



Safeguarding and Child Protection Policy

Our Vision

We want Virginia Primary School to be a community of happy, confident, motivated lifelong learners. We want our children to be successful citizens who value themselves and each other. Therefore, we are continually striving to ensure that we nurture, challenge and enable each and every one to be the very best they can be in all areas of school life.

Policy Review

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Rights Respecting School

We are a Rights Respecting School and this policy supports the following articles from the United Nations Convention on the Rights of a Child:

- Article 3– the best interest of the child must be a top priority in all things that affect children.
- Article 6 – survival and development. Every child has a right to life. Governments must do all they can to ensure that children survive and develop to their full potential.
- Article 12 – freedom of expression. Every child has the right to say what they think in all matters affecting them, and to have their views taken seriously.
- Article 19 – protection from all forms of violence. Governments must do all they can to ensure that children are free from all forms of violence, abuse, neglect and bad treatment by their parents or anyone else who looks after them.
- Article 28 – every child has the right to an education. Discipline in schools must respect children’s dignity.
- Article 29 – goals of education. Education must develop every child’s personality, talents and abilities to the full. It must encourage the child’s respect for human rights, as well as respect for their parents, their own and other cultures and the environment.

Rationale

At Virginia School we believe that all pupils have a fundamental right to be protected from harm and that they cannot learn effectively unless they feel safe. We strive to build a school where pupils feel secure, their viewpoints are valued, they are encouraged to talk and adults listen to them and hear them.

A range of documents, circulars and guidance for good practice governs Child Protection work at Virginia Primary School. Key documents are:

- The Children Act 1989
- Framework for the assessment of children in need and their families 2000.
- Every Child Matters 2003
- The Children Act 2004
- Female Genital Mutilation Act 2004
- The Equality Act 2010
- Channel Duty Guidance, 2015
- What to do if you are worried a child is being abused 2015
- SEND Code of Practice, 2015
- *Supporting Pupils with Medical Needs at School*, DFE 2015).
- Sexual violence and sexual harassment between children in schools and colleges, DFE May 2018
- Working Together to Safeguard Children 2018
- London Child Protection Procedures <https://www.londoncp.co.uk/index.html>
- Tower Hamlets LSCB Child Protection Procedures for Staff Working in Children’s School and Family Settings - September 2017
- Tower Hamlets SCP Supplementary Guidance for Schools and Education Settings on Child Protection Procedures - September 2019
- Tower Hamlets SCP Multi-Agency Safeguarding Thresholds Guidance
- Tower Hamlets LSCB procedures for reporting and managing Allegations Against Staff Working in the Children’s Workforce.
- THSCP Arrangements, September 2019
- Tower Hamlets SCP Supplementary Guidance for Schools and Education Settings on Managing Allegations of Abuse against Staff – September 2019
- Tower Hamlets SCP Allegations against staff or volunteers, Child Protection Process Flowchart
- Keeping Children Safe in Education, 2019

This policy applies to the head teacher, all staff (including supply and peripatetic staff), volunteers, governors or anyone working on behalf of Virginia Primary School. This policy needs to be read alongside the following safeguarding policies:

- Anti-bullying
- Positive Behaviour
- Single Equality
- Inclusion
- Physical Activity
- Safer Code of Conduct
- Health and Safety
- Staff Handbook
- Whistle Blowing
- Educational Visits
- Safer Recruitment

Part 1

Aims

The aim of our safeguarding policy and child protection policy is to create a *'safer culture of vigilance'* in our school. We aim to have a school where:

- The welfare of the child is paramount.
- There is a belief that *'it could happen here'*
- All children without exception have the right to protection from abuse regardless of gender, ethnicity, disability, sexuality or beliefs.
- No child or group of children will be treated any less favourably than others in being able to access services which meet their needs
- The staff always act in the best interests of the child. A child refers to any individual under the age of 18 years old.
- The staff will not assume that other staff will act in relation to a concern.
- All staff should be aware of the process for making referrals to children's social care and for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) that may follow a referral, along with the role they might be expected to play in such assessments
- All concerns and allegations of abuse will be taken seriously by staff and volunteers and responded to appropriately - this may require a referral to children's social care services, the independent Local Authority Designated Officer (LADO) for allegations against staff and other volunteers and, in emergencies, the police
- Key individuals and their specific safeguarding roles are identified and known to the whole school community
- We have a commitment to safe recruitment, selection and vetting
- The policy is reviewed, approved and endorsed by the Governing Body annually or when legislation changes
- The policy is shared with children and parents as appropriate
- The Head Teacher, Barbara Lo Giudice, ensures the policy is followed by all members of staff

Safeguarding and Child Protection

This policy outlines the safeguarding and child protection procedures for all staff, adults, visitors and volunteers working in Virginia Primary School and gives guidance on safeguarding pupils in accord with the statutory guidance KCSIE 2019 and Tower Hamlets' Local Safeguarding Arrangements;

*The Tower Hamlets Safeguarding Children Partnership (THSCP) has three statutory partners; the Local Authority, the NHS Clinical Commissioning Group and the Metropolitan Police who lead and work alongside key partners including schools, colleges and the voluntary sector. — The vision of the THSCP is that the statutory partners, wider relevant agencies, community and voluntary sector and residents work together to ensure that **everyone does everything** they can to ensure that all Tower Hamlets children and young people are safe, supported and successful.*

At Virginia we require the Governing Body and the Safeguarding Team to make themselves aware of the multi-agency safeguarding arrangements, as explained above and set out in the THSCP Arrangements document Sept, 2019.

The Safeguarding and Child Protection Team

DSL: Barbara Lo Giudice – *Head Teacher*

Deputy DSLs: Amanda Carr – *AHT Teaching and Learning (SLT)*,
Joan Kearns – *School Support Leader*, Salma Haris – *AHT
Assessment (SLT)*

Governor for Safeguarding: Cathy Darby

Designated Teacher for LAC and PLAC: Amanda Carr

Virtual School Head Teacher: Helen Murphy

Tel: 020 7364 3924

Email: helen.murphy@towerhamlets.gov.uk

Multi Agency Safeguarding Hub (MASH)

Tel: 0207 364 3444/5601/5606

Email: MASH@towerhamlets.gov.uk

The Early Help Hub (which includes the work of the Social
Inclusion Panel)

Tel: 020 7364 5006

Email: EarlyHelp@towerhamlets.gov.uk

Local Authority Designated Officer (LADO): Melanie Benzie

Tel: 0207 364 0677

Safeguarding roles and responsibilities

Safeguarding is the responsibility of all staff, adults and volunteers working in Virginia Primary School. Everyone has a role to play in identifying concerns, sharing information, taking prompt action and providing a safe environment in which children can learn.

Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment;
- preventing the impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care;
- and taking action to enable all children have the best outcomes (KCSIE, 2019).

The Role of the Head Teacher

The head teacher is ultimately responsible, within the school, for child protection. The head teacher is responsible for:

- Ensuring internal and external arrangements for consultation and liaison are devised
- Considering, in conjunction with the DSL, at what point to involve parents/carers
- Advising parents/carers of the decision to make a referral
- Ensuring an effective record-keeping system is in place
- Ensuring arrangements are in place for police checks of voluntary helpers
- Ensuring information about a child with a Child Protection Plan is passed on to a new school
- Taking the lead where allegations are made against a member of staff

The Role of the Designated Safeguarding Lead and Deputies Safeguarding Leads

There are two principles that the DSL and DDSL should always bear in mind:

- The welfare of the child is **paramount** and should always be at the forefront of all decisions taken
- Confidentiality must be respected at all times

The Designated Safeguarding Lead will:

- Make sure all staff and governors know about and know where to find the procedures relating to child protection
- Ensure that all staff are clear about their responsibilities within the child protection procedures
- Make sure that all staff know that the DSL should be informed about any suspicions or allegations of abuse
- Liaise closely with the three safeguarding partners; the Local Authority, the NHS Clinical Commissioning Group and the Metropolitan Police, and other agencies in line with Working Together to Safeguard Children.
- Ensure that formal referrals to children's social care are made following consultation with the head teacher on behalf of the school
- Refer cases to the Channel programme where there is radicalisation concern as required;
- Refer cases where a crime may have been committed to the police as required
- Ensure the head teacher is kept informed of every situation, including those cases of uncertainty, as well as giving an update report on the welfare of those children who have a Child Protection Plan or are being monitored
- Attend relevant training every two years
- Undertake Prevent awareness training
- Understand and support the school with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation
- Keep all records up to date and secure
- Advise staff in cases of uncertainty and give informed advice and guidance to new staff and especially NQTs
- Consider, in conjunction with deputy safeguarding leads, at what point to involve parents/carers
- Contact and liaise with children's social care and any other relevant agencies
- Be supportive to those members of staff to whom pupils have made disclosures
- Be active in supporting the Child Protection Plan
- Establish a system, in conjunction with the deputy safeguarding leads, for passing appropriate Child Protection information to a new school
- Whilst the activities of the DSL can be delegated to the deputies the ultimate lead responsibility for safeguarding remains with the DSL. This includes out of hours activities.

The Role of Staff

The key principle that all staff should always bear in mind:

- The welfare of the child is **paramount** and should always be at the forefront of all decisions taken

To support this principle:

- All staff will be alert to signs of abuse and will act upon any concerns or suspicions. Observations/comments should be recorded and passed on immediately to the DSL
- All staff, including the DSL, will receive regular and appropriate training
- All staff will respect confidentiality and share information on a need to know basis

Staff understand that they have a particularly important role to play with regards safeguarding as they are in a unique position to identify concerns early. Staff members are aware that they should raise any child protection concern with the DSL or Deputy DSLs.

Staff are also aware that they should be prepared to identify children who may benefit from early help and be aware of their role in referring cases requiring early help. In the first instance staff would discuss early help cases with the DSL or DDSLs.

The Designated Safeguarding Lead or Deputy Designated Leads should always be available to discuss safeguarding concerns. If the DSL and / or any deputies are not in school, staff should go to a member of the senior leadership team or the head teacher. If in exceptional circumstances they are not available, this would not delay appropriate action being taken.

For general advice, information and Early Help or to access services if it is not clear who needs to be involved contact: The Early Help Hub (which includes the work of the Social Inclusion Panel) Tel: 020 7364 5006 email: EarlyHelp@towerhamlets.gov.uk

All emails sent to MASH will be sent using the GCSX secure email address: MASH@towerhamlets.gcsx.gov.uk

Training

- Supply staff and visitors are informed of the school's child protection procedures on arrival at the school by the school office.
- New staff and volunteers complete safeguarding and child protection awareness training within the initial weeks of their placement in the school.
- Whole school safeguarding and child protection training is repeated every year and regular updates are each week there is additional '60 Seconds of Safeguarding' for all staff in the briefing or staff meeting. This ensures an awareness and understanding of the Pan London Continuum of Help and Support – see table below.
- Members of the safeguarding team are trained at 'Designated' level and this training is ongoing. They also receive regular bulletins via email and attend safeguarding forums 3 times a year delivered by the local authority and at the very minimum the DSL will receive WRAP training (Workshop to Raise Awareness of Prevent).
- All training is updated regularly and is in line with local safeguarding arrangements.

