Glyne Gap School

Curriculum Guideline 2 (CG2): Safeguarding and Child Protection

Contents

Introduction

Safeguarding children is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.

Safeguarding and promoting the welfare of children is defined as
- Providing help and support to meet the needs of children as soon as problems emerge.
- Protecting children from maltreatment, whether that is within or outside the home, including online.
- Preventing impairment of children's mental and physical health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable children to have the best outcomes.

Child protection is the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Safeguarding is not just about protecting children from deliberate harm, neglect and failure to act. It relates to broader aspects of care and education, including:

- Children's and learners' health and safety and wellbeing (both online and offline)
- The use of reasonable force
- Meeting the needs of children and learners with medical conditions
- Providing first aid
- Educational visits
- Personal care and emotional wellbeing
- Online safety and associated issues
- Appropriate arrangements to ensure children's and learners' security, taking into account the local context.

Guiding Principles
- At the heart of the **school's philosophy** is the belief that school … i**s a place where everyone is treated with dignity, with respect and is of equal worth.**
- We are a school where learning and personal development takes place in a **climate of trust and confidence** and where we **value everyone's unique contribution** to our community.
- Maintaining children's welfare is our paramount concern and **everyone has a responsibility** for safeguarding and promoting the welfare of children and young people, sharing relevant information promptly and safely.
- We have a collective attitude that **'it could happen here'** and will always ask questions around the welfare of a child.

- When concerned about the welfare of a child, staff members always act in the **best interests of the child**.
- We are **proactive** in ensuring children are kept safe through our curriculum that focusses on the **whole child promoting the social, physical, emotional and moral development** and **feeling safe.**
- We have a **whole school child centred and co-ordinated approach** to safeguarding the school curriculum and school procedures are outlined below.

The United Nations Declaration of the Rights of the Child state that … **all children have the right not to be harmed…and …the right always to be among the first to get protection**

This policy has been developed in accordance with the principles established by the Children Act 1989, the Education Act 2002, and the Children and Social Care Act 2017; and in line with Working Together to Safeguard Children (2023) and Keeping Children Safe in Education (2024). It also takes into account Sexual Offences Act (2003) which states that it is an offence for a person aged 18 or over to have a sexual relationship with a child under 18, where that person is in a position of trust in respect of that child, even if the relationship is consensual.

In order to uphold our duty to ensure all staff understand their responsibilities as outlined in Part 1 of Keeping Children Safe in Education (2024), we have incorporated the contents of Part 1 into annual staff safeguarding training. We feel that this is a strong way of imparting information to staff and therefore improves safeguarding practice across the school. Homework from this annual training is for staff to read Part 1, which is made readily available, and sign to say they have read it. School staff understand the distinction between 'must' and 'should' in the statutory guidance.

Being Proactive

The school places a high level of importance on its responsibility to be proactive in the safeguarding of pupils. This is done in the following ways:

Through the school's PSHE curriculum we have a unique and preventative role. Key concepts are introduced in the Nursery to children and extended over time through activities which are age-appropriate. Concepts are delivered through both the Tier 1 PSHE curriculum and the Tier 2 Personal Development curriculum; with planning and individual targets set for all pupils. These concepts cover a range of areas but, in this context, the following are important to note:

- **Feelings and Emotions** – enabling pupils to express a range of emotions through speech, signing, symbols, gesture and body language are all critical. Good practice is seen across the school when pupils' emotional expressions are reinforced by our responses as adults and we can model appropriate responses to various activities and situations.
- **Trust** – this is intrinsic to healthy development, positive and rewarding relationships.

- **Self-esteem** – growing up with a positive self-image and valuing themselves as people.
- **Assertiveness** – the ability to stand up for what you believe to be right, being able to voice opinions without causing offence whilst still respecting the views of others. Many of our pupils find this area very difficult as they 'try hard to please'. Giving opportunities to express a NO choice is very important. Having a clear NO strengthens and validates a YES response.
- An important part of our teaching is to give pupils guidance on **how to keep safe (both on and off line)**. This is exemplified by visitors to the school being required to sign in and sign out and to wear a Visitor lanyard whenever on the school site. Similarly, escorts and drivers, therapists etc. are required to wear their organisational ID. Pupils learn who they can talk to and ask for help in different contexts.
- Pupils are also given **Relationships and Sex** education at an appropriate level for their age and cognitive understanding.

Privacy, particularly at times of Personal Care, is part of the underpinning values of the school when treating children and young people with dignity and respect. Staff are supported in carrying out the pupils' personal care needs alone unless more people are required for the purposes of handling and lifting. Children and young people should be involved in their own intimate care as much as possible, encouraging them to help and ensuring that they are given a chance to do so.

We have a high staff to pupil ratio in all classes and staff know that whilst all pupils they are working with need to be protected, some groups of pupils are potentially at greater risk of harm through additional vulnerabilities or circumstances. Staff knowledge of pupils is excellent and changes of behaviour observed are reported to the DSL of the day and logged on CPOMS, who then follow school procedures. Staff relationships with pupils are excellent and pupils' feel safe; so pupils who are able would talk to a trusted adult in the class team. Staff ensure that when pupils talk about a concern, they are always taken seriously, they will be supported and kept safe, they will never be given the impression that they are creating a problem or have anything to be ashamed about.

The weekly Child Protection Meetings are chaired by the DSL, attended by the DDSL's, where pupils at level 3 and 4 and pupils the school has identified as vulnerable at level2+ are discussed, to give updates and concerns raised to enable shared reflection and decision making. These meetings also enable the Safeguarding team to undertake a 'deep dive' on specific pupils, cases or incidents, reflecting on current practice/systems and 'lessons learned' to inform and enhance future practice. The meetings are minuted and actions and outcomes are recorded on pupil's electronic safeguarding file.

The weekly Multi-disciplinary Liaison Meetings, give staff an important and valuable opportunity to share information about all pupils including those the school identifies as from Hard to Reach/Vulnerable families for whom parenting presents a challenge and

discuss any issues prior to them becoming concerns. This process may lead to referral to Early Help services.

The Attendance Team meet termly to monitor the whole schools attendance and look for patterns or trends. Pupils with persistent or severe absence is discussed and individual supports agreed. This may include creating an attendance support plan, liaising with medical professionals, meeting with parents, or referral to children's service. Attendance for identified pupils is monitored by the safeguarding team at 'The Attendance weekly meeting'. This is chaired by the designated senior leader responsible for attendance (Jayne Gosling). Minutes of actions and next steps are recorded on pupil's electronic safeguarding file. The DSL includes a section on attendance in her report for discussion at the Safeguarding governors meetings 3 times a year.

Roles and Responsibilities

- We are committed to safe **recruitment and selection** procedures to safeguard children**.** The School Business Manager (Associate Governor), Assistant Business Manager and Headteacher DDSL have completed the safer recruitment training approved by the Secretary of State.

  Pre-employment checks ensure that we meet all the relevant legal requirements in this respect. These checks are carried out before an individual starts work in school and evidence given to our Personnel Support Unit (PSU). We keep a record of these security checks. Only a provisional offer of employment can be made prior to all the checks below being successfully completed:
    - Evidence of identity
    - Enhanced Disclosure Barring Service (DBS) check with children's and adult's barred list check
    - A prohibition from teaching check where appropriate (QTS)
    - Childcare Disqualification Declaration
    - Evidence of eligibility to work in the UK (if appropriate)
    - Two references
    - Qualifications (if necessary for the post)
    - Job application form
    - Health statement

  The Data Protection Act 2018 and the General Data Protection Regulations 2018 are not barriers to sharing information and **do not change duties under safeguarding**. They are there to ensure that personal information is managed in a sensible way and that a balance is struck between a person's privacy and public protection.

