

Orleans Primary School



Safeguarding – Including Child Protection

Governor's Committee Responsible	Full Governing Body
Status	Statutory
Review Cycle	Annual
Date written/last review	September 2020
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Signature Headteacher:

Date:

Signature Chair of Governors:

Date:

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1. Terminology

Safeguarding: In relation to children and young people, the School adopts the definition used in the Children Act 2004 and the Department for Education (DFE) guidance document: Working together to Safeguard Children 2019 which defines safeguarding and promoting children and young people's welfare as:

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

It also relates to aspects of school life including:

- Pupils' Health and Safety
- The use of reasonable force
- Meeting the needs of children with medical conditions
- Providing first aid
- Educational Visits
- Intimate Care
- Bullying
- Peer on peer abuse
- Internet or online safety
- Arrangements for ensuring school security, taking into account our identified local needs.

Child Protection refers to the processes undertaken to protect children who have been identified as suffering, or being at risk of significant harm.

Staff refers to all those working for or on behalf of the school, full time or part time, temporary or permanent, in a paid or a voluntary capacity.

Child includes everyone under the age of 18.

Parent refers to birth parents and other adults who are in a parenting role, for example, Stepparents, foster carers and adoptive parents.

Local Authority Designated Officer: (LADO): works within social care and should be alerted to all cases in which there is an allegation of abuse of a child by a person who works with children where there is a concern that the person may have:

- Behaved in a way that has, or may have harmed a child.
- Possibly committed a criminal offence against/related to a child.
- Behaved towards a child or children in a way which indicates s/he would pose a risk of harm if they work regularly or closely with children.

The LADO captures concerns, allegations or offences emanating from inside and outside of work and is involved from the initial phase of the allegation through to the conclusion of the case. The LADO for Richmond is Alice Stott: contact details -

Email: LADO@achievingforchildren.org.uk

Phone: 020 8891 7370

Kingston and Richmond SPA: 020 8547 5008

2. Key Personnel

The designated teacher for Child Protection is Jane Evans. In her absence, Beckie Bennett, Leanne Ho and Sarah Connolly are trained to take on the Deputy DSL role.

Significant Contact Information

SPA (Single Point of Access) 0208 547 5008 – Out of hours number is 0208 770 5000.

3. Policy Principles and Aims

This policy applies to all children, staff* and Governors in the school. This policy is reviewed on an annual basis. It provides information regarding our safeguarding responsibilities and details how these responsibilities are carried out. The welfare of our children is paramount. All children regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection and safeguarding.

*Wherever the word 'staff' is used, it covers all staff on site, including ancillary, supply and self-employed staff, contractors, volunteers and Governors.

This policy should be read in conjunction with the following Orleans Primary School policies:

Whistle Blowing Policy	Resolution and Escalation Policy
Risk Assessment Statement	Health and Safety (including First Aid)
Safer Recruitment Policy	Toileting and Incontinence Policy
Physical Intervention Policy	Anti-bullying Policy
Exclusion Policy	Staff Code of Conduct
Online Safety Policy	Radicalisation and Extremism Policy

All of the above policies are available through our school office and/or our school website.

4. Our Ethos

The Governors and staff of Orleans Primary school fully recognise the contribution that school makes to safeguarding children. We recognise that all staff have a full and active part to play in protecting our pupils from harm. At Orleans, we take the approach of 'thinking the unthinkable' and believe that we should be vigilant in tackling Child Protection concerns, taking action and working with outside agencies to achieve the best outcomes for pupils. We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm. We also recognise that our procedures must continue to be followed during the Covid-19 pandemic.

All staff and Governors believe that our school should provide a caring, positive, safe and stimulating environment, which promotes the social, physical and moral development of the individual child. We believe that safeguarding children is everyone's responsibility and take the approach that all adults in our school play a vital part in this.

We take a child-centred approach, considering what is in the best needs of the child. We aim to work in tandem with other professionals and agencies to share information and to take prompt action to achieve the best results for pupils. We are able to play a significant part in the prevention of harm to our children by providing them with good lines of communication with trusted adults, supportive friends and an overarching ethos of protection.

This policy seeks to set out the principles and procedures we operate to protect children from harm.

5. At Orleans our Safeguarding and Child Protection aims are:

- To demonstrate to pupils, parents and other partners, the commitment of Orleans Primary School to safeguarding and child protection.
- To commit to providing an environment in which children and young people feel safe, secure, valued and respected and which promotes their social, physical and moral development.
- To ensure that all children regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection and safeguarding.
- To support the child's development in ways that will foster security, confidence and independence.
- To raise the awareness of both teaching and non-teaching staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse by ensuring that they are properly trained to do so.
- To provide a systematic means of monitoring children known or thought to be at risk of harm.
- To emphasise the need for good levels of communication between all members of staff on safeguarding and child protection policies and procedures.
- To follow a structured procedure within the school which will be followed by all members of the school community in cases of suspected abuse.
- To develop and promote effective working relationships with other agencies, especially the Police and Social Care so that they have evidence to support the interests of individual children.
- To ensure that all adults within our school who have access to children on a regular basis have been checked as to their suitability through robust Safer Recruitment Procedures.
- To ensure that all children are protected from physical, emotional or sexual abuse and from neglect.
- To provide opportunities in the PSHE curriculum for children to develop the skills they need to recognise and stay safe from abuse.

6. Statutory Framework, key statutory and non-statutory guidance for Child Protection and Safeguarding:

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

- The Children Act 1989 Care Planning, Placement and Case Review
- The Children Act 2004
- Education Act 2002 (section 175)
- The London Child Protection Procedures (2015)
- Keeping Children Safe in Education (DFE 2020) *2
- Working Together to Safeguard Children (DFE 2018) *1
- What to do if you are worried a child is being abused
- The Teaching Standards (2012)
- Information Sharing 2018
- Online Safety Guidance (DFE June 2019)

The document 'Keeping Children Safe in Education' DFE September 2020 must be read in conjunction with this policy and should be kept as an appendix to the school's child protection policy.

The school's procedures have been reviewed in response to Covid-19 and the school's policy will remain in force throughout the current situation.

<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

The school will publish its Safeguarding and Child Protection Policy on its website and signpost all stakeholders to inform that it will actively keep children safe online. The school also signposts adults to the NSPCC website for further information.

We take seriously our responsibility to ensure that we have appropriate procedures in place for responding to situations in which we believe that a child has been abused or is at risk of abuse.

Our procedures also cover circumstances in which a member of staff is accused of, or suspected of, abuse.

We will take steps to ensure that any groups or individuals who hire and/or use our building or grounds inside or outside of school hours, follow the local child protection guidelines and are aware of their safeguarding duties.

We will ensure that staff read and understand:

- Orleans Primary School Safeguarding and Child Protection Policy
- Keeping Children Safe in Education (2020) (Part One) and school leaders and staff that work directly with children should also read Annex A
- Orleans Primary School Code of Conduct which includes our Acceptable Usage Policy

We will ensure that all staff are aware of:

- Orleans Primary School Behaviour Policy
- The safeguarding response to children who go missing from education
- The role of the Designated Safeguarding Lead
- The identity of Orleans Primary School 's Designated Safeguarding Lead and Deputies

The roles of the Designated Safeguarding Lead and the Deputy Safeguarding Leads will be explicit in their job descriptions and we will ensure that they have the time and resources to fulfil their duties.

7. Procedures at Orleans Primary School:

Our school procedures for safeguarding children will be in line with Kingston and Richmond Safeguarding Children Partnership which are detailed here:

<https://kingstonandrichmondsafeguardingchildrenpartnership.org.uk/>

Richmond upon Thames operates under the revised London Child Protection Procedures (April 2015) and Working Together to Safeguard Children (September 2019).

Safe school, safe staff

We will ensure that:

- We have minimum of two designated members of staff who undertake regular child protection training and the names of the designated safeguarding lead and deputies, are clearly advertised in the school with a statement explaining the role in referring and monitoring cases of suspected abuse.
- Our procedures are regularly reviewed and updated.
- Safer recruitment practices are adhered to including appropriate DBS checks, reference checks and any additional checks relevant to the role undertaken and that at least one member of every recruitment panel has completed safer recruitment training.

- Advice will be sought from SPA, before the school undertake any enquires into incidents.
- All staff are aware of the need for maintaining appropriate and professional boundaries in their relationship with staff, pupils and parents and adhere to Orleans Primary's code of conduct.
- Our lettings policy will seek to ensure the suitability of adults working with children on school sites at any time.
- Any disciplinary proceedings against staff related to child protection matters are concluded in full in accordance with Government guidance Keeping Children Safe in Education 2020 and Kingston and Richmond Safeguarding Partnership, LADO and Schools HR policy, procedures and guidance.
- Staff are fully aware of how to and have the confidence to report misconduct.
- All staff receive information about Orleans Primary School's safeguarding arrangements, safeguarding statement, staff behaviour policy (code of conduct), safeguarding and child protection policy, the role and names of the designated safeguarding lead and their deputies, and Keeping Children Safe in Education part 1 and Annex A on induction.
- All staff receive safeguarding and child protection training at induction which is regularly updated. In addition, they receive safeguarding and child protection updates including online safety (for example, via email, e-bulletins and staff meetings), as required, but at least annually.
- All staff will be given a copy of Part 1 and Annex A of Keeping Children Safe in Education 2020 and will sign to say they have read and understood it. This applies to the Governing Board in relation to part 2 of the same guidance.
- The safeguarding and child protection policy is made available via our school website or other means and that parents and carers are made aware of this policy and are made aware of the responsibilities of staff members with regard to child protection procedures.
- Orleans Primary School provides a co-ordinated offer of Early Help when additional needs of children are identified and contributes to early help arrangements and inter-agency working and plans.
- Community users organising activities for children are aware of Orleans Primary School's safeguarding and child protection policy, guidelines and procedures.

Extended school and off-site arrangements

- Where extended school activities are provided by and managed by the school, our own safeguarding and child protection policy and procedures apply.
- If other organisations provide services or activities on our site, we will ensure that they have appropriate procedures in place, including safer recruitment procedures. We are dedicated to ensuring the safeguarding of pupils at all times. Whilst it is the responsibility of third-party hirers/extra-curricular club providers to put adequate safeguarding procedures and policies in place, the school works with club providers to ensure that their procedures are robust and holds copies of these policies on file.
- When our pupils attend off-site activities, we will ensure that effective child protection arrangements are in place including risk assessments for residential visits.
- When our pupils attend an alternative provision provider, we will obtain written confirmation that appropriate safeguarding checks have been carried out on individuals working at the establishment, i.e. those checks that we would otherwise perform in respect of our own staff.

Photography and images

The vast majority of people who take or view photographs or videos of children do so for entirely innocent, understandable and acceptable reasons. Sadly, some people abuse children through taking or using images, so we must ensure that we have some safeguards in place. To protect pupils, we will:

- Seek their consent and parental consent for photographs to be taken or published (for example, on our website or in newspapers or publications).
- Use only the pupil's first name with an image and ensure that no other personal information is published alongside the photo.
- Ensure that pupils are appropriately dressed.
- Encourage pupils to tell us if they are worried about any photographs that are taken of them.
- Ensure that pupils do not take photographs or video images of other students without their express permission and the permission of a member of staff.
- Hold online safety training for parents on an annual basis to remind them of the importance of safeguarding children when it comes to photography and recording.
- Include up skirting (an offence under the voyeurism offences act 2019) in our staff safeguarding training.

8. Children who may be particularly vulnerable;

Orleans Primary School recognises that some children may have an increased risk of abuse. Many factors can contribute to an increase in risk, including prejudice and discrimination, isolation, social exclusion, communication issues and reluctance on the part of some adults to accept that abuse can occur. To ensure that all of our pupils receive equal protection, we will give special consideration to children who are;

- Disabled or have special educational needs
- Young Carers
- Looked after or post looked after
- Living in a domestic abuse situation
- Affected by parental substance misuse
- Affected by mental health issues
- Asylum seekers
- Living away from home
- Vulnerable to being bullied, or engaging in bullying including cyber, homophobic, racist bullying
- Living in temporary accommodation
- Living transient lifestyles
- Missing education
- Living in chaotic and unsupportive home situations
- Vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion, disability or sexuality
- Vulnerable to extremism or radicalisation
- Involved directly or indirectly in sexual exploitation or trafficking
- Do not have English as a first language
- At risk of Female Genital Mutilation (FGM) or forced marriage
- Has returned home to their family from Care
- Is a Privately Fostered Child

Children Looked After and Previously Looked After

The most common reasons for children becoming looked after is as a result of abuse and/or neglect. Orleans Primary School will ensure that staff have the necessary skills and knowledge to keep children looked after safe. Appropriate staff will have the information they need in relation to a child looked after's legal status, (for example, who has parental responsibility, who is not permitted to have contact and who is not permitted to know where the child is being educated) and the level of authority delegated by the caring authority to the carer.