Pan London Continuum of Help and Support and the Threshold Guidance:

Level 1	Should be met within universal settings; including low level addition needs.
Level 2	Which meet the criteria for more formal targeted services delivered as part of the early help offer; multi-agency intervention, a lead professional and a team around the family approach in addition to support in universal services.
Level 3	Which meet the threshold for social work assessment and support under S.17 Children Act 1989 (child in need), in addition to provision in universal settings and by targeted services
Level 4	Which meet the threshold for statutory child protection by social work teams delivered under S.47 Children Act 1989, in addition to provision in universal settings and by targeted services. This may also include children subject to a Care Order or children looked after under S.20 (duty to accommodate) of the Children Act 1989.

Confidentiality and Information Sharing

Child protection records are kept securely and separate from pupils' academic records. For pupil transition, child protection files are passed on to receiving schools directly to the DSL and sent securely. The DSL is responsible for regularly updating safeguarding records of vulnerable pupils. These records include pupils such as Looked After and Previously Looked After pupils (LAC/PLAC), Privately Fostered pupils or pupils regarded as 'young carers'. Information and updates from the safeguarding list are passed on to the leadership team regularly and disseminated to staff through face to face conversations on a strictly need-to-know basis.

The seven golden rules

When sharing confidential information, we follow the 7 golden rules.

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice from other practitioners, or your information governance lead, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible. Fears concerning information sharing cannot be allowed to prevent the need to promote the welfare and protect the safety of children.
4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.
5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. ***Necessary, proportionate, relevant, adequate, accurate, timely and secure***: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up to-date, is shared in a timely fashion, and is shared securely.
7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Looked after children and previously looked after children (LAC, PLAC)

The most common reason a child becomes looked after is through abuse and/or neglect. At Virginia, we understand that a looked after and previously looked after child potentially remain vulnerable and all staff should have the skills, knowledge and understanding to keep looked after and previously looked after children safe. When dealing with looked after children and previously looked after children, we understand it is important that all agencies work together and prompt action is taken on concerns to safeguard these children, who remain a particularly vulnerable group.

The Designated Teacher

On commencement of Sections 4 to 6 of the Children and Social Work Act 2017, our designated teacher (Amanda Carr) works with the virtual school to promote the educational achievement and support the progress of children who have left care through adoption, special guardianship or child arrangement orders or who were adopted from state care outside England and Wales.

Attendance monitoring (see also *Children Missing in Education*)

Children who are subject to either a CP (Child Protection) or CIN (Child in Need) plan, children who are Looked After (LAC) or Previously Looked After (PLAC), Young Carers and Privately Fostered pupils' attendance is prioritised each day for absence phone calls and reporting. This is the responsibility of the School Support Leader, who will report directly to the DSL with any concerns.

Contextual Safeguarding

Contextual Safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. All staff understand that safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside the school. All our staff, but especially the designated safeguarding lead (and deputies) consider the context within which such incidents and/or behaviours occur. We understand that this is known as contextual safeguarding, which means assessments of children should consider whether wider environmental factors are present in a child's life that can be a threat to their safety and/or welfare. We recognise that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships. Therefore children's social care practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.

We understand that children's social care assessments should consider such factors so it is important that as a school *we provide as much information as possible as part of the referral process*. This will allow any assessment to consider all the available evidence and the full context of any abuse.

Disguised Compliance

Disguised compliance is defined by the NSPCC as involving *a parent or carer giving the appearance of cooperating with child welfare agencies to avoid raising suspicions, to dispel professional concerns and ultimately to diffuse professional intervention*. Examples of parental behaviours which indicate disguised compliance include:

- Parents who fail to engage with professionals and avoid contact;
- Repeated cancelling and rescheduling of appointments;
- Parents who tell workers 'what they want to hear', and who appear to agree about the changes needed but who then put little actual effort into making any change;
- Selective engagement - where parents do 'just enough' to keep professionals at bay;
- Parents who manipulate situations and make it difficult for professionals to see the child(ren) alone;
- Parents insisting on pre-arranged visits (perhaps in order to clean the house first);
- Sporadic compliance - such as a sudden increase in school attendance, attending a run of appointments or engaging well with some professionals for a limited period of time;
- Deflecting attention - for example by criticising other workers;
- Controlling discussions - ensuring focus is on the parents and their problems, rather than the needs of the child(ren)

Indicators of disguised compliance include:

- Parents seeking to avoid contact with professionals, including missed appointments;
- Parents seeking to control meetings with professionals and divert focus from the child to their own issues / problems;
- The child's account differs to that of their parents / carers;

Despite appearing to agree that changes are required, parents/carers then put little effort into making agreed changes work;

- Parental engagement with services is superficial and there is no significant change at reviews despite significant input from professionals.

We understand that it occurs because most parents whose families are the focus of child protection interventions are involuntary participants in a process they may resent; agencies can be perceived as a threat meaning that families are fearful and reluctant to cooperate. Disguised compliance occurs when parents want to draw the professional's attention away from allegations of harm and unsafe parenting with the aim of minimising or avoiding agency interventions in family life.

Disguised compliance harms children in the following ways:

- Through missed opportunities to intervene;
- By removing professional focus from children to adults in family meaning cases drift;
- By making professionals feel overly optimistic about progress. As young people become older, they may display disguised compliance themselves, particularly in relation to health appointments.

Recognising Disguised Compliance - Think the Unthinkable

Serious Case Reviews have highlighted situations where professionals have delayed or avoided child protection interventions owing to parental disguised compliance. The Serious Case Review into the death of Daniel Pelka (2013) challenged workers to 'think the unthinkable' and to 'believe and act upon what they saw in front of them, rather than accept parental versions of what was happening at home without robust challenge'. However, as Brandon et al (2008) note disguised compliance, by its very nature, makes it difficult for professionals who are involved with a family to maintain an objective view of progress in safeguarding the welfare of a child. Disguised compliance 'wrong foots' professionals and can prevent or delay understanding of the severity of harm being experienced by children in the family.

Tips for Practice - How to tackle Disguised Compliance

At Virginia we understand the importance of healthy skepticism. Whilst child protection work is complex, and it can be hard when professionals have busy workloads to 'dig deeper'. However, when there are suspicions of disguised compliance, it is important we always check for evidence in support of the parent's story / explanation for events. In his report into the death of Victoria Climbiè, Lord Laming (2003) explained the importance of 'respectful uncertainty' as follows: While I accept that social workers are not detectives, I do not consider that they should simply serve as the passive recipients of information, unquestioningly accepting all that they are told by the carers of children about whom there are concerns. The concept of *respectful uncertainty* should lie at the heart of the relationship between the social worker and the family. It does not require social workers constantly to interrogate their clients, but it does involve the critical evaluation of information that they are given. People who abuse their children are unlikely to inform social workers of the fact. For this reason at least, social workers must keep an open mind.

How do we contribute to recognising Disguised Compliance; *Establish the Facts*

- Use in-depth assessments to gather evidence about what is actually happening. Observe what is being said but also remember to look for non-verbal cues - e.g. body language and parent / child interactions;
- Keep detailed records and build up a chronology - this will help with looking for patterns of non-compliance. Look at previous records to identify patterns of behaviour / engagement. Remember that previous history is the best predictor of future behaviour;
- Talk to other professionals. What are their experiences of the family? Coordinate information across families for a fuller picture of what life is like for the child;
- Be prepared to make critical judgements of parents and their behaviour;
- Avoid being over optimistic about a parent's ability or motivation to change.

Keep the Child in Focus

- Remain child focused at all times; Look to uncover the reality of the child's life in that family; talk to the child (ren). What is it like to be a child living in that household?
- When a young child misses important appointments (e.g. with health providers) remember that this is not their choice.

Ensure that Plans put in place to Safeguard Children Focus on Outcomes

- Identify clear outcomes which can be used to measure progress and reduce drift;
- Stand back – have there been any real changes?
- Look for clear signs of sustained improvement.

Support and Supervision

- We would ask the social worker to undertake joint visits with other professionals so they can share experiences;
- We would ask the social worker to use their supervision to bring in a 'fresh pair of eyes'; talk through your concerns with your supervisor or manager and reflect on the case including any on-going concerns you have.

Assessing Capacity to Change

All disguised compliance involves resistance to change and an inability or unwillingness on the part of parents and carers to address risks to their child. Assessments of the parent's capacity and willingness to change should therefore be carried out alongside assessments of the child's life.

As part of how we work successfully with other agencies and safeguarding partners, whilst remaining child focused at all times, Virginia expects the DSL and deputies to be confident in understanding the definition and indicators of disguised compliance in order to successfully challenge or escalate individual referrals where necessary.

Part 2

The referral process

As a staff we remain alert to signs of abuse and neglect. The first step is to be alert to the signs of abuse and neglect.

We question behaviours. The signs of child abuse might not always be obvious and a child might not tell anyone what is happening to them. You should therefore question behaviours if something seems unusual and try to speak to the child if appropriate, to seek further information.

We ask for help. You should discuss your concerns with your manager, a named or designated professional or a designated member of staff;

- *For our schools' staff (both teaching and non-teaching), concerns are reported via the school's Designated Safeguarding Lead (DSL). The safeguarding lead will usually decide whether to make a referral to Children's Social Care;*
- *For early years practitioners, the Early Years Foundation Stage sets out that providers should ensure that they have a practitioner who is designated to take a lead responsibility for safeguarding children who should liaise with local statutory children's services agencies. This is done in conjunction with the DSL.*

Record of concern (ROC Form)

Any member of staff or volunteer who has concerns about the safety or potential abuse of a child must report their concerns orally to a member of the safeguarding team without delay. It is expected that a written account of the concern or disclosure follow as soon as possible. The member of staff is also aware of their obligation to continue to communicate with the LA throughout the process of the referral.

We expect staff to remember when listening to a disclosure: *Actively listen, do not look shocked or disbelieving; Stay calm; Take what the child is saying seriously; Do not ask for detail; Reassure the child that they are doing the right thing; Do not promise to keep secrets; Tell the child that you have to share this information; Explain what will happen next; Record the information as quickly as possible – facts not opinion; Sign and date everything you record (NSPCC, 2018)*

- This must be completed on the school's Record of Concern (ROC) form found in the safeguarding folder on the staff network.
- The ROC must be given to a designated safeguard lead immediately. If in exceptional circumstances, the Designated Safeguarding Lead and deputies are not available, this should not delay appropriate action being taken.
- It must include as much information as possible – including time, date, exact words used in a disclosure, specific description to visible marks and their location, or a general description of how a child's behaviour and/or demeanor has changed, giving a sense of concern for the child's experience outside school.
- The DSL will act on the information and report back to the member of staff as to the outcomes. Options include;
 - managing any support for the child internally via the school's own pastoral support processes;
 - an early help assessment or
 - a referral for statutory services, for example as the child is in need or suffering or likely to suffer harm
 - If a child is in danger the referral will be made to the police
 - If the pupil has committed a crime a referral will be made to the police

- When making referrals to children’s social care the DSL will always consider wider environmental factors that pose a threat to their safety or welfare. The DSL will gather as much contextual information as possible to support the referral.
- Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead professional. Any such cases should be kept under constant review and consideration given to a referral to children’s social care for assessment for statutory services if the child’s situation does not appear to be improving or is getting worse.