  The school takes a proportional risk based approach to temporary staff and volunteers. They are informed of who the DSL is and what to do in the case of any concerns around pupil welfare. DBS checks are carried out on all volunteers. See SH4 'Recruitment and Selection Policy' for more information.

- We believe that safeguarding is the responsibility of **all** school staff, both through the proactive measures outlined above and through sharing any concerns with the relevant people (see 'procedures').

- It is the responsibility of the school to appoint a **Designated Safeguarding Lead** – currently Jayne Gosling. In addition the school has appointed **Deputy Safeguarding Leads**, Kirsty Prawanna, Barbara Clarke, and Sarah Tidmarsh. To be effective they must:
  - Refer all cases of suspected abuse to the local authority children's social care (via the SPOA in the first instance) and contact the police where necessary;
  - Refer cases to the Channel programme where there is a radicalisation concern as required;
  - Liaise with agencies providing early help services and coordinate referrals from the school to targeted early help services for children in need of support. Monitor any cases referred to early help and consider referral to children's services where the situation does not improve.
  - Carry out systematic monitoring of pupils about whom there are concerns using a system of Assess, Plan, Intervene and Review to ensure concerns are acted upon in a timely manner when necessary;
  - Carry out systematic monitoring of pupil attendance and recognise that school absence may be an indicator of abuse;
  - Liaise directly with other agencies where necessary to ensure information sharing;
  - Ensure there is a deputy acting on her behalf in her absence;
  - Liaise with the Headteacher to inform her of issues;
  - Liaise with the associate governor for safeguarding to ensure Governors are aware of safeguarding issues within the school;
  - Report any accidental injuries, which have occurred within an Early Years setting, to Ofsted and the relevant Education Division Safeguarding Consultant in the Early years Improvement Team;
  - Liaise with the schools safeguarding partners (LA, Clinical commissioning group within the LA, Chief office of police within the LA)
  - Act as a source of support, advice and expertise within the school;
  - Attend appropriate training every two years in order to:
    - Understand the assessment process for providing early help and intervention.
    - Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so.
    - Ensure each member of staff has access to and understands the school's child protection policy and procedures, especially new and part time staff.
    - Be alert to the specific needs of children in need, those with special educational needs and young carers.
    - Be able to keep written records of all concerns, discussions and decisions, including the rationale for those decisions (including reasons for referrals) which are in line with East Sussex Local Safeguarding Board *Keeping Records of Child Protection and Welfare Concerns Guidance.* As a school we use an encrypted and

secure web data base called CPOMS to which all our staff have access for the purposes of recording concerns they may have about children.

- Ensure child protection files are kept up to date and information will be stored securely and files are only accessed by those who need to see them and where files or content is shared, this will happen in line with information sharing advice and guidance.
- Obtain access to resources and attend any relevant or refresher training courses.
- Encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school or college may put in place to protect them.
- Maintain accurate records of staff induction and training.

- Ensure the school's child protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, working with the governing body regarding this.
- Ensure the child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school in this.
- Ensure staff receive safeguarding training at induction and regular safeguarding and child protection training annually and updates throughout the year where necessary to provide them with relevant skills and knowledge to safeguard children effectively.
- Attend regular DSL network meetings as a means of keeping knowledge up to date.
- Link with the local LSCB to make sure staff are aware of training opportunities and the latest local policies on safeguarding.
- Where children leave the school ensure their child protection file is transferred to the new school or college as soon as possible.
- Complete an audit of the schools safeguarding arrangements at frequencies specified by the East Sussex Local Safeguarding Children Board.
- Provide regular reports, to the governing body detailing changes and reviews to policy, training undertaken by staff members and the number of children with child protection plans and other relevant data.
- Liaise with the Safeguarding Advisor to the Governing Body (Elisabeth Lawrence). She champions good practice and provides critical challenge.
- Take lead responsibility for remedying any deficiencies and weaknesses identified in safeguarding and child protection arrangements.

Recognising Child Abuse

- The Child Protection Procedures apply to all children under the age of 18 years. There are similar procedures in place for the safeguarding of vulnerable adults. Our procedures are the same for pupils aged 19 and also take into account any risks to the unborn child.
- Children and young people are abused in families, institutional settings or, more rarely, by strangers. Abuse, neglect and safeguarding issues are rarely standalone events; in most cases multiple issues will overlap with one another
- There is an increased vulnerability to disabled children and young people because they are more dependent and have less control over their lives and their bodies and are

often in the care of many more adults than other children and young people. This emphasises the importance of proactive attitudes and teaching for our pupils and students.

- Safeguarding action may be needed to protect children and learners from:
    - neglect
    - physical abuse
    - sexual abuse
    - emotional abuse
    - child missing from education
    - bullying, including online bullying and prejudice-based bullying
    - child on child abuse (including up skirting which is a criminal offence)
    - child on child sexual violence and sexual harassment
    - teenage relationship abuse
    - racist, disability and homophobic or transphobic abuse
    - gender-based violence/violence against women and girls
    - radicalisation and/or extremist behaviour (See PREVENT strategy risk assessment)
    - child sexual exploitation (CSE) and trafficking
    - other forms of child exploitation (e.g. criminal)
    - the impact of new technologies on sexual behaviour, for example sexting
    - substance misuse
    - issues that may be specific to a local area or population, for example gang activity and youth violence, honour based violence (HBV)
    - domestic violence
    - female genital mutilation FGM (must be reported to the police)
    - forced marriage
    - fabricated or induced illness
    - poor parenting, particularly in relation to babies and young children
    - other issues not listed here but that pose a risk to children, young people and vulnerable adults.

Abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another. Hate incidents e.g. racist, homophobic, gender or disability based bullying, are reported, recorded and considered under safeguarding arrangements. Preventing Extremism and Radicalisation can also be found in our 'PREVENT Strategy Risk Assessment'

Appendix 1 contains more information on the above and outlines some signs to look out for.

Procedures
(procedures for concerns raised during Holiday Club are outlined in Appendix 4)

- If a staff member has concerns relating to the safety of a child or young person, they should immediately discuss them with the Designated Safeguarding Lead (or one of her deputies in her absence).
- Concerns must always be given the highest priority and raised **as soon as possible**.
- It is the **responsibility of the Designated Safeguarding Lead** to **decide** upon an appropriate **action** and they will inform members of staff of the outcome. In order to make a decision the Continuum of Need will be consulted. Options are likely to be:
  - Monitoring of the pupil's situation and needs;
  - Managing any support for the child internally via the school's own support processes;
  - Referral to Children's Services at level 3 for an early help assessment;
  - Referral to Children's Services at level 4 for statutory services.
- If a child is in immediate danger or is at risk of harm, the Designated Safeguarding Lead will make a referral to Children's Services immediately via the SPOA (01323 464222). While it is preferable for the DSL to make the referral to Children's Services, anyone can do so and the DSL should be informed if this has happened.
- The staff member who has raised the concern will be ask to complete a Record of Concern on CPOMS by the DSL. This must be completed on the same day as the information was given to the Designated Safeguarding Lead. A body map may be required to be completed to give specific information.
- When completing the CPOMS Record of Concern, care should be taken to write facts as accurately as possible and give as much information as possible.
- All concerns, discussions and decisions made and the reasons for those decisions will be recorded in writing on CPOMS. Records will include:
  - A clear and comprehensive summary of the concern
  - Details of how the concern was followed up and resolved
  - A note of any action taken, decisions reached and the outcome
- Records of concern will be kept on the child's individual CPOMS file and consulted if further concerns are raised.
- Matters relating to child protection will be treated with confidentiality and shared on a need to know basis only.
- Where the decision is taken not to make a referral to Children's Services, the DSL may decide to undertake a period of in-depth monitoring of the pupil. The class team will be asked to complete daily monitoring forms, which will be reviewed by the DSL. These will enable a clear picture to be built up and will serve as evidence should it be needed at a later date. On reviewing the monitoring forms the DSL may decide to make a referral to Children's Services (at level 3 or 4), continue with in-depth monitoring for an extended period, or return to standard procedures of monitoring.
- In the event of a disclosure by a pupil, the school's **guidance on how to respond** to pupils is as follows:

