

# **Safeguarding, Prevent and Child Protection Policy & Procedures**

**(including Roles, Indicators of Abuse, and Definitions)**

**All Prevent policy information is given in red.**

Please note, QMC Staff should read this document alongside other relevant policies, and Keeping Children Safe in Education 2019 (available on Firefly)

- **The Use of Force to Control or Restrain Policy**
- **The Allegations of Abuse Against Staff Policy.**
- **The Safe Recruitment and Selection Policy**
- **The Health and Safety Policy**
- **The Harassment and Bullying Policy**
- **The Single Equalities Framework**
- **The Students at Risk Procedure**
- **The SEN Policy**
- **The Off-Site Activities, Field Trips and Visits Policy & Instructions**
- **Staff Code of Conduct**
- **Staff Guidelines on the use of social media/IT code of conduct**
- **External Speakers & Events policy**
- **QMC PREVENT Risk Assessment & Action Plan**

Where necessary, the guidance contained in this Policy will take precedence.

This Policy is available in different font sizes, formats, languages or on different coloured paper, or someone can go through it with you – please ask in Resources or ask your tutor.

Within this document:

**Safeguarding** is defined in the Children Act 2004 as protecting from maltreatment; preventing impairment of health and development; ensuring that children grow up with the provision of safe and effective care; and work in a way that gives the best life chances and transition to adult hood. Our safeguarding practice applies to every student and vulnerable adult.

**Child Protection** is an aspect of safeguarding but is focused on how we respond to children who have been significantly harmed or are at risk of significant harm.

**Significant harm** - is defined as a situation where a child is suffering, or is likely to suffer, a degree of physical, sexual and / or emotional harm (through abuse or neglect) which is so harmful that there needs to be compulsory intervention by child protection agencies into the life of the child and their family.

**Abuse** could mean neglect, physical, emotional or sexual abuse or any combination of these. Children can be abused either by direct acts and / or failure to provide proper care. Explanations of different types of abuse are given in the Definitions section of this document below.

**Child** refers to all young people who have not yet reached their 18th birthday. On the whole, this will apply to students at QMC; however the policy will extend to visiting children and students from other establishments. A child, in law, is anyone under the age of 18. For the purposes of this Policy, the words child/children will be replaced by “Student/Students” where practical.

**Vulnerable Adult** refers to a person ‘who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation’ (Department of Health, 2000). Vulnerability can apply to a wide range of disabilities and situations including those adults at risk owing to their caring role or family responsibilities. Vulnerability may be temporary or permanent. Individuals can become vulnerable when no previous conditions existed, for example if they become ill.

**Parent** refers to birth parents and other adults in a parenting role for example adoptive parents, guardians, step parents and foster carers.

**Staff** applies to all those working for or on behalf of QMC, full time or part time, in either a paid or voluntary capacity. This also includes parent volunteers and Governors

**The DSL is Beth Linklater**

**The Deputy DSLs are Denise Valler, Barbara Dossett, Chris Tuckwell,  
Lianne Wright Lucy Poynter and Lyn Oram**

In making its commitments to safeguarding learners, the College recognises that its practices are also bound by a broad framework of legislation, and statutory or national guidance including:

- a) Employment Protection Act (1975)
- b) UN convention on rights of the child (1989)
- c) Protection from Harassment Act (1997)
- d) Human Rights Act (1998)
- e) Framework for the Assessment of Children in Need and their Families (2000)
- f) Special Educational Needs and Disability Act (2001)
- g) The Children Act (1989 and 2004)
- h) Employment Relation Act (2004)
- i) The Safeguarding Vulnerable Groups Act (2006)
- j) Forced Marriage (Civil Protection) Act (2007)
- k) Equality Act (2010) Department for Education Guidance Safeguarding Children and Safer Recruiting in Education, (2012)
- l) Department for Education Guidance Safeguarding Children and Safer Recruiting in Education, (2012)
- m) Dealing with Allegations of Abuse against Teachers and Other Staff (2012)
- n) Use of Reasonable Force: When Can Reasonable Force be Used? (2013)
- o) Safer Recruitment (2015)
- p) What to Do if You are Worried a Child is Being Abused (2015)
- q) The Counter-Terrorism and Security Act (2015)
- r) FGM Act (2003) and Mandatory Reporting Guidance (2016)
- s) Sexual Violence & Sexual Harassment between Children in Schools and Colleges (2018)
- t) GDPR (2018)
- u) Working Together to Safeguard Children (2019)
- v) Keeping Children Safe in Education (DfE 2019)
- w) Local Safeguarding Children protocols and guidance (2019)

The procedures of the Hampshire Safeguarding Children Partnership can be accessed at:  
<https://www.hampshiresafeguardingchildrenboard.org.uk/procedures/4lscb-procedures/>

## **Policy Statement**

Queen Mary's College fully recognizes our moral and statutory responsibility to safeguard and promote the welfare of all students. We make every effort to provide a safe and welcoming environment underpinned by a culture of openness where both students and adults feel secure, able to talk and believe that they are being listened to.

We maintain an attitude of "it could happen here" where safeguarding is concerned.

### **Aims**

- To provide staff with the framework to promote and safeguard the wellbeing of students and in so doing ensure they meet their statutory responsibilities. Specific guidance is available to staff within the procedure documents
- To inform parents and guardians how we will safeguard their children whilst they are in our care.
- To ensure consistent good practice across the College.
- To demonstrate our commitment to protecting all children.

### **Principles and Values**

- Students have a right to feel secure and cannot learn effectively unless they do so.
- All students, regardless of age, gender, race, ability, sexuality, religion, culture or language have a right to be protected from harm.
- All staff have a key role in prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a student is at risk of harm in accordance with the guidance.
- We acknowledge that working in partnership with other agencies protects students and reduces risk and so we will engage in partnership working throughout the child protection process to safeguard students.
- Whilst the College will work openly with parents as far as possible, the College reserves the right to contact Children's Services or the police without notifying parents if this is in the student's best interests.

The Children Act 1989 states that the child's welfare is paramount and safeguarding and promoting it is our priority.

The Children Act 2004 sets out a duty for the Local Authorities to work closely with those providing services to children and young people.

**The Counter-Terrorism and Security Act 2015 contains a duty on specified authorities to have due regard to the need to prevent people from being drawn into terrorism.**

This Policy has been developed in accordance with the principles established by these Acts, by the Education Act, 2002 and in line with the Government publications listed above. It has also been developed in line with advice from our local Safeguarding Children Partnership (HSCP).

Our definitions of harm and abuse are wide ranging and include Female Genital Mutilation and Forced Marriage (see Definition & Types of Abuse). This Policy also covers managing allegations against other students (peer on peer abuse), in line with recent guidance. Victims of peer on peer abuse will be supported as all other victims of abuse. **We understand that extremism may also lead to significant harm and abuse and in line with our PREVENT duty believe that there is an important role for us in helping prevent people being drawn into terrorism.**

Children are legally defined as young people under 18 years of age for the purpose of referrals to Children's Services. However, as a College, we will apply the moral guidelines to all our students regardless of race, ethnicity, gender, disability, sexual orientation or age - this includes vulnerable adults. The Policy will also extend to visiting children and students from other establishments. When our staff are visiting other educational establishments they will act in the spirit of this policy, but in accordance with the policies of those establishments.

#### **Queen Mary's College will:**

1. Establish a safe environment within which students can learn and develop.
2. Support students who have been, or are, at risk of significant harm.
3. Ensure we practice safe recruitment in checking the suitability of staff and volunteers who work with students.
4. Carry out regular child protection training, in line with legal requirements
5. Publish and implement clearly defined procedures for identifying and reporting cases, or suspected cases, of abuse (see attached procedures)
6. Develop and promote effective working relationships with other agencies, especially the Police and Children's Services.
7. **Implement our PREVENT Action Plan in line with our PREVENT Risk Assessment. (see separate documents).**

We will focus on:

- **PREVENTION** (positive and safe environment, careful and vigilant teaching, accessible support to students and good adult role models).
- **PROTECTION** (agreed procedures are followed, staff are trained and supported to respond appropriately and sensitively to child protection / safeguarding concerns).

- **SUPPORT** (to students, staff and children who may have been abused or have been affected by the abuse of others).

## **1. Establish a safe environment within which children can learn and develop.**

Induction sessions at the start of a student's time at college make the college ethos of respect clear to all. It is the responsibility of the whole college community to create and maintain this ethos, which is in line with British values. This message is reinforced through a variety of means - Induction, tutorial, curriculum, events and student support provision, regularly publicised to all students. The Student Guide gives all students advice about where to seek support. We ensure that systems are in place for any student to be able to raise concerns with staff, knowing that they will be listened to, believed, and valued. We will ensure that appropriate IT filters and monitoring systems are in place, to safeguard children from harmful and inappropriate online material. We will provide information and awareness about the dangers of technology when used inappropriately through:

- Acceptable use agreements
- Curriculum and tutorial activities involving raising awareness
- Information on Firefly
- Campaigns e.g. Safer Internet Day

We will also provide education to help prevent students from becoming victims and perpetrators of abusive relationships, by encouraging them to rethink their views of violence, abuse and controlling behaviours, and understand what consent means within their relationships.

## **2. Support students who have been, or are, at risk of significant harm.**

The College will support students who are at risk of harm or who suffer harm through our tutorial system, the provision of a professional Counselling Service, a trained Student Personal Adviser and/or The Wellbeing Hub. Tutors may refer students to either service if they are concerned for the welfare of the student. *This does not obviate the need for the tutor to report child protection issues to the Designated Safeguarding Lead (DSL) or Deputy DSLs or for the Counsellors to follow child protection guidelines.* Students may also refer themselves to either support service without the involvement of any of their tutors.