When the DSL makes a referral to CSCS or to other external agencies the information will be shared in line with confidentiality requirements (see The Seven Golden Rules, as set out previously on page 7-8.) The DSL will work alongside external agencies maintaining close liaison taking advice and support as well as offering challenge to decisions where necessary. The DSL is committed to keep constant communication with pupils and parents. Staff are aware that that they need to follow up their referrals, support social workers if they carry out a statutory assessment and consider following local escalation procedures to ensure their concerns are addressed and that the pupil’s situation improves.

The DSL is responsible for ensuring all concerns, discussions and decisions made and the reasons for those decisions to be recorded in writing.

Listening and Talking to Children

There are several reasons why you might listen/talk with a child about something which causes you concern and/or might indicate possible abuse. It may be because of a comment they make, or a drawing, or some play activity, or something you notice. It might also be because a child tells you something directly. It is very important that you know what NOT to say or do as well as what kind of things to say or do.

What NOT to say or do

It is very important that you do not:

- Make any assumptions or leap to any conclusions. If you do either of these you will not really hear what the person is saying, you will ask the wrong questions and generally react inappropriately.
- Ask the child leading, closed or directed questions. Do not try to find out exactly what happened so it makes sense to you. You are meant to be listening – not interrogating. Be quiet and let it come out as it may. Cases which have later gone to Court have been dismissed because somebody has questioned the child inappropriately – do not let it be you. This leaves the child in a more vulnerable position than ever.
- Make promises you cannot keep. You cannot offer complete confidentiality on anything that is potentially abusive. Do not pretend that you will and then have to betray the child later: be honest. Say that you would need to tell.
- Dismiss what they say or contradict their understanding or experience. E.g., “Your Mum? She wouldn’t do a thing like that, it must have been an accident.” “Oh, I’m sure he doesn’t mean it, he was probably joking.”
- Indicate that the child is to blame. E.g., “My dad really belted me on Sunday.” “You must have made him very angry, what had you done?”
- Let your own emotions get in the way. This is not about you – it is about the child. So whatever your emotions might be – skepticism, general upset, outrage, disgust etc., deal with them later. Do not let them be part of your communication with the child: remember you are the adult. Do not say Oh how dreadful / I can’t believe it / you poor thing / are you sure?

What to do and say

You need to listen and say very little;

- Pay total attention to the speaker
- Be very calm and patient
- Look at the speaker directly / good eye contact

- Allow silences and long pauses
- Pay total attention to the speaker
- Your whole attitude is 'you are my only priority right now'

Questions you can use

- Do you want to/can you say what happened next?
- Is there anything else you want to say?

Things you could/would say after a disclosure

- I'm glad you have told me this
- Thank you for telling me this
- I take what you have told me very seriously
- You've been very brave to talk about this
- I will help you as much as I can

Remember

- That the child may fear reprisals from having told
- Stay with the child if at all possible
- It has been an act of courage, as well as desperation, for them to have spoken

Supporting the child

Where there is a safeguarding concern, we take steps to take the pupil's needs, wishes and feelings into account. We recognise that children who experience or witness abuse or violence may experience difficulties that impact on their sense of self-worth. They may experience emotional, behavioural or social difficulties and may blame themselves for their situation. They may become challenging, disruptive, attention-seeking or withdrawn.

Children who have experienced abuse, neglect, exposure to domestic violence, hidden harm or are failing to thrive emotionally and socially are prioritized for additional support, intervention or provision.

Next steps might involve undertaking an Early Help assessment or making a referral directly to children's social care/the police (*DFE What to do if You're Worried a Child is Being Abused*, March 2015).

Staff understand that any child may benefit from early help or an inter-agency assessment where a family could benefit from coordinated support from more than one agency, but we are particularly alert to 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 and care plan);
- is a young carer;
- is frequently missing/goes missing from care or home;
- is misusing drugs or alcohol;
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse; and/or
- has returned home to their family from care.

It is important for children to receive *'the right help at the right time'* to address risks and prevent issues escalating. Failing to take effective action is a disciplinary offence. Poor practice includes: *failing to act on and refer the early signs of abuse and neglect, poor record keeping, failing to listen to the views of the child (UNCRC)¹, failing to re-assess concerns when situations do not improve, sharing information too slowly, and a lack of challenge to those who appear not to be taking action.*

Staff reporting concerns will not suffer adversely from reporting the concerns and parent/carers will not be made aware of who reported the concern within the school. If we require general advice, information and Early Help or need to access services and are not clear who needs to be involved we contact the Early Help Hub;

Early Help Hub

Tel: 020 7364 5006

Email: EarlyHelp@towerhamlets.gov.uk.

Escalation Procedures

Staff know that if they have concerns about the safety or welfare of a child and feel they are not being acted upon by the Designated Safeguarding Lead, it is their responsibility to take action. All staff must understand that in exceptional circumstances they are also able to discuss concerns directly with the MASH team.

MASH

Tel: 0207 364 3444

Email: MASH@towerhamlets.gov.uk

Allegation or evidence of child abuse by a member of staff or other person in a 'position of trust'

'The Allegations against staff working in the children's workforce' guidance from the LA (June 2018) should be used when it is alleged that a member of staff or any volunteer has;

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

This should be reported immediately to the Headteacher or, in their absence, one of the Assistant Headteachers. The headteacher or assistant headteacher will immediately act in accordance with the procedures outlined in KCSIE 2019 Part 4 and discuss the concerns with the LA Designated Officer (LADO). If the allegation is against the Headteacher this should be reported to the Chair of Governors or a local authority officer with responsibility for the school.

Head Teacher: *Barbara Lo Giudice*

Chair of Governors: *Cathy Darby*

LA Designated Officer: *Melanie Benzie (020 7364 0677)*

On no account should any member of school staff attempt to interview the child or the member of staff. A written record of the allegation, the names of staff and pupils involved, the location of the alleged abuse and the names of potential witnesses should be taken. The LA offers advice and manages the investigation.

¹ The United Nations Convention on the Rights of the Child (UNCRC)⁷. This is an international agreement that protects the rights of children and provides a child-centred framework for the development of services to children. The UK Government ratified the UNCRC in 1991 and, by doing so, recognises children's rights to expression and receiving information.

Whistleblowing

Whistleblowing is the term used when a worker passes on information concerning wrongdoing. The wrongdoing will typically (although not necessarily) be something you have witnessed at work. An important aspect of accountability and transparency is a mechanism to enable staff to voice concerns about such wrongdoings in a responsible and effective manner.

The school has a separate policy designed to enable you to raise concerns at a high level and to disclose information which you believe shows malpractice, impropriety, criminal activity, or dangers to health and safety. Our Whistle Blowing Policy is intended to cover concerns where you reasonably believe that the disclosure tends to show past, present or likely future wrongdoing falling into one or more of the following categories:

- criminal offences (this may include, for example, types of financial impropriety such as fraud);
- unauthorised use or misuse of public funds
- failure to comply with an obligation set out in law;
- abuse of position, whether or not for personal gain
- miscarriages of justice;
- endangering of someone's health and safety;
- damage to the environment;
- conduct which may damage the Council's reputation;
- other unethical conduct; and
- covering up wrongdoing in the above categories.

The NSPCC whistleblowing helpline is available as an alternative route for staff who do not feel able to raise concerns regarding child protection failures internally or have concerns about the way a concern is being handled.

Part 3

Safer Recruitment, Vetting and Maintenance of Disclosure and Barring Service (DBS) checks

We understand in order to create a safer culture of vigilance it is vital that we create a culture of safe recruitment and, as part of that, adopt recruitment procedures that help deter, reject or identify people who might abuse children (for additional detail please see the Tower Hamlets *Safer Recruitment Selection in Schools Framework, 2015*).

Virginia ensures all staff adhere to the statutory requirements set out in *Keeping Children Safe in Education* (2019) which ensures all adults who work with pupils in the school have undergone the appropriate teacher service checks for all prohibitions, sanctions and restrictions as part of our recruitment and vetting checks; criminal record checks (Disclosure and Barring Service), barred list checks and prohibition order checks, S128 directions (for those who apply to take up the role of management positions), together with references and interview information. We ensure that safer recruitment practices are in place and followed when checking the suitability of all staff and volunteers who are working with children in regulated activity, including relevant members of the Governing Body. Evidence of these checks are recorded on our SCR (Single Central Record). Interviews panels have at least one person who has successfully completed Safer Recruitment training. All offers of employment are conditional based on the satisfactory completion of the necessary pre-employment checks.

Our Single Central Record

Our SCR is kept in electronic form, password protected and maintained by the school support leader and checked at least 3 times per year by the DSL plus additional members of the safeguarding team and governing body.

The SCR covers all staff including trainee teachers on salaried routes and agency and third party supply staff who work at the school. For agency and third party supply staff we record whether written confirmation has been received that the organization supplying the staff member has carried out the relevant checks, the date the confirmation was received and whether any enhanced DBS check has been provided in respect of that member of staff. Checks conducted for volunteers are also recorded on the SCR.

Regulated Activity

Regulated activity includes:

- a) teaching, training, instructing, caring for (see (c) below) or supervising children if the person is unsupervised, or providing advice or guidance on physical, emotional or educational well-being, or driving a vehicle only for children;
- b) work for a limited range of establishments (known as 'specified places', which include schools and colleges), with the opportunity for contact with children, but not including work done by supervised volunteers. Work under (a) or (b) is regulated activity only if done regularly.

Some activities are always regulated activities, regardless of frequency or whether they are supervised or not. This includes:

- c) relevant personal care, or health care provided by or provided under the supervision of a health care professional:
 - personal care includes helping a child with eating and drinking for reasons of illness or disability or in connection with toileting, washing, bathing and dressing for reasons of age, illness or disability;
 - health care means care for children provided by, or under the direction or supervision of, a regulated health care professional.

Enhanced DBS certificates, which do not include a barred list check will be required for all staff who have the opportunity for regular contact with pupils who are not engaging in regulated activity. Governors of Virginia are required to undertake an enhanced DBS check and the governing body is responsible for applying for a certificate where a member of the board is not in possession of one. If governors were to be engaged in regulated activity they would also undertake a barred list check. Governors are also subject to a section 128 check because a person subject to a section 128 direction is disqualified from being a governor. The results of which are also recorded on the SCR.

We understand that it is our duty to report to the DBS anyone who has harmed or poses a risk of harm to a child where;

- the DBS harm test is satisfied in respect of that individual
- the individual has received a caution or conviction for a relevant offence
- there is reason to believe the individual has committed a listed relevant offence
- the individual has been removed from working in regulated activity or would have been removed had they not left or they are suspended

To help us comply with the requirements of the Data Protection Act 2018, if we choose to retain a copy of DBS, we do not retain it for longer than six months after the member of staff has ceased to work at the school. Where we employ agency staff we follow the steps laid out in the *KCSIE 2019*.

Agency Staff

We must obtain written notification from any agency they use that the organisation has carried out the checks (in respect of the enhanced DBS certificate, written notification that confirms the certificate has been obtained by either the employment business or another such business), on an individual who will be working at school that we would otherwise perform. Where the position requires a barred list check, this is obtained by the agency prior to appointing the individual. We also ID check that the person presenting themselves for work is the same person on whom the checks have been made.