Helpful ideas	What to avoid:
• Remain calm	• Doing nothing
• Reassure child if distressed	• Delaying help
• Let the child know you will help	• Showing distaste or shock

• Listen carefully if any information is given • Take what is said seriously	• Speculating about what may have happened • Making negative comments • Expressing disbelief • Asking leading questions e.g. did your…..do that? • Telling the pupil off e.g. Why didn't you tell me before? • Agreeing to keeping information secret

- In the event of the **Designated Safeguarding Lead referring** any concerns about a pupil to **Social Care** (via the SPOA), another part of the process begins (see appendix 7) i.e. a **Strategy** discussion/meeting – this involves various different agencies. This part of the Child Protection referral process should take within the same day and may involve school staff in further discussions and may lead to a **Safeguarding/Child Protection Case Conference**. Attendance at a CP Case Conference is very important and class teachers or a senior member of staff should attend. If the class teacher attends then the Designated Safeguarding Lead will support in briefing the member of staff. Written information should be provided if attendance is impossible.
- In any conflict between the needs of the child and those of the parents/carers, the **needs of the child must be put first**. However, it is **crucial** to try to maintain our **relationships with parents/carers** during any Safeguarding/CP process although clearly this has sensitivities and potential demands. We are a school who has pupils at the heart of all we do. This does not prevent us from giving support to parents and showing them compassion.

Due to the close professional relationship with pupils, **staff** are also vulnerable to allegations. These accusations may be false, malicious or misplaced. They may also be true. On the extremely rare likelihood that this happens all **concerns** should be taken directly to the Headteacher. If the allegation is against the Headteacher, the Chair of Governors will be contacted. Concerns about staff can also be reported to the NSPCC on 0808 800 5000. Allegations about members of staff should be referred to the Local Authority Designated Officer (LADO) by the Headteacher/DSL. (See appendix 8)

LOW LEVEL CONCERNS (concerns which do not meet the Threshold of harm)

- If you have a concern about a member of staff you must report this to the Head teacher- Kirsty Prawanna
- 'The term 'low-level' concern does not mean that it is insignificant, it means that the behaviour towards a child does not meet the threshold of harm.
- A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' - that an adult working in or on behalf of the school or college may have acted in a way that:

• is inconsistent with the staff code of conduct, including inappropriate conduct outside of work, and

• does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the LADO.

Examples of 'low-level' concerns which 'could include, but are not limited to:

• being over friendly with children;

• having favourites;

• taking photographs of children on their mobile phone;

• engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or,

• using inappropriate sexualised, intimidating or offensive language.

The school has exemplary practice which is demonstrated by the positive, proactive and professional attitudes of all staff to this important area of the school.

The use of 'reasonable force'

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

Further guidance on the use of reasonable force and positive handling should be sought within 'CG7 – Supporting Positive Attitudes and Good Behaviour'

When managing incidents of positive handling the school will consider whether to liaise with the LADO, where it is thought that the physical intervention may lead to an allegation.

Supporting Staff

We recognise that staff who have become involved with a child who has suffered harm, or appears to be likely to suffer harm, may find the situation upsetting. We will support such

staff by providing an opportunity to talk through their anxieties with the Designated Safeguarding Lead and to seek further support as appropriate.

Related Policies

This document should be read in conjunction with a number of other policy documents, particularly:

CG1 – Teaching and Learning policy

CG3 – Working with Families

CG4 – Meeting pupils' medical, care and health needs

CG6 – Personal, Social and Health Education

CG7 – Supporting Positive Attitudes and Good Behaviour

CG9 – Developing the Whole Child

CG12 – Equal Opportunities

SH29 - Online Safety Policy

HR3 – Health and Safety

PREVENT Strategy Risk Assessment

Appendices

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Last updated October 2024

APPENDIX 1 – Definitions of Abuse and Indicators of Harm

PHYSICAL ABUSE

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

Indicators in the child

Bruising

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

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

Fractures

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

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

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement

Rib fractures are only caused in major trauma such as in a road traffic accident, a severe

shaking injury or a direct injury such as a kick.

Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the child will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

Mouth Injuries

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

Poisoning

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

Fabricated or Induced Illness

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

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

Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.

A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded.

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

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

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

Scars

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

Emotional/behavioural presentation

Refusal to discuss injuries

Admission of punishment which appears excessive

Fear of parents being contacted and fear of returning home

Withdrawal from physical contact

Arms and legs kept covered in hot weather

Fear of medical help

Aggression towards others

Frequently absent from school

An explanation which is inconsistent with an injury

Several different explanations provided for an injury

<u>Indicators in the parent</u>

May have injuries themselves that suggest domestic violence

Not seeking medical help/unexplained delay in seeking treatment

Reluctant to give information or mention previous injuries

Absent without good reason when their child is presented for treatment

Disinterested or undisturbed by accident or injury

Aggressive towards child or others

Unauthorised attempts to administer medication

Tries to draw the child into their own illness.

Past history of childhood abuse, self-harm, false allegations of physical or sexual assault

Parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids

Observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care.

May appear unusually concerned about the results of investigations which may indicate physical illness in the child

Wider parenting difficulties may (or may not) be associated with this form of abuse.

Parent/carer has convictions for violent crimes.

Indicators in the family/environment

Marginalised or isolated by the community

History of mental health, alcohol or drug misuse or domestic violence

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Past history of childhood abuse, self-harm, false allegations of physical or sexual assault or a culture of physical chastisement.

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

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

Indicators in the child
Developmental delay
Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
Aggressive behaviour towards others
Child scapegoated within the family
Frozen watchfulness, particularly in pre-school children
Low self-esteem and lack of confidence
Withdrawn or seen as a 'loner' - difficulty relating to others
Over-reaction to mistakes
Fear of new situations
Inappropriate emotional responses to painful situations
Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
Self-harm
Fear of parents being contacted
Extremes of passivity or aggression
Drug/solvent abuse
Chronic running away
Compulsive stealing

Low self-esteem

Air of detachment – 'don't care' attitude

Social isolation – does not join in and has few friends

Depression, withdrawal

Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention

Low self-esteem, lack of confidence, fearful, distressed, anxious

Poor peer relationships including withdrawn or isolated behaviour

Indicators in the parent

Domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse.

Abnormal attachment to child e.g. overly anxious or disinterest in the child

Scapegoats one child in the family

Imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection.

Wider parenting difficulties may (or may not) be associated with this form of abuse.

Indicators of in the family/environment

Lack of support from family or social network.

Marginalised or isolated by the community.

History of mental health, alcohol or drug misuse or domestic violence.

