool Children's Services (tel: 0151 233 3700)
- The Local Authority Designated Officer (L.A.D.O.) for Managing Allegations Against Staff can be contacted via 0151233 3700. The school office can provide you with a copy of the school's procedures for Managing Allegations Against Staff.

#### If a child makes a disclosure to you:

- Do not investigate them but report them immediately to senior staff at the school
- Avoid being shocked or embarrassed.
- Listen to the child without interrupting them.
- Do not promise to keep a secret.
- Do not ask the child any leading questions.
- Reassure them that 'it is not their fault and they have done the right thing to tell you'.
- Immediately following the disclosure report your concerns to the Designated Safeguarding Lead (see above) and write down what the child said using the child's own words and phrases. Sign and date this document and hand it to the Designated Safeguarding Lead.
- Consider how best to manage your own feelings
- Following reporting your concerns remember that the disclosure and the child's identity should remain confidential

The school has a full code of conduct to encourage safer working practices for all adults working with young people, including advice regarding 'e-safety'.

#### Remember

- provide a positive role model to young people
- dress appropriately ensuring your clothing is not likely to be viewed as offensive or revealing
- treat all members of the school's community with respect and tolerance
- work with children so that you are visible by a member of the school staff
- respect a child's privacy and dignity
- always be able to justify any physical contact you have with a young person
- always report any situations that arise that you may feel may give rise to a complaint or misunderstanding in respect of your own actions

#### Never:

- Photograph a child without the school's permission
- Never use your personal mobile phone in areas used by young people
- Ignore inappropriate behaviours towards children either by other children or adults
- Share personal details with a child
- Meet or contact the child out of school including by text, email, Facebook or other social media or give a child a lift home
- Discuss the school, children or adults working within the school on social media
- Make inappropriate comments to a child including racist, homophobic, sexist or sexualised comments
- Give gifts to a young person (unless part of the school's agreed rewards policy or with the agreement of your line manager) or show them preferential treatment

#### **Key Safeguarding Staff:**

Headteacher: Paul Cronin

Designated Safeguarding Leads: Paul Cronin & Bev Riley

Safeguarding Team: Base Leaders: A Hesketh, P Chadwick, M Rooney, PLSWs C Pratt,

J Meaney.

Chair of Governors: **B Forshaw**Safeguarding Governor: **M Kelly** 

## Other Safeguarding Guidance:

#### In the case of a fire follow the following procedures:

• There should be no delay in ringing 999 and requesting fire and police.

#### If a child or member of staff needs emergency treatment or first aid:

• There should be no delay in ringing 999 and requesting an ambulance