Volunteers

Under no circumstances would a volunteer in respect of whom no checks have been obtained, should be left unsupervised or allowed to work in regulated activity. Volunteers who, on an unsupervised basis, teach or look after children regularly or provide personal care on a one-off basis in school will be in regulated activity. We would obtain an enhanced DBS certificate (which should include barred list information) for all volunteers who are new to working in regulated activity. We understand that existing volunteers in regulated activity do not have to be re-checked if they have already had a DBS check (which includes barred list information). However, we reserve the right to conduct a repeat DBS check (which should include barred list information) on any such volunteer should we have concerns. We understand that we are not legally permitted to request barred list information on a supervised volunteer as they are not considered to be engaged in regulated activity. When we determine whether a volunteer is considered to be supervised we have regard to the statutory guidance issued by the Secretary of State (see *KCSIE P3, 2019*). This guidance requires that, for a person to be considered supervised, the supervision must be:

- by a person who is in regulated activity;
- regular and day to day; and
- reasonable in all the circumstances to ensure the protection of children

We undertake a risk assessment and use our professional judgement and experience when deciding whether to obtain an enhanced DBS certificate for any volunteer not engaging in regulated activity.

Part 4

Categories of child abuse

All staff at Virginia should be aware that abuse, neglect and safeguarding issues are rarely stand-alone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

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

Signs of Abuse

Any child may benefit from early help, but all school and college staff should be particularly alert to 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 and care plan);
- is a young carer;
- is frequently missing/goes missing from care or home;
- is misusing drugs or alcohol;
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse; and/or
- has returned home to their family from care

Some of the following signs might be indicators of abuse or neglect:

- Children whose behaviour changes – they may become aggressive, challenging, disruptive, withdrawn or clingy, or they might have difficulty sleeping or start wetting the bed;
- Children with clothes which are ill-fitting and/or dirty;
- Children with consistently poor hygiene;
- Children who make strong efforts to avoid specific family members or friends, without an obvious reason;
- Children who don't want to change clothes in front of others or participate in physical activities;
- Children who are having problems at school, for example, a sudden lack of concentration and learning or they appear to be tired and hungry;
- Children who talk about being left home alone, with inappropriate carers or with strangers;
- Children who reach developmental milestones, such as learning to speak or walk, late, with no medical reason;
- Children who are regularly missing from school or education;
- Children who are reluctant to go home after school;
- Children with poor school attendance and punctuality, or who are consistently late being picked up;
- Parents who are dismissive and non-responsive to practitioners' concerns;
- Parents who collect their children from school when drunk, or under the influence of drugs;
- Children who drink alcohol regularly from an early age;
- Children who are concerned for younger siblings without explaining why;
- Children who talk about running away; and
- Children who shy away from being touched or flinch at sudden movements.

Physical abuse is when a child suffers physical injury as a result of deliberate infliction or knowingly not preventing injury by a parent/carer. Physical abuse is deliberately physically hurting a child. It might take a variety of different forms, including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child. Physical abuse can happen in any family, but children may be more at risk if their parents have problems with drugs, alcohol and mental health or if they live in a home where domestic abuse happens. Babies and disabled children also have a higher risk of suffering physical abuse. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Physical abuse can also occur outside the family environment.

Some of the following signs may be indicators of physical abuse:

- Children with frequent injuries;
- Children with unexplained or unusual fractures or broken bones;
- Children with unexplained:
 - bruises or cuts;
 - burns or scalds; or
 - bite marks.

Sexual abuse is the involvement of children or young people in sexual activities that they neither comprehend nor are able to give informed consent to. This includes failure on the part of a parent/carer to protect their child from exposure to or involvement in sexual activity. Sexual abuse is any sexual activity with a child. You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong. Sexual abuse can have a long-term impact on mental health. Sexual abuse 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 clothing. It may include 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). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Some of the following signs may be indicators of sexual abuse:

- Children who display knowledge or interest in sexual acts inappropriate to their age;
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have;
- Children who ask others to behave sexually or play sexual games; and
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

Emotional abuse includes bullying, withdrawal of love and affection, lack of or poor parent/child attachment, lack of positive regard. Exposure to domestic violence in the home environment is also regarded as emotional abuse. Emotional abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development. Although the effects of emotional abuse might take a long time to be recognisable, practitioners will be in a position to observe it – for example, in the way that a parent interacts with their child. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. Emotional abuse may involve serious bullying –

including online bullying through social networks, online games or mobile phones – by a child’s peers. Some of the following signs may be indicators of emotional abuse:

- Children who are excessively withdrawn, fearful, or anxious about doing something wrong;
- Parents or carers who withdraw their attention from their child, giving the child the ‘cold shoulder’;
- Parents or carers blaming their problems on their child; and
- Parents or carers who humiliate their child – for example, by name-calling or making negative comparisons.

Neglect can be difficult to define and consequently is under-reported and underestimated. Neglect co-exists with other forms of maltreatment. It is mainly defined as the failure of adults to meet children’s basic human needs (food, warmth, shelter, hygiene) or the abdication of responsibility to provide a safe and secure environment for children. Neglect is a pattern of failing to provide for a child’s basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter. It is likely to result in the serious impairment of a child’s health or development. It is vital that we ensure the child’s voice is heard when working to address or intervene with cases of neglect.

Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action. However, while you may be concerned about a child, neglect is not always straightforward to identify. Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs or alcohol over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

Some of the following signs may be indicators of neglect:

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e., around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care; and
- Parents who fail to seek medical treatment when their children are ill or are injured.

The Child and Adolescent Toolkit distinguishes between Level 3 and Level 4 cases of neglect in the following way;

Level 3; Child needs are secondary to the adults. Carers are not clear about how to meet child’s needs and do not always accept advice or act on it. They need help to understand the likely impact on the child and why change is necessary. In this case the child presents with complex and multiple needs and a referral to children’s social care is necessary to ensure access to statutory services.

Level 4; Child’s needs are not considered. Carers do not meet child’s needs, are hostile to advice, do not recognise the impact of the circumstances on the child’s well being and do not accept the need for action or change. In this case immediate referral to children’s social care is required.

Children Missing in Education (CME)

All children, regardless of their circumstances, are entitled to an efficient, full time education which is suitable to their age, ability, aptitude and any special educational needs they may have. Children missing education are children of compulsory school age who are registered pupils at a school and are not receiving suitable education otherwise than at a school. Children missing in education are at significant risk of

underachieving, being victims of harm, exploitation or radicalisation, and becoming NEET (not in education, employment or training) later in life.

All staff are aware that children going missing, particularly repeatedly, can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect, which may include sexual abuse or exploitation and child criminal exploitation. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation or risk of forced marriage. Early intervention is necessary to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future. Staff are made aware of our unauthorised absence and children missing from education procedures.

At Virginia we monitor pupils' attendance through our daily registers. We monitor attendance and punctuality closely and address poor or irregular attendance, paying close attention to our vulnerable families. We systematically refer pupils' poor attendance to the local authority and investigate any unexplained absences. Children who are going abroad for extended period of time, going to stay elsewhere with relatives in the UK, or who are living in a 'private fostering' arrangement are subject to additional monitoring.

The school follows the procedures as set out through the Attendance and Welfare Service. If a child moves house they remain on our school register until their attendance at another school is verified through the Local Authority (LA). In the case of families moving abroad permanently, the LA will be notified and the school will endeavour to contact the school in the country that the family has moved to.

We always will notify our local authority when we remove a pupil's name from the school admission register. When removing a pupil's name, the notification to the local authority will include: *(a) the full name of the pupil, (b) the full name and address of any parent with whom the pupil normally resides, (c) two emergency contacts for children, (d) the pupil's future address and destination school, if applicable, and (e) the grounds, in regulation 8, under which the pupil's name is to be removed from the admission register.* We will make reasonable enquiries to establish the whereabouts of the child jointly with the Local Authority before deleting the pupil's name from the register if the deletion is under regulation.

We will also notify the Local Authority within five days of adding a pupil's name to the admission register at a non-standard transition point. The notification must include all the details contained in the admission register for a new pupil. When adding a pupil's name, the notification to the local authority must include all the details contained in the admission register for the new pupil.

Extremism, Radicalisation and the Prevent Duty

Since July 2015, schools have a legal responsibility to *'have due regard to the need to prevent people from being drawn into terrorism'*. Children and young people can be influenced by beliefs and opinions held by members of their family and/or community. Children who show sympathy for extremist causes, who glorify violence and/or who advocate messages held by extremist groups may be vulnerable to being drawn into extremism or radicalisation.

We recognise that protecting children from the risks of radicalisation is part of our schools wider safeguarding duties.

The DSL will ensure they remain up to date with the *Counter Terrorism Local Profile (CTLP)* and at the very minimum receive WRAP training (Workshop to Raise Awareness of Prevent). The school also takes steps to ensure that appropriate filtering is in place to protect pupils from accessing extremist materials on-line.

Risk Factors for pupils and completion of risk assessment

We complete the *Prevent Duty - Risk Assessment* written with reference to The Prevent Duty Guidance; duty in the Counter Terrorism and Security Act 2015 to have due regard to the need to prevent people being drawn into terrorism. All staff receive prevent training and are aware of the potential vulnerabilities and signs of a child being drawn into radicalisation;

- isolating themselves from family and friends
- talking as if from a scripted speech
- unwillingness or inability to discuss their views
- a sudden disrespectful attitude towards others
- increased levels of anger
- increased secretiveness around use of the internet

Children who are at risk of radicalisation may have low self-esteem or be victims of bullying or discrimination. This makes them vulnerable to potentially becoming targets of others with extremist views.

Pupils who cause concern for their extremist views should be referred to child protection agencies using a multiagency referral form and emailing to the following addresses;

Prevent.referral@towerhamlets.gov.uk

and

MASH@towerhamlets.gov.uk

Sexual violence between children in school

Virginia Primary follows the advice set out in the DFE guidance 'Sexual violence and sexual harassment between children in schools and colleges' May 2018 regarding what sexual violence and sexual harassment is, how to minimise the risk of it occurring and what to do when it does occur, or is alleged to have occurred. At Virginia we have considered how to reflect on sexual violence and sexual harassment in our whole-school approach to safeguarding and child protection.

Harmful Sexual Behaviour (HSB)

Understanding HSB now forms part of our staff training. Staff are required to fully understand the school's policies and procedure relating to peer-on-peer abuse. Children's sexual behaviour exists on a wide continuum, from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. A useful umbrella term is 'harmful sexual behaviour'. The term has been widely adopted in child protection and is used in this advice. Harmful sexual behaviour can occur online and/or offline and can also occur simultaneously between the two.

We understand that HSB should be considered in a child protection context. When considering harmful sexual behaviour, ages and the stages of development of the children are critical factors to consider. Sexual behaviour between children can be considered harmful if one of the children is much older, particularly if there is more than two years' difference or if one of the children is pre-pubescent and the other is not. However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature.

At Virginia we believe in the importance of:

- making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up;
- not tolerating or dismissing sexual violence or sexual harassment as 'banter', 'part of growing up', 'just having a laugh' or 'boys being boys' or 'girls being girls';
- challenging behaviour (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia and flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them; and
- understanding that all of the above can be driven by wider societal factors beyond the school and college, such as everyday sexist stereotypes and everyday sexist language.