The College will also support students, and to make them aware of safeguarding and safeguarding support, through:

- Compliance with and support of any Child Protection plans; Child in Need Plans; Team Around the Family plans etc that may be in place for any of our students.
- Liaison with, and referral to, other agencies that support the student such as Hampshire Youth Support Service, Children's Services, Child and Adolescent Mental Health Services, YPI (local Counselling service), Catch-22 (Drugs education and support), Education Welfare Service, Educational Psychology Service **and The Channel Programme**. We are also able to refer to MASH and Early Help Hub.

The College will identify students who are in need of support pre-entry through liaison with the schools, parents/guardians, relevant agencies and the students themselves. These students will be confidentially identified to relevant staff via our internal systems, and staff are invited to talk to a member of the support team, or the AP, Personal Development, Behaviour & Welfare, for further information. Students identified will be monitored via their tutor and other staff, and monitoring will be confidentially recorded. We will also develop risk assessments and provide targeted work for students identified as being a potential risk to other students.

### **3. Ensure we practice safe recruitment in checking the suitability of staff and volunteers who work with children.**

‘Safe recruitment’ means that the College will scrutinise all job applicants; verifying identity and any academic or vocational qualifications; obtaining professional and character references; checking previous employment history and that a candidate has the health and physical capacity for the job (making reasonable adjustments where necessary). Candidates will always undergo a face to face interview. The College will carry out the mandatory DBS checks. The College will follow the guidance contained in the DfE Document: Department for Education Guidance Safeguarding Children and Safer Recruiting in Education, 2007, and in Working Together to Safeguard Children (2018).

### **4. Carry out regular Child Protection Training, in line with legal requirements**

All staff are expected to be aware of the signs and symptoms of abuse and must be able to respond appropriately.

All staff in whatever role will undertake training to equip them to carry out their responsibilities for child protection effectively. This will be kept up to date by regular refresher training. The particular safeguarding risks for looked after children are always included in this training, as well as those for other vulnerable groups of children (see Definitions & Types of Abuse section of the policy). Also included in the training is guidance on how to act out of hours or on college trips, where either the police or college emergency contacts should be notified.

Detailed child protection training will be part of Induction for all new staff.

All staff will receive a copy of the Child Protection & Safeguarding Policy & Procedures, and a copy of the Staff Code of Conduct (contained within the Staff Handbook) as well as Keeping Children Safe in Education (part 1) (KCSiE). All staff will have a copy of the Child Protection memo to refer to at all times. **How to spot and refer possible indicators of Extremism are also dealt with in this memo.**

The Designated Safeguarding Lead and other Designated Deputy Safeguarding Leads will undertake refresher training as required (currently annually) to keep their knowledge and skills up to date. (They will also develop knowledge more regularly as outlined in KCSiE.) The DSL (as Designated Teacher) will receive specialist training in issues concerning Looked After Children, and pass this on to other relevant staff.

Any update in national or local guidance will be shared with all staff in briefings and then captured in the next refresher training. This policy will be updated during the year to reflect any changes brought about by new guidance.

**5. Publish and implement clearly defined procedures for identifying and reporting cases, or suspected cases, of abuse**

See attached procedures, including managing allegations against other students.

**6. Develop and promote effective working relationships with other agencies, especially the Police and Children's Services.**

The Designated Safeguarding Lead, all DSLs, and the Counsellors will liaise closely with other agencies that support students such as MASH, EHH, Hampshire YSS, Children's Services, Child and Adolescent Mental Health Services, YPI, Catch-22, Education Welfare Service, Educational Psychology Service, **and The Channel Programme**. They will attend Child Protection Reviews, CAMHS reviews, Child In Need conferences, and Team Around The Child/Family or relevant multi-agency meetings, as invited. The Designated Safeguarding Lead and all DSLs will receive training as to how to contribute effectively to review meetings, and support Social Workers to take decisions about individual students.

**7. Implement our PREVENT Action Plan in line with our PREVENT Risk Assessment. (see separate documents).**

Through Tutorial sessions and the curriculum we make students aware of the dangers of extremism and what to do if they are worried about someone. In addition, we focus on fundamental British/human values of Individual Liberty, The Rule of Law, Democracy and Mutual Respect and Tolerance.

We train staff (including Governors) in spotting possible indicators of extremism and how to refer using our safeguarding procedures. We share concerns with all relevant agencies and authorities, including police and local authority/Department of Education PREVENT coordinators. We provide pastoral care and support for students and staff affected.

There is careful management of external speakers and visitors, publicity materials, and IT equipment and systems – where users are researching terrorism and extremism for whatever reason (including as part of their studies) on our equipment, we are aware.

We have clear and visible policies and procedures in place for managing whistleblowing and complaints. QMC has assessed risk and implemented an action plan.

QMC will ensure that every adult who works with or on behalf of Queen Mary's College is aware of the contents of this policy and understands what the reporting procedures are in cases where a student (or their parent(s) / carer(s)) makes a disclosure of abuse or an allegation. Any

such disclosures or allegations will always be taken very seriously to ensure that any students involved in whatever role are protected and supported.

Any documents regarding Child Protection issues will be kept by the AP, Personal Development, Behaviour & Welfare until the child's 25<sup>th</sup> birthday. This information will be stored securely and will be held separately from the student's routine paperwork. It will only be used for the purposes of child protection, and only be shared with relevant agencies under strict guidance from the police/children's services, in line with GDPR regulations.

This policy will be reviewed annually, by the AP, Personal Development, Behaviour & Welfare, CMT, and by the Governors. It will be published on the college website and on Firefly.

Updated, November 2019, in line with the Hampshire Safeguarding Children Partnership model policy.

# Procedures

## **Overview**

The following procedures apply to all staff working in the College and will be covered by training to enable staff to understand their role and responsibilities.

The aim of our procedures is to provide a robust framework which enables staff to take appropriate action when they are worried that a student is being abused.

The prime concern at all stages must be the interests and safety of the student. Where there is a conflict of interest between the student and an adult, the interests of the student must be paramount.

All staff are aware that students with disabilities, special needs or with language delay may communicate concerns with behaviours rather than words. Additionally staff will question the cause of knocks and bumps in students who have limited mobility.

We will work with students with all mental health conditions, having requested information regarding these conditions at enrolment and interview. We will work with the relevant health professionals. We will take account of government guidance.

QMC will inform all parents of students who are absent (unless the parent has informed us). If the parent is also unaware of the location of their child, and the definition of missing is met, we will either support the parent to contact the police or do so ourselves.

## **Disclosure and Confidentiality**

- We maintain that all matters relating to child protection are to be treated as confidential and only shared as per the 'working together' guidance.
- Information will only be shared with agencies who we have a statutory duty to share with or individuals within the College who 'need to know'. Where possible we obtain a signed 'Permission to Share Information' agreement from students.
- All staff are aware that they cannot promise a student to keep a disclosure confidential.

As a general rule you should treat all personal (ie non-academic) information you acquire or hold in the course of working with students and families as confidential and take particular care with sensitive information. **However, in cases of child protection you cannot promise confidentiality.** You may be anxious about the legal or ethical restrictions on sharing information. Be mindful that passing on information might prevent a tragedy. Therefore, if you are unsure about whether or not to regard information as confidential, you **MUST** talk about the situation to the Designated Safeguarding Lead or a designated DSL. If you prefer, you can do this without disclosing the student's name.

A decision whether to disclose information may be particularly difficult if you think it may damage the trust between you and the student. Wherever possible you should try to obtain the

student's consent to share information they have told you, and take their wishes and feelings into account. In order to get this consent, you should explain the problem to the student, seek agreement and explain the reasons if you decide to act against a parent or student's wishes. However, you **do not need to seek consent** where you consider that to do so would be contrary to a student's welfare, or if urgent action is required. In some instances seeking consent may prejudice a police investigation or may increase the risk of harm to the student. The law recognises that disclosure of confidential information without consent may be justified in the public interest to prevent harm to others. **Similarly, you do not need to gain consent in cases concerning potential extremism or radicalization, where to do so would endanger the child, or other people.**

The key factor in deciding whether or not to disclose confidential information is proportionality: is the proposed disclosure a proportionate response to the need to protect the welfare of the student? The amount of confidential information disclosed, and the number of people to whom it is disclosed, should be no more than is strictly necessary to meet the public interest in protecting the health and wellbeing of a student ('the need to know basis'). This is particularly important where there is a serious allegation directly against the parents, guardians, close family members or friends, or in cases of allegations against other students or staff.

Decisions regarding communicating with parents/guardians should always be clear and should be made jointly by whichever authorities are involved, including the college. This should be the case even if one of the statutory agencies is present in college at the time the allegation is made.