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

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

NEGLECT

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

Once a child is born, neglect may involve a parent or carer failing to:
- *provide adequate food, clothing and shelter (including exclusion from home or abandonment);*
- *protect a child from physical and emotional harm or danger;*
- *ensure adequate supervision (including the use of inadequate care-givers); or*
- *ensure access to appropriate medical care or treatment.*

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators in the child

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

Development
General delay, especially speech and language delay
Inadequate social skills and poor socialization

Emotional/behavioural presentation
Attachment disorders
Absence of normal social responsiveness
Indiscriminate behaviour in relationships with adults
Emotionally needy

Compulsive stealing

Constant tiredness

Frequently absent or late at school

Poor self esteem

Destructive tendencies

Thrives away from home environment

Aggressive and impulsive behaviour

Disturbed peer relationships

Self-harming behaviour

Indicators in the parent

Dirty, unkempt presentation

Inadequately clothed

Inadequate social skills and poor socialisation

Abnormal attachment to the child .e.g. anxious

Low self-esteem and lack of confidence

Failure to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene

Failure to meet the child's health and medical needs e.g. poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy

Child left with adults who are intoxicated or violent

Child abandoned or left alone for excessive periods

Wider parenting difficulties, may (or may not) be associated with this form of abuse

Indicators in the family/environment

History of neglect in the family

Family marginalised or isolated by the community.

Family has history of mental health, alcohol or drug misuse or domestic violence.

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals

Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating

Lack of opportunities for child to play and learn

SEXUAL ABUSE

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

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

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).
Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue (which is classed within a broader range of issues known as child on child abuse) in education and all staff should be aware of it and of the school policy and procedures for dealing with it. The school response to child on child abuse and child on child harmful sexual behaviour is detailed within Appendix 3 of this policy.

Indicators in the child

Physical presentation
Urinary infections, bleeding or soreness in the genital or anal areas
Recurrent pain on passing urine or faeces
Blood on underclothes
Sexually transmitted infections
Vaginal soreness or bleeding
Pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father
Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Emotional/behavioural presentation
Makes a disclosure.
Demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
Inexplicable changes in behaviour, such as becoming aggressive or withdrawn
Self-harm - eating disorders, self-mutilation and suicide attempts
Poor self-image, self-harm, self-hatred

Reluctant to undress for PE

Running away from home

Poor attention / concentration (world of their own)

Sudden changes in school work habits, become truant

Withdrawal, isolation or excessive worrying

Inappropriate sexualised conduct

Sexually exploited or indiscriminate choice of sexual partners

Wetting or other regressive behaviours e.g. thumb sucking

Draws sexually explicit pictures

Depression

Indicators in the parents

Comments made by the parent/carer about the child.

Lack of sexual boundaries

Wider parenting difficulties or vulnerabilities

Grooming behaviour

Parent is a sex offender

Indicators in the family/environment

Marginalised or isolated by the community.

History of mental health, alcohol or drug misuse or domestic violence.

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

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

Family member is a sex offender

Taken from LCSB model Safeguarding and Child Protection Policy

Serious violent crime

All staff should be aware of indicators, which may signal that children are at risk from, or are involved with serious violent crime.

Indicators in the child

Increased absence from school

A change in friendships or relationships with older individuals or groups

A significant decline in performance

Signs of self-harm or a significant change in wellbeing

Signs of assault or unexplained injuries

Unexplained gifts or new possessions.

All staff are aware of the associated risks and understand the measures in place to manage these. (Advice for schools and colleges is provided in the Home Office's Preventing youth violence and gang involvement and its Criminal exploitation of children and vulnerable adults: county lines guidance11.)   Taken from KCSIE 2024

APPENDIX 2 – Government Publications consulted when writing this policy

- Keeping Children Safe in Education 2024 - Statutory guidance for schools and colleges
- Working Together to Safeguard Children 2023
- What to do if you are worried a child is being abused 2015 - Advice for practitioners.
- *Pan-Sussex Child Protection and Safeguarding Procedures*
- Children and Social Work Act 2017
- Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers, May 2024
- East Sussex Record keeping guidance September 2022
- Continuum of Need
- East Sussex Neglect Matrix. October 2023
- Brook Traffic Light Tool
- East Sussex Harmful Sexual Behaviours; Protocol and Guidance when speaking to children January 2023
- East Sussex-Protocol for Managing child on child Harmful Sexual Behaviour in Schools, Settings and Colleges January 2023
- East Sussex Restrictive Physical Intervention / Use of Reasonable Force Guidance for Settings, Schools and Colleges. November 2023
- East Sussex Domestic Abuse toolkit. 2019
- Statutory Framework for the Early Years Foundation Stage. 2024

APPENDIX 3 – Guidelines on Child on Child Abuse

Child on Child abuse

'Child-on-child abuse is abuse that happens between children of a similar age or stage of development.' It **could** be relevant for some of our pupils and we need to **understand** what it is……

- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing   physical harm;
- sexting, upskirting
- Initiation type violence and rituals.

Children can abuse their peers **online** through:

- Abusive and harassing messages
- Non-consensual sharing of indecent nude and semi-nude images and/or videos, especially around chat groups
- Sharing of abusive images and pornography, to those who don't want to receive such content

It is essential that we all understand the importance of **challenging inappropriate behaviours** between peers that are actually abusive in nature.

Downplaying certain behaviours, for example dismissing sexual harassment as "just banter", "just having a laugh", "part of growing up" or "boys being boys" can lead to a **culture of unacceptable behaviours**, an **unsafe environment** for children and in worst case scenarios '**a culture that normalises abuse**'.

We need to remember that child-on-child abuse may be taking place, even if it is not reported.

- When you have a concern that someone is at risk from child on child abuse you must report this immediately to the DSL/DSL of the day and record on cpoms.

In our school it might not be someone's 'intent' to hurt someone, but the other pupil might still be experiencing harm through their behaviour. Behaviour incident forms are completed electronically, if a pupil is injured by another pupil (and if an adult or the pupil themselves are also injured).

- Class teachers monitor all behaviour incident forms and will alert the DSL of any incident of concern to be considered as child on child.
- HOS analyse 'high' behaviour incident forms and consider if they meet the threshold for child on child abuse. They are also looking for any patterns or trends.

Harmful Sexual Behaviour

- If you have a safeguarding concern that child on child harmful sexual behaviour has potentially occurred or is being reported to you, refer any concerns to the DSL immediately who will follow the Protocol for Managing child on child Harmful Sexual Behaviour in Schools, Settings and Colleges. January 2023, Sexual Behaviour Screening Resource for children and young people 2023 or Brooks Traffic Light Tool.

- When discussing any incidents of harmful sexual behaviour in school with parents we have adopted the language of 'initiator' for the pupil/student who has displayed the alleged harmful behaviour (rather than 'perpertrator') and the pupil/student who is receiving the behaviour is known as the recipient (rather than the 'victim').

- DSL reports on the number of risk reduction plans in place at the Safeguarding Governors Meetings 3 times a year.

Remember that we **nurture a positive culture and ethos** at school in relation to relationships and how we interact with each other. This is demonstrated in our attitudes and behaviours. We are also proactive and teach healthy friendships and relationships as part of our PSHE and RSE curriculum. We proactively support creating a positive behaviour for learning for all pupils and there is additional support for pupils who have behaviour that challenges through individual 1 page IPAs and extended IPAs and be being on the A or B list. See CG7 Supporting Positive Attitudes and Good Behaviour for more information.