We understand that Children with Special Educational Needs and Disabilities (SEND) are more likely to be abused than their peers. Additional barriers can sometimes exist when recognising abuse in SEND children. These can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- the potential for children with SEND being disproportionately impacted by behaviours such as bullying and harassment, without outwardly showing any signs; and
- communication barriers and difficulties overcoming these barriers.

Sexual violence - Peer on peer Abuse

We ensure all staff are aware of sexual violence and the fact that children can, and sometimes do, abuse their peers in this way. When referring to sexual violence in this policy, we do so in the context of child-on-child sexual violence. When referring to sexual violence we are referring to sexual offences under the Sexual Offences Act 2003 as described below:

Rape: *A person (A) commits an offence of rape if: he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.*

Assault by Penetration: *A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.*

Sexual Assault: *A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents.*

What is consent?

Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g., to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

- A child under the age of 13 can never consent to any sexual activity.
- The age of consent is 16.
- Sexual intercourse without consent is rape.

Sexual harassment

When referring to sexual harassment we mean '*unwanted conduct of a sexual nature*' that can occur online and offline. When we reference sexual harassment, we do so in the context of child-on-child sexual harassment.

Sexual harassment is likely to: *violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.*

Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
- sexual "jokes" or taunting; *physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (we consider when any of this crosses a line into sexual violence – we understand it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature;*

and

- online sexual harassment. This may be stand-alone, or part of a wider pattern of sexual harassment and/or sexual violence and may include the following;

- non-consensual sharing of sexual images and videos;
- sexualised online bullying;
- unwanted sexual comments and messages, including, on social media;
- sexual exploitation; coercion and threats;
- sexual violence and sexual harassment (more detail in Part 5);
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexting/Youth-Produced Sexual Imagery;
- initiating/hazing type violence and rituals.

At Virginia we consider sexual harassment in broad terms. Sexual harassment (as set out above) creates an atmosphere that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence. It is not tolerated in Virginia Primary.

Action following a report of sexual violence and/or sexual harassment

We would carefully consider any report of sexual violence and/or sexual harassment. The Designated Safeguarding Lead (or deputy) will create a complete safeguarding picture and be the most appropriate person to advise on our initial response. As always when concerned about the welfare of a child, we act in the best interests of the child. In all cases, we should follow general safeguarding principles as set out throughout this policy and other guidance and statutes. We give immediate consideration to how best to support and protect the victim and the alleged perpetrator (and any other children involved/impacted). We consider the following:

- the wishes of the victim in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment. Victims should be given as much control as is reasonably possible over decisions regarding how any investigation will be progressed and any support that they will be offered;
- the nature of the alleged incident(s), including: whether a crime may have been committed and consideration of harmful sexual behaviour;

- the ages of the children involved;
- the developmental stages of the children involved;
- any power imbalance between the children. For example, is the alleged perpetrator significantly older, more mature or more confident? Does the victim have a disability or learning difficulty?;
- if the alleged incident is a one-off or a sustained pattern of abuse;
- are there ongoing risks to the victim, other children, adult students or school or college staff.

Reports of rape and assault by penetration are likely to be especially difficult with regard to the victim and close proximity with the alleged perpetrator is likely to be especially distressing. Whilst we establish the facts of the case and start the process of liaising with children's social care and the police, the alleged perpetrator would be removed from any classes they share with the victim. We would also consider how best to keep the victim and alleged perpetrator a reasonable distance apart on school premises and on transport to and from the school or college, where appropriate. These actions are in the best interests of both children and should not be perceived to be a judgment on the guilt of the alleged perpetrator. For other reports of sexual violence and sexual harassment, the proximity of the victim and alleged perpetrator and considerations regarding shared classes, sharing school premises and school or college transport should be considered immediately. In all cases, the initial report should be carefully evaluated, reflecting the considerations set out at paragraph. The wishes of the victim, the nature of the allegations and the protection of all children in the school or college will be especially important when considering any immediate actions.

Options to manage the report

We consider every report on a case-by-case basis. When to inform the alleged perpetrator will be a decision that should be carefully considered. Where a report is going to be made to Children's Social Care and/or the police, then, as a general rule, we would speak to the relevant agency and discuss the next steps and how the alleged perpetrator will be informed of the allegations. However, as per general safeguarding principles, this would not stop us taking immediate action to safeguard children where required. There are four likely scenarios for schools to consider when managing any reports of sexual violence and/or sexual harassment.

1. Manage internally
2. Early help
3. Referrals to children's social care
4. Reporting to the Police.

Ongoing response - *Safeguarding and supporting the victim*

The following principles are based on effective safeguarding practice and should help shape any decisions regarding safeguarding and supporting the victim. Consider the age and the developmental stage of the victim, the nature of the allegations and the potential risk of further abuse. The AIM guidance makes us aware that, by the very nature of sexual violence and sexual harassment, a power imbalance is likely to have been created between the victim and alleged perpetrator.

The needs and wishes of the victim should be paramount (along with protecting the child) in any response. It is important they feel in as much control of the process as is reasonably possible. Wherever possible, the victim, if they wish, should be able to continue in their normal routine. Overall, the priority should be to make the victim's daily experience as normal as possible, so that school is a safe space for them.

A victim of sexual violence is likely to be traumatised and, in some cases, may struggle in a normal classroom environment. While we should avoid any action that would have the effect of isolating the victim, in particular from supportive peer groups, there may be times when the victim finds it difficult to maintain a

full-time timetable and may express a wish to withdraw from lessons and activities. This should be because the victim wants to, not because it makes it easier to manage the situation. If required, we would provide a physical space for victims to withdraw.

It may be necessary for us to maintain arrangements to protect and support the victim for a long time. We would be prepared for this and should work with children's social care and other agencies as required.

We would ensure that we do everything we reasonably can to protect the victim from bullying and harassment as a result of any report they have made.

Whilst they should be given all the necessary support to remain in their school or college, if the trauma results in the victim being unable to do this, alternative provision or a move to another school should be considered to enable them to continue to receive suitable education. This should only be at the request of the victim (and following discussion with their parents or carers).

It is important that if the victim does move to another educational institution (for any reason), that the new educational institution is made aware of any ongoing support needs. The designated safeguarding lead will take responsibility to ensure this happens (and will discuss with the victim and, where appropriate, their parents or carers the most suitable way of doing this) as well as transferring the child protection file.

Safeguarding and supporting the alleged perpetrator

The following principles are based on effective safeguarding practice and will help shape any decisions regarding safeguarding and supporting the alleged perpetrator.

- We acknowledge we will have a difficult balancing act to consider. On one hand, we need to safeguard the victim (and the wider pupil/student body) and on the other hand provide the alleged perpetrator with an education, safeguarding support as appropriate and implement any disciplinary sanctions.
- We would consider the age and the developmental stage of the alleged perpetrator and nature of the allegations. Any child is likely to experience stress as a result of being the subject of allegations and/or negative reactions by their peers to the allegations against them.
- Consider the proportionality of the response. Support (and sanctions) should be considered on a case-by-case basis. An alleged perpetrator may potentially have unmet needs (in some cases these may be considerable) as well as potentially posing a risk of harm to other children. Harmful sexual behaviours in young children may be (and often are) a symptom of either their own abuse or exposure to abusive practices and or materials. We would seek advice as appropriate, from children's social care, specialist sexual violence services and the police.
- It is important that if the alleged perpetrator does move to another educational institution (for any reason), that the new educational institution is made aware of any ongoing support needs and where appropriate, potential risks to other children and staff. The designated safeguarding lead will take responsibility to ensure this happens as well as transferring the child protection file.

So-called *Honor Based Violence (HBV)*/Violence Against Women and Girls (VAWG)

So-called 'honour' based violence is a term used to describe violence committed against a woman or a girl (or sometimes men) who the family or the community feels has not followed what they believe is acceptable behaviour and has brought dishonor or shame to the family.

What sort of behaviours lead to so-called 'honour' based violence?

Women and girls can experience violence or, in the most extreme form, be killed for a wide variety of behaviours, which can range from very trivial, such as talking to a male who is not a relative, to being sexually assaulted or raped. Some common 'behaviours' are:

- defying their parents
- talking to a male who is not related to the family
- seeking a divorce or seeking residence of the children after divorce
- refusing to marry a man chosen by the family (rejecting a forced marriage)
- sexual relationships or pregnancy before or outside of marriage (including kissing or intimacy in public)
- becoming 'western' (wearing make-up or clothes deemed inappropriate, having male friends or boyfriends from another faith, etc.)
- gossip (rumours can damage the 'honour' of a family)
- using drugs or drinking alcohol
- being sexually assaulted or raped
- being homosexual.

So-called 'honour' based violence is not a religion-based issue. It has been recorded in communities practicing every major religion, including Jewish, Sikh, Christian, Hindu and Muslim communities. The underlying belief behind so-called 'honour' based violence is to maintain the control over women by the men within the family or community by denying women autonomy over their lives – including decisions such as who to marry, their sex lives or divorce and their human rights.

Female Genital Mutilation (FGM)

Teachers and support staff are mindful of all forms of HBV and particularly the practice of FGM which occurs for girls at primary school age. There is a need to be alert to the possibility of a girl being at risk of FGM or already having suffered from FGM. Indicators can be removal of the child from PSHE and SRE lessons, a change in the girl's behaviour, the knowledge an elder sister has experienced FGM, the level of integration by the family into UK society. Two or more indicators present could signal a risk to the child. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the issue. Teachers and support staff are asked to be vigilant when children are discussing holidays abroad, particularly in a transition summer break Y6-Y7. Whilst all staff should speak to the Designated Safeguarding Lead (or deputy) with regard to any concerns about female genital mutilation (FGM), there is a specific legal duty on teachers. If a teacher, in the course of their work in the profession, discovers that an act of FGM appears to have been carried out on a girl under the age of 18, the teacher must report this to the police.

Forced Marriage

A forced marriage is where one or both people do not (or in cases of people with learning disabilities, cannot) consent to the marriage and pressure or abuse is used. It is an appalling and indefensible practice and is illegal in Great Britain. It is recognised as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights. A marriage must be entered into with the free and full consent

of both parties; you should feel you have a choice. An arranged marriage is not the same as a forced marriage. In an arranged marriage, the families take a leading role in choosing the marriage partner, but both parties are free to choose whether to enter into the marriage or not. The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they're bringing shame on their family). Financial abuse (taking your wages or not giving you any money) can also be a factor. In some case people may be taken abroad without knowing that they are to be married. When they arrive in that country, their passport(s)/travel documents may be taken to try to stop them from returning to the UK.

Telephone: 0207 008 0151 Monday – Friday 9-5pm
Global Response Centre (out of hours): 0207 008 1500
Email: fmufco.gov.uk www.gov.uk/forced-marriage

Upskirting

We understand the definition of upskirting to typically involve taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.

Upskirting is a highly intrusive practice which can take place in a range of places, eg British Transport Police have seen a rise of reports on public transport. Anyone, and any gender, can be a victim and this behaviour is completely unacceptable. Upskirting is distressing and a humiliating violation of privacy for victims.

Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of child sexual abuse. Sexual abuse 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 clothing. It may include 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). The definition of child sexual exploitation is as follows:

Child sexual exploitation 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.

Like all forms of child sexual abuse, child sexual exploitation:

- can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex;
- can still be abuse even if the sexual activity appears consensual;
- can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity;
- can take place in person or via technology, or a combination of both;
- can involve 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 (through others copying videos or images they have created and posting on social media, for example);

- can be 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;
- is typified by some 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.