Children who need a social worker (Child in need and Child Protection Plans)

The school is very proactive in working with social care to support the needs of pupils who have been assigned a social worker due to safeguarding or welfare needs. The DSL holds and shares this information, when necessary to safeguard and promote the mental health and wellbeing of these pupils.

Children requiring Mental Health support

The school has support structures in place for pupils who need support with mental health. The DSL has attended the two day Mental Health First Aid course. Where pupils have a recognised mental health need the school will make a referral to CAMHS or seek advice from other supporting agencies for actions which can take place within school to support a child's needs with the aim that we want the child to achieve their best during their time at our school. We understand that mental health issues can result from suffering, abuse, neglect or exploitation.

9. Roles and Responsibilities

9.1 The Designated Safeguarding Lead:

Governing Bodies should ensure that the school designates an appropriate senior member of staff to take lead responsibility for child protection. This person should have the status and authority within the school to carry out the duties of the post including committing resources and, where appropriate, support and direct other staff. The designated lead for this school is;

Jane Evans, Headteacher

The Deputy DSLs for Orleans Primary School are - Beckie Bennett (Deputy Head), Leanne Ho (SENCO), Sarah Connolly (PSHE/ SMSC Lead).

The Designated Safeguarding Lead (DSL) holds ultimate responsibility for Safeguarding and Child Protection in Orleans Primary School. This responsibility will not be delegated.

Any allegation or disclosure involving someone who works with children in a paid or voluntary capacity must be reported directly to the Headteacher (or in her absence the Deputy Head), unless it involves the Headteacher and then it should be reported directly to the Chair of the Governing Body (Alex Axiom).

The areas of responsibility for the DSL are:

- Managing referrals - This school recognises that it is an agent of referral and not of investigation.
- Acting as a source of support and expertise for the whole school community in regards our Safeguarding duties.
- Encouraging a culture of listening to children and taking account of their wishes and feelings.
- Undertaking Level 3 safeguarding training with updates every two years and will refresh their knowledge and skills at regular intervals but at least annually.
- Referring a child if there are concerns about possible abuse, to Achieving for Children's Single Point of Access (SPA) and/or the local authority where the child resides and act as a focal point for staff to discuss concerns.

- Keeping detailed accurate records, either written or using appropriate online software, of all concerns about a child even if there is no need to make an immediate referral.
- Ensuring that all records are kept confidential, stored securely and are separate from the pupil's general file. Ensuring that a copy of the safeguarding and child protection file is retained until such a time that the new school acknowledges receipt of the original file, the copy will then be shredded.
- Liaising with the local authority and work with other agencies and professionals in line with Working Together to Safeguard Children.
- Have a working knowledge of Kingston and Richmond Safeguarding Children Partnership and Achieving for Children Procedures.
- Ensure that they, or an appropriate staff member attend case conferences, core groups or other multi-agency planning meetings, contribute to assessments and provide a report, where required, which has been shared with the parents and child (depending on age and understanding.)
- Notify Children's Social Care if a child subject to a child protection plan is absent from school without an explanation.
- Ensure that all staff sign to say they have read, understood and agree to work within Orleans Primary School's safeguarding and child protection policy, code of conduct and Keeping Children Safe in Education 2020 Part 1 and Annex A and ensure the at the policies are used appropriately.
- Organise child protection and safeguarding induction, regularly updated training and a minimum of annual updates (including online safety) for all school staff, keep a record of attendance and address any absences.
- Undertake with the Governing Body and annual audit of our school safeguarding policies, procedures and practices and ensure that this is submitted to Kingston and Richmond Safeguarding Children Partnership.
- Have an understanding of locally agreed processes for providing early help and intervention and will support members of staff where Early Help is appropriate.
- Recognise additional risks that children with SEN and disabilities (SEND) face online, for example, from online bullying, grooming and radicalisation.
- Ensure that the name of the designated safeguarding lead and deputies are clearly advertised in the school and on the website, with a statement explaining the school's role in referring and monitoring cases of abuse.
- Ensure that they or another deputy are available during term time school hours for staff to discuss any safeguarding concerns.
- Ensure there are adequate and appropriate cover arrangements for any out of hours or out of term activities.

9.2 Deputy Designated Safeguarding Leads:

- Are trained to the same standard as the designated safeguarding lead and, in the absence of the DSL, carries out those functions necessary to ensure the ongoing safety and protection of pupils. In the event of the long-term absence of the DSL the Deputies will assume all the functions above.

9.3 All School Staff:

At Orleans, we have a strong safeguarding culture and we ensure that all staff:

- Understand that it is everyone's responsibility to safeguard and promote the welfare of children and that they have a role to play in identifying concerns, sharing information and taking prompt action.
- Consider, at all times, what is in the best interests of the child.
- Know how to respond to a pupil who discloses abuse.

- Will refer any safeguarding or child protection concerns to the DSL or if necessary where the child is at immediate risk, to the police or Single Point of Access (SPA), or if a child lives out of the borough, to the relevant local authority.
- Will provide a safe environment in which children can learn.

9.4 The Headteacher

The Headteacher will ensure that:

- The Safeguarding and Child Protection Policy and related policies and procedures are implemented and followed by staff.
- Sufficient time, training, support, resources, including cover arrangements where necessary is allocated to the role of the DSL and deputies to carry out their roles effectively.
- Where there is a safeguarding concern that the child's wishes and feelings are taken into account when determining what action to take and what services to provide.
- Systems are in place for children to express their views and give feedback which operate with the best interest of the child at heart.
- All staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the whistle-blowing procedures.
- Pupils are provided with opportunities through the curriculum to learn about safeguarding, including keeping themselves safe online.
- They liaise with the Local Authority designated officer (LADO) within 24 hours, before taking any action and then on an ongoing basis, where an allegation is made against a member of staff or volunteer.

10.5 The Governing Board:

- The Governing Board of Orleans Primary School understands and fulfils its responsibilities, namely to ensure that there is a Safeguarding and Child Protection policy together with a staff Code of Conduct which are consistent with the Kingston and Richmond Safeguarding Children's Partnerships recommendations.
- There is an appointed senior member of staff who is named as the Designated Safeguarding Lead with this responsibility contained within their job description and their Deputies undertake multi-agency Level 3 safeguarding training, which is updated every two years.
- The Child Protection and Safeguarding, Safer Recruitment and Managing Allegations Policies are reviewed annually and that the Safeguarding and Child Protection Policy is publicly available on the school website.
- All staff read and understand Orleans Primary Schools Safeguarding and Child Protection Policy and read and sign the Staff Code of Conduct.
- All staff have read and understood the Keeping Children Safe in Education Part 1 (2020) and Annex A and that mechanisms are in place to assist staff in understanding and discharging their roles and responsibilities as set out in the guidance.
- The school operates a safer recruitment procedure that includes statutory checks on staff suitability to work with children (and disqualification by association regulations where applicable) and by ensuring that there is at least one person on every recruitment panel who has completed safer recruitment training.
- The school has procedures for dealing with allegations of abuse against staff (including the Headteacher), volunteers and against other children and that a referral is made to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have had they not resigned.

- A named Governor with responsibility for Safeguarding and Child Protection has undertaken appropriate training for the role. The Chair of Governors is responsible in the event of an allegation against the Headteacher.
- An annual audit of the schools Safeguarding and Child Protection policies, procedures and practices is undertaken with the Headteacher and Designated Safeguarding Lead and that this is submitted to Kingston and Richmond Safeguarding Children Partnership.
- All other staff have safeguarding training updated as appropriate.
- At least one member of the Governing Body has completed safer recruitment training, which is updated every three years.
- The curriculum includes clear opportunities for pupils to be taught about safeguarding, including online safety as part of a broad and balanced curriculum covering relevant issues through PSHE and through Relationship and Sex Education.
- Appropriate safeguarding responses are in place for children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect including sexual abuse or exploitation and to help prevent the risks of their going missing in the future.
- The IT systems within the school have an appropriate online filtering and monitoring system in place.
- Enhanced DBS checks are in place for all Governors.

9.6 The Designated Teacher for Looked-After and Previously Looked-After Children

The Designated Teacher promotes the educational achievement of every looked-after and previously looked-after child on the school's roll.

They are the central point of initial contact within the school for looked after and previously looked after children. This helps to make sure that the school plays its role to the full in making sure arrangements are joined up and minimise any disruption to a child's learning.

The Designated teacher takes lead responsibility for ensuring school staff understand the things which can affect how looked-after and previously looked-after children learn and achieve and how the whole school supports the educational achievement of these pupils.

At Orleans Primary School the Designated Teacher is Rebecca Johnson. They work closely with the leadership team, the staff and the Virtual School to ensure the best outcomes for looked-after and previously looked-after pupils.

10. Supporting Staff

- We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.
- We will provide support and supervision for such staff by providing an opportunity to talk through their anxieties with the designated teacher or, if preferred, an outside agency, and to seek further support as appropriate.

11. Training

The DSL should receive Level 3 refresher training every 2 years and should:

- Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as Early Help Assessments.
- 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 detailed, accurate, secure written records of concerns and referrals.
- Obtain access to resources and attend any relevant or refresher training courses.
- Promote a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school may put into place to protect them.

Members of staff will receive annual safeguarding training and refresher reminders mid-way through the academic year.

12. Areas of Particular Risk for our School

The school is aware of the potential for an increase in disclosures from pupils following the school closure period in March 2020 and the subsequent lockdown period, due to a reported increase in domestic violence incidents. The school is also aware that pupil's time on social media may have increased during the school closure period and there has been a reported increase in the potential for pupils being exposed to extremist material. The DSL attends the local Safeguarding forums each term which provides information on local risk factors.

Orleans Primary School is situated in a cul-de-sac road in St Margarets. However, the school has identified the need for traffic calming in the road that the school is accessed from. This has the aim of protecting pupils when arriving and leaving school. The Local Authority is putting into place a ANPR as part of the School Streets provision which will support the pupils coming to and from school. During the Covid-19 arrangements the school has a staggered start and finish schedule for all pupils. The school is marshalling the outside pavements and ensuring a one way system is in place.

The Key Stage Two pupils at Orleans use Mable Hill Park for PE. However, during the autumn term 2020 the school has decided to teach PE on site due to the Covid-19 risk of taking pupils out to a public park.

13. Teaching and Learning

Safeguarding is included in many aspects of the curriculum at Orleans Primary School. We understand that pupils will need to understand how to keep themselves safe both in school and outside in the wider world. Through our curriculum, we teach our children to be safe and happy. Great importance is placed on identifying opportunities in the taught curriculum for children to learn about safeguarding. Our broad curriculum gives pupils opportunities to experience life in all its diversity to acquire knowledge, understanding and skills that significantly influences personal development, behaviour and welfare and equips every child with the knowledge and skills for personal safeguarding. Our PSHE, RSE and SMSC curriculum covers all areas of safeguarding through each of the strands to a different degree. We plan to constantly challenge children to think about safeguarding matters and their own personal physical and mental wellbeing. We value our pupil's questions and give them space for their own thoughts, ideas and concerns. We give them opportunities across the curriculum to explore values, personal rights, responsibilities and equal opportunities that develop moral concepts, which in turn impact positively on safeguarding and promote British Values.

Specific examples of this are; road safety training, stranger danger talks, the online safety curriculum, Anti-bullying week, positive relationships, safer walking and cycle awareness.

14. Procedures for Reporting Concerns to outside agencies

All cases of suspected abuse are referred to the local authority children's social care and to the police in cases where a crime may have been committed. Liaison will take place with outside agencies to inform them of issues, especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations. The school will refer to the NSPCC guidance on when to call the police; www.npcc.police.uk

The DFE has clear guidelines on what schools, Governing Bodies and Local Authorities should do if they suspect a child has been abused. It is not, however, the responsibility of teachers and other staff in schools to investigate suspected abuse. They should not take action beyond that agreed in the procedures established by their Local Safeguarding Board (Kingston and Richmond Safeguarding Partnership). The DSL is responsible for referring cases of suspected abuse or allegations to the relevant investigating agencies in line with local procedures. The Headteacher or Chair of Governors must also be clear on the procedure for dealing with allegations made against members of staff.

If a member of staff has any concerns about the health, wellbeing, happiness or safety of a child at this school or feel that something may be troubling them, they should share this information with the DSL straight away.

Staff in school should be alert to any changes in behaviour or presentation of a child, as well as disclosures, which may be made. A Child Protection concern is where the child has been harmed or is at risk of harm e.g. physical, sexual, emotional abuse or neglect. (Please see Appendix 1 for the definitions of these categories). Any issues, which concern you, must be reported to the DSL. It is much better to report things that turn out to be small, than miss a worrying situation.

If at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately. Anybody can make a referral, if the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. The contact number for SPA is 0208 547 5008. For Hounslow Social Services the contact number is 0208 583 3100.

Orleans Primary School follow the DFE advice 'What to do if you are worried a child is being abused 2015 – Advice for practitioners' to help practitioners identify child abuse and neglect and take appropriate action in response.