## Referrals

*It is important that everyone in Queen Mary's College is aware that the person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred. That is a task for the professional child protection agencies following a referral to them of concern about a child.*

**If a member of staff has concerns about a student's welfare, suspects abuse or potential radicalisation, spots signs or indicators of abuse, or they have a disclosure of abuse made to them they must:**

1. Make an initial record of the information.
2. Report it to a DSL immediately, or, if out of hours/on a trip and you consider it urgent, report to the police and email or phone the DSL.
3. The DSL will consider if there is a requirement for immediate intervention, however urgent medical attention should not be delayed if a DSL or Principal is not immediately available (follow separate first aid procedures if the situation requires)
4. Make an accurate record (which may be used in any subsequent court proceedings) as soon as possible and within 24 hours of the occurrence, of all that has happened, including details of:

- Dates and times of their observations
  - Dates and times of any discussions they were involved in.
  - Any injuries
  - Explanations given by the student / adult
  - What action was taken
  - Any actual words or phrases used by the student.
5. The records must be signed and dated. Pass all relevant documents and records to the Designated Safeguarding Lead (Beth Linklater) for safekeeping.
  6. No student should ever be asked to remove clothing by a member of staff.
  7. **Following a report of concerns from a member of staff, the DSL must:**
    - Decide whether or not there are sufficient grounds for suspecting significant harm in which case a referral must be made to children's social care using the inter agency referral form
    - Normally the College should try to discuss any concerns about a student's welfare with the family and where possible to seek their agreement before making a referral to children's social care. However, in accordance with DfE guidance, this should only be done when it will not place the student at increased risk or could impact a police investigation. The student's views should also be taken into account.
    - If there are grounds to suspect a student is suffering, or is likely to suffer, significant harm they must contact children's social care via the Children's Reception Team (CRT) on Professionals Line 01329 225379 and make a clear statement of:
      - the known facts
      - any suspicions or allegations
      - whether or not there has been any contact with the child's family
  8. If the DSL feels unsure about whether a referral is necessary they can phone children's reception team (CRT) to discuss concerns
  9. If there is not a risk of significant harm, then the DSL will either actively monitor the situation or consider the early help process
  10. The DSL/s will follow up all referrals in writing to children's social care, within 24 hours, including the actions that have been taken. The written referral must be made using the inter-agency referral form (IRAF) which will provide children's social care with the supplementary information required about the student and family's circumstances. (IARF can be accessed at the following link  
[https://forms.hants.gov.uk/en/AchieveForms/?form\\_uri=sandbox-publish://AF-Process-7e6115a7-b0ba-484d-991f-084c1248ac72/AF-Stage-52cf8e73-0daf-47d4-bb55-0fdad856d3e6/definition.json&redirectlink=/en&cancelRedirectLink=/en](https://forms.hants.gov.uk/en/AchieveForms/?form_uri=sandbox-publish://AF-Process-7e6115a7-b0ba-484d-991f-084c1248ac72/AF-Stage-52cf8e73-0daf-47d4-bb55-0fdad856d3e6/definition.json&redirectlink=/en&cancelRedirectLink=/en)

11. DSLs use the sexual exploitation risk assessment form (SERAF) and associated guidance to identify pupils who are at risk and share this information as appropriate. We also use the community partnership information (CPI) form.
12. If there is information or intelligence about child criminal exploitation, drug dealing, county lines or similar, we will report this to the police via the community partnership information form. <https://www.safe4me.co.uk/portfolio/sharing-information/>
13. QMC will follow the “Sexual violence and sexual harassment between children in schools and colleges” advice provided by the DfE. We will challenge all contact behaviours that have a sexual nature to them such as pushing or rubbing against, grabbing bottoms, breasts or genitals, pinching or flicking bras, lifting skirts or pulling down trousers and impose appropriate levels of disciplinary action, to be clear that these behaviours are not tolerated or acceptable. If staff in College are made aware that upskirting has occurred, then this will be treated as a sexual offence and should be reported to a DSL accordingly. If technology that is designed for covert placement and could be used to take upskirting or indecent images is discovered in College it will be confiscated. If the technology is in location and potentially may have captured images, this will be reported to the police and left in situ so that appropriate forensic measures can be taken to gather evidence. Any confiscated technology will be passed to the Principal or Deputy Principal to make a decision about what happens to the items and will be carried out under the principles set out in the government guidance on searching, screening and confiscation  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/674416/Searching\\_screening\\_and\\_confiscation.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/674416/Searching_screening_and_confiscation.pdf)
14. If a student is in immediate danger and urgent protective action is required, the Police must be called. The DSL must also notify children’s social care of the occurrence and what action has been taken.
15. When a student is in need of *urgent* medical attention and there is suspicion of abuse the DSL or Principal should follow first aid procedures, as well as notifying children’s social care. The DSL should seek advice about what action children’s social care will take and about informing the parents, remembering that parents should normally be informed that a student requires urgent hospital attention.

You may be approached by Children’s Services or another agency – e.g. GP - and asked to provide information about a student or family or to be involved in an assessment or to attend a Child Protection Conference. Contact the DSL or a designated DSL for advice. They will ensure a member of the Safeguarding team will respond to the request, or attend the meeting on behalf of the College.

**Remember: A child is a student under of the age of 18 but it is always important to establish whether the student has any younger siblings in dealing**

**If you have concerns about a student's welfare, you can always discuss your concerns with a member of the College's Safeguarding Team.**

Remember that an allegation of child abuse, **extremism** or neglect may lead to a criminal investigation, so **don't do anything that may jeopardise a Police investigation**, such as asking a student leading questions or attempting to investigate.

**In all cases communicate with the student in a way that is appropriate to their age, understanding and preference.** This is especially important for students who have any form of disability or learning difficulty and for those whose first language is not English. The nature of this communication will also depend on the substance and seriousness of the concerns and you may require advice from one of our team to ensure that neither the safety of the student nor any subsequent investigation is jeopardised.

### **Protecting yourself**

Dealing with a disclosure from a student and safeguarding issues can be stressful. The member of staff or volunteer should, therefore, consider seeking support for him/herself and discuss this with HR, or a member of the Safeguarding Team.

Seek to minimise the risk of any situation arising in which misunderstandings can occur. The following sensible precautions can be taken when working alone with students:

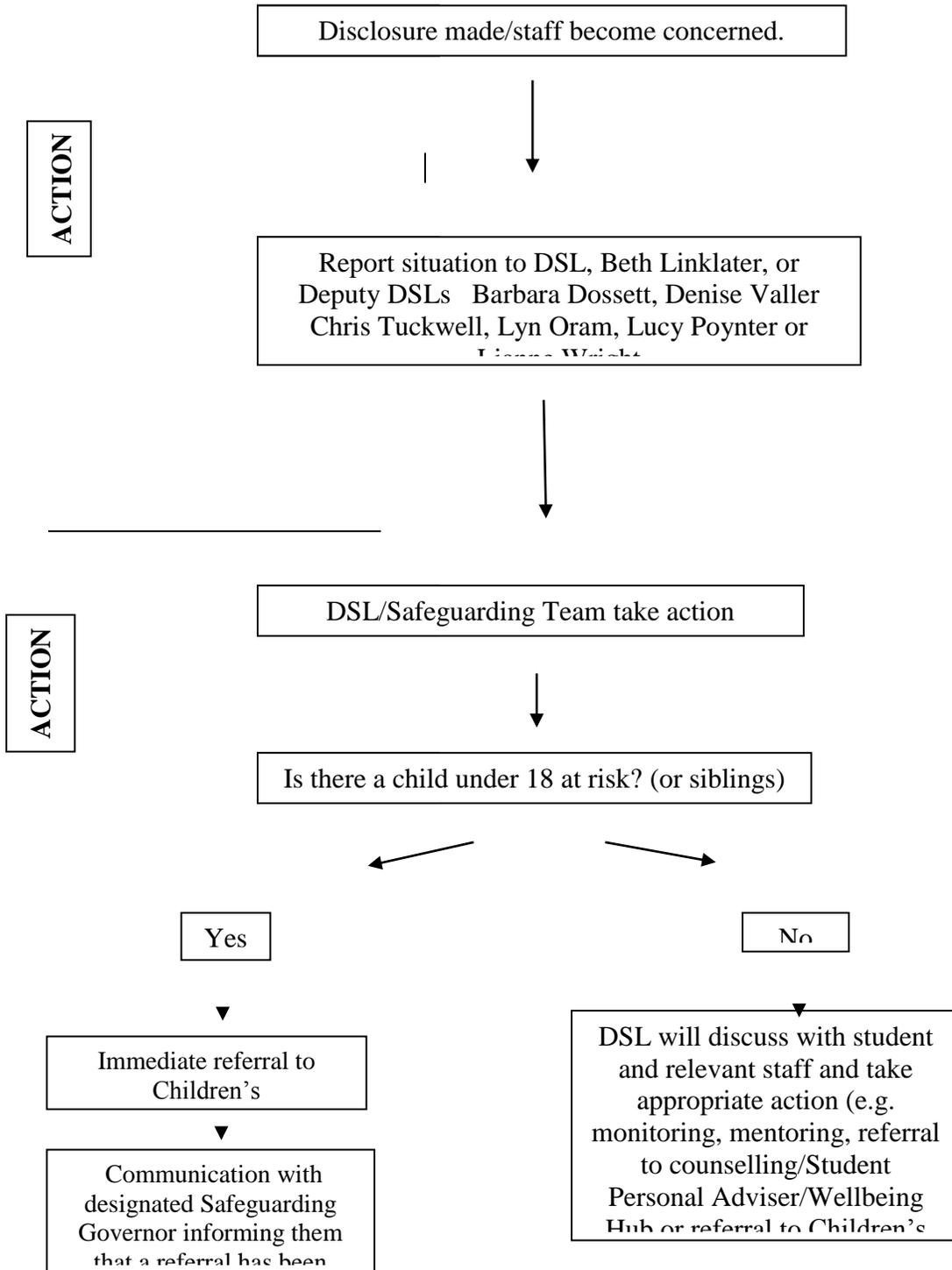
- work in a room where there is a glass panel in the door or leave the door open
- make sure that other adults visit the room occasionally
- avoid working in isolation with students unless thought has been given to safeguards
- do not give out personal mobile phone numbers or private e-mail addresses
- do not engage in communications with parents or students from the college community in any personal social media. If any parent or student requests such communication, report this to a member of the Safeguarding Team.
- set all privacy settings to the highest possible levels on all personal social media accounts
- do not give students lifts in your cars
- do not arrange to meet students outside of normal college hours
- do not chat to students on the social websites or engage in any form of inappropriate electronic communication with a student

Under the Sexual Offences Act 2003 it is a criminal offence for anyone working in an educational setting to have a sexual relationship with a student even when the student is over the age of consent.

For sensible use of force and restraint, please read the relevant policy. For permitted use of social media, please read the guidelines in the staff handbook.