Child sexual exploitation is a complex form of abuse and it can be difficult for those working with children to identify and assess. The indicators for child sexual exploitation can sometimes be mistaken for 'normal adolescent behaviours'. It requires knowledge, skills, professional curiosity and an assessment which analyses the risk factors and personal circumstances of individual children to ensure that the signs and symptoms are interpreted correctly and appropriate support is given. Even where a young person is old enough to legally consent to sexual activity, *'the law states that consent is only valid where they make a choice and have the freedom and capacity to make that choice'*. If a child feels they have no other meaningful choice, are under the influence of harmful substances or fearful of what might happen if they don't comply (all of which are common features in cases of child sexual exploitation) consent cannot legally be given whatever the age of the child.

Child sexual exploitation 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.

One of the key factors found in most cases of child sexual exploitation is the presence of some form of exchange (sexual activity in return for something) for the victim and/or perpetrator or facilitator. Where it is the victim who is offered, promised or given something they need or want, the exchange can include both tangible (such as money, drugs or alcohol) and intangible rewards (such as status, protection or perceived receipt of love or affection). It is critical to remember the unequal power dynamic within which this exchange occurs and to remember that the receipt of something by a child/young person does not make them any less of a victim.

It is also important to note that the prevention of something negative can also fulfil the requirement for exchange, for example a child who engages in sexual activity to stop someone carrying out a threat to harm his/her family. Whilst there can be gifts or treats involved in other forms of sexual abuse (e.g., a father who sexually abuses but also buys the child toys) it is most likely referred to as child sexual exploitation if the 'exchange', as the core dynamic at play, results in financial gain for or enhanced status of, the perpetrator. Where the gain is only for the perpetrator/facilitator, there is most likely a financial gain (money, discharge of a debt or free/discounted goods or services) or increased status as a result of the abuse. If sexual gratification, or exercise of power and control, is the only gain for the perpetrator (and there is no gain for the child/young person) this would not normally constitute child sexual exploitation, but should be responded to as a different form of child sexual abuse (*Child sexual exploitation Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation, February 2017*).

A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Some of the following signs may be indicators of sexual exploitation:

- Children who appear with unexplained gifts or new possessions;
- Children who associate with other young people involved in exploitation;
- Children who have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant;
- Children who suffer from changes in emotional well-being;

- Children who misuse drugs and alcohol;
- Children who go missing for periods of time or regularly come home late; and
- Children who regularly miss school or education or don't take part in education.

Sexting or 'Youth Produced Sexual Imagery'

Whilst professionals refer to the issue as 'sexting' there is no clear definition of 'sexting'. Many professionals consider sexting to be 'sending or posting sexually suggestive images, including nude or semi-nude photographs, via mobiles or over the Internet.' Yet when young people are asked 'What does sexting mean to you?' they are more likely to interpret sexting as 'writing and sharing explicit messages with people they know'. Similarly, many parents think of sexting as flirty or sexual text messages rather than images.

Staff are aware of legislation surrounding sharing of sexual imagery by young people.

Specifically:

- It is an offence to possess, distribute, show and make indecent images of children.
- The Sexual Offences Act 2003 (England and Wales) defines a child, for the purposes of indecent images, as anyone under the age of 18.

'Indecent' is not defined in legislation. When cases are prosecuted, the question of whether any photograph of a child is indecent is for a jury, magistrate or District Judge to decide based on what is the recognised standard of propriety. For most purposes, if imagery contains a naked young person, a topless girl, and/ or displays genitals or sex acts, including masturbation, then it will be considered indecent. Indecent images may also include overtly sexual images of young people in their underwear.

Creating and sharing sexual photos and videos of under-18s is illegal and therefore causes the greatest complexity for schools and other agencies when responding. It also presents a range of risks which need careful management. Virginia understands the phrase '*youth produced sexual imagery*' and uses this instead of 'sexting.' This is to ensure clarity about the issues this policy addresses. 'Youth produced sexual imagery' best describes the practice because:

- 'Youth produced' includes young people sharing images that they, or another young person, have created of themselves.
- 'Sexual' is clearer than 'indecent.' A judgement of whether something is 'decent' is both a value judgement and dependent on context.
- 'Imagery' covers both still photos and moving videos.

The types of incidents which this covers are:

- A person under the age of 18 creates and shares sexual imagery of themselves with a peer under the age of 18
- A person under the age of 18 shares sexual imagery created by another person under the age of 18 with a peer under the age of 18 or an adult
- A person under the age of 18 is in possession of sexual imagery created by another person under the age of 18

Sharing photos and videos online is part of daily life for many people, enabling them to share their experiences, connect with friends and record their lives. 90% of 16-24 year olds and 69% of 12-15 year olds own a smartphone, giving them the ability to quickly and easily create and share photos and videos.

This increase in the speed and ease of sharing imagery has brought concerns about young people producing and sharing sexual imagery of themselves. Staff understand that this can expose them to risks, particularly if

the imagery is shared further, including embarrassment, bullying and increased vulnerability to sexual exploitation.

Initial response

All incidents involving youth produced sexual imagery should be responded to in line with our Safeguarding and Child Protection policy and reported to the safeguarding lead or deputy.

When an incident involving youth produced sexual imagery comes to our attention the following procedure is followed:

- The incident should be referred to the DSL as soon as possible
- The DSL should hold an initial review meeting with appropriate school staff
- There should be subsequent interviews with the young people involved (if appropriate)
- Parents should 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
- At any point in the process if there is a concern a young person has been harmed or is at risk of harm a referral should be made to Children's Social Care and/or the police immediately.

Initial review meeting

The initial review meeting should consider the initial evidence and aim to establish:

- Whether there is an immediate risk to a young person or young people
- If a referral should be made to the police and/or children's social care
- If it is necessary to view the imagery in order to safeguard the young person – in most cases, imagery should not be viewed
- What further information is required to decide on the best response
- Whether the imagery has been shared widely and via what services and/or platforms. This may be unknown.
- Whether immediate action should be taken to delete or remove images from devices or online services
- Any relevant facts about the young people involved which would influence risk assessment
- If there is a need to contact another setting or individual
- Whether to contact parents or carers of the pupils involved - in most cases parents should be involved

An immediate referral to police and/or children's social care would be made if at this initial stage:

1. The incident involves an adult;
2. there is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example owing to special educational needs);
3. what you know about the imagery suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent;
4. the imagery involves sexual acts and any pupil in the imagery is under 18;
5. you have reason to believe a pupil is or pupils are at immediate risk of harm owing to the sharing of the imagery, for example, the young person is presenting as suicidal or self-harming.

If none of the above applies, a school may decide to respond to the incident without involving the police or children's social care (a school can choose to escalate the incident at any time if further information/concerns come to light).

Serious violence

Staff at Virginia are aware of indicators, which may signal that children are at risk from, or are involved with serious violent crime. These may include increased absence from school, a change in friendships or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs. Our staff are aware of the associated risks and understand the measures in place to manage these.

County Lines

County lines, or '*going country*' means groups or gangs using young people or vulnerable adults to carry and sell drugs from borough to borough, and across county boundaries. It is a tactic used by groups or gangs to facilitate the selling of drugs in an area outside the area where they live, reducing their risk of detection. This issue is affecting all London boroughs and its impact can be seen in the Home Counties and many other towns and cities.

County line enterprises almost always involve exploitation of vulnerable people: this could involve both children and adults and is always a safeguarding issue. The gang/group will put vulnerable individuals between themselves and the risk of detection, asking them to carry and sell drugs, and/or to sell drugs at the other end of the line. A group/gang may also target a vulnerable person living in the area outside London and take over their home as a base to sell drugs from.

This almost exclusively involves violence, intimidation and the offer of money or drugs. The use of the property for drug dealing often leads to the vulnerable person being left homeless. This is sometimes known as 'cuckooing'. The gang might also send young vulnerable people from their own area to stay at the house and distribute the drugs, again often intimidating and threatening them to stay. This is sometimes known as a 'trap house', and mobile phones are used to order more drugs, carried by other young people or vulnerable adults, who travel by train or car.

The impact of this is that young people become indebted to gangs/groups and are forced into labour and exploitation to pay off debts and local vulnerable people are targeted in care homes, foster care, and local authority and supported housing.

Staff will immediately report concerns that a pupil may be vulnerable to, or involved in, this activity will immediately report all concerns to the DSL.

Knife Crime

At Virginia we understand that knife crime has a huge impact on our children and the communities in which they live. It is a societal problem and it cannot be tackled by schools or single agencies alone. As a school we must identify, support, help and protect children on the school site, and do our best to teach them about the dangers of knives and related dangers. We aim to work together with all other agencies to put children first and protect them from county lines, gangs, knives, drugs and from adults who pose a risk to them.

It is clear that knife crime is an increasing safeguarding risk to children. We understand that it is a generally held belief that children are in three categories of risk of knife-carrying: The highest level of risk is for those children who have been groomed into gangs, for the purposes of criminal exploitation. Underneath this lies a group of children who have witnessed other children carrying knives, have been the victim of knife crime or know someone who has carried a knife for protection or status-acquisition or who are encouraged to believe knife-carrying is normal through the glamorisation of gangs and knives on social media. Then there

are children who carry knives to school as an isolated incident. For example, they may carry a penknife that a grandparent has gifted them.

As a staff we understand that the common denominator of pupils who are found carrying bladed objects into school is their vulnerability. These children have experienced poverty, abuse or neglect or are living within troubled families. They may also experience social exclusion due to factors such as their race or socio-economic background. In addition those involved were also more likely to be low attainers academically compared with their peers.

At Virginia we are aware of the recommendations and pay particular attention to the importance of teaching the curriculum and consider how our personal, social, health and economic education (PHSE) curriculum reflects local safeguarding issues and trends, including knife crime. We also cultivate positive and trusting relationships with parents and families to raise awareness of the dangers of grooming and criminal exploitation.

Children with family members in prison

Approximately 200,000 children have a parent sent to prison each year. These children are at risk of poor outcomes including poverty, stigma, isolation and poor mental health. NICCO provides information designed to support professionals working with offenders and their children, to help mitigate negative consequences for those children.

We understand the added vulnerabilities of children with a parent in prison are;

- twice as likely to experience conduct and mental health problems, and less likely to do well at school;
- three times more likely to be involved in offending. Sixty-five per cent of boys with a convicted father will go on to offend themselves

Private Fostering

Privately fostered children remain a diverse and potentially vulnerable group and as a school we understand that we have a mandatory duty to report this to the Local Authority.

A private fostering arrangement is one that is made privately, that is to say without the involvement of the Local Authority, for the care of a child under the age of 16 (or 18 if disabled) by someone other than a parent (or other person with parental responsibility) or a relative with the intention that it should last for 28 days or more. The private foster carer becomes responsible for providing the day to day care of the child. The parent will continue to hold parental responsibility for the child. The arrangement will fall within the definition of private fostering in the 1989 Act, and the provisions in that Act and in the Children (Private Arrangements for Fostering) Regulations 2005 will apply. Local authorities are required to satisfy themselves that the welfare of the children who are privately fostered in their area is safeguarded and promoted. This means that they must visit the private fostering arrangements within seven days of being notified of the arrangement. They will also speak to the parents and provide support and advice where necessary. Local authorities will then carry out follow-up visits. The number of visits required is at intervals of not more than six weeks in respect of the first year and twelve in the second and subsequent years of the arrangement. Local authorities are also required to monitor the way in which they discharge their private fostering duties, appoint an officer for that purpose and raise awareness of the requirement to notify them of private fostering arrangements.