Making a referral to the Single Point of Access (SPA)

Concerns about a pupil or a disclosure should be discussed with the DSL who will help decide whether a referral to the Single Point of Access is appropriate. If a referral is needed then the DSL should make it. However, anyone can make a referral and if for any reason a staff member thinks that a referral is appropriate, they can consider making one themselves.

The pupil (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the pupil. If after a referral the pupil's situation does not seem to be improving the DSL (or whoever made the referral) should press for re-consideration to ensure their concerns have been addressed, and most importantly the pupil's situation improves.

If a pupil is at immediate risk of harm a referral should be made to SPA and/or the police immediately. Anybody can make a referral.

Where referrals are not made by the DSL, the DSL should be informed as soon as possible.

SPA contact number 020 8547 5008.

15. Records, Monitoring and Storage of Child Protection Information

Any member of staff receiving a disclosure of abuse or noticing indicators of abuse must make an accurate record as soon as possible, noting what was said or seen, putting the event into context, and giving the time, date and location. All records will be signed and dated and will include the action and advice taken, including any differences of opinion. This must be recorded on the Child Protection recording form (See appendix 5) and handed to the DSL on the same day. The DSL will keep the forms in the confidential Child Protection files located securely in the Headteacher's office. A recording of each and every episode/incident/concern/activity regarding a child, including telephone calls to other professionals, needs to be recorded on the chronology

recording form at the start of each child's file. This should also contain any information received about the child.

The chronology will be started when any concern about a child is brought to the attention of the DSL.

A record of all conversations and meetings must be kept. A hard copy of all notes must be kept securely in the child's Child Protection folder, which is stored securely and confidentially in the Headteacher's office.

Emma Edwards or Anna Westerman (Administrators) inform the designated person of any children leaving the school so that appropriate records can be passed on and where pupils move out of the country contact the named school to ensure the child has joined the named school. The school office also contacts the previous schools of children joining the school with a Child Protection request form to ensure Orleans Primary School is aware of any concerns from previous schools.

The Chair of Governors (the Governor in charge of Child Protection) will attend school meetings, PSHE lessons, RSE lessons, meet and talk to children and parents, analyse survey results and carry out an annual checklist of procedures (OFSTED), especially regarding DBS practices. The Headteacher also reports back termly on Safeguarding in the Headteacher's report.

16. Supporting Children

The impact of child abuse, neglect and exploitation should not be underestimated. Many children do recover well and go on to lead happy, healthy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach and the rest of their childhood and their adulthood may be characterised by anxiety and depression, self-harm, eating disorders, alcohol and substance abuse, unequal and destructive relationships and long-term medical or psychiatric difficulties.

We recognise that a child who is abused or witnesses violence may find it difficult to develop and maintain a sense of self-worth and that a child in these circumstances may feel helpless and humiliated perhaps feeling self-blame. At Orleans Primary School, we recognise that for some children our school may provide the only stability in their life and that research shows that the behaviour of a child in such circumstances may range from that which is perceived to be normal to aggressive or withdrawn. We know that children with disabilities are the most likely to suffer abuse and least likely to report it. We undertake to be vigilant in looking for signs or indications of abuse.

The school signs up to Operation Encompass with the Metropolitan Police so that it is informed if a child has witnessed a domestic incident.

Our school will support all pupils by:

- Encouraging self-esteem and self-assertiveness whilst not condoning aggression or bullying.
- Promoting a caring, safe and positive environment within the school.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notifying Social Services as soon as there is a significant concern.
- Providing continuing support to a pupil about whom there have been concerns, who leaves the school, by ensuring that appropriate information is forwarded under confidential cover to the pupil's new school.

17. Early Help and interagency working

At Orleans Primary School, we are prepared to identify children who may benefit from early help. Early help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to teenage years. In the first instance staff should discuss early help requirements with the DSL.

Any child may benefit from early help, but at Orleans Primary School we are particularly aware of the potential need for early help for a child who:

- Is disabled and has specific additional needs
- Has special educational needs (whether or not they have a statutory education, health care plan)
- Is a young carer.
- Is showing signs of being drawn into anti-social or criminal behaviour, including gang, involvement and association of with organised crime groups.
- Is frequently missing/goes missing from care or from home.
- Is misusing drugs or alcohol themselves.
- Is at risk of modern slavery, trafficking or exploitation.
- Is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse.
- Has returned home from their family care.
- Is showing early signs of abuse/neglect
- Is at risk of being radicalised or exploited.
- Is a privately fostered child.

Staff may be required to support other agencies and professionals in an Early Help Assessment (EHA) Early Help Assessment.

This includes identifying emerging problems, liaising with the DSL, sharing information with other professionals to support early identification and assessment and, in some cases, acting as the lead professional in undertaking early help and assessment. If early help is appropriate the DSL should liaise with other agencies and setting up and inter-agency assessment as appropriate.

If early help and other support is appropriate the case will be under constant review and consideration given to a referral to child's social care if the child's situation doesn't appear to be improving. The DSL is aware of the local escalation policy and procedures, we work closely with local professional agencies including social care, the police, health services and other services including voluntary organisations to promote the welfare of children and protect them from harm. This includes providing a co-ordinated offer of early help when additional needs of children are identified and contributing to inter-agency plans to provide additional support to children subject to child protection plans.

As part of meeting a child's needs our Governing Board recognises the importance of sharing information between professionals and local agencies. Fears about sharing information should not stand in the way of promoting the welfare and safety of children.

18. Confidentiality and Information Sharing

Orleans Primary School recognises that in order to effectively meet a child's needs, safeguard their welfare and protect them from harm the school must contribute to inter-agency working in line with Working together to Safeguard Children 2019 and share information between professionals and agencies where there are concerns.

All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children and that the Data Protection Act is not a barrier to sharing information where to do so would place a child at risk of harm.

All staff must be aware that they cannot promise pupils to keep information secret which might compromise the pupil's safety or wellbeing. It is important that the member of staff or volunteer tell the pupil in a manner which is appropriate to their age and development that they cannot promise complete confidentiality and that they may need to pass information on to other professionals to help to keep the pupil or other children safe.

However, we also recognise that all matters relating to child protection are personal to children and families. Therefore, in this respect they are confidential and the headteacher or DSLs will only disclose information about a pupil to other members of staff on a need to know basis.

We will always undertake to share our intention to refer a child to SPA with their parents and carers unless to do so could put the pupil at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with SPA on this point.

18.1 Notifying Parents

The school will normally seek to discuss any concerns about a pupil with their parents. This must be handled sensitively and the DSL will make contact with the parent in the event of a concern, suspicion or disclosure. However, if the school believes that notifying parents could increase the risk to the child or exacerbate the problem, advice will first be sought from the Single Point of Access.

Where there are concerns about forced marriage or honour based abuse parents should not be informed a referral is being made as to do so may place the child at significantly increased risk.

18.2 Record Keeping

Pupils' safeguarding and child protection records will be stored securely and access to them will be appropriately limited. When pupils leave Orleans Primary School, the school will ensure that their child protection file is transferred to the new school or college as soon as possible. This will be transferred separately from their main pupil file, ensuring secure transit and a confirmation of receipt will be requested and retained. Where appropriate, the DSL will share information in advance of the pupil transferring so support can be put in place.

19. Procedure for dealing with a disclosure from a child (See Appendix 2)

If you have any reason to be concerned that a child may be being abused, **you have a responsibility to act. Think – 'It could happen here.'**

If you suspect that a child is being abused, or if a child discloses to you that he is being abused, you should:

- Listen carefully to the child without judging. Try not to ask leading questions or prompt the child, but give him/her time to explain what has happened.
- Do not give false promises of confidentiality; explain to the child that you have a duty to help him/her and that this will mean telling someone else about what s/he has said.
- Reassure the child that s/he has done the right thing by telling you and that s/he is not to blame.
- Inform the designated person as soon as possible. Best practice is to pass the information on verbally, so that you know the message has been heard.
- Record what the child said as soon as possible: stick to the facts, date and sign your record and pass it urgently to the designated person.
- In the majority of cases the designated person, or Headteacher, will inform Social Services and take advice. If at all possible, this is to be done by telephone by 3pm on a school day. The person making the phone call to Social Services is responsible for following the phone call up in writing.
- Continue to monitor the child after you have reported the suspected abuse.

- Maintain confidentiality – speak about the incident only with people who need to know (usually Headteacher, designated teacher, Social Worker).

Remember: It is better to pass on information; however small it seems as it may be a small part of a bigger picture of abuse.

20. Signs of Abuse (Please see Appendix 1):

Recognising abuse

To ensure that our pupils are protected from harm, we need to understand what types of behaviour constitute abuse and neglect. Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child directly by inflicting harm, or indirectly, by failing to act to prevent harm (definition taken from NSPCC website). Children are vulnerable to abuse within the home and outside of the home, by those known to them or, more rarely, by others (e.g. via the internet).

Abuse is categorised as follows:

Physical Abuse

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

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent effects on the child's emotional development, and may involve:

- Conveying to a child that s/he is worthless, unloved, inadequate, or valued only insofar as s/he meets the needs of another person.
- Imposing developmentally inappropriate expectations e.g. interactions beyond the child's developmental capability, overprotection, limitation of exploration and learning, preventing the child from participation in normal social interaction.
- Causing a child to feel frightened or in danger e.g. witnessing domestic violence, seeing or hearing the ill treatment of another.
- Exploitation or corruption of a child.
- Some level of emotional abuse is involved in most types of ill treatment of children, though emotional abuse may occur alone.
- 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 placed on children 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 child.
- It may involve bullying (including cyber-bullying) causing children to feel frightened or in danger, or the exploitation or corruption of children.
- Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, including prostitution, whether or not s/he is aware of what is happening.

- Activities may involve physical contact, including penetrative and non-penetrative acts. 'Penetrative acts' include 'rape' (forced penetration of vagina, anus or mouth with a penis) and 'assault by penetration' (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching the outside of clothing.
- Sexual activities may also include non-contact activities, e.g. involving a child in looking at / production of abusive images, watching sexual activities or encouraging her/him to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). It may include use of photos, pictures, cartoons, literature or sound recordings via internet, books, magazines, audio cassettes, tapes or CDs.
- Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
- Children under sixteen years of age cannot lawfully consent to sexual intercourse, although in practice may be involved in sexual contact to which, as individuals, they have agreed. A child of under thirteen is considered in law incapable of providing consent.

Neglect

Neglect is defined as **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 and development.

Neglect may occur during pregnancy as a result of maternal substance misuse and once the child is born, neglect may involve failure to:

- Provide adequate food, clothing or shelter (including exclusion from home or abandonment).
- Protect from physical and emotional harm or danger.
- Meet or respond to basic emotional needs.
- Ensure adequate supervision including the use of adequate care-takers.
- Ensure access to appropriate medical care or treatment.
- Ensure that her/his educational needs are met.
- Ensure that her/his opportunities for intellectual stimulation are met.

Definitions are taken from Working Together to Safeguard Children 2019 (HM Government 2019)

Please see Appendix 1 for the Indicators of Abuse.

21. Allegations against staff (See Appendix 3)

Despite all efforts to recruit safely there may be occasions when allegations of abuse against children are reported to have been committed by staff (including supply staff), practitioners or volunteers, who work with pupils within our school.

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

- Behaved in a way that has, or may have harmed a child.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child or children in a way that indicates they may pose a risk of harm to children.

This applies to any child the member of staff or volunteer has contact with in their personal, professional or community life, such as if they had a child protection concerns raised for their own children. To reduce the risk of allegations, all staff should be aware of the safer working practice and should be familiar with the guidance contained in the staff handbook, schools code of conduct and the Guidance for Safer Working Practice for adults who work with children and young people in education settings.'

Guidance about conduct and safe practice will also be given at induction.

All school staff should take care not to place themselves in a vulnerable position with a pupil.

- If such an allegation is made, the member of staff receiving the allegation will immediately inform the Headteacher. The Headteacher on all such occasions will discuss the content of the allegation with the Local Authority Designated Officer (LADO) and follow Richmond and Kingston Safeguarding Partnership protocol for managing allegations. If the allegation against any member of staff meets the harms test then the Head teacher will seek advice from the appropriate authorities.
- If the allegation made to a member of staff concerns the Headteacher, the designated teacher will immediately inform the designated child protection Governor who will consult with the LADO

The school recognises its duty of care to staff and will ensure that allegations against staff (including supply staff and volunteers) are dealt with promptly and thoroughly and will advise staff members to seek support through outside agencies such as their union. Where an allegation arises against an individual not directly employed by the school such as a supply teacher we will follow the advice of the LADO and ensure that the allegation is investigated thoroughly.

22. Allegations against the Headteacher (See Appendix 4)

If a disclosure is made to a member of school staff regarding an allegation against the Headteacher, the member of staff must inform the Chair of Governors and the Deputy DSL. The Chair of Governors will then inform the LADO. If a decision is made by the LADO not to proceed then this must be recorded and all relevant parties informed. If the decision is made to proceed then the allegation will be taken to a strategy meeting organised by the LADO.