All allegations of abuse against members of staff will be referred to the LADO (Local Authority Designated Officer). Allegations of abuse against ex-members of staff will be referred to the police. Please read the separate policy on Dealing with Allegations of Abuse.

**What happens when a disclosure is made or when staff have concerns about a student's safety and welfare?**



## CHILD PROTECTION PROCEDURES AT QMC

**If in doubt – share with a member of the Safeguarding Team!**

1. If a student discloses something that appears to put them at risk of significant harm, and therefore be a potential child protection issue, you should seek advice from **Beth Linklater, Barbara Dossett, Denise Valler, Lyn Oram, Chris Tuckwell, Lucy Poynter or Lianne Wright**. In this instance you cannot promise confidentiality, because it may be putting them, or other siblings, at risk. If you have an urgent child protection case you may contact Help Desk, who will find a trained member of staff for you. **Do not attempt to deal with difficult cases on your own or without support.**
2. As part of noticing signs and symptoms which might cause you to seek advice, please be aware that we are now also legally required to refer on anyone at risk of “being drawn into terrorism”. This includes all forms of extremism which threaten fundamental British values, including the extreme right. The aim of referring is to seek support for the student concerned. Signs to look out for:
  - Seeing any worrying changes in behaviour or attitudes to authority. (For example students may suddenly become more aggressive, isolated, vengeful etc.)
  - Hearing any concerning outlooks being expressed, for example as regards the value of human life, race, religion, minority groups etc.

Please pass these concerns on through the usual safeguarding systems. We will refer concerns to Channel (a national programme to divert people away from extremism and offer support). Where possible please seek the consent of the student concerned before referring on, but you are not obliged to.

3. If you are a teacher, you can (and should) contact parents about matters relating to a student’s academic progress or with other concerns unless there is a note on VISTA to the contrary. You must not divulge information about a student to anyone who is not a named contact, regardless of their relationship to the student. If you are contacted in this way and the person is insistent, please refer the case directly to the Principal.
4. Do not contact parents about medical information that a student has requested be kept confidential (e.g pregnancy, terminations). However, you might attempt to get them to talk to their parents, to a Counsellor or Barbara Dossett, or to their tutor (if you are not the tutor).
5. If a child is experiencing any form of bullying refer the matter to Beth Linklater, your Assistant Principal, the Deputy Principal or, in serious cases, The Principal. In cases involving cyber-bullying students must keep all relevant evidence (texts, Facebook messages, etc)
6. Keep yourself safe – do not communicate with students on sites such as Facebook, do not give them your personal mobile number (except in extreme cases such as when you are off-site on

trips), or any other personal details, do not comfort students with overt displays of affection etc. If anything happens which could be misconstrued, talk to your line manager about it.

7. If there is a violent incident in your department, class or elsewhere in College, call security – phone the Help Desk on 321 (the same number as First Aid). Do not put yourself in a dangerous situation. While you wait for security attempt to calm the situation by talking to the student concerned, or separating him/her from the rest of the group if possible.

If you are approached by a student about whom you have concerns:

1. Listen carefully – don't ask leading questions
2. Bring the student to see a member of the team as soon as you can.
3. Make a record of the conversation as soon as you can and pass this to Beth Linklater, Barbara Dossett, Denise Valler, Lyn Oram, Chris Tuckwell, Lucy Poynter or Lianne Wright.

If you are approached by a student in the evening or outside usual College hours:

If you are on site take them to the Help Desk, the Sports Centre or Central Studio Box Office. If you are not on site, and it is via email, ensure that Beth or a member of the team is alerted to the situation as soon as possible and inform your line manager and AP, Beth Linklater, Mark Henderson or Ali Foss by text, phone call or email.

You may want to encourage a student to stay with a friend or safe family member that night. If the situation is **really urgent**, direct the student to the Police Station, or phone the police and ask them to visit the student at home, or, if you are in College, come to us. The number for Basingstoke police is 101. Explain that it is a child protection emergency. Make a record of the conversation as soon as you can and pass this to a member of the At Risk and Child Protection team.

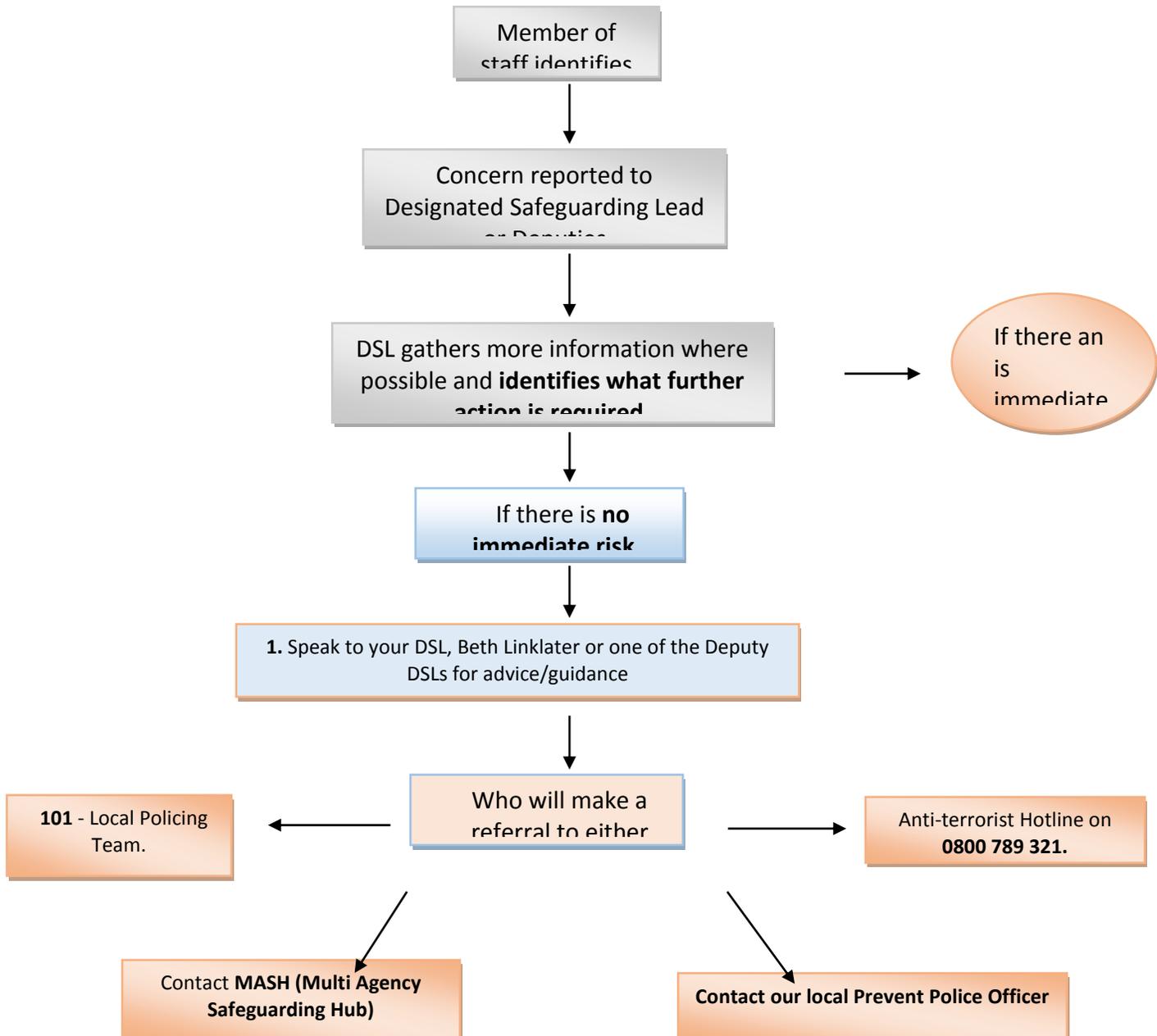
If the matter is health related (eg self harm) and it is out of hours, refer the student to their GP, the NHS (111) The Samaritans (116 123) or A&E. Reassure them that they will be able to talk to someone at college the next working day. Again, inform one of CMT or the Safeguarding team asap.

Please ensure you have read the latest Keeping Children Safe in Education, Part 1, (Sept. 2019)