APPENDIX 4 – Dealing with Safeguarding Concerns during Holiday Club

During Glyne Gap School's Holiday Club, Club staff are responsible for the safeguarding of all children/young people in their care. All members of Club staff are given safeguarding training in line with the school's regular programme of training.

In the event that concerns are raised during Holiday Club, the following procedure should be followed:

- Any concern should be taken to the leader of the Holiday Club on that particular day;
- Club leader to discuss the concern with the Designated Safeguarding Lead (or another member of SLT in her absence);
- The person raising the concern or the Club leader in discussion with the person raising the concern to log the incident on CPOMS
- Club leader to carry out any actions requested by Safeguarding Lead (e.g. contacting parents);

If the DSL feels it necessary, Club leader to contact the SPOA (Single Point of Advice) on 01323 464222 (8:30 – 5:00 Monday to Thursday and 8:30 – 4:30 Friday; Out of hours: 01273 335905/6) and share concerns with them (they are likely to pass on to the Disability Duty Team at Sorrell Drive 01323 466050); If they ask for a referral, Club leader to complete a SOR (Statement of Referral), which can be found at http://sussexchildprotection.procedures.org.uk/ and send to them at 0-19.SPOA@eastsussex.gov.uk ;

- Club leader to update 'outcomes' by adding to CPOMS
- Club leader to keep DSL (or SLT member) informed of any outcomes;
- On DSL's return to school, hold an update meeting for Club leader to update her on meetings/decisions etc.

APPENDIX 5 – Guidelines around Online Safety

Please refer to DFE document 'Teaching online safety in school. Guidance supporting schools to teach their pupils how to stay safe online. January 2023' SH29 - Online Safety Policy

The use of technology is now recognised as an essential life skill and ICT is a powerful tool for our pupils which can be used across the curriculum to enhance learning. In addition, ICT supports the school as a whole to perform its function of delivering high quality pupil learning.

Alongside the significant benefits of ICT come associated risks and Online Safety is an important aspect of Safeguarding. The school takes a proportional response to these risks and acknowledges that our pupils are less vulnerable due to high levels of supervision, but aims to reduce the risks as much as possible in order to keep pupils safe.

The overriding principle when using all forms of ICT is to BE PROFESSIONAL, RESPONSIBLE AND RESPECTFUL and this should be followed in order to minimise risk.

Security

The school takes steps to keep information secure (e.g. Local Authority firewall and security settings, antivirus software, individual password protected user accounts, different levels of access for different accounts, weekly online monitoring email sent to DSL from Schools ICT). In addition staff have a responsibility to keep information secure. This is done by:

- Changing passwords regularly
- Logging off from/locking computers when not in use
- Saving work on the relevant intranet drive rather than on a laptop's hard drive
- Keeping memory sticks safe
- Going through the helpdesk to install any software

Teaching pupils about the associated risks

It is important that we equip pupils with the skills they need to be able to use technology safely. This is covered as part of our PSHE and ICT curriculum and is delivered to all pupils for whom it is relevant (Content, Contact, Conduct, Commerce). At Glyne Gap we have a small cohort of pupils developing higher level functional skills and who are accessing devices independently. These pupils are taught how to be safe online and become responsible digital citizens, using our online safety curriculum. We also endeavour to raise awareness of the risks with parents through school newsletter items to enable them to support their children in staying safe.

<u>Use of photographs and videos</u>

Photographs and videos are useful tools for engaging pupils in learning, recording progress, celebrating learning and promoting the work of the school. Parental consent to use images of pupils is gained at the beginning of each academic year and class teams are informed if any pupil's image is not to be used. Staff have a responsibility to ensure pupils' images are used responsibly and this is done by:

- Using school equipment rather than personal equipment to take photographs and videos
- Storing photos centrally on the school intranet, which is password protected
- Only sharing photos through school channels e.g. school email, intranet

<u>Social media</u>

The school has separate guidelines which outline the potential risks of social media and the measures taken to reduce these risks.

<u>Reporting concerns</u>

Any concerns around Online Safety should be reported to the Designated Safeguarding Lead in the first instance (or a member of the Senior Leadership Team in her absence) and these will be recorded as a Safeguarding Record of Concern. A decision will be made around actions to be taken, which are likely to include informing parents and contacting the Schools Service Desk at the Local Authority.

<u>Related policies</u>

- SH29 - Online Safety Policy
- School Code of Conduct

<u>Guidance for Parents</u>

[Internet Matters](#) – a not-for-profit organisation set up to empower parents and carers to keep children safe in the digital world. Their support for parents includes a range of downloadable guides covering subjects such as transition to secondary school, Vlogging & livestreaming, online gaming and cyberbullying.

[NSPCC](#) - includes a range of resources to help parents keep children safe when they're using the internet, social networks, apps, games and more.

[Parent Info](#) - from CEOP and Parent Zone, Parent Info is a website for parents covering all of the issues amplified by the internet. It is a free service which helps schools engage parents with expert safety advice, endorsed by the National Crime Agency's CEOP command. This website provides expert information across a range of online harms.

Parent Zone - offers a range of resources for families, to help them meet the challenges of the digital age, including parent guides on the latest digital trends and platforms.

<u>Guidance for Pupils</u>

- BBC Own It – Support for young people to take control of their online life, including help and advice, skills and inspiration on topics such as friendships and bullying, safety and self-esteem.

- Childline – includes information for pupils on sexting, gaming, grooming, bullying, porn, relationships.

APPENDIX 6 – Guidelines for the Positive Use of Social Media

<u>Guiding Principles</u>

The internet provides a range of social media tools which allow users to interact with one another. The school aims to help pupils to lead happy and fulfilled lives both now and in the future and the use of these social media tools can provide far reaching benefits to pupils in this e.g. in their learning, social interaction and leisure. In addition, the tools can benefit individual staff members and the school as a whole e.g. development of resources, professional networks and school communications.

However, alongside the enormous benefits provided by these tools, come risks to pupils, staff and the school alike. These guidelines aim to outline beneficial use of social media while raising awareness of the associate risks and provide strategies for reducing these risks.

These Guidelines refer to various uses of social media, namely pupil use, official school use and staff personal use.

<u>Pupil Use of Social Media within School</u>

For some of our pupils Social Media tools may provide great learning opportunities related to social interaction, relationships, information-finding and leisure skills. However, through using these channels our pupils may find themselves in a vulnerable position e.g. cyber-bullying, grooming, child sexual exploitation, radicalisation. In order to reduce the risks posed to pupils through the use of these tools, the following guidelines will be followed:

- Where appropriate pupils are specifically taught about Online Safety and the risks posed to them (e.g. giving out personal information, accepting unknown friends, age restrictions, cyber-bullying);
- Pupils' use of social media is supervised when they are in school;
- The school endeavours to raise parental awareness of the risks posed to pupils who are engaging with social media;
- The school strives to form strong relationships between pupils and staff which allow for honest and open conversations around problems pupils are facing and appropriate opportunities are provided for these discussions to take place.

<u>Official School Use of Social Media</u>

The school may use a variety of social media tools to communicate with others and give information about the school. Examples of tools used by the school are the school website, and parent email. In order to maximise the benefits of the use of these tools while reducing the risks posed, the following guidelines will be followed:

- Official school social media channels are one way, information-giving tools without the capacity for 'commenting' or 'posting' by members of the public;
- Official school social media channels are only updated by agreed members of staff;
- When sharing photographs/video clips of pupils, consent is obtained from parents/carers (gained at the beginning of each academic year);
- Care is taken not to share pupils' personal details (beyond their first name);
- The channels are kept up to date to ensure the school is consistently shown in a positive light.