23. Specific Safeguarding Concerns

23.1 Children missing from education

A child going missing from education is a potential indicator of abuse or neglect. Orleans Primary School follows the guidance of the statutory guidance 'Children Missing Education' (DFE 2016) and would report any child's continuous absence to the Educational Welfare Officer. There are regular meetings held between the EWO and the Headteacher. All staff have received training on FGM and the Prevent Duty and take this into consideration when monitoring attendance.

At Orleans we have procedures in place for informing the Local Authority when a child is:

- Leaving school to be home educated.
- No longer living close enough to the school to responsibly attend.
- Diagnosed as medically unfit to attend school.
- Permanently excluded.

The school will ensure that school staff:

- Understand what to do when children do not attend regularly.

- Know the signs and triggers for travelling to conflict zones, Female Genital Mutilation (FGM), forced marriage and domestic servitude.

23.2 Children missing from home or care

Orleans Primary School recognises that children who run away or go missing – and thus are absent from their normal residence – are potentially vulnerable to abuse, exploitation, offending and placing themselves in situations where they may suffer physical harm. Keeping Children Safe in Education 2020 highlights that 'Statutory Guidance on Children who run away or go Missing from Home or Care' (2014) requires that every child or young person who goes missing must be offered a return home interview within 72 hours of their return. When necessary and in conjunction with AFC or other relevant local authority, Orleans Primary School will facilitate return home interviews, both in terms of releasing the young person from their normal timetable to participate in an interview and in providing an appropriate and safe space in the school building for the interview to take place.

Orleans Primary School monitors the attendance of all pupils including Looked after Children and report any concerns directly to SPA.

23.3 Domestic Abuse

Domestic violence and abuse can affect adults and children within a family setting. The risks to victims of Domestic violence and abuse and children are likely to increase significantly, when relationships finish and for some time following any break-up. Although both men and women can experience domestic violence and abuse it is much more likely that women and children will be affected in cases of ongoing abuse, with the risk of serious harm and homicide being higher for women than men. Children who live with domestic violence and abuse are highly likely to be suffering emotional abuse themselves and are likely to be facing many risks, such as:

- Suffering direct physical abuse;
- Injuries being caused when intervening in domestic violence situations;
- The emotional effects of witnessing domestic violence and abuse;
- Emotional stress and abuse through the overhearing of domestic violence in the home.

These risks can cause both short and long-term effects on the child's safety, welfare and development even if the parents are doing their best to protect them. Orleans Primary School would follow the reporting procedures for any disclosures of Domestic Violence and seek advice from SPA.

The Government definition of domestic violence and 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 members¹ 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.

The Government definition, which is not a legal definition, includes so called 'honour' based abuse, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic

group. It has been widely understood for some time that coercive control is a core part of domestic violence. As such the extension does not represent a fundamental change in the definition. However, it does highlight the importance of recognising coercive control as a complex pattern of overlapping and repeated abuse perpetrated within a context of power and control.

23.4 Drugs

Orleans Primary School will be alert to behaviour which might indicate that the child is experiencing difficult home circumstances. Where problems are observed or suspected, or if a child chooses to disclose that there are difficulties at home involving drugs the school will seek advice from SPA. This will include protocols for assessing the pupil's welfare and support needs and when and how to involve other sources of support for the child such as Children's Services, services commissioned by the Drug and Alcohol Action Teams (DAAT) programmes and, where appropriate, the family.

23.5 Fabricated or Induced Illness

Staff at Orleans Primary School are alert to the issues surrounding fabricated or induced illnesses. Fabricated or induced illnesses is a condition whereby a child has suffered or is likely to suffer, significant harm through the deliberate action of their parent and which is attributed by the parent to another cause.

There are three main ways of the parent fabricating or inducing illness in a child:

- Fabrication of signs and symptoms, including fabrication of past medical history
- Fabrication of signs and symptoms and falsification of hospital charts, records, letters and documents and specimens of bodily fluids.
- Induction of illness by a variety of means

The above three methods are not mutually exclusive. Existing diagnosed illness in a child does not exclude the possibility of induced illnesses. The very presence of an illness can act as a stimulus to the abnormal behaviour and provide the parent with opportunities for inducing symptoms.

Fabricated or induced illness is most commonly identified in younger children. Although some of these children die, there are many who do not as a result of having their illness fabricated or induced, but who suffer significant long term physical or psychological health consequences.

Fabrication of illness may not necessarily result in a child experiencing physical harm, but there may be concerns about the child suffering emotional harm. They may suffer emotional harm as a result of an abnormal relationship with their parent and/or disturbed family relationships.

Staff at Orleans Primary School will record and report any concerns about a child who might be experiencing fabricated or induced illness to the DSL as with any other safeguarding concerns. The DSL will consider the need to make a referral or consult with SPA as with any other child protection concern.

23.6 Contextual Safeguarding

Orleans Primary School recognises that safeguarding incidents and/or behaviours can be associated with factors outside of the school and/or can occur between children outside the school. All staff, but especially the DSL will consider the context within which such incidents and/or behaviours occur and whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare. The school is aware through local authority updates of the current risk of radicalisation and of grooming through targeting young people at takeaway shops.

23.7 Faith Abuse

The school will follow standard child safeguarding procedures apply in all cases where abuse or neglect is suspected, including those that may be related to particular belief systems.

23.8 Honour Based Abuse

‘Honour-based’ violence (HBV) encompasses crimes, which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (Please refer to paragraph below), forced marriage, and practices such as breast ironing. All forms of so-called HBA are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt, staff should speak to the designated safeguarding lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBA, or already having suffered HBV. Orleans Primary School will activate local safeguarding procedures if any disclosure or information regarding HBV becomes known or suspected.

HBV might be committed against young people in school who:

- become involved with a boyfriend or girlfriend from a different culture or religion
- want to avoid an arranged marriage
- want to avoid a forced marriage
- Wear clothes or take part in activities that might not be considered traditional within a particular culture.

Staff at Orleans Primary School will record and report any concerns about a child who might be at risk of HBV to the DSL as with any other safeguarding concern. The DSL will consider the need to make a referral to the police, and /or SPA as with any Child Protection concern and may contact the forced marriage unit for advice as necessary.

23.9 Forced Marriage

A forced marriage is a marriage in which a female (and sometimes a male) does not consent to the marriage but is coerced into it. Coercion may include physical, psychological, financial, sexual and emotional pressure. It may also involve physical or sexual violence and abuse.

A forced marriage is not the same as an arranged marriage. In an arranged marriage, which is common in several cultures, the families of both spouses take a leading role in arranging the marriage but the choice of whether or not to accept the arrangement remains with the prospective spouses. In forced marriage Children may be married at a very young age, well below the age of consent in England. School staff should be particularly alert to suspicions or concerns raised by a pupil about being taken abroad and not being allowed to return to England.

Forcing someone to marry has become a criminal offence in England and Wales under the Anti-social behaviour, Crime and Policing Act 2014.

23.10 Female Genital Mutilation (FGM)

Female Genital Mutilation is a form of child abuse and as such is dealt with through our Child Protection/Safeguarding Policy. The definition of FGM by the World Health Organisation is as follows: ‘FGM comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural or non-therapeutic reasons.’ FGM is not like male circumcision, it is very harmful and can cause long-term mental and physical suffering, menstruation and sexual problems, difficulty in giving birth, infertility and even death. The average age for FGM to be carried out is about 14 years old. However, it can vary from soon after birth, up until adulthood.

Orleans has taken proactive action to protect and prevent our girls being forced to undertake FGM through the following strategies;

- We have a robust attendance policy that does not authorise holidays, extended or otherwise.
- FGM training for the Child Protection leads which has been disseminated to all staff.
- FGM discussions by the Child Protection lead with parents of children from practising communities who are at risk.
- The school has a comprehensive PSHE and Sex and Relationship Education programme in place.

If we have concerned that children in our school community are at risk or victims of FGM then we refer immediately to social services via SPA. Teachers are subject to a statutory duty defined by section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) to report to police personally where they discover that an act of FGM appears to have been carried out on a girl who is aged under 18. This is known as mandatory reporting.

The mandatory reporting duty applies to all persons in Orleans Primary School who are employed or engaged to carry out 'teaching work' in the school, whether or not they have qualified teacher status. The duty applies to the individual who becomes aware of the case to make a report to police.

At Orleans Primary School staff will record their concerns on the reporting form and inform the DSL who will support them in making a direct report to the police. There are no circumstances in which a teacher or other member of staff will examine a girl.

Indications that a child is at risk of FGM.

- The family comes from a community that is known to practice FGM – especially if there are elderly women present.
- In conversation a child may talk about FGM.
- A child may express anxiety about a special ceremony.
- The child may talk about or have anxieties about forthcoming holidays to their country of origin.
- Parent/Guardian requests for permission for authorised absence overseas.
- If a woman has already undergone FGM – and it comes to the attention of any professional, consideration needs to be given to any Child Protection indications.

Indications that FGM has already taken place:

- Prolonged absence from school with noticeable behaviour change – especially after a return from holiday.
- Spending long periods of time away from the class during the day with bladder or menstrual problems.
- Having difficulty standing, sitting or walking.
- Requests being made to be excused from physical exercise lessons without the support of their GP.
- A child who has undergone FGM should be seen as a Child Protection issue and reported immediately to social care.

23.11 Private Fostering

Private Fostering is when a child under the age of 16 (under 18 if they are disabled) is cared for by someone who is not their parent or a close relative, for 28 days or more. Close relatives are defined as step-parents, grandparents, brothers, sisters, uncles or aunts. To be privately fostered, the arrangement has not been made by the local authority, and the child is not being looked after by an approved foster carer. The school has a statutory duty to report cases of suspected private fostering to the Local Authority through SPA.

Orleans Primary School recognises that most privately fostered children remain safe and well, but safeguarding concerns have been raised in some cases. Therefore, all staff are alert to possible safeguarding issues, including the possibility that a child has been trafficked into the country.

By law, a parent, private fosterer or other persons involved in making a private fostering arrangement must notify Children's Social Care. When Orleans Primary School becomes aware of a private fostering arrangement for a pupil that has not been notified to Children's Social Care, we will encourage parents and private foster carers to notify them directly in the first instance, but also alert them to our mandatory duty as a school to inform the local authority of such arrangements.

23.12 Homelessness

Orleans Primary School recognises that being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The DSL is aware of contact details and referral routes to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity.

Indicators that a family may be at risk of homelessness include;

- Household debt
- Rent arrears
- Domestic Abuse and anti-social behaviour.
- The family being asked to leave a property.

23.13 Children with family members in prison

Orleans Primary School recognises that children who have a family member in prison are at risk of poor outcomes including poverty, stigma, isolation and poor mental health. The school will work with agencies and resources such as NICCO to help mitigate negative consequences for those children.

23.14 Child Sexual Exploitation (CSE)

Orleans Primary School follows the London Child Protection Procedures for Safeguarding children from Sexual Exploitation.

Updated Government Definition of Child Sexual Exploitation (16/02/17):

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.

CSE is a form of child sexual abuse, which can involve:

- Physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing and rubbing or touching outside clothing.
- Non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet).
- Any young children or young person, both boys and girls under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex.
- Abuse even if the sexual activity appears consensual.
- Take place in person or via technology or a combination of both.
- Force and or enticement based methods of compliance and may or may not be accompanied by violence or threats of violence.
- May occur without the child or young person's immediate knowledge (though others copying videos or images they have created and posting on social media, for example).
- Being perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse.

- A form of power imbalance in favour of those perpetrating the abuse. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status and access to economic or other resources.

CSE is never the victim's fault, even if there is some form of exchange: all children and young people under the age of 18 have a right to be safe and should be protected from harm.

Links to other kinds of crime

- Child Trafficking.
- Domestic abuse.
- Sexual violence.
- Grooming* (including online grooming).
- Abusive images of children and their distribution.
- Drugs-related offences.
- Gang-related activity.
- Immigration-related offences.
- Domestic servitude.

*The NSPCC defines grooming as: Grooming is when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking. Children and young people can be groomed online or face-to-face, by a stranger or by someone they know - for example a family member, friend or professional. Groomers may be male or female. They could be any age. Many children and young people do not understand that they have been groomed or that what has happened is abuse.

Although the following vulnerabilities increase the risk of child sexual exploitation, it must be remembered that not all children with these indicators will be exploited. Child sexual exploitation can occur without any of these issues.

- Having a prior experience of neglect, physical and/or sexual abuse.
- Lack of a safe or stable home environment, now or in the past.
- Recent bereavement or loss.
- Social isolation or social difficulties.
- Absence of a safe environment to explore sexuality.
- Economic vulnerability.
- Homelessness or insecure accommodation status.
- Connections with other children and young people who are being sexually exploited.
- Family members of other connections involved in adult sex work.
- Having a physical or learning disability.
- Being in care.
- Sexual identity.

Possible indicators of CSE

- Acquisition of money, clothes, mobile phones etc. without plausible explanation.
- Isolation from peers, gang involvement.
- Leaving home or care without explanation and persistently going missing or returning late.
- Excessive receipt of texts or phone calls.
- Inappropriate sexualized behaviour for their age.
- Evidence of suspicious of physical or sexual assault.
- Relationships with controlling or significantly older individuals or groups.
- Concerning use of the internet or social media.
- Self-harm or significant changes in emotional well-being.
- Online exploitation.