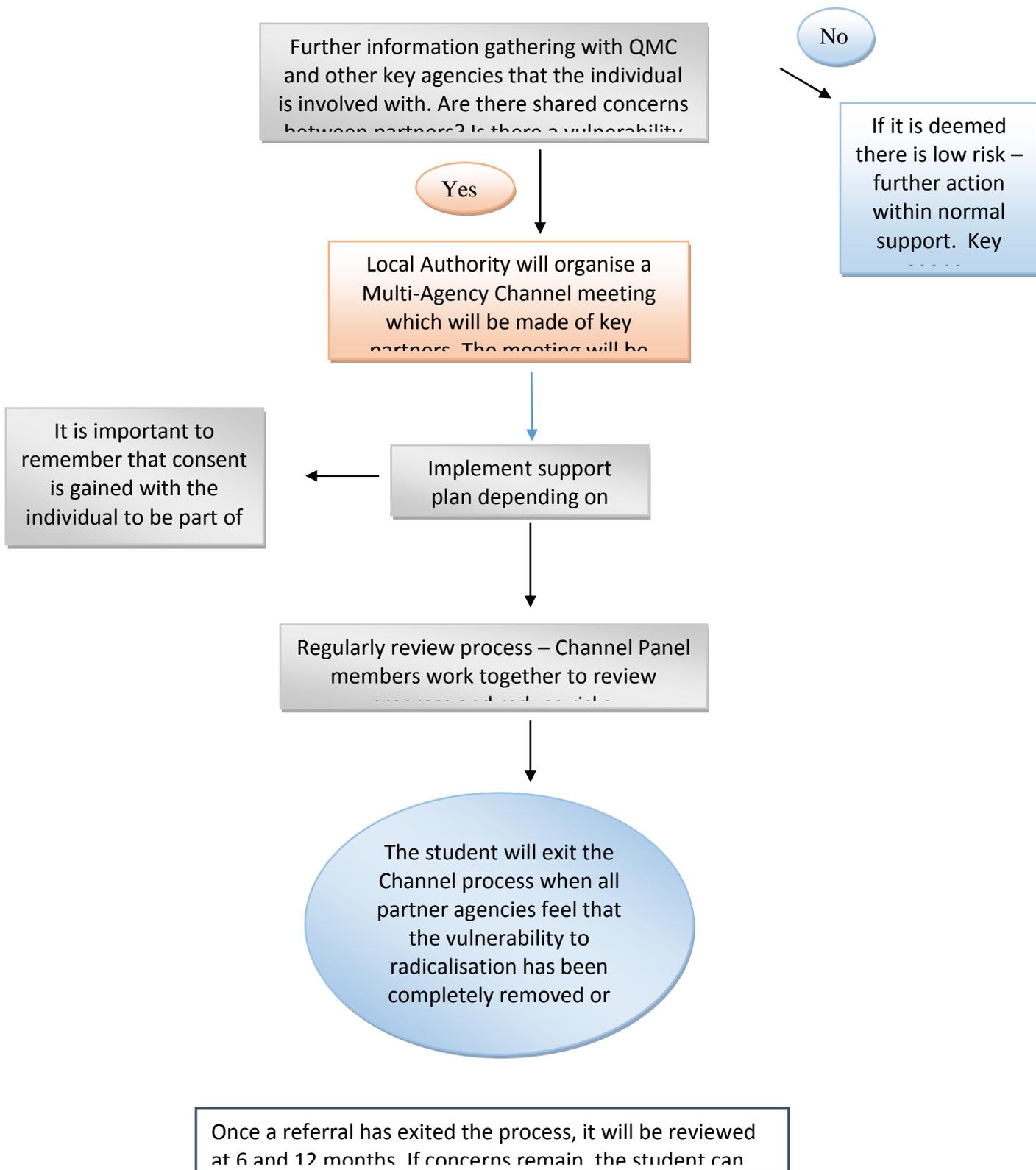
# Prevent and Chanel Process Map

## Process map for reporting a concern of a vulnerable individual

It is important for you as a member of staff to know where to go if you have a concern that someone may be on the route to radicalisation. Below is a flow chart which aims to show the process as to which you can



Once a referral has been made and enters the Channel process, the below process map illustrates what happens next...



## What is Abuse? High Risk and Emerging Safeguarding Issues

### 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. 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 another child or children.

The definitions and descriptions below all fall under the overall heading of abuse, and there are a number of indicators which should cause you to seek advice from, or report to, a DSL immediately you have any concerns. These indicators are listed in the Appendix at the end of this document.

On their own these indicators need not indicate abuse of any of the kinds listed below. However, it is important to be satisfied that where these behaviours occur, they are not linked to abuse. It is also important to avoid making assumptions about an individual student's circumstances or act on the basis of stereotyping. For example, an extended holiday may be taken for entirely legitimate reasons and may not necessarily represent a pretext for, for example, forced marriage. Each student should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons.

**What is important to keep in mind is that if you feel unsure or concerned about any of these issues, do something about it as per our procedures. Don't keep it to yourself.**

*The definitions below are listed in alphabetical order, not in order of significance. All abuse will be taken equally seriously and must be reported to a DSL, who will report it on as required.*

**Breast Ironing** - Breast Ironing also known as 'Breast Flattening' is the process whereby young pubescent girls breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear or delay the development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage and therefore be kept in education. Much like Female Genital Mutilation (FGM), Breast Ironing is a harmful cultural practice and is child abuse.

**Bullying including cyberbullying** – Bullying is behaviour by an individual or group, repeated over time, that intentionally hurts another individual or group either physically or emotionally. Bullying can take many forms (for instance, cyber-bullying via text messages or the internet), and is often motivated by prejudice against particular groups, for example on grounds of race, religion, gender, sexual orientation, or because a student is adopted or has caring responsibilities. It might be motivated by actual differences between students, or perceived differences. Stopping violence and ensuring immediate physical safety is obviously our first priority but emotional

bullying can be more damaging than physical; tutors and staff have to make their own judgements about each specific case. See separate policy. See also DFE Guidance, <https://www.gov.uk/government/publications/preventing-and-tackling-bullying>

**Child Criminal Exploitation (including County Lines)** - Child Criminal Exploitation is defined as: ‘where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact, it can occur through the use of technology.’

A current trend in criminal exploitation of children and young people is ‘**County Lines**’ which refers to a ‘phone line through which drug deals can be made. An order is placed on the number and typically a young person will deliver the drugs to the specified address and collect the money for the deal. These lines are owned and managed by organised crime gangs, often from larger cities, who are expanding their markets into rural areas.

**Children Missing from Education, Home or Care** - The Association of Chief Police Officers has provided the following definitions and guidance: “A **missing person** is: ‘Anyone whose whereabouts cannot be established and where the circumstances are out of character or the context suggests the person may be the subject of crime or at risk of harm to themselves or another.’ An **absent person** is: ‘A person not at a place where they are expected or required to be.’

All cases classified as ‘missing’ by the police will receive an active police response – such as deployment of police officers to locate a child. Cases where the child was classified as ‘absent’ will be recorded by the police and risk assessed regularly but no active response will be deployed. The absent case will be resolved when a young person returns or new information comes to light suggesting that he/she is at risk. In the latter instance, the case is upgraded to ‘missing’.

Patterns of children missing education can be an indicator of either abuse or safeguarding risks. A relatively short length of time a child is missing does not reduce risk of harm to that child, and all absence or non-attendance should be considered with other known factors or concerns. QMC will view absence as both a safeguarding issue and an educational outcomes issue.

Children who run away from home or from care provide a clear behavioural indication that they are either unhappy or do not feel safe in the place of residence. Research shows that children run away from conflict or problems at home or school, neglect or abuse, or because children are being groomed by predatory individuals who seek to exploit them. Many run away on numerous occasions.

**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 (*Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation*, February 2017).

- Exploitation can be isolated (one-on-one) or organised group/criminal activity
- There can be a big age gap between victim and perpetrator, but it can also be peer-on-peer
- Boys can be targeted just as easily as girls – this is not gender specific
- Perpetrators can be women and not just men
- Exploitation can be between males and females or between the same genders
- Children with learning difficulties can be particularly vulnerable to exploitation as can children from particular groups, e.g. looked after children, young carers, children who have a history of physical, sexual emotional abuse or neglect or mental health problems; children who use drugs or alcohol, children who go missing from home or school, children involved in crime, children with parents/carers who have mental health problems, learning difficulties/other issues, children who associate with other children involved in exploitation. However, it is important to recognise that any child can be targeted.

CSE can happen to a child of any age, gender, ability or social status. Often the victim of CSE is not aware that they are being exploited and do not see themselves as a victim.

**Contextual Safeguarding** - In KCSiE 2019 the DfE refer to contextual safeguarding as a specific term that has come out of research from the University of Bedfordshire. The definition of Contextual Safeguarding is “an approach to understanding, and responding to, young people’s experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people’s experiences of extra-familial abuse can undermine parent-child relationships. Therefore children’s social care practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.”

As a College we will consider the various factors that have an interplay with the life of any student about whom we have concerns and the level of influence that these factors have on their ability to be protected and remain free from harm particularly when it comes to child exploitation or criminal activity.

While this term applies to this specific definition, the notion of considering a child within a specific context is also important. What life is like for a student outside of College, within the

home, within the family and within the community are key considerations when the DSL is looking at any concerns.

**Domestic Abuse** - Domestic abuse is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

Research indicates that living within a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, wellbeing and understanding of what constitutes a normal relationship. Children witnessing domestic abuse is recognised as ‘significant harm’ in law. These children may become aggressive; display anti-social behaviours; suffer from depression or anxiety; or fail to reach their educational potential.

**Drugs** – this includes alcohol, tobacco, illegal drugs, medicines, new psychoactive substances (“legal highs”) and volatile substances. See separate policy and DFE guidance, <https://www.gov.uk/government/publications/drugs-advice-for-Colleges>

**Emotional abuse** - 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 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, though it may occur alone

**Extremism:**

Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. This also includes calls for the death of members of the British armed forces. (From the PREVENT Guidance)

**Fabricated or Induced Illness** - The fabrication or induction of illness in children by a carer has been referred to by a number of different terms, most commonly Munchausen Syndrome by Proxy, Factitious Illness by Proxy, or Illness Induction syndrome. There are three main ways of the carer fabricating or inducing illness in a child. These are not mutually exclusive and include:

- fabrication of signs and symptoms. This may include fabrication of past medical history;
- fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents;
- induction of illness by a variety of means.

See guidance at: <https://www.gov.uk/government/publications/safeguarding-children-in-whom-illness-is-fabricated-or-induced>

**Faith Abuse** – is the mistreatment of a person by someone in a position of spiritual authority, resulting in diminishing that person’s sense of wellbeing and growth—both spiritually and emotionally. It is also defined as the use of spiritual authority, by words or actions, to manipulate someone for personal gain or to achieve a personal agenda.

See: <https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief>

**Female Genital Mutilation (FGM)** - FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls’ and women’s bodies.

The age at which girls undergo FGM varies enormously according to the community. The procedure may be carried out when the girl is newborn, during childhood or adolescence, just before marriage or during the first pregnancy. However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at a higher risk. FGM is illegal in the UK.

On the 31 October 2015, it became mandatory for teachers to report known cases of FGM to the police. ‘Known’ cases are those where either a girl informs the person that an act of FGM – however described – has been carried out on her, or where the person observes physical signs on a girl appearing to show that an act of FGM has been carried out and the person has no reason to believe that the act was, or was part of, a surgical operation within section 1(2)(a) or (b) of the FGM Act.