<u>Staff Personal Use of Social Media</u>

Staff are entitled to a personal and private life and this may involve the use of social media tools. However, there are risks associated with the personal use of social media and these should be considered by all staff members. The diagram overleaf outlines the potential risks presented to pupils, the school and individuals.

The overriding principle when using these social media tools is to BE PROFESSIONAL, RESPONSIBLE AND RESPECTFUL and this should be followed in order to minimise risk.

Potential Risks Involved in your use of Social Media

Risks to the SCHOOL

- engagement in activities which may bring the school into disrepute
- personal views can be interpreted as the views of the school

Risks to PUPILS

- photos in public domain
- sharing of personal information
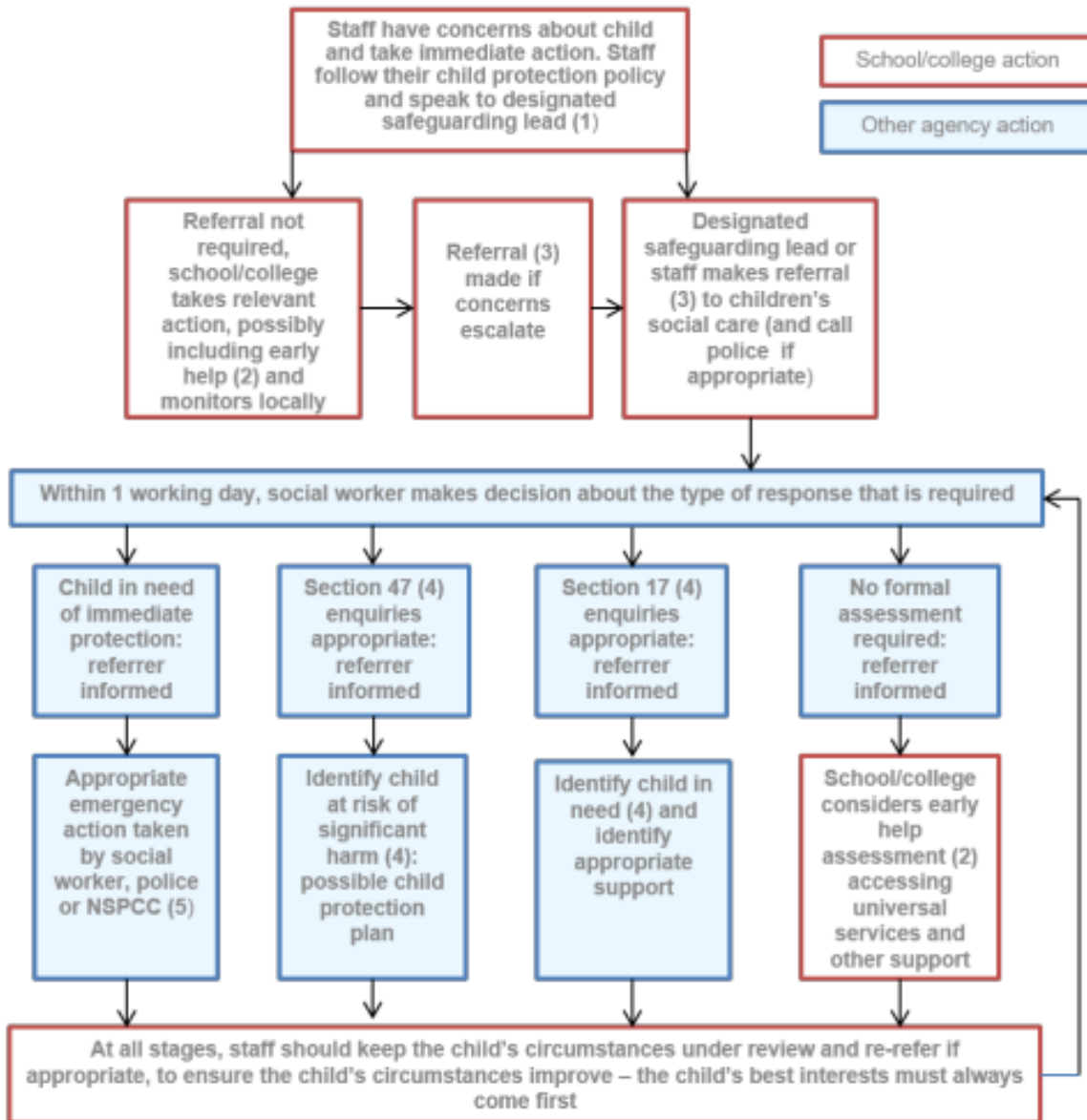- pupil vulnerability to attack, abuse, defamation, insult

Risks to YOURSELF

- blurring of professional boundaries
- vulnerability to allegations

APPENDIX 7 – Actions where there are concerns about a child

Actions where there are concerns about a child

Staff have concerns about child and take immediate action. Staff follow their child protection policy and speak to designated safeguarding lead (1)

School/college action

Other agency action

Referral not required, school/college takes relevant action, possibly including early help (2) and monitors locally

Referral (3) made if concerns escalate

Designated safeguarding lead or staff makes referral (3) to children's social care (and call police if appropriate)

Within 1 working day, social worker makes decision about the type of response that is required

Child in need of immediate protection: referrer informed

Section 47 (4) enquiries appropriate: referrer informed

Section 17 (4) enquiries appropriate: referrer informed

No formal assessment required: referrer informed

Appropriate emergency action taken by social worker, police or NSPCC (5)

Identify child at risk of significant harm (4): possible child protection plan

Identify child in need (4) and identify appropriate support

School/college considers early help assessment (2) accessing universal services and other support

At all stages, staff should keep the child's circumstances under review and re-refer if appropriate, to ensure the child's circumstances improve – the child's best interests must always come first

(1) In cases which also involve an allegation of abuse against a staff member, see Part Four of this guidance.