All young people are at risk from online exploitation, and can be unaware that this is happening. Online exploitation allows perpetrators to initiate contact with multiple potential victims and offers a perception of anonymity. Where exploitation does occur online, the transfer of images can be quickly and easily shared with others which makes it difficult to contain the potential for further abuse. Children may also be the perpetrators of abuse, sometimes at the same time as being abused themselves.

23.15 County Lines: Child Criminal Exploitation and Serious Crime

Criminal Exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity: drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns.

Like other forms of abuse and exploitation, county lines exploitation:

- Can involve threats either physical or online.
- Can affect any child or young person (male or female) under 18 years of age.
- Can affect any vulnerable adult over the age of 18 years.
- Can still be exploitation even if the activity appears consensual
- Can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threat of violence.
- Can be perpetrated by individuals or groups, males or females, young people or adults.
Is typified by some form of power imbalance in favour of those perpetrating the exploitation. Whilst age may be the most obvious factor, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status and access to economic or other resources.

At Orleans Primary School staff would immediately seek advice from SPA if information regarding such a situation came to light. If a child was in immediate danger then the DSL would inform the police via the emergency number.

23.16 Prevent: Tackling Extremism and Radicalisation and Referring to Channel (Please see separate policy)

At Orleans we recognise that tackling against extremism and radicalisation is not different to safeguarding against any other vulnerability in today's society and we aim for our staff to overcome any professional disbelief that such issues will not happen here and ensure that we work alongside other professional bodies and agencies to ensure that our pupils are safe from harm.

Section 26 of the Counter-Terrorism and Security Act 2015 places a duty on education and other children's services ('Specified authorities') to have 'due regard' to the need to prevent people from being drawn into terrorism.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. The government defines extremism as vocal or active opposition to fundamental British Values.

Our policy provides a framework for dealing with issues relating to vulnerability, radicalisation and exposure to extremist views and sets out how the school will deal with such incidents and identifies how the curriculum and ethos underpins our actions.

23.17 Mental Health

Orleans Primary School follows the advice set out in the DFE advice document, 'Mental Health and Behaviour in Schools' (2018), and actively promotes the health and well-being of pupils. Where we have concerns, we would seek the advice of supporting professionals such as the Educational Psychologist and CAMHS. If safeguarding concerns are centred around the mental health of a child's parent or carers, then the school will follow its safeguarding procedures and contact SPA.

23.18 Suicide and Self-harm

Suicide: an act of deliberate self-harm which results in death.

Self-harm: self-poisoning or self-injury, irrespective of the apparent purpose of the act.

Suicide and Self harm links: self-harm is generally a way of coping with overwhelming emotional distress. Many young people who self-harm have no intent towards suicide. However, research shows that young people who self-harm can be at a higher risk of suicide.

Self-harm is a coping mechanism which enables a person to express difficult emotions. Young people who hurt themselves often feel that physical pain is easier to deal with than the emotional pain they are suffering because it is tangible. But the behaviour only provides temporary relief and fails to deal with the underlying issues that a young person is facing. For some people self-harm may last for a short time. For others it can become a long-term problem. Some people self-harm, stop for a while, and return to it within months, even years later in times of distress.

The most common forms of self-harm are:

- Cutting
- Biting-self
- Burning, scalding, branding.
- Picking at skin, reopening old wounds.
- Breaking bones
- Hair pulling
- Head banging
- Ingesting objects or toxic substances
- Overdosing with a medicine.

Self-harm is usually a secretive behaviour but signs may include:

- Wearing long sleeves at inappropriate times
- Spending more time in the bathroom
- Unexplained cuts or bruises, burns or other injuries
- Unexplained smell of Dettol or TCP
- Low mood – seems to be depressed or unhappy, low self-esteem, feelings of worthlessness
- Mood changes – anger, sadness.
- Changes in eating and sleeping patterns.
- Losing friendships, spending more time by themselves and becoming more private or defensive.
- Withdrawal from activities which used to be enjoyed.
- Abuse of alcohol and drugs

Orleans Primary School recognises that any pupil who self-harms or expresses thoughts about self-harm and/or suicide must be taken seriously and appropriate help and intervention will be offered at the earliest point. Any member of staff who is made aware that a pupil has self-harmed or is contemplating self-harm or suicide will record and report the matter to the DSL as soon as possible as with any other safeguarding concern.

23.19 Peer on Peer Abuse

When allegations are made by pupils against other pupils in the school, which are of a safeguarding nature; these could be physical, emotional, sexual abuse or sexual exploitation. It is likely that to be considered a safeguarding allegation against a pupil some of the following features may appear:

- The allegation is made against an older pupil and refers to their behaviour towards a younger pupil or a more vulnerable pupil.
- Is of a serious nature, possibly including a criminal offence.
- Raises risk factors for other pupils in the school.
- Indicates that other pupils may have been affected by this pupil.
- Indicates that young people outside the school may be affected by this student.

Examples of safeguarding concerns against a pupil could include:

- Physical Abuse; violence, particularly pre planned.
- Emotional Abuse; blackmail or extortion, threats or intimidation.
- Sexual Abuse: indecent exposure, indecent touching or serious sexual assaults, forcing others to watch pornography or take part in sexting.
- Sexual Exploitation: encouraging other children to attend appropriate parties, photographing or filming other children performing indecent acts.

Specific actions for dealing with allegations of peer on peer abuse:

- When an allegation is made by a pupil against another pupil, members of staff should consider whether the complaint raises a safeguarding concern. If so the DSL should be informed.
- Details of the allegation should be recorded but no attempt at this stage should be made to investigate it.
- The DSL should contact children's services to discuss the case. It is possible that the children's services are already aware of safeguarding concerns around the young person. The DSL will follow the recommendations made by children's services and make a referral where appropriate, keeping a record of the concern, the discussion and the outcome.
- If the allegation indicates a potential criminal offence has taken place, the police should be informed immediately and the parents of both pupils.
- Where the behaviour meets the criteria within the Orleans Primary School Behaviour Policy an exclusion may be given for a fixed term period.
- Where neither the police or social services accept the complaint a thorough school investigation will be carried out using the school's disciplinary procedures.
- If the school deems that there is a safeguarding risk, then a risk assessment should be prepared along with a preventative, supervision plan, including a date for review with everyone concerned.

23.20 Child Trafficking and Modern-Day Slavery (MDS)

Human trafficking is defined in the UN Protocol on trafficking, adopted in 2000, as the acquisition of a person by means of deception or coercion, for the purposes of exploitation. Human trafficking or modern day slavery, as it is often referred to, is a crime and a safeguarding issue affecting millions across the world and in the United Kingdom. Staff at Orleans Primary School are alert to the existence of modern slavery and child trafficking and concerns will be recorded and reported to SPA as appropriate.

Types of Modern Day Slavery - Examples of industries and services where slavery exists in the UK today, the victims of which include children and young people are;

- The sex industry.
- Retail; nail bars and hand car washes.
- Factories; food packing.
- Hospitalities: fast food outlets.
- Agriculture: fruit picking.
- Domestic labour; cooking, cleaning and child minding.
- Additionally, victims can be forced into criminal activities such as cannabis production, theft or begging.

MDS is an issue that transcends age, gender and ethnicities. It can include victims who have been brought to the UK from overseas or vulnerable people in the UK being forced to work illegally against their will. Children and young people have an increased vulnerability to slavery.

Poverty, limited opportunities, lack of education, unstable social and political and war are some of the situations that contribute to the trafficking of victims and slavery. Slavery can be linked to a number of safeguarding issues, including CSE but normally occurs during these specific situations:

- Child trafficking; young people being moved internationally or domestically so that they can be exploited.
- Forced labour; victims are forced to work through physical or mental threat, against their will, often for very long hours for little or no pay, in conditions which can affect their physical and mental health. They are often subjected to verbal or physical threats of violence against them as individuals or their families.
- Debt bondage: victims forced to work to pay off debts that they will never be able to. Debts can be passed down to children. Extreme examples include where a victim may be owned or controlled by an employer or sold as a commodity.

Possible signs and indicators that someone is a victim of modern day slavery that anyone working with children and young people include;

- Physical appearance: poor physical condition, malnourishment, untreated injuries, and looking neglected.
- Victims may not be allowed out on their own and may appear to be under the control or influence of people accompanying them, with the absence of a parent or legal guardian. They may not interact or be familiar with their local community.
- Poor living conditions: victims may be living in dirty, cramped or overcrowded accommodation, with multiple children living and working at the same address or premises.
- Personal belongings: few possessions, wearing the same clothes each day, and no identification documents.
- Restricted freedom: victims have little opportunity to move freely and may be kept from having access to their passport.
- Unusual travel times: victims may be picked up and dropped off early and late.
- Reluctant to seek help: victims may avoid eye contact, appear frightened or hesitant to approach people and have a lack of trust or concern about making a report in case they are deported or there is violence against their family.

If a member of staff suspects that a pupil may be a victim they will, in the first instance report their concerns to the DSL. The DSL will seek advice from SPA who may in turn make a referral to the National Crime Agency via the National Referral Mechanism. Further advice can be provided directly by the modern slavery helpline on 0800 0121 700.

23.21 Child on Child Sexual Harassment

Orleans Primary School follows the DFE's advice about sexual violence and sexual harassment between children in schools and colleges. 'Sexual Violence and Sexual Harassment Between Children in Schools and Colleges (DFE May 2018)

Sexual Violence and Sexual Harassment can occur between two pupils of any sex. They can also occur through a group of pupils sexually assaulting or sexually harassing a single pupil or group of pupils. It is more likely that girls will be the victims of sexual violence and more likely that sexual harassment will be perpetrated by boys.

Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur both off and online (both physical and verbal) and are never acceptable. Orleans Primary School will ensure that all victims are taken seriously and offered appropriate support.

At Orleans, we will not tolerate any form of sexual violence or sexual harassment. Whilst taking into consideration the primary age range of our pupils, we understand that children can and sometimes do, abuse their peers in this way. Rape, assault by penetration and sexual assault are examples of sexual violence whilst sexual jokes, comments and physical behaviour such as deliberately brushing up against someone or digital sexual harassment such as sexting (please see below) are examples of sexual harassment. Behaviours such as this are not 'banter' or 'having a laugh' and will not be tolerated. The Designated Safeguarding Lead would immediately report to the police, CEOP and to social services any incidents of such behaviour. The school will follow its Behaviour and Exclusion policies in the light of such circumstances. We will be mindful of ensuring that information is shared only on a need to know basis so that protection is afforded to both the alleged perpetrator and the alleged victim. As a school, we work to an ethos of early intervention and so would ensure we seek advice from outside specialist agencies to provide support within school.

We recognise that the following pupils can be especially vulnerable to sexual violence and sexual harassment;

- Children with Special Educational Needs and Disabilities (SEND)
- Pupils who are Lesbian, Gay, Bi or Trans, Questioning (LGBTQ) or who are perceived to be so by their peers.

Sexual Violence refers to sexual offences under the Sexual Offences Act 2003:

- Rape: A person commits a rape if: he intentionally penetrates the vagina, anus or mouth of another person with his penis whilst he does not reasonably believe the other person consents.
- Assault by Penetration: A person commits an offence if s/he intentionally penetrates the vagina or anus of another person with a body part or anything else, the penetration is sexual and the person does not reasonably believe that the other person consents.
- Sexual Assault: A person commits sexual assault if s/he intentionally touches another person, with the touching being sexual in nature and does not reasonably believe that the other person consents.

Sexual Harassment: Sexual Harassment is 'unwanted conduct of a sexual nature' that can occur online and offline. Sexual harassment is likely to violate a child's dignity and make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

Sexual Harassment can include;

- Sexual Comments, such as telling jokes, making lewd comments, making sexual remarks about clothes and appearance or calling someone sexualised names.
- Physical behaviour, such as deliberately brushing against someone, interfering with someone's clothes, displaying photos, pictures or drawings of a sexual nature.
- Online sexual harassment, which might include: non-consensual sharing of sexual images and films and sharing these, inappropriate sexual comments on social media; exploitation, coercion and threats. Online sexual harassment may be stand alone, or part of a wider pattern of sexual harassment and/or sexual violence.
- Upskirting: (which is now a criminal offence) which typically involves taking a picture underneath clothing without a person knowing.

Harmful Sexual Behaviours:

Children's sexual behaviour exist on a wide continuum, from normal and developmentally expected to appropriate, problematic, abusive and violent. Harmful sexual behaviours refers to problematic, abusive and violent. When considering harmful sexual behaviours, ages and stages of development of the children are critical factors to consider.

Orleans Primary School recognises that pupils displaying harmful sexual behaviours have often experienced their own abuse and trauma and they will be offered appropriate support through discussion with children's services.