**Forced Marriage** - In the case of children: ‘a forced marriage is a marriage in which one or both spouses cannot consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure.’ In developing countries 11% of girls are married before the age of 15. One in 3 victims of forced marriage in the U.K. are under 18. Advice and help can be obtained nationally through the Forced Marriage Unit and locally through the local police safeguarding team or children’s social care.

**Fundamental British Values** – British values are defined by the Government as "democracy, the rule of law, individual liberty and mutual respect and tolerance for those with different faiths and beliefs"; institutions are expected to encourage students to respect other people with particular regard to the protected characteristics set out in the Equality Act 2010.

**Gangs and youth violence** – refers to group violence, often in the community. An organised criminal group is a group of individuals for whom involvement in crime is for personal gain (financial or otherwise). For most, however, crime is their 'occupation'. These groups operate almost exclusively in the grey and illegal marketplace where market transactions are totally unregulated by the law.

A gang is a relatively durable group who have a collective identity and meet frequently. They are predominantly street-based groups of young people who see themselves (and are seen by others) as a discernible group for whom crime and violence is integral to the group's identity.

A peer group is a relatively small, unorganised and transient group composed of peers who share the same space and a common history. Involvement in crime will be mostly be non-serious in nature and not integral to the identity of the group. (Adapted from Hallsworth S and Young T (2004) *Getting Real About Gangs*. Criminal Justice Matters (55)

See DFE advice,

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/226293/Advice\\_to\\_Colleges\\_and\\_Colleges\\_on\\_Gangs.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/226293/Advice_to_Colleges_and_Colleges_on_Gangs.pdf)

### **Gender based violence / Violence against women and girls**

<https://www.gov.uk/government/policies/violence-against-women-and-girls>

**Female genital mutilation, forced marriage, honour based violence and teenage relationship abuse all fall under this definition – see separate entries.**

**Honour Based Violence** - Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community.

It is often linked to family or community members who believe someone has brought shame to their family or community by doing something that is not in keeping with their unwritten rule of conduct. For example, honour based violence might be committed against people who:

- become involved with a boyfriend or girlfriend from a different culture or religion

- want to get out of an arranged marriage
- want to get out of a forced marriage
- wear clothes or take part in activities that might not be considered traditional within a particular culture
- convert to a different faith from the family

Women and girls are the most common victims of honour based violence however it can also affect men and boys. Crimes of ‘honour’ do not always include violence. Crimes committed in the name of ‘honour’ might include:

- domestic abuse
- threats of violence
- sexual or psychological abuse
- forced marriage
- being held against your will or taken somewhere you don’t want to go
- assault

**Mental Health** - QMC recognises that there a number of mental health conditions which make studying difficult, and may have safeguarding implications, eg. Anorexia nervosa, OCD, psychosis etc.

**See:** <https://www.gov.uk/government/publications/the-mental-health-strategy-for-england>

**Missing, Exploited and Trafficked Children (MET)** - Within Hampshire, the acronym MET is used to identify all children who are missing; believed to be at risk of or being exploited; or who are at risk of or are being trafficked. This includes missing from education, home or care. It can also include CSE, Child Criminal Exploitation (including County Lines) and Serious Violence – see separate entries.

**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:

- a. provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- b. protect a child from physical and emotional harm or danger
- c. ensure adequate supervision (including the use of inadequate care-givers)
- d. ensure access to appropriate medical care or treatment

**Online reputation** - is the opinion others get of a person when they encounter them on-line. It is formed by posts, photos that have been uploaded and comments made by others on people’s

profiles. It is important that students and staff are aware that anything that is posted could influence their future professional reputation. The majority of organisations and work establishments now check digital footprint before considering applications for positions or places on courses.

**Parental mental health** - The term 'mental ill health' is used to cover a wide range of conditions, from eating disorders, mild depression and anxiety to psychotic illnesses such as schizophrenia or bipolar disorder. Parental mental illness does not necessarily have an adverse impact on a child's developmental needs, but it is essential to always assess its implications for each child in the family. It is essential that the diagnosis of a parent/carer's mental health is not seen as defining the level of risk. Similarly, the absence of a diagnosis does not equate to there being little or no risk.

For children the impact of parental mental health can include:

- The parent / carer's needs or illnesses taking precedence over the child's needs
- Child's physical and emotional needs neglected
- A child acting as a young carer for a parent or a sibling
- Child having restricted social and recreational activities
- Child finds it difficult to concentrate - impacting on educational achievement
- A child missing school regularly as (s)he is being kept home as a companion for a parent / carer
- A child adopts paranoid or suspicious behaviour as they believe their parent's delusions.
- Witnessing self-harming behaviour and suicide attempts (including attempts that involve the child)
- Obsessional compulsive behaviours involving the child

**Parental Substance misuse** - Substance misuse applies to the misuse of alcohol as well as 'problem drug use', defined by the Advisory Council on the Misuse of Drugs as drug use which has: 'serious negative consequences of a physical, psychological, social and interpersonal, financial or legal nature for users and those around them. Parental substance misuse of drugs or alcohol becomes relevant to child protection when substance misuse and personal circumstances indicate that parenting capacity is likely to be seriously impaired or that undue caring responsibilities are likely to be falling on a child in the family.

For children the impact of parental substance misuse can include:

- Inadequate food, heat and clothing for children (family finances used to fund adult's dependency)
- Lack of engagement or interest from parents in their development, education or wellbeing
- Behavioural difficulties- inappropriate display of sexual and/or aggressive behaviour
- Bullying
- Isolation – finding it hard to socialise, make friends or invite them home
- Tiredness or lack of concentration

- Child talking of or bringing into school, drugs or related paraphernalia
- Injuries /accidents (due to inadequate adult supervision )
- Taking on a caring role
- Continued poor academic performance including difficulties completing homework on time
- Poor attendance or late arrival.

**Peer on Peer abuse** – This can take different forms, such as sexual violence and sexual harassment (between two children or group of children of any age and sex), physical abuse such as hitting, kicking or shaking, Youth Produced Sexual Imagery (sexting), upskirting (which is a criminal offence) or initiation type violence or rituals. This can take place in person, on line or via a mobile phone (via texting). The College has a zero tolerance of all peer-on-peer abuse.

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

### **Prevent, Radicalisation and Extremism**

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

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.

*The College will collaborate with all statutory partners, the police and the local community to identify individuals at risk of being drawn into any form of extremism; assess the nature and extent of that risk; and develop the most appropriate support plan for the individuals concerned.*

*Where you suspect a student is at risk of being drawn into terrorism, extremism or radicalization you are duty bound to report this immediately to a member of the College's Safeguarding team, who will make the appropriate decision around the information submitted after an internal review. They will follow the Prevent and Chanel Process Map (Appendix item 3).*

QMC will adhere to the Counter Terrorism and Security Act (2015) Prevent Duty and therefore aim to intervene early to protect and divert people away from the risks they may potentially face before illegality occurs. We will challenge any ideology that supports extremism and/or terrorism to protect vulnerable individuals.

See: <http://www.homeoffice.gov.uk/publications/counter-terrorism/prevent/prevent-strategy> and <http://www.homeoffice.gov.uk/publications/counter-terrorism/counter-terrorism-strategy>

**Private fostering** - Private fostering is an arrangement by a child's parents for their child (under 16 or 18 if disabled) to be cared for by another adult who is not closely related and is not a legal

guardian with parental responsibility, for 28 days or more. It is not private fostering if the carer is a close relative to the child such as grandparent, brother, sister, uncle or aunt. The Law requires that the carers and parents must notify the Children's Services Department of any private fostering arrangement.

**Self-harm** - is when someone deliberately hurts or injures themselves. This can take a number of forms including:

- cutting or burning - the most common forms of self-harm.
- taking overdoses of tablets or medicines.
- punching themselves.
- throwing their bodies against something.
- pulling out their hair or eyelashes.
- scratching, picking or tearing at their skin causing sores and scarring.
- inhaling or sniffing harmful substances.
- swallowing things that are not edible.
- inserting objects into their bodies.

Some young people self-harm on a regular basis while others do it just once or a few times. For some people it is part of coping with a specific problem and they stop once the problem is resolved. Other people self-harm for years whenever certain kinds of pressures or feelings arise.

A few people who self-harm may go on to commit suicide - generally this is not what they intend to do. In fact, self-harm can be seen as the opposite of suicide as it is often a way of coping with life rather than of giving up on it. Self-harm comes under the more general category of "physical abuse". If others know about the activity and do nothing, the issue of "neglect" may also be relevant.

**Serious Violence** - Serious violence is becoming a factor for those who are involved in criminal exploitation. It can also be an indication of gang involvement and criminal activity.

**Sexting** - 'Sexting' refers to the sharing of naked or 'nude' pictures or video through mobile phones and/or the internet. It also includes underwear shots, sexual poses and explicit text messaging. While sexting often takes place in a consensual relationship between two young people, the use of sexted images in revenge following a relationship breakdown is becoming more commonplace. Sexting can also be used as a form of sexual exploitation and take place between strangers.

**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 Violence and Sexual Harassment Between Children** - Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

Whilst any report of sexual violence or sexual harassment should be taken seriously, it is more likely that girls will be the victims of sexual violence and sexual harassment and more likely it will be perpetrated by boys.

We are clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up. It cannot be described as ‘banter’, ‘having a laugh’ or ‘boys being boys’.

We will also take seriously any sharing of sexual images (photos, pictures or drawings) and videos; sexual jokes, comments or taunting either in person or on social media; or on-line sexual harassment.