(2) Early help means providing support as soon as a problem emerges at any point in a child's life. Where a child would benefit from co-ordinated early help, an early help inter-agency assessment should be arranged. Chapter one of Working together to safeguard children provides detailed guidance on the early help process.
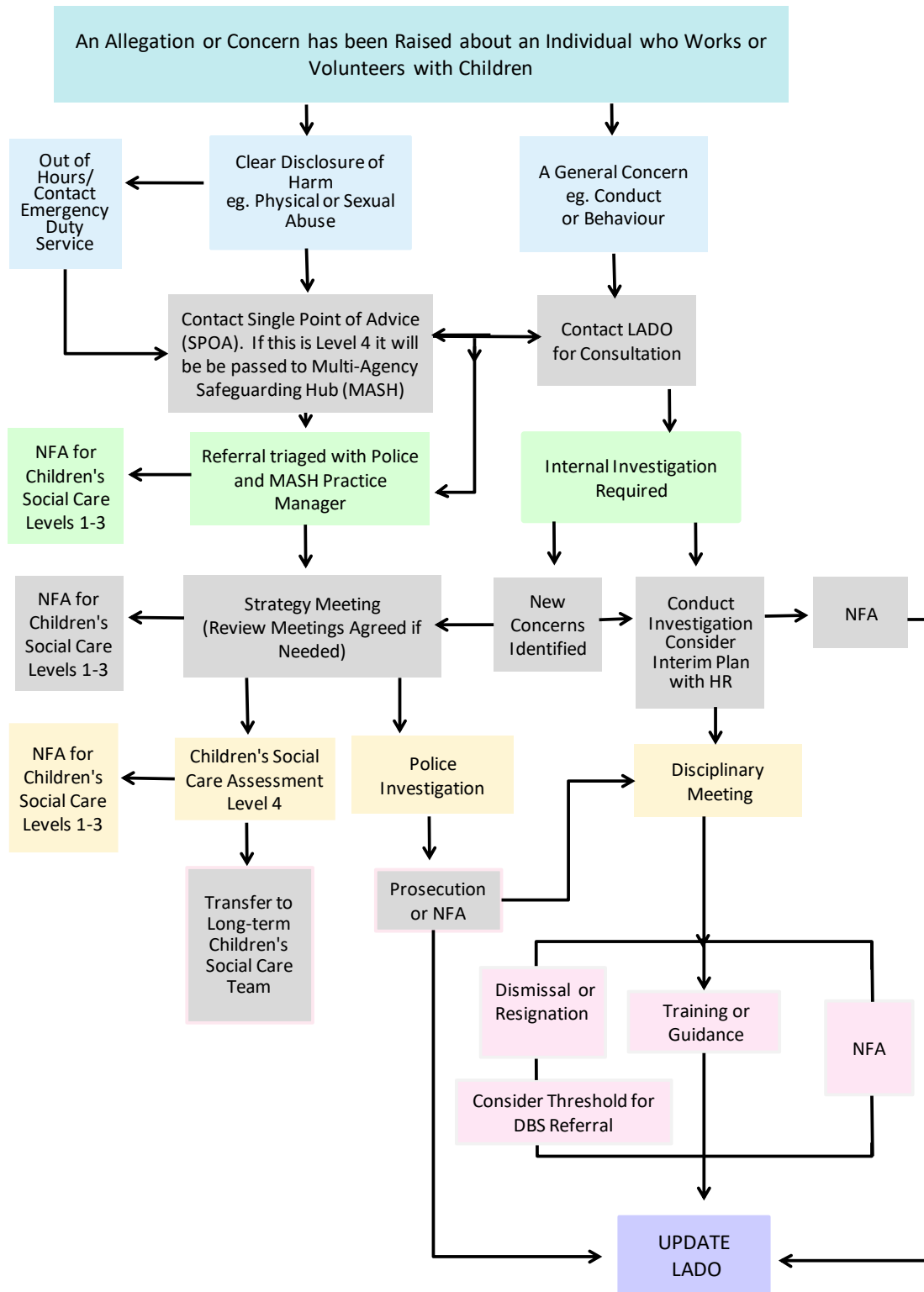
(3) Referrals should follow the local authority's referral process. Chapter one of Working together to safeguard children.

(4) Under the Children Act 1989, local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. This can include section 17 assessments of children in need and section 47 assessments of children at risk of significant harm. Full details are in Chapter One of Working together to safeguard children.

(5) This could include applying for an Emergency Protection Order (EPO).

Managing Allegations Flowchart

An Allegation or Concern has been Raised about an Individual who Works or Volunteers with Children

Clear Disclosure of Harm eg. Physical or Sexual Abuse

A General Concern eg. Conduct or Behaviour

Out of Hours/ Contact Emergency Duty Service

Contact Single Point of Advice (SPOA). If this is Level 4 it will be be passed to Multi-Agency Safeguarding Hub (MASH)

Contact LADO for Consultation

NFA for Children's Social Care Levels 1-3

Referral triaged with Police and MASH Practice Manager

Internal Investigation Required

NFA for Children's Social Care Levels 1-3

Strategy Meeting (Review Meetings Agreed if Needed)

New Concerns Identified

Conduct Investigation Consider Interim Plan with HR

NFA

NFA for Children's Social Care Levels 1-3

Children's Social Care Assessment Level 4

Police Investigation

Disciplinary Meeting

Transfer to Long-term Children's Social Care Team

Prosecution or NFA

Dismissal or Resignation

Training or Guidance

NFA

Consider Threshold for DBS Referral

UPDATE LADO

APPENDIX 9 – Visitors to Glyne Gap School

Type of Visitor	East Sussex Guidance	Glyne Gap School Practice
Is the visit a one off – e.g. a parent/s coming in to meet with a teacher, or coming in for an assembly or sports day?	Infrequent visitors do not need to bring ID, but you should have an appropriate system in place to track them, e.g. unique dated stickers, visitor lanyards, sign in sheets etc. Your school should already have adequate plans in place for events such as parent assemblies, along with appropriate supervision for the whole visit. Head teacher and DSL will decide case by case or event by event the level of supervision required	e.g. parents or other relatives Visitor is signed in. Visitor is given a visitor lanyard. If they are not known to the school they should be accompanied to their destination (e.g. child's class). Visitors will not be left unaccompanied during their visit.
Is the visitor a member of staff at ESCC, with ESCC identification? (This includes the music service, ESCC social services, the LADO, Education Division, safeguarding team, ISEND and Bikeability instructors from the Road Safety Team, even if they visit regularly)	You do not need to see the visitor's DBS certificate and you do not need to record them on your Single Central Record (SCR). You must still be able to see their ESCC identification and they must sign the visitor log. *N.B – only ESCC employees employed who will have contact with children will hold an enhanced DBS, and your supervision of visitors should reflect this, e.g. personnel staff will not hold enhanced DBS.*	e.g. East Sussex social worker Visitor is signed in, if they are not known to the school their ID is checked. Visitor is given a visitor lanyard. If they are not known to the school they should be accompanied to their destination (e.g. child's class).
Is the visitor a member of another professional agency (e.g. other LA social workers, CAMHS, school nursing, Educational Phycologists) with identification?	You do not need to see the visitor's DBS certificate and you do not need to record them on your SCR. You must still be able to see their relevant photo based identification, which can include personal ID such as a driving licence. Generally these would be visits by prior appointment.	e.g. Speech and Language Therapist / physio / other NHS staff Visitor is signed in, if they are not known to the school their ID is checked. Visitor is given a visitor lanyard. If they are not known to the school they should be accompanied to their destination (e.g. child's class).

Is the visitor a member of supply staff or a contractor who works for a company offering a service to the school e.g. sports coaches?	You should have been provided with an enhanced DBS with a children's barred list check details from the supply agency or contracting company, which you need to record on your SCR. This should be supported by written evidence of all required safeguarding checks. It is good practice to see their DBS on the first visit and photo ID if you have not seen a photo from the supply agency or contracting company.	e.g. sports coach Visitor is signed in, if they are not known to the school their ID is checked. DBS should be seen on first visit. Visitor is given a visitor lanyard. If they are not known to the school they should be accompanied to their destination (e.g. to see Sally). Recorded on SCR.
Is the visitor a sole trader/self-employed person offering a service to the school, e.g. music or drama tutors?	The school should have followed their own recruitment checks in this instance and the sole trader should be recorded on the SCR with written confirmation of all required safeguarding checks.	e.g. Jackie / Antonella Visitor is signed in. Visitor is given a lanyard until they are well-known in school. Visitor free to go to their destination unaccompanied. Recorded on SCR.
Is the visitor a contractor who works for a company that carries out repairs in the school e.g. to the boiler or the lift?	You should have been provided with enhanced DBS details from the contracting company, which you need to record separately to your SCR. If they do not have a DBS, then they should be supervised on their visit.	e.g. Booker and Best / G M Monk Site manager is called. Visitor is signed in, if they are not known to the school their ID is checked. Visitor is given a lanyard. If they are not known to the school they should be accompanied to their destination (e.g. child's class). If from any other company (i.e. we have not seen a DBS, they should be super vised the whole time they are in school.

| | | Letters received from Booker and Best and Monks stating that all contractors have enhanced DBS checks.