The PSHE and SRE curriculum covers what healthy respectful relationships look like, gender roles, stereotyping, equality body confidence and self-esteem.

Specific actions for dealing with allegations of sexual harassment and sexual violence - Orleans Primary School will make decisions on a case-by-case basis, with the DSL taking a leading role and using their professional judgement, supported by other agencies, such as children's social care and the police as required. The management of children and young people with sexually harmful behaviour is complex and our school will work with other relevant agencies to maintain the safety of the whole school community.

A risk and needs assessment will be completed for all reports of sexual violence, will be completed on a case-by-case basis and will consider;

- The victim, especially their protection and support.
- The alleged perpetrator.
- The needs of the other pupils in school and the actions needed to keep them safe.

23.22 Youth produced sexual imagery (YPI)

Sexting is when someone sends or receives a sexually explicit text, image or video. This includes sending 'nude pics', 'rude pics' or 'nude selfies'. Pressuring someone into sending a nude picture can happen in any relationship and to anyone, whatever his or her age, gender or sexual preference. Orleans Primary School does not allow pupils to use their mobile devices in school; the only pupils permitted to bring a phone to school are Year 6 pupils who walk to school unaccompanied; these are kept in a secure place during the school day and are not for use. Online Safety talks are provided for pupils and parents, which give advice on this specific subject from specialist professionals. The school has included resources from the Child Exploitation and Online Protection agency's website to support online safety and guidelines for parents and pupils on our school website.

Orleans Primary School will act in accordance with advice endorsed by the DFE 'Sexting in Schools and Colleges; responding to incidents and safeguarding young people.' (UK Council for Child Internet Safety 2016) All incidents will be dealt with as safeguarding concerns. The primary concerns at all times will be the welfare and protection of the young people involved. Young people who share sexual imagery of themselves or their peers are breaking the law. However, as highlighted in the national guidance, it is important to avoid criminalising young people unnecessarily. Orleans Primary School will therefore work with external agencies with a view to responding proportionately to the circumstances of any incident.

How we deal with such issues:

All incidents of YPI should be reported to the DSL as with all other safeguarding issues and concerns. Staff will not make their own judgements about whether an issue relating to YPI is serious enough to report to the DSL. What may seem less serious concerns to individual members of staff may be more significant when considered in the light of other information known to the DSL, which the member of staff may not be aware of.

If a member of staff becomes concerned about a YPI issue in relation to a device in the possession of a student, the member of staff will secure the device by confiscating it. This is consistent with the DFE advice searching, screening and confiscation: advice for Headteachers, school staff and governing bodies (DFE February 2014) Staff will not view or print any indecent images; the confiscated device will be passed to the DSL. The DSL will discuss the concerns with appropriate staff and speak to young people involved as appropriate. Parents and carers will be informed at an early stage and involved in the process unless there is good reason to believe that involving parents would put the young person at risk of harm. If at any point in the process, there is a concern that a young person has been harmed or is at risk of being harmed a referral will be made to SPA and/or the police immediately. The police will always be informed when there is reason to believe that indecent images involve sexual acts and any child in the imagery is under 13 years of age.

The DSL will make a judgement about whether a reported YPI incident is experimental or aggravated. Aggravated incidents involve criminal or abusive elements beyond the creation, sending or possession of

sexual images created by young people. These include possible adult involvement or criminal or abusive behaviour by young people, such as sexual abuse, extortion, threats, malicious conduct arising from personal conflicts, or creation or sending or showing images without the knowledge or against the will of a young person who is pictured. Aggravated incidents of sexting will be referred to SPA for advice about whether or not a response by the police and/or children's services is required.

This will facilitate consideration of whether:

- There are any offences which warrant a police investigation.
- Child Protection Procedures need to be invoked.
- Parents or carers require support to safeguard their children.
- A multi-agency sexual exploitation (MASE) meeting is required.
- Any of the perpetrators and/or victims require additional support; this may require the initiation of any Early Help Assessment and the offer of early help services.

Examples of aggravated incidents include:

- Evidence of adult involvement in acquiring, creating or disseminating indecent images of young people (possibly involving an adult pretending to be a young person known to the victim.)
- Evidence of coercing, intimidating, bullying, threatening and/or extortion of students by one or more other students to create and share indecent images of themselves.
- Pressuring a student who does not have the capacity to consent (e.g. due to their age, level of understanding or special educational needs.)
- Dissemination of indecent images of young people to a significant number of others with an intention to cause harm or distress
- What is known about the imagery suggests the content depicts sexual acts which are unusual for the young person's developmental stage or are violent.
- Sharing indecent images places a young person at risk of immediate harm, for example the young person is presenting as suicidal or self-harming.

Viewing the imagery

Adults should not view the YPI unless there is good and clear reason to do so. Wherever possible, the DSL's responses to incidents will be based on what they have been told about the content of the imagery. Any decision to view the imagery will be based on the DSL's professional judgement. Imagery will never be viewed if the act of viewing will cause significant distress or harm to a pupil. If a decision is made to view the imagery, the DSL will be satisfied that the viewing:

- Is the only way to make a decision about whether to involve other agencies:
- Is necessary to report the image to a website, app or suitable reporting agency to have it taken down, or to support the young person or parent in making a report.
- Is unavoidable because the young person has presented an image directly to a staff member of the imagery has been found on a school device or network.

If it is necessary to view the imagery then the DSL will;

- Never copy, print or share the imagery: this is illegal
- Discuss the decision with the Headteacher
- Ensure viewing is undertaken by the DSL or if it is the Deputy DSL then it must have the explicit permission of the Headteacher.
- Ensure viewing takes place with another member of staff present in the room, i.e. the Deputy DSL or Senior Member of Staff. The member of does not need to view the imagery.
- Record the viewing of the imagery in the pupils safeguarding record, including who was present, why the image was viewed and any subsequent actions: and ensure this is signed and dated.

If the school has decided that other agencies do not need to be involved, then consideration will be given to deleting imagery from devices and online services to limit any further sharing of the imagery.

23.23 Up skirting

Orleans Primary School will ensure that all staff and pupils are aware of the changes to the Voyeurism (Offences) Act 2019 which criminalises the act of 'up skirting'. The Criminal Prosecution Service (CPS) defines upskirting as: 'a colloquial term referring to the action of placing equipment such as a camera or mobile phone beneath a person's clothing to take a voyeuristic photograph without their permission. It is not only confined to victims wearing skirts or dresses and equally applies when men or women are wearing kilts, cassocks shorts or trousers. It is often performed in crowded public places, for example on public transport or at music festivals, which can make it difficult to notice offenders.'

Incidents of upskirting in school will not be tolerated. Orleans Primary School will make decisions on a case by case basis, with the DSL or Deputy DSL taking a leading role and using their professional judgement, supported by other agencies, such as children's social care and the police as required.

23.24 Bullying (Please see separate Anti-bullying and Online Safety Policies)

Our policy on bullying is set out in a separate policy and acknowledges that, to allow or condone bullying may lead to consideration under child protection procedures. All staff are aware that safeguarding issues can manifest themselves through Peer on Peer abuse and will take action as set out in our Anti-bullying and Online Safety policies.

23.25 Racist Incidents (Please see separate policy)

Our policy on racist incidents is set out in a separate policy and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures.

23.26 Keeping Children Safe Online (Please also see Online Safety Policy)

Children and young people commonly use electronic equipment including mobile phones, tablets and computers on a daily basis to access the internet and share content and images via social networking sites. We recognise that the school plays a significant part in the prevention of harm to our pupils by providing pupils with good lines of communication with trusted adults, supportive friends and an ethos of protection. Orleans Primary School has a rigorous Online Safety Policy, including how to keep safe when they are learning at home which can be accessed in the policy section of the school website.

The school ensures that the age limits for technologies are followed and pupils are not allowed to access these in school under any circumstances. Many pupils own or have access to hand held devices and parents are encouraged to consider measures to keep their children safe when using the internet and social media at home and in the community. Cyberbullying and sexting by pupils will be treated as seriously as other types of bullying and will be managed through our anti-bullying procedures.

Orleans utilises the 360 safe website for advice and guidance on supporting pupils. There may be instances where pupils are asked to work at home (particularly during the Covid-19 pandemic) and the school has written to parents to advise them on how to keep their child safe at home when working online.

23.27 Health & Safety

Our Health & Safety Policy, set out in a separate document, reflects the consideration we give to the protection of our children both within the school environment and when away from the school when undertaking school trips and visits.

All visitors are required to report to the School Office at the start and end of their visit. Visitors must sign in and out and wear a visitor badge for the duration of their visit. Visitors to the school site are always supervised

or accompanied by a member of school staff unless they have a current DBS check which is presented to the office staff on arrival.

All volunteers should be DBS checked prior to working alone with children. The school has a Volunteer Handbook in place to advise volunteer working within the school.

23.28 First Aid

Orleans Primary School has three members of staff who are fully trained first aiders (Iona Medland, Amanda Johnson and Charley Taylor) There are other staff who have attended a one-day first aid course. All club providers are expected to be first aid trained and carry their own first aid kit. In an emergency, a first aid bag is available from the school office. Club organisers should keep their own register and are shown where the children's emergency contact details are kept in the office.

24. Whistleblowing (Please see separate Policy)

We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so. All staff are aware of their duty to raise concerns, where they exist, in relation to the actions of colleagues. Staff are aware of how to access other channels of support, the NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally Staff can call 0800 028 0285 or email help@nspcc.org.uk

25. Physical Intervention (Please see separate Policy)

Our policy on physical intervention by staff acknowledges that staff must only ever use physical intervention as a last resort, and that at all times it must be the minimal force necessary to prevent injury to another person or to the child themselves. Where appropriate, guidance will be sought from Richmond LA. We understand that physical intervention of a nature which causes injury or distress to a child may be considered under Child Protection or disciplinary procedures.

26. Safer Recruitment - Please refer to our Safer Recruitment Policy (January 2019) which fully details our recruitment procedures. However, a brief summary is as follows;

The Governing Body, Headteacher and School Business Manager are responsible for ensuring that the school follows recruitment procedures that help to deter, reject or identify people who must abuse children whether through volunteer or paid employment.

All recruitment panels will have at least one member who has completed Safer Recruitment training.

When advertising for new posts to the school the following statement is included in all adverts:

'Our school is committed to safeguarding the wellbeing of children and young people and expects all staff, visitors and volunteers to share in this commitment. References will be carried out prior to interview and an enhanced DBS check is required for the successful candidate.'

Disqualification by association – Where applicable all staff and volunteers who work within Early Years will complete an annual return in relation to disclosable information/convictions/personal matters.

The following guidance is used by recruitment panels as they consider references and employment.

- References must be on headed paper and signed with an original signature
- Returned by the person it was requested from
- Two references must be given
- Referees must be spoken to if possible

DBS (Disclosure and Barring Service);

- The DBS application is completed online.
- Staff and volunteers must be enhanced DBS checked (with barred list check).
- For school staff, the school may accept DBS certificates processed by the same local authority, providing it is dated within three years and there has been no break in employment. A barred list check must still be completed.
- The school maintains an up to date record of the DBS information it holds called the Single Central Record.

Medical Clearance

- All new employees are sent a link to a Health Questionnaire which is sent directly back to Occupational Health.
- If an existing employee takes up a different post, they may be subject to another medical clearance depending on the type of work carried out.

National Insurance Numbers

- Employees may begin working before they receive their National Insurance Number as long as they can provide evidence they have applied for one.

Right to work in the UK

- The school will check that the employee has the necessary documentation to work in the UK.
- The school will keep a copy of the documentation within personnel files.

This policy was reviewed by the Headteacher (DSL) in September 2020 and was shared with all staff. This policy will be reviewed in September 2021.

APPENDIX 1

Indicators of Abuse - 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. The identification of Physical signs is complicated, as children may go to great lengths to hide injuries, often because they are ashamed or embarrassed or their abuser has threatened further violence or trauma if they ‘tell’. Medical knowledge is required to be able to categorise injuries into accidental or deliberate. It is vital that staff are aware of the range of behavioural indicators of abuse and report any concerns to the DSL.

Indicators in the Child	Indicators in the Parent	Indicators in Family/Environmental
<ul style="list-style-type: none"> • Bruises – shape, grouping, site, repeat or multiple • Bite marks – site and size • Burns and Scalds – shape, definition, size, depth, scars • Fractures- delay in seeking medical attention, old fractures, • Injuries not typical of accidental injury • Fabricated or induced illness • Improbable or conflicting explanations for injuries • Repeated or multiple injuries • Admission of punishment which appears excessive • Fear of parents being contacted and fear of returning home • Withdrawal from physical contact • Aggression towards others • Frequently absent from school <p>Emotional/behavioural presentation</p> <ul style="list-style-type: none"> • Refusal to discuss injuries • Concerns about changing for PE and Swimming. • Difficulties in making or sustaining friendships. • Reckless with their own or others safety • Show signs of not wanting to go home. • 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 	<ul style="list-style-type: none"> • Parent with injuries that may suggest domestic violence • Not seeking medical help/unexplained delay in seeking treatment • Evasive or aggressive towards child or others • Refusal or reluctance to discuss injuries or mention previous injuries • Delay in seeking treatment • Given explanation inconsistent with injury • Over chastisement of child / aggressive towards child or others • Absent without good reason when their child is presented for treatment • Disinterested or undisturbed by accident or injury • Unauthorised attempts to administer medication • Tries to draw the child into their own illness. • Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault • 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. 	<ul style="list-style-type: none"> • 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.