**Technologies & Online safety** - Technological hardware and software are developing continuously with an increase in functionality of devices that people use. The majority of students use online tools to communicate with others locally, nationally and internationally. Access to the Internet and other tools that technology provides is an invaluable way of finding, sharing and communicating information. While technology itself is not harmful, it can be used by others to make students vulnerable and to abuse them. Students may underestimate how often they come across potentially harmful and inappropriate material on the internet and may be unsure about how to respond. Some of the risks could be:

- unwanted contact
- grooming
- online bullying including sexting
- digital footprint

For further information on **Cyberbullying** please refer to the Bullying policy

**Teenage Relationship Abuse** - Research has shown that teenagers do not understand what constitutes abusive behaviours and controlling behaviours which could escalate to physical abuse, e.g. checking someone's ‘phone, telling them what to wear, who they can/can't see or speak to; or that this abuse is prevalent within teenage relationships. Further research shows that teenagers are likely not to understand what consent means within their relationships. They often hold the common misconception that rape could only be committed by a stranger down a dark alley and do not understand or recognise that it could happen within their own relationships. This can lead to these abusive behaviours feeling ‘normal’ and therefore left unchallenged as they are not recognised as being abusive.

**Trafficked Children and modern slavery** - Human trafficking is defined by the UNHCR in respect of children as a process that is a combination of:

- Movement (including within the UK);
- Control, through harm / threat of harm or fraud
- For the purpose of exploitation

Any child transported for exploitative reasons is considered to be a trafficking victim. These behaviours themselves do not indicate that a child is being trafficked, but should be considered as indicators that this may be the case. When considering modern slavery, there is a perception that this is taking place overseas. The Government estimates that tens of thousands of slaves are in the UK today. Young people being forced to work in restaurants, nail bars, car washes and harvesting fruit, vegetables or other foods have all been slaves 'hiding in plain sight' within the U.K and rescued from slavery. Other forms of slavery such as sex slaves or household slaves are more hidden but have also been rescued within the UK.

**The Trigger Trio** - The term 'Trigger Trio' has replaced the previous phrase 'Toxic Trio' which was used to describe the issues of domestic violence, mental ill-health and substance misuse which have been identified as common features of families where harm to women and children has occurred (see separate entries). In an analysis of Serious Cases Reviews undertaken by Ofsted in 2011, they found that in nearly 75% of these cases two or more of the issues were present. These factors will have a contextual impact on the safeguarding of children and young people.

**Upskirting** - is defined as someone taking a picture under another person's clothing without their knowledge, with the intention of viewing their genitals or buttocks, with or without underwear. The intent of upskirting is to gain sexual gratification or to cause the victim humiliation, distress or alarm. If this is between pupils, we will follow the peer on peer abuse procedure. There are behaviours that would be considered as sexual harassment which may be pre-cursors to upskirting. The use of reflective surfaces or mirrors to view underwear or genitals will not be tolerated and we will respond to these with appropriate disciplinary action and education.

In 2019 the Voyeurism Offences Act came into force and made the practice of upskirting illegal.

## Indicators of abuse

**In general ANY of the indicators below should trigger concern, and a conversation with the student and/or a referral to a DSL, who will then decide how to take it further. Please make a note of your conversation with the student as per procedures.**

**These indicators are not in order of importance.**

As regards the student:

- an extended or repeated pattern of absence; consider how many periods the student is missing, if they occur in any pattern, and how many days
- regularly coming in late, or reports of going home late (or not at all)
- evidence of running away from home
- a drop in performance
- signs of low motivation, mood swings or changes in emotional wellbeing
- changes in behaviour that affect emotional wellbeing
- disengaging from previous positive peer groups, friendships
- problems sleeping
- problems eating or changes in eating habits
- bed wetting
- soiling clothes
- excessive risk taking
- obsessive behaviour
- experiencing nightmares
- evidence of self-harm, treatment for depression, attempted suicide or thoughts of suicide being voiced, social isolation, eating disorders or substance abuse
- having injuries including bruising that are unexplained and unwilling to be looked at
- appearing with unexplained gifts or new possessions
- having unexplained amounts of money
- having multiple mobile phones
- associating with other young people known to be involved in exploitation
- having older boyfriends or girlfriends
- suffering from sexually transmitted infections
- drug and alcohol misuse
- displaying inappropriate sexualised behavior
- increased social media and phone/text use, almost always secretly
- increase in aggression, violence and fighting
- carrying weapons – knives, baseball bats, hammers, acid
- travel receipts that are unexplained
- has contracted a sexually transmitted infection or has an unwanted pregnancy
- has a history with missing educational links and unexplained housemoves
- is required to earn a minimum amount of money every day

- works in various locations
- is known to beg for money
- is being cared for by adult/s who are not their parents and the quality of the relationship between the child and their adult carers is not good
- is one among a number of unrelated children found at one address
- has not been registered with or attended a GP practice
- has been seen in places known to be used for sexual exploitation or drug use
- clothing unusual for a child i.e. inappropriate for age, or borrowing clothing from older people
- having keys to premises other than those known about
- entering or leaving vehicles driven by unknown adults
- appears excessively afraid of being deported
- being found in areas where the young person has no known links
- inappropriate use of the internet and forming on-line relationships, particularly with adults.

As regards the parent(s) or guardian(s):

- lack of parental engagement with college
- excessive parental restriction and control of movements
- parental control of income
- students being allowed only limited career choices

As regards the wider family:

- a history of siblings leaving education to marry early;
- evidence of family disputes/conflict, domestic violence/abuse or running away from home.

Other factors:

- comments by other students which concern you
- older males in particular seen to be hanging around the site, especially in cars

## **Specific indicators of Four Main types of Abuse**

### **Physical abuse**

#### **The nature of physical abuse**

Most children collect cuts and bruises quite routinely as part of the rough and tumble of daily life. Clearly, it is not necessary to be concerned about most of these minor injuries. But accidental injuries normally occur on the *bony prominences* – e.g., shins. Injuries on the *soft* areas of the body are more likely to be inflicted intentionally and should therefore make us more alert to other concerning factors that may be present.

#### **Indicators of physical abuse / factors that should increase concern**

- Multiple bruising or bruises and scratches (especially on the head and face)
- Clusters of bruises – e.g., fingertip bruising (caused by being grasped)
- Bruises around the neck and behind the ears – the most common abusive injuries are to the head
- Bruises on the back, chest, buttocks, or on the inside of the thighs
- Marks indicating injury by an instrument – e.g., linear bruising (stick), parallel bruising (belt), marks of a buckle
- Bite marks
- Deliberate burning may also be indicated by the pattern of an instrument or object – e.g., electric fire, cooker, cigarette
- Scalds with upward splash marks or *tide marks*
- Untreated injuries
- Recurrent injuries or burns
- Bald patches.

**It is perfectly acceptable to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:**

- the explanation given does not match the injury
- the explanation uses words or phrases that do not match the vocabulary of the child
- no explanation is forthcoming
- the child (or the parent/carer) is secretive or evasive
- the injury is accompanied by allegations of abuse or assault

**You should be concerned if the child or young person:**

- is reluctant to have parents/carers contacted
- runs away or shows fear of going home
- is aggressive towards themselves or others
- flinches when approached or touched
- wears long sleeves during hot weather
- is unnaturally compliant in the presence of parents/carers.
- has a fear of medical help or attention
- admits to a punishment that appears excessive.

## **Emotional abuse**

### **The nature of emotional abuse**

Emotional abuse is difficult to define, identify/recognise and/or prove. Emotional abuse is chronic and cumulative and has a long-term impact. All kinds of abuse and neglect have emotional effects although emotional abuse can occur by itself. Children can be harmed by witnessing someone harming another person – as in domestic violence.

It is sometimes possible to spot emotionally abusive behaviour from parents and carers to their children, by the way that the adults are speaking to, or behaving towards children. An appropriate challenge or intervention could affect positive change and prevent more intensive work being carried out later on.

### **Indicators of emotional abuse**

#### **Developmental issues**

- Delays in physical, mental and emotional development
- Poor academic performance
- Speech disorders, particularly sudden disorders or changes

#### **Behaviour**

- Acceptance of punishment which appears excessive
- Over-reaction to mistakes
- Continual self-deprecation (I'm stupid, ugly, worthless etc)
- Neurotic behaviour (such as rocking, hair-twisting, thumb-sucking)
- Self-mutilation
- Suicide attempts
- Drug/solvent abuse
- Running away
- Compulsive stealing, scavenging
- Acting out
- Poor trust in significant adults
- Regressive behaviour
- Eating disorders
- Destructive tendencies
- Neurotic behaviour
- Arriving early, leaving late

#### **Social issues**

- Withdrawal from physical contact
- Withdrawal from social interaction
- Over-compliant behaviour
- Insecure, clinging behaviour
- Poor social relationships

#### **Emotional responses**

- Extreme fear of new situations

- Inappropriate emotional responses to painful situations (“I deserve this”)
- Fear of parents being contacted
- Self-disgust
- Low self-esteem
- Unusually fearful with adults
- Lack of concentration, restlessness, aimlessness
- Extremes of passivity or aggression

## **Sexual Abuse**

### **The nature of sexual abuse**

Sexual abuse is often perpetrated by people who are known and trusted by the child – e.g., relatives, family friends, neighbours, people working with the child in college, faith settings, clubs or activities. Children can also be subject to child sexual exploitation.

### **Characteristics of child sexual abuse:**

- it is often planned and systematic – people do not sexually abuse children by accident, though sexual abuse can be opportunistic
- grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent
- grooming the child’s environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Most people who sexually abuse children are men, but some women sexually abuse too.