Domestic Abuse

The cross-government definition of domestic violence and abuse is:

Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality.

The abuse can encompass, but is not limited to:

- psychological;
- physical;
- sexual;
- financial; and
- emotional

All children witnessing domestic violence are experiencing emotional abuse. Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

Children will react in different ways to being brought up in a home where there is violence. Age, sex, culture, stage of development, and individual personality will all have an effect on a child's responses. Most children, however, will be affected in some way by tension or by witnessing arguments, distressing behaviour or assaults - even if they do not always show this. They may feel they are to blame, may feel angry, guilty, insecure, alone, frightened, powerless, or confused. They may have mixed feelings, both towards the abuser, and towards the non-abusing parent.

There can be an impact on school attendance and achievement: some children will stay home in an attempt to protect their parent, or because they are frightened what may happen if they go out. Worry, disturbed sleep and lack of concentration can all affect schoolwork.

If a child reveals abuse we understand that it is important to:

- let them know they have done the right thing
- tell them its not their fault
- say you will take it seriously
- tell them what you will do next
- do not confront the alleged abuser
- report what the child has told you as soon as possible

Homelessness

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The Designated Safeguarding Lead (and any deputies) are aware of contact details and referral routes into 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, as well as the family being asked to leave a property. We understand that whilst referrals and or discussion with the Local Housing Authority should be progressed as appropriate, and in accordance with local procedures, this does not, and should not, replace a referral into children's social care where a child has been harmed or is at risk of harm.

The Homelessness Reduction Act 2017 places a new legal duty on English councils so that everyone who is homeless or at risk of homelessness will have access to meaningful help including an assessment of their needs and circumstances, the development of a personalised housing plan, and work to help them retain their accommodation or find a new place to live. The duties shift focus to early intervention and encourage those at risk to seek support as soon as possible, before they are facing a homelessness crisis. Children's Services are the lead agency for these young people and the Designated Safeguarding Lead (or a deputy) will ensure appropriate referrals are made based on the child's circumstances.

Part 5

Additional safeguarding considerations

Curriculum – see also our PSHE policy and Positive Relationships policy, 2019

At Virginia we understand that our children are growing up in an increasingly complex world which presents opportunities, on and offline, but also challenges and risks. It benefits us to ensure our PSHE curriculum teaches our children how to be critical thinkers, how to keep themselves healthy but also how to successfully manage their personal and social lives in a positive way. We want our children to develop positive personal attributes embedded in our school values; *the ability to care for each other and keep each other safe, be kind, be effective communicators and to work together, celebrating and respecting difference*. PSHE is taught sensitively and inclusively and at a time which we deem is developmentally appropriate to our children. This subject is a key building block of healthy respectful relationships with a focus on family and friendships in all contexts including online.

Teaching children about mental wellbeing is essential, we believe it is a priority to ensure their happiness. We want to empower children to face life's challenges, with a knowledge and the capability to take care of themselves. By fostering pupil wellbeing, nurturing self-belief and enabling them to develop resilience we help them to become successful and productive members of society who believe they can achieve their goals.

Online Safety - see also our Online Safety policy

As a school we have a responsibility to teach our pupils to be safe when using the internet and other technologies. It is also our responsibility to teach them the appropriate behaviours and responses to protect themselves and others online. We cannot keep up with or anticipate new risks from technologies and so we must prepare our pupils to assess risk and harm. We do ensure that appropriate filters and monitoring systems are in place to prevent pupils accessing potentially harmful or inappropriate online material.

We aim to teach a curriculum which supports children and young people to live knowledgeably, responsibly and safely in a digital world. We combine the National Curriculum for computing alongside a number of different educational resources, guidelines and materials offered by **LGfL, Espresso, Purple Mash, Kidsmart, Think U Know, UK Council for Child Internet Safety, Childnet** and **Common-Sense Media** as well as others.

Leaders work together to ensure the safeguarding curriculum is embedded as far as possible across all subjects rather than taught in isolation or rather so it is not seen as the sole domain of one particular subject or person. In this way our provision supports and broadens the provision of online safety education,

so that it empowers, builds resilience and effects a positive culture change. Our objective is to promote the development of safe and appropriate long term behaviours in our children.

We empower parents through our offer of Online Safety training which covers how to use computers, tablets and smart phones safely at home. Expectations for staff are clearly laid out in our Code of Conduct Policy and staff are not permitted to use personal mobile phones or cameras for any reason in school - see also our Code of Conduct Policy. Staff should not communicate with pupils on private emails or social networking sites – even on educational matters. Staff are advised to be extremely careful when using social networking sites and to never discuss school business or any issues relating to pupils. All staff must use their LGFL mail accounts when conducting school business.

Keeping disabled children safe

At Virginia we understand that disabled children are three to four times more likely to experience abuse. We play an important role in keeping disabled children safe and understand that impairments increase their vulnerability which make it difficult to recognise or respond to danger. Added vulnerability comes from various situations; *Some children require support with personal intimate care; some children may be seen as easy targets for exploitation or grooming by gangs; social media also presents challenges in relation to what children may accidentally access; some children's behaviours may also be misinterpreted and considered to be sexual.*

We understand that in our work when considering adjustments there is not a 'one size fits all' approach as children have a range of needs and abilities. As teachers we need to be informed about the signs of abuse and be open to the children and able to pick up on changes in behaviour. The NSPCC recommended the following actions for schools to work effectively to protect disabled young people;

- 1) An improved understanding and awareness of the need for all disabled children to be taught sex and relationship education and the need to break the taboo surrounding the sexuality of disabled young people
- 2) The need to deliver accessible sex and relationship education for disabled pupils which develops appropriately with the children age and understanding. Access to this could also be included in their EHCPs and monitored as a measurable outcome
- 3) School and multi-agencies should work together with parents to ensure that disabled children receive consistent, clear, accessible information on safe touch, choice and control, puberty, sex, relationships and abuse and knowing how to let others know if they feel unsafe
- 4) All disabled children should have access to communication methods and communication told which enable them to have a level of choice and control and access a number of people who understand their communication methods as a safety mechanism. This should be included on EHCP plans
- 5) EHCP need to be written holistically to address social and emotional needs including relationships, choices, sexuality and healthy relationships. For disabled children to be helped to understand behaviour that hurts and that they have a right to be safe and have help to learn about who and how to let know if they don't feel safe
- 6) The development of more accessible resources in multiple formats which address all elements to support disabled children's safety – these resources should be shared with parents and professionals
- 7) Provide opportunities for parents to discuss these sensitive issues and share ideas in a safe and sensitive environment

- 8) Better understanding, training and a consistent balanced approach to avoid what is deemed inappropriate behaviour by disabled children leading to unnecessary criminalization or inappropriate investigation
- 9) Improved training for professionals to spot signs of abuse of disabled children and prioritise the prevention and protection of disabled children and their families

Physical handling (intervention including use of restraint)

The school adopts a sensible approach to physical contact with pupils which allows and supports staff to make appropriate physical contact. The decision on whether or not to use reasonable force to control or restrain a pupil is down to the professional judgment of the staff concerned and always depends on individual circumstances. When using reasonable force in response to risks presented by incidents involving pupils with SEND or medical conditions staff will recognise the additional vulnerability of these groups and will draw up individual behaviour plans as appropriate. We start from the premise that staff should work positively and confidently with children and find the least intrusive way possible to support, empower and keep children safe. The foundation of good practice in working with children should be:

- building relationships of trust and understanding
- understanding triggers and finding solutions
- if incidents do occur, defusing the situation and/or distracting the child wherever possible.

At times restraint is permissible and necessary. Section 93 of the Education and Inspections Act 2006 enables school staff to use '*reasonable force*' to prevent a pupil from causing injury to themselves or others. Staff can intervene and physically hold a child who may be a safety risk to self or others (*Use of Reasonable Force*, July 2013). Staff may also physically intervene to prevent theft or destruction of property. They may ask for children to hand over property (whether visible or concealed) not allowed in school or that could be unsafe.

We expect adults to be skilled and confident in finding the best ways to keep children safe; ways that promote their rights, respect their dignity and help equip them for the future. Following any restraint being used, we make every attempt to record an account of the incident in the paged and numbered book.

Supporting Pupils with Medical Needs – see also our *First Aid policy and Supporting Children with Medical Needs policy*

In ensuring we meet the needs of pupils with medical conditions, Virginia Primary has due regard to the relevant statute (SEND Code of Practice, 2015) and DFE Guidance (*Supporting Pupils with Medical Needs at School*, 2015).

Concerns arising during home visits

If a child discloses or makes a direct allegation to a member of staff during a home visit or off site educational visit, the member of staff must make a written record of the concern and any explanation given by the child or parent/carer. They must then contact the DSL without delay. If the concern is after hours and it is believed that the child may be at immediate risk the Children's Social Care Out of Hours Team or the police should be contacted.

Collection of children

If a parent/carer arrives at school to collect their child and it is thought that they may be adversely under the influence of alcohol or other substances, a decision will be taken regarding whether the child's safety might be at risk by releasing them to the parent/carer. Normally parent/carers cannot be prevented from collecting their children, but if it is believed the child would be at risk, staff may request that the parent/carer name another suitable adult (e.g., a relative) to collect and look after the child.

Site Security

The school maintains high expectations relating to the safety of children and staff whilst on site. A series of physical and practical measures are in place to ensure this. Access is possible through gated entrances, each of which has a buzzer entrance system. The staff in the main school office are alerted to a visitor request for entry and a camera entry system allows us to physically identify potential visitors. Office staff ask a series of questions following our *see – greet – challenge* procedure to ensure all visitors have a valid reason to gain entry;

1. *How can I help you?*
2. *Can I confirm the reason for your visit?*
3. *May I see some form of photo identification?*
4. *Please sign in and wear your lanyard at all times.*

Where necessary we ask for photo identification to verify the visitor's details. Everyone who enters the school is required to sign in and is given a visitor, staff or governor lanyard to wear. A secondary door is then opened by the office when the visitor is deemed safe to be allowed entry. Where adults are not DBS checked and engaging in work with children they will be supervised by an adult who has the appropriate level of security checks.

Addendum
Safeguarding during the COVID-19 response

From 20th March 2020 parents were asked to keep their children at home, wherever possible, and for schools to remain open to provide care for a limited number of children - children who are vulnerable, and children whose parents are critical to the COVID-19 response and cannot be safely cared for at home.

Supporting documents:

Coronavirus (COVID-19): safeguarding in schools, colleges and other provider, DfE 27 March 2020

This addendum of the Virginia Primary School Safeguarding and Child Protection policy contains details of our individual safeguarding arrangements in the following areas:

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Vulnerable Children

Vulnerable children include those who have a

- Social worker
- Education, Health and Care (EHC) plan.

Children with a social worker:

Those who have a social worker include children who have a Child Protection Plan and those who are looked after by the Local Authority.

A child may also be deemed to be vulnerable if they have been assessed as being in need or otherwise meet the definition in section 17 of the Children Act 1989.