Received an email from Home James (School transport contractor) advising that all drivers have DBS checks undertaken by Rother DC and that he undertakes DBS checks for all escorts. |
|---|---|---|
| Is the visitor a regular visitor to your school, such as a volunteer or governor? | The school should have seen an appropriate enhanced DBS certificate for any regular visitors, and this should be recorded on the SCR with other appropriate information. Office staff should be aware of the purpose of the visit in case this no longer falls within the scope of the enhanced DBS clearance obtained (for example if a visitor starts carrying out regulated activity – they must have an enhanced DBS check with a children's barred list check). If governors act in a volunteering capacity then it is best practice for them to be subject to further checks for the SCR. | e.g. governors; volunteers

Visitor is signed in.

Visitor is given a lanyard.

Visitor free to go to their destination unaccompanied.

Recorded on SCR. |

All DBS checks we do are enhanced DBS checks and include both adult and children's barred list checks.

Appendix 10–

Preventing extremism and radicalisation

All schools and colleges are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions, to have "the need to prevent people from becoming terrorists or supporting terrorism". This duty is known as the Prevent Duty.

1.2   Children are susceptible to radicalisation into terrorism. Similar to protecting children from other forms of harms and abuse, protecting children from this risk is all part of our whole school approach to safeguarding.

1.3   When approaching this area of work our school uses the following accepted Governmental definitions of extremism, radicalisation and terrorism:

- **Extremism** is the 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 calling for the death of members of the armed forces.

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

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

1.4   There is no place for extremist views of any kind in our school, whether from internal sources, pupils, staff or governors, or external sources - school community, external agencies or individuals.

1.5   Any prejudice, discrimination, or extremist views, including derogatory language, displayed by pupils or staff will always be challenged and, where appropriate, dealt with in line with our Behaviour Policy for pupils and the Code of Conduct for staff.

1.6   We are aware that technology is a significant component of many safeguarding and wellbeing issues and that children are at risk of being exposed to illegal, inappropriate or harmful content including radicalisation and extremism online. Whilst the nature of our pupils' disabilities are likely to act as an unintended protective factor, as such the school will ensure that children are safe from terrorist and extremist material when accessing the internet in school by establishing appropriate levels of filtering.

1.7   We will promote the values of democracy, the rule of law, individual liberty, mutual respect and tolerance for those with different faiths and beliefs at a level that is understandable for and relevant to our pupils.

1.8   We will teach and encourage pupils to respect one another and to respect and tolerate difference, especially those of a different faith or no faith.

1.9   We will ensure that all our teaching approaches help our pupils build resilience and give pupils a positive sense of identity through the development of critical thinking skills.

1.10   We will ensure that all our staff are equipped to recognise extremism and are skilled and confident enough to challenge it.

1.11   We will be flexible enough in our thinking to consider 'it could happen here' and to adapt our teaching approaches, as appropriate, to address specific issues as relevant.

1.12   As part of our whole school safeguarding responsibilities school staff will be alert to the indicators of possible extremism/radicalisation:

- Disclosures by pupils of their exposure to the extremist actions, views, or materials of others outside of school, such as in their homes or community groups, especially where pupils have not actively sought these out.
- Graffiti symbols, writing or artwork promoting extremist messages or images.
- Pupils accessing extremist material online, including through social networking sites.
- Parental reports of changes in behaviour, friendship or actions and requests for assistance.
- Partner schools, local authority services, and police reports of issues affecting pupils in other schools or settings.
- Pupils voicing opinions drawn from extremist ideologies and narratives.
- Use of extremist or 'hate' terms to exclude others or incite violence.

- Intolerance of difference, whether secular or religious or, in line with our equalities policy, views based on, but not exclusive to, gender, disability, homophobia, race, colour or culture.
- Attempts to impose extremist views or practices on others.
- Anti-Western or Anti-British views.

1.13   We encourage the use of external agencies or speakers to enrich the experiences of our pupils; however, we will positively vet those external agencies, individuals or speakers who we engage to provide such learning opportunities or experiences for our pupils.

1.14   Our school will assess the suitability and effectiveness of input from external agencies or individuals to ensure that:

- Any messages communicated to pupils are consistent with the ethos of the school and do not marginalise any communities, groups or individuals
- Any messages do not seek to glorify criminal activity or violent extremism or seek to radicalise pupils through extreme or narrow views of faith, religion or culture or other ideologies
- Activities are properly embedded in the curriculum and clearly mapped to schemes of work to avoid contradictory messages or duplication.
- Activities are matched to the needs of pupils
- Activities are carefully evaluated by schools to ensure that they are effective

1.15   We recognise, however, that the ethos of our school is to encourage pupils to understand opposing views and ideologies, appropriate to their age, understanding and abilities, and to be able to actively engage with them in informed debate, and we may use external agencies or speakers to facilitate and support this.

1.16   We are aware of the potential indicating factors that a child is vulnerable to being radicalised or exposed to extreme views, including peer pressure, influence from other people or the internet, bullying, crime and anti-social behaviour, family tensions, race/hate crime, lack of self-esteem or identity, prejudicial behaviour and personal or political grievances.

- All concerns will be reported to the DSL.
- All concerns will be fully investigated and responded to from a safeguarding perspective, alongside, where needs be, the Behaviour Policy/Code of Conduct.

- Parents/carers will be contacted, and the concern discussed in detail, aiming to identify motivating factors, any changes in circumstances at home, parental views of the incident.
- If a crime has been committed then the police will be contacted.
- If the school are concerned that someone is vulnerable to radicalisation, we will follow ESCC guidance and submit a [Prevent referral form](#). This referral is screened by the police Prevent team to determine if the young person is vulnerable to being drawn into terrorism.
- If a vulnerability is identified the case will be discussed at the local 'Channel' meeting - a voluntary programme through which individuals consent to receive support to address their vulnerabilities and reduce the risk to them.
- The school will have a representative at these meetings.

1.17 The arrangements for recruiting all staff, governors and volunteers, to our school will follow guidance for safer recruitment. Within this we will be alert to the possibility that people may seek to gain positions within our school to unduly influence our schools' character and ethos. We are aware that such people seek to limit the opportunities for our pupils thereby rendering them vulnerable to extremist views and radicalisation as a consequence.

1.18 Where the school premises are used for non-school activities we will ensure due diligence around those activities to ensure that these do not conflict with the Prevent Duty.

1.19 The headteacher, Chair of Governors and DSL will all complete Prevent Training. Whole school safeguarding training will include Prevent.

1.20 The ongoing whole school approach to fulfilling the Prevent Duty will be informed by a risk assessment which will take into account the local context and the pupil demographic. This will determine the level and frequency of any additional training as well as curriculum content or interventions for groups or individual pupils.

Risk assessment considerations for 2024 -25 (East Sussex)
Local Channel referral themes currently include:
- Males (13-17yrs): Think families and future outcomes for younger children.
- Accessing extremist materials on websites and forums and making contact with others on encrypted and gaming platforms.
- ASD traits are often present but should not be considered as the only vulnerability.

- Racist views (comfortable in expressing these openly to peers either online or in person) and other hate themes: religion, sexuality or disability.
- Mental health: anxiety, low mood, depression and self-harm.
- Historic and current bullying which have left a negative impression on them about their school: how they view their peers and as well as staff who dealt with any incidents – creating a sense of injustice and grievance.
- Isolation and loner with few 'real friends' or peers – creating no sense of belonging.