<ul style="list-style-type: none"> • Frequently absent from school • An explanation which is inconsistent with an injury • Several different explanations provided for an injury 		
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Notes on Physical Abuse

Bruising It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as not 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 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, oval, or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.

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

Burns and Scalds It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded. Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid.

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

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

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including 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.

Indicators in the Child	Indicators in the Parent	Indicators in Family/Environmental
<ul style="list-style-type: none"> • Developmental delay • Abnormal attachment 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 • 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 • '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 	<ul style="list-style-type: none"> • Domestic abuse • Mental health; drug or alcohol difficulties • Abnormal attachment to child e.g. overly anxious or disinterest in the child • Scapegoats one child in the family • Cold or unresponsive to the child's needs • Imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection. • Overly critical of the child • Never allowing anyone else to undertake the child's care • History of abuse or mental health problems • Wider parenting difficulties may (or may not) be associated with this form of abuse. 	<ul style="list-style-type: none"> • 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.

<ul style="list-style-type: none"> • Poor peer relationships including withdrawn or isolated behaviour 		
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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	Indicators in the Parent	Indicators in Family/Environmental
Physical presentation <ul style="list-style-type: none"> • Failure to thrive/ underweight or small stature • Frequent hunger • Dirty, unkempt condition • clothing in a poor state of repair or inadequate • Swollen limbs with sores that are slow to heal, usually associated with cold injury • Abnormal voracious appetite • Dry, sparse hair • Recurrent / untreated infections or skin conditions e.g. severe nappy rash, eczema or persistent head lice • Untreated medical problems • Frequent accidents or injuries Development <ul style="list-style-type: none"> • General delay, especially speech and language delay • Inadequate social skills and poor socialization Emotional/behavioural	<ul style="list-style-type: none"> • Dirty, unkempt presentation • Inadequately clothed • Inadequate social skills and poor socialisation • Abnormal attachment to the child. • 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 	<ul style="list-style-type: none"> • 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

<ul style="list-style-type: none"> • 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 • Disturbed peer relationships • Self-harming behaviour 	<p>hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy</p> <ul style="list-style-type: none"> • 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 	
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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).

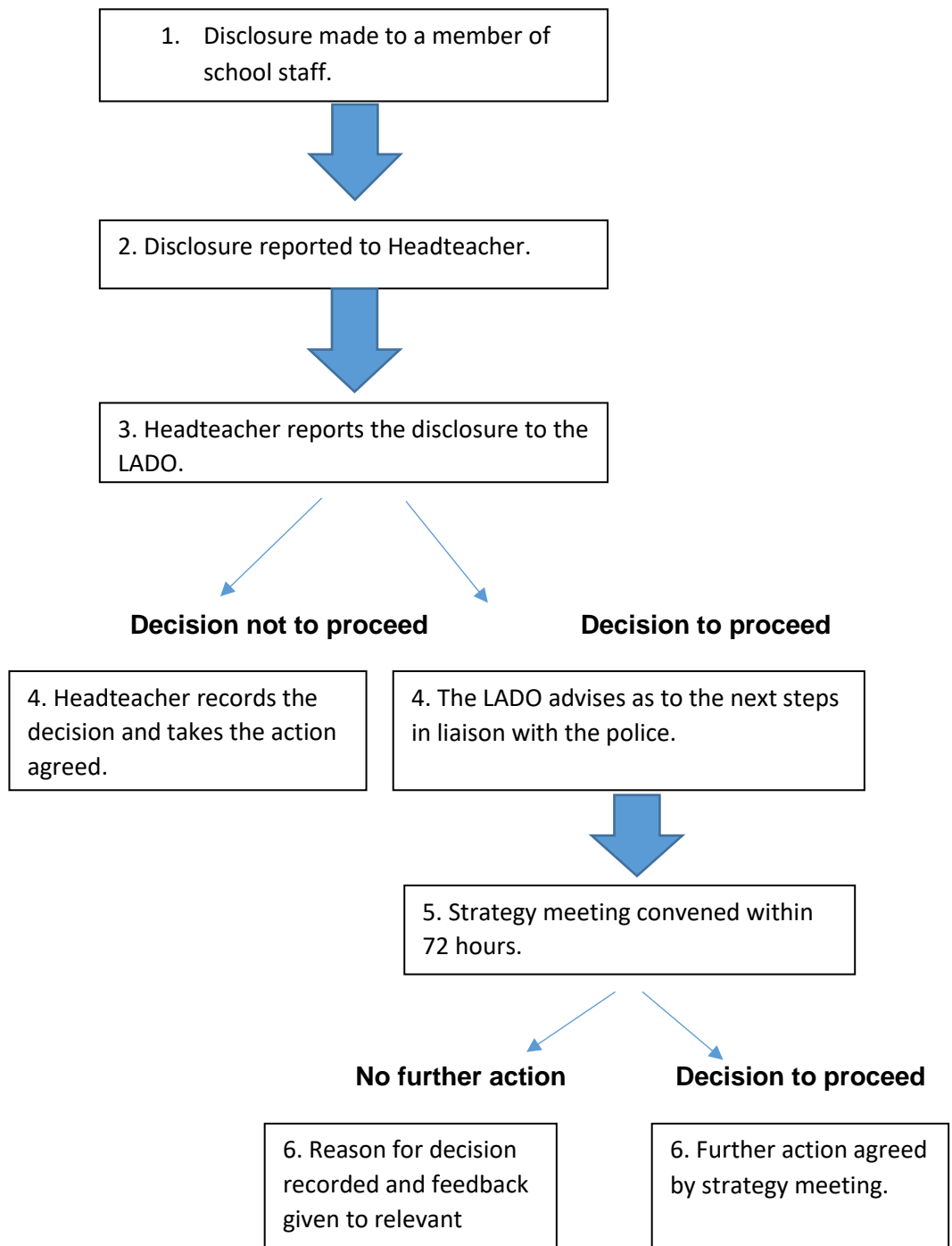
Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Indicators in the Child	Indicators in the Parent	Indicators in Family/Environmental
<p>Physical presentation</p> <ul style="list-style-type: none"> • Pain, bleeding, bruising or itching in genital and /or anal area • Recurrent pain on passing urine or faeces / Blood on underclothes • Sexually transmitted infections • Pregnancy in a younger girl where there is secrecy about identity of the father 	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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

<ul style="list-style-type: none"> Physical symptoms such as injuries/bruises to the genital or anal area, buttocks, abdomen and thighs presence of semen on vagina, anus, external genitalia or clothing <p>Emotional/behavioural <input type="checkbox"/> Makes a disclosure.</p> <ul style="list-style-type: none"> Exhibits 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 Sudden changes in school work habits, becomes truant Withdrawal, isolation or excessive worrying or depression Inappropriate sexualised conduct Sexually exploited or indiscriminate choice of sexual partners Wetting or other regressive behaviours e.g. thumb sucking Draws sexually explicit pictures 		<p>disorder or false allegations of physical or sexual assault or a culture of physical chastisement.</p> <ul style="list-style-type: none"> Family member is a sex offender.
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APPENDIX 3

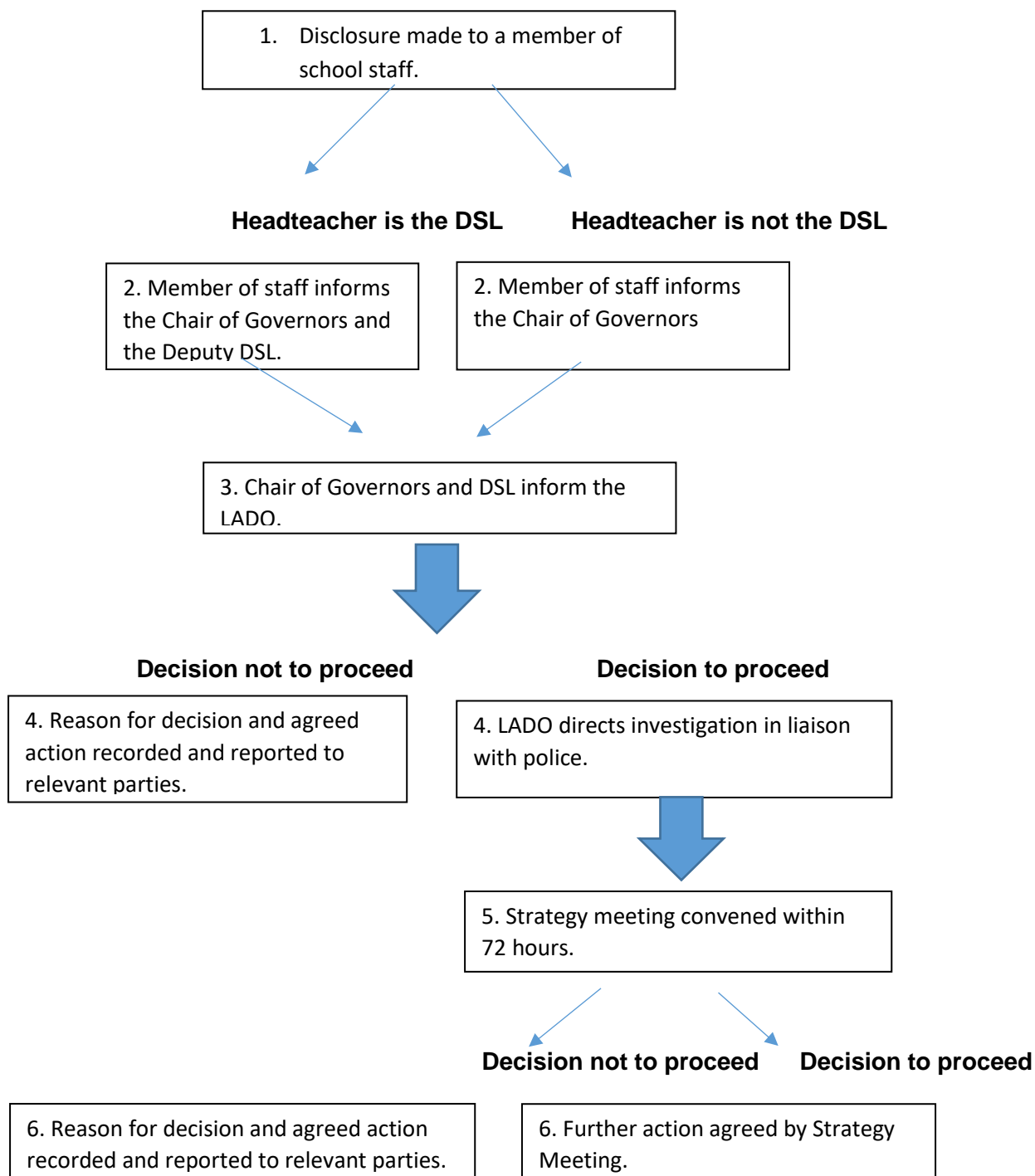
Action to be taken when dealing with an allegation of abuse by a member of staff or volunteer.



A referral will be made to the Disclosure and Debarring Service (DBS) if a person in a regulated activity is dismissed. The school will contact them and will also seek advice from the LADO.

APPENDIX 4

Action to be taken when dealing with a disclosure to a member of school staff an allegation of abuse by the Headteacher.



A referral will be made to the Disclosure and Barring Service (DBS) if a person in a regulated activity is dismissed. The school will contact them and will also seek advice from the LADO.

Concern reporting form

Please complete this form as soon as possible if you have any concerns about a pupil

Pupil's name			
Pupil's DOB		Day/Date/Time	
Name of member of staff noting concern			

Details of concern

(Please describe as fully as possible and use the pupil's own words where applicable. Include names of witnesses, if relevant, and any immediate action taken.)