Virginia Primary will continue to work with and support children's social workers to help protect vulnerable children. This includes working with and supporting children's social workers and the local authority virtual school head; Helen Murphy for looked-after and previously looked-after children.

There is an expectation that vulnerable children who have a social worker will attend an education setting, so long as they do not have underlying health conditions that put them at risk. The decision upon whether the child with a social worker comes into the school setting will be evaluated on a case by case basis taking into account the best interests and safety of the child. Virginia Primary, the social worker, other agencies and the parents/carers will agree upon this and review at regular intervals, following the advice set out by Public Health England.

Children with an EHC plan:

Those with an EHC plan will be risk-assessed in consultation with the Local Authority and parents, to decide whether they need to continue to be offered a school or college place in order to meet their needs, or whether they can safely have their needs met at home. This could include, if necessary, carers, therapists or clinicians visiting the home to provide any essential services. Many children and young people with EHC plans can safely remain at home.

Other considerations:

- Eligibility for free school meals in and of itself should not be the determining factor in assessing vulnerability.
- Senior leaders, especially the Designated Safeguarding Lead and deputies know who our most vulnerable children are. They have the flexibility to offer a place to those on the edge of receiving children's social care support.

Virginia Primary have identified children and families who do not fit the DfE's definition of 'vulnerable' however they are in need of safeguarding. In relation to this, SLT members are to make regular telephone contact with families, checking in with the wellbeing of the child(ren) and family members. Children are

directed to access the online learning platform and resources provided by the school. Here, SLT can also assess if further referrals of support are needed and how to sign-post or refer families to appropriate agencies and/or whether to upscale the safeguarding mechanisms surrounding the child(ren).

Attendance monitoring

Local authorities and education settings do not need to complete their usual day-to-day attendance processes to follow up on non-attendance. Virginia Primary and social workers will agree with parents/carers whether children in need should be attending school – Virginia Primary will then follow up on any pupil that we were expecting to attend, who does not. We will also follow up with any parent or carer who has arranged care for their child(ren) and the child(ren) subsequently do not attend.

The Department of Education has introduced a [daily online attendance form](#)* to keep a record of children of critical workers and vulnerable children who are attending school. This allows for a record of attendance for safeguarding purposes and allows Virginia Primary to provide accurate, up-to-date data to the DfE on the number of children taking up places during the COVID-19 response.

To support the above, Virginia Primary, when communicating with parents/carers and carers, confirm emergency contact numbers are correct and ask for any additional emergency contact numbers where they are available. In all circumstances where a vulnerable child does not take up their place at school, or discontinues, Virginia will notify their social worker.

Designated Safeguarding Lead and Deputies

Virginia has a Designated Safeguarding Lead (DSL) and three Deputy Designated Safeguarding Leads:

Designated Safeguarding Lead:	Barbara Lo Giudice	Acting Head Teacher
Deputy Safeguarding leads:	Amanda Carr Salma Haris Joan Kearns	Acting Assistant Head Teachers School Business Lead

The optimal scenario is to have Barbara Lo Giudice or Salma Haris available on site. Where this is not the case, they alongside Amanda Carr and/or Joan Kearns will be available to be contacted via phone or online video - for example when working from home.

The DSL and deputy DSLs will assume responsibility for co-ordinating safeguarding on site. This might include updating and managing access to child protection documents and liaising with the offsite DSL (or deputy) and as required liaising with children’s social workers where they require access to children in need and/or to carry out statutory assessments at the school.

It is important that all Virginia Primary staff and volunteers have access to a trained DSL (or deputy). On each day, staff on site will be made aware of who that person is and how to speak to them. The DSL will continue to engage with social workers, and attend all multi-agency meetings, which can be done remotely.

* <https://www.gov.uk/government/publications/coronavirus-covid-19-attendance-recording-for-educational-settings>

Reporting a concern

Where staff have a concern about a child, they should continue to follow the process outlined in the main body of the school Safeguarding and Child Protection Policy, this includes making a verbal and possibly a written report to the DSL or DSL deputies through secured email Egress.

In the unlikely event that a member of staff cannot contact the on duty DSL or deputy DSLs, they should contact the Governor for Safeguarding: Cathy Darby. This will ensure that the concern is received. Staff are reminded of the need to report any concern immediately and without delay.

Where staff are concerned about an adult working with children in the school, this should be reported immediately to the DSL or, in their absence, one of the deputy DSLs. They will immediately act in accordance with the procedures outlined in KCSIE 2019 Part 4 and discuss the concerns with the LA Designated Officer (LADO). If the allegation is against the headteacher this should be reported to the Chair of Governors or a local authority officer with responsibility for the school.

Head Teacher: *Barbara Lo Giudice*

Chair of Governors: *Cathy Darby*

LA Designated Officer: *Melanie Benzie (020 7364 0677)*

Safeguarding Training and induction

DSL training is very unlikely to take place whilst there remains a threat of the COVID 19 virus. For the period COVID-19 measures are in place, a DSL (or deputy) who has been trained will continue to be classed as a trained DSL (or deputy) even if they miss their refresher training.

All existing school staff have had safeguarding training and have read part 1 of Keeping Children Safe in Education (2019). The DSL should communicate with staff any new local arrangements, so they know what to do if they are worried about a child.

Where new staff are recruited, or new volunteers enter Virginia Primary, they will continue to be provided with a safeguarding induction. If staff are deployed from another education or children's workforce setting to our school, we will take into account the DfE supplementary guidance on safeguarding children during the COVID-19 pandemic and will accept portability as long as the current employer confirms in writing that:

- the individual has been subject to an enhanced DBS and children's barred list check
- there are no known concerns about the individual's suitability to work with children
- there is no ongoing disciplinary investigation relating to that individual

Upon arrival, they will be given a copy of the Safeguarding and Child Protection policy, confirmation of local processes and confirmation of DSL arrangements.

Safer recruitment/volunteers and movement of staff

It remains essential that people who are unsuitable are not allowed to enter the children's workforce or gain access to children. When recruiting new staff, Virginia Primary will continue to follow the relevant safer recruitment processes for our setting, including, as appropriate, relevant sections in part 3 of Keeping Children Safe in Education (2019) (KCSIE).

In response to COVID-19, the Disclosure and Barring Service (DBS) has made changes to its guidance on standard and enhanced DBS ID checking to minimise the need for face-to-face contact. Where Virginia are utilising volunteers, we will continue to follow the checking and risk assessment process as set out in paragraphs 167 to 172 of KCSIE.

Under no circumstances will a volunteer who has not been checked be left unsupervised or allowed to work in regulated activity. Virginia Primary will continue to follow the legal duty to refer to the DBS anyone who has harmed or poses a risk of harm to a child or vulnerable adult. Full details can be found at paragraph 163 of KCSIE.

Virginia Primary will continue to consider and make referrals to the Teaching Regulation Agency (TRA) as per paragraph 166 of KCSIE and the TRA's 'Teacher misconduct advice for making a referral. During the COVID-19 period all referrals should be made by emailing Misconduct.Teacher@education.gov.uk

Whilst acknowledging the challenge of the current National emergency, it is essential from a safeguarding perspective that the Senior Leaders and Business Lead are aware, on any given day, which staff/volunteers will be in the school, and that appropriate checks have been carried out, especially for anyone engaging in regulated activity. As such, Virginia Primary will continue to keep the single central record (SCR) up to date as outlined in paragraphs 148 to 156 in KCSIE.

Online safety for children on school site

Virginia Primary will continue to provide a safe environment, including online. This includes the use of an online filtering system. Where students are using computers in school, appropriate supervision will be in place.

Children and online safety away from school.

It is important that all staff who interact with children, including online, continue to look out for signs a child may be at risk. Any such concerns should be dealt with as per the schools Safeguarding and Child Protection Policy and where appropriate referrals should still be made to children's social care and as required, the police.

Online teaching should follow the same principles as set out in the teaching code of conduct, the ICT Security Policy and Staff Agreement, and the Pupil Online Safety Policy. Virginia Primary will ensure any use of online learning tools and systems is in line with privacy and data protection/GDPR requirements. Marion Reilly and Chris Lyons have the technical knowledge to maintain safe IT arrangements. If either of these two people become unavailable, the school business lead will immediately contact Levett Consultancy to ensure cover and safeguarded systems remain in place at all times.

Staff understand that they should:

- only use online platforms and tools suggested by Virginia Primary School to communicate with pupils.
- only use school-registered accounts, never personal ones
- Avoid 1:1 communication unless pre-approved by SLT

Care should be taken to ensure that photos and videos made at home by staff and shared with pupils uphold professional standards.

Below are some things to consider when delivering remote learning/lessons, especially where webcams or uploaded photos are involved:

- Staff and children must wear suitable clothing in photos or video links, as should anyone else in the household/background.
- Any computers or devices used by staff or pupils should be in appropriate areas, for example, not in bedrooms or bathrooms
- Care should be taken to ensure that any areas of private homes seen on video or in photos, (eg furniture, wall art and other personal items) are appropriate
- Language (including from anyone else in the household) must be professional and appropriate
- Background sounds must be minimised as much as possible

Blogs and learning platforms will be monitored daily by SLT and any concerns will be discussed as part of 1:1 communication.

Online Safety Support and resources for parents and families will be clearly signposted on the school website.

Parents and Children should be made aware of how to report online abuse through clear routes such as; UK Safer Internet Centre and CEOP

Supporting children not in school

Virginia is committed to ensuring the safety and wellbeing of all its children and families. Where the DSL has identified a child to be on the edge of social care support, or who would normally receive pastoral-type support in school, they should ensure that a robust communication plan is in place for that child.

As part of these children's plan, Virginia Primary will make the following steps:

- SLT members are to make regular telephone contact with families, checking in with the wellbeing of the child(ren) and family members.
- Children are directed to access the online learning platform and resources provided and recommended by the school.
- Details of the outcomes and next steps are reported to the Head Teacher, Business Support Lead and Assistant Heads.
- Each child's plan must be reviewed regularly (at least once a fortnight)
- SLT/DSL will assess if further referrals of support are needed and how to sign-post or refer families to appropriate agencies and/or whether to upscale the safeguarding mechanisms surrounding the child(ren).

Virginia Primary recognises that school is a protective factor for children, and the current circumstances, can affect the mental health of pupils and their parents/carers. Teachers need to be aware of this in setting expectations of pupils' work where they are at home.

Teachers are to monitor the use of the learning platforms and blogs. If children within the class are not accessing the learning platforms or making contact, SLT or teachers will call home to check in with families and direct parents/carers and children to the school approved websites and learning platforms.

Supporting children in school

Virginia Primary will continue to be a safe space for all children to attend and flourish. The Headteacher will ensure that appropriate staff are on site and staff to pupil ratio numbers are appropriate, to maximise safety.

Virginia Primary will refer to the Government guidance for education and childcare settings on how to implement social distancing and continue to follow the advice from Public Health England on handwashing and other measures to limit the risk of spread of COVID19.

We will ensure that where we care for children of critical workers and vulnerable children on site, we ensure appropriate support is in place for them. This will be bespoke to each child.

Where Virginia Primary has concerns about the impact of staff absence – such as our Designated Safeguarding Lead or first aiders – will discuss them immediately as an SLT and refer to the Local Authority as needed.