### **Indicators of sexual abuse**

#### **Physical observations**

- Damage or soreness to genitalia, anus or mouth and other medical problems such as chronic itching, unexplained recurrent urinary tract infections and discharges or abdominal pain
- Sexually transmitted diseases
- Unexpected pregnancy

#### **Behavioural observations**

- Sexual knowledge inappropriate for age
- Sexualised behaviour or affection inappropriate for age
- Sexually provocative behaviour/promiscuity
- Hinting at sexual activity
- Inexplicable decline in academic performance
- Depression or other sudden apparent changes in personality – such as becoming insecure or clinging
- Lack of concentration, restlessness, aimlessness
- Socially isolated or withdrawn
- Overly-compliant behaviour
- Acting out, aggressive behaviour

- Poor trust or fear concerning significant adults
- Regressive behaviour, nightmares
- Onset of insecure, clinging behaviour
- Arriving early, leaving late, running away from home
- Suicide attempts, self-mutilation, self-disgust
- Suddenly drawing sexually explicit pictures
- Eating disorders or sudden loss of appetite or compulsive eating
- Trying to be 'ultra-good' or perfect; overreacting to criticism.

## **Neglect**

### **The nature of neglect**

Neglect is a lack of parental care but poverty and lack of information or adequate services can be contributory factors. Far more children are registered to the category of neglect on child protection plans than to the other categories. As with abuse, the number of children experiencing neglect is likely to be much higher than the numbers on the plans.

### **Neglect can include parents or carers failing to:**

- provide adequate food, clothing and shelter
- protect a child from physical and emotional harm or danger
- ensure adequate supervision or stimulation
- ensure access to appropriate medical care or treatment.

### **NSPCC research has highlighted the following examples of the neglect of children:**

- frequently going hungry
- frequently having to go to college in dirty clothes
- regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse
- being abandoned or deserted
- living at home in dangerous physical conditions
- not being taken to the doctor when ill or not receiving dental care

Neglect is a difficult form of abuse to recognise and is often seen as less serious than other categories. It is, however, very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group.

Neglect is often noticed at a stage when it does not pose a risk to the child. The duty to safeguard and promote the welfare of children would suggest that an appropriate intervention or conversation at this early stage can address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm or in significant need. (What to do if you are worried a child is being abused, DfE 2015)

Neglect is often linked to other forms of abuse, so any concerns college staff have should at least be discussed with the DSL.

**Physical indicators of neglect**

- Constant hunger and stealing food
- Poor personal hygiene - unkempt, dirty or smelly
- Underweight
- Dress unsuitable for weather
- Poor state of clothing
- Illness or injury untreated

**Behavioural indicators of neglect**

- Constant tiredness
- Frequent absence or lateness
- Missing medical appointments
- Isolated among peers
- Stealing or scavenging, especially food
- Destructive tendencies

## Roles & Responsibilities

### Designated Staff Members.

**The Principal**, Ali Foss, has overall responsibility for child protection within College, but is free to delegate this responsibility to others as required.

### CMT & HR

- Contribute to inter-agency working in line with guidance
- Carry out tasks delegated by the Governing body such as training of staff; safer recruitment; maintaining a single central register
- Provide support and advice on all matters pertaining to safeguarding and child protection to all staff regardless of their position within the College
- Treat any information shared by staff or students with respect and follow procedures
- Ensure that allegations or concerns against staff are dealt with in accordance with guidance from Department for Education (DfE), Hampshire Safeguarding Children Partnership (HSCP) and Hampshire County Council (HCC)

**The DSL/AP, Personal Development, Behaviour & Welfare (Designated Safeguarding Lead)**, Beth Linklater, has lead responsibility for dealing with child protection, safeguarding and PREVENT related issues providing advice and support to other staff; liaising with Hampshire LA, the LSCP, PREVENT agencies and Colleges where appropriate; and working with other agencies. She is a member of the College Management Team. She is also the Designated Teacher for Looked After Children. In addition to the role of staff and senior management team the DSL will:

- Assist the Governing Body in fulfilling their responsibilities under section 175 or 157 of the Education Act, 2002
- Attend initial training for the role and refresh this every other year. By attending appropriate training and demonstrating evidence of continuing professional development thereafter:
- Ensure every member of staff knows who the DSL is, is aware of the DSL role and has their contact details
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the DSL
- Ensure that whole College training occurs regularly with at least annual updates so that staff and volunteers can fulfil their responsibilities
- Ensure any members of staff joining the College outside of this training schedule receive induction prior to commencement of their duties
- Keep records of child protection concerns securely and separately from the main student files and use these records to assess the likelihood of risk
- Ensure that safeguarding records are transferred accordingly (separate from student files) when a student transfers College

- Ensure that where a student transfers College and is on a Child Protection Plan or is a Child Looked After, the information is passed on or acted upon immediately and that the student's Social Worker is informed
- Link with the HSCP to make sure staff are aware of training opportunities and the latest local policies on safeguarding
- Develop, implement and review procedures in College that enable the identification and reporting of all cases, or suspected cases, of abuse
- Attend case conferences and review meetings as appropriate.
- Be alert to the specific needs of Looked After Children, students with special educational needs, and young carers
- Ensure the Child Protection and Safeguarding Policy and procedures are reviewed annually and available to all stakeholders via the website etc
- Compile the Child Protection and Safeguarding report to Governors and CMT
- Ensure information is available to tutors and support staff relating to looked after children (legal status, contacts, care arrangements, social worker's details etc)
- Keep detailed and accurate records of concerns and referrals

The other **DSLs** are Chris Tuckwell, Barbara Dossett, Lyn Oram, Lianne Wright, Lucy Poynter and Denise Valler. Their role is to:

- Report to Beth Linklater as Designated Safeguarding Lead, and support her in her work outlined above
- Know how to make an appropriate referral.
- Be available to provide support and advice to other staff on issues relating to child protection/**radicalization**
- Be available to listen to students at college and to refer them to other appropriate people at College (e.g. the Counselling Service)
- Deal with individual cases, including attending case conferences and review meetings as appropriate.
- Receive training in child protection issues and inter-agency working, as required by the local safeguarding children partnership and receive refresher training at least every two years.
- Keep up to date with developments in child protection/**radicalization** issues.
- Be alert to the specific needs of Looked After Children, students with special educational needs (SEN), and young carers
- Raise awareness of safeguarding/**radicalization** within the College
- Train staff and Governors on child protection and safeguarding when required
- Keep detailed and accurate records of concerns and referrals

**All students and staff** should be aware of the College's Child Protection Memo published in the Staff Handbook, and the Procedure and Guidance for Identifying and Reporting Cases, or Suspected Cases of Abuse.

## All staff

All staff have a key role to play in identifying concerns early and in providing help for students. To achieve this they will:

- Establish and maintain an environment where students feel secure, are encouraged to talk and are listened to.
- Ensure students know that there are adults in the College whom they can approach if they are worried about any problems.
- Plan opportunities within the curriculum for students to develop the skills they need to assess and manage risk appropriately and keep themselves safe.
- Attend training in order to be aware of and alert to the signs of abuse.
- Maintain an attitude of “it could happen here” with regards to safeguarding.
- Record their concerns if they are worried that a student is being abused and report these to the relevant person as soon as practical that day.
- If the disclosure is an allegation against a member of staff they will follow the allegations’ procedures (see separate policy).
- Follow the procedures set out above and take account of the KCSiE guidance issued by the DfE.
- Support relevant students in line with their child protection plan.
- Treat information with confidentiality but never promising to “keep a secret”.
- In the context of early help, staff will notify colleagues and/or parents of any concerns about their students, and provide them with, or signpost them to, opportunities to change the situation.
- Ensure they know who the designated safeguarding lead (DSL) and deputy DSLs are and know how to contact them.
- **Include Prevent referrals in their referrals to DSLs**

**The Governing Body** is accountable for ensuring the College has effective child protection, **PREVENT** and safeguarding policies and procedures in place and for monitoring their College’s compliance with them. They should ensure that an appropriate senior member of staff is designated to take lead responsibility for dealing with child protection/**radicalization** issues, providing advice and support to other staff, liaising with the local authority and working with other agencies (see Section 175 of the Education Act 2002). They need to ensure that the College:

- keeps students safe and challenges poor and unsafe practice
- The College has effective Safeguarding Policies & Procedures including a Child Protection Policy; a Prevent Policy and a Staff Behaviour Policy and including effective partnership working between all those involved with providing safeguarding services for students
- HSCP is informed annually about the discharge of duties via the safeguarding audit
- Recruitment, selection and induction follows safer recruitment practice including all appropriate checks.
- Allegations against staff are dealt with by the Principal. Allegations against the Principal are dealt with by the Chair of Governors and/or LADO

- A member of the senior staff team is allocated the role of Designated Safeguarding Lead (DSL) and has this recorded in their job description. Deputies are available in her absence.
- Staff have been trained appropriately and this is updated in line with guidance
- Any safeguarding deficiencies or weaknesses are remedied without delay
- They have identified a nominated Governor for Safeguarding

However, neither the Governing body, nor individual Governors, have a role in dealing with individual cases or a right to know details of cases (except when exercising their disciplinary functions in respect of allegations against a member of staff).

**The designated member of the Governing body with responsibility for child protection issues is Islam Jalaita.** He is responsible for liaising with the Principal and Designated Safeguarding Lead over matters regarding child protection, as detailed above. To assist in these duties, the designated Governor will seek appropriate training.

## **Glossary**

<b>CAMHS</b>	Child and Adolescent Mental Health Services
<b>DBS</b>	Disclosure & Barring Service
<b>DFE</b>	Department for Education
<b>DSL</b>	Designated Safeguarding Lead
<b>EHH</b>	Early Help Hub
<b>HSCP</b>	Hampshire Safeguarding Children Partnership
<b>LA</b>	Local Authority (in our case Hampshire)
<b>LADO</b>	Local Authority Designated Officer
<b>LSCP</b>	Local Safeguarding Children Partnership
<b>MASH</b>	Multi-Agency Safeguarding Hub