Body map attached: Yes ☐ No ☐

Signature:

Date:

Please ensure that the completed form is given to the Designated Safeguarding Lead or Deputy Designated Safeguarding Lead

Actions taken			
Date	Person taking action	Action	Signature

If the parent or carer has **NOT** been informed, please state the reason for this decision:

APPENDIX 6

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/830121/Keeping_children_safe_in_education_060919.pdf

**LINK TO DEPARTMENT FOR EDUCATION DOCUMENT 'KEEPING CHILDREN SAFE IN EDUCATION
September 2020'**

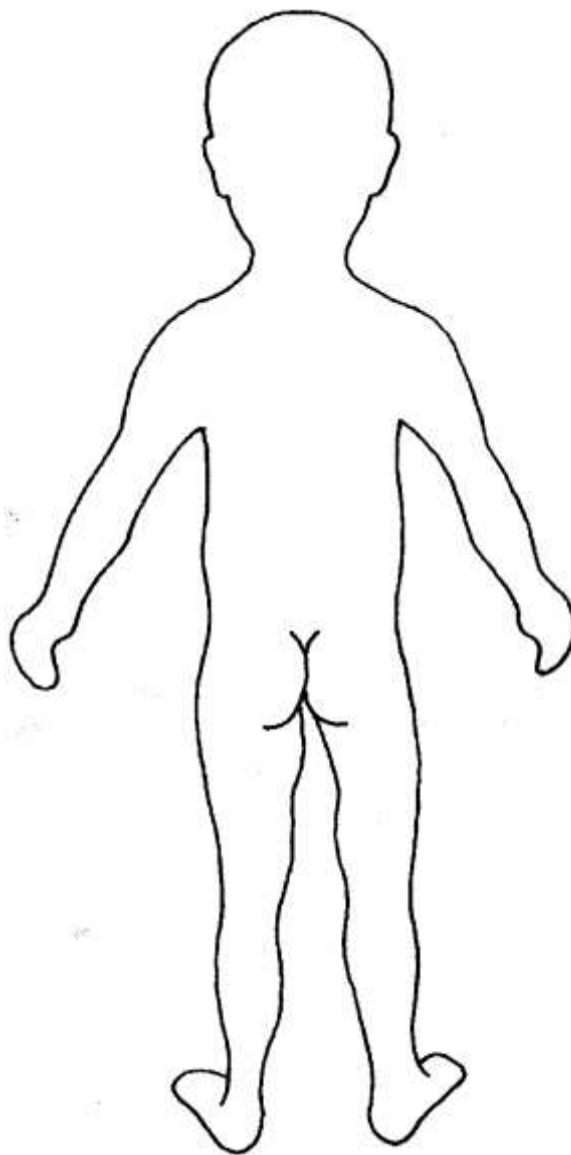
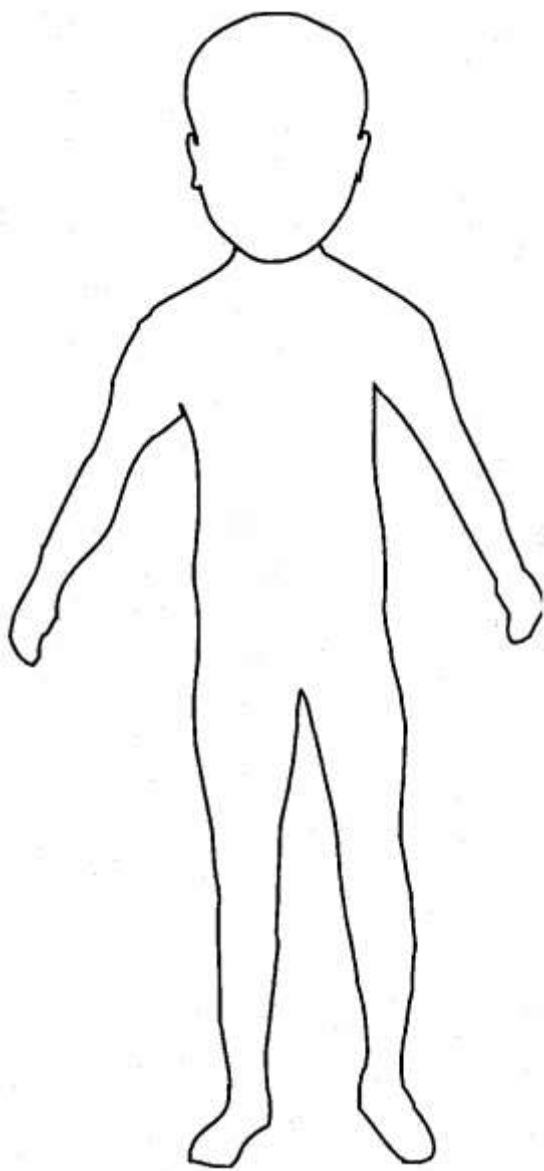
APPENDIX 7

BODYMAP

(This must be completed at time of observation)

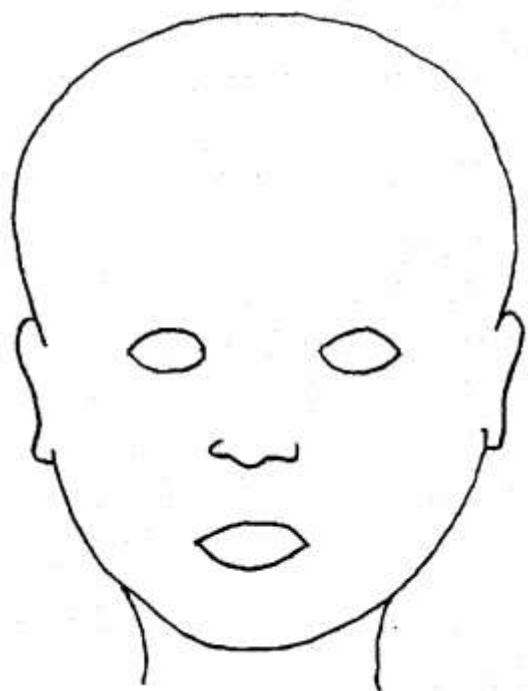
Name of Child: _____

Date of Birth: _____

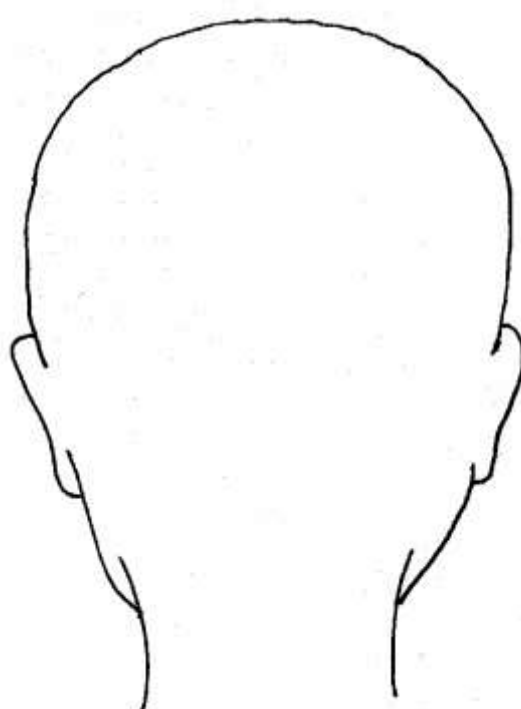


Name of Child: _____

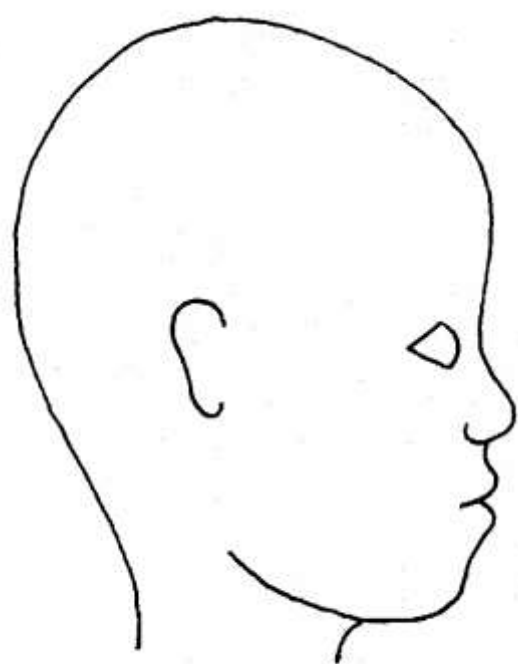
Date of Birth: _____



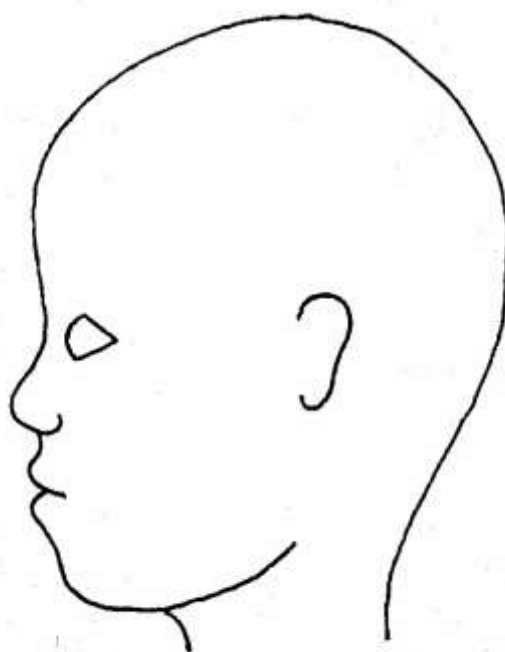
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BACK



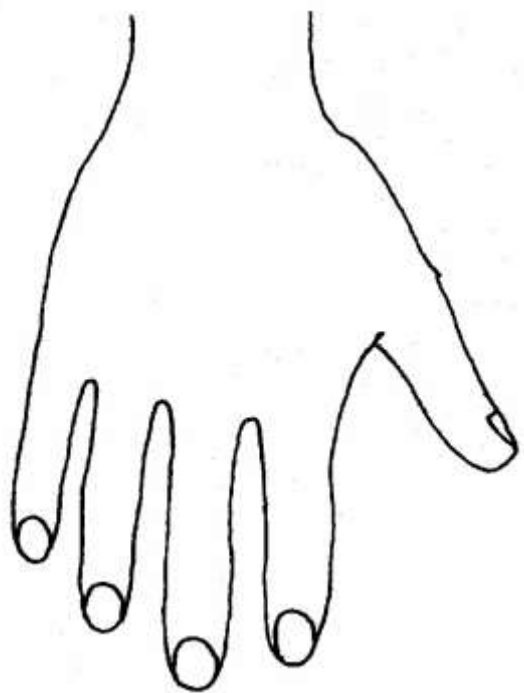
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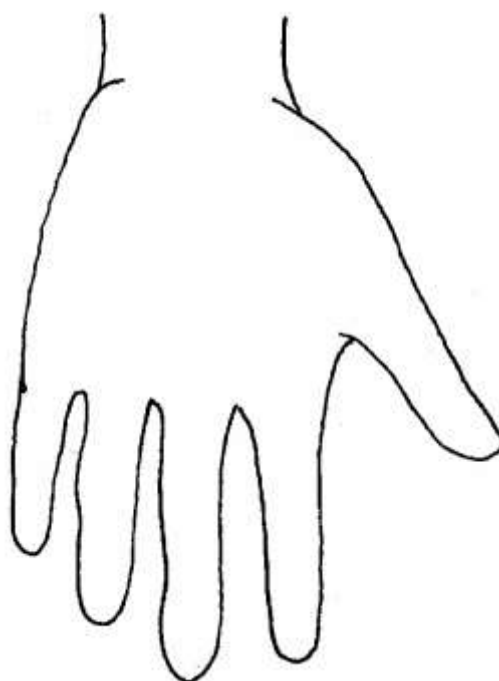
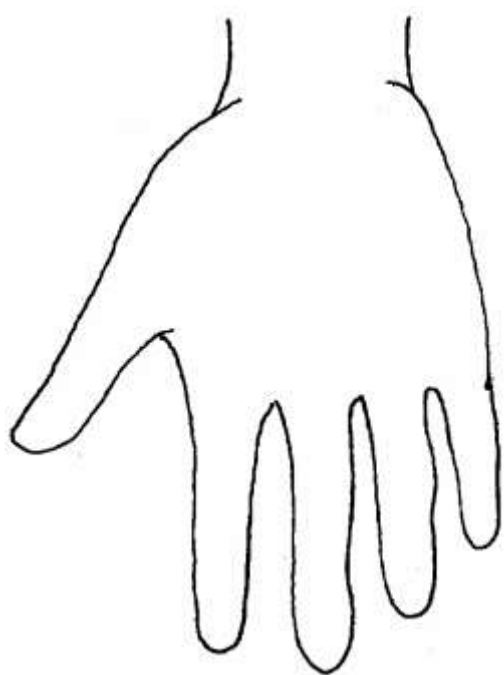
LEFT

Name of Child: _____

Date of Birth: _____



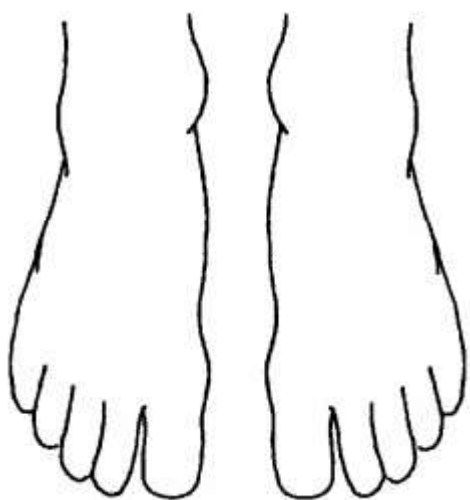
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PALM

Name of Child: _____

Date of Birth: _____



R TOP L



R BOTTOM L



R



L

INNER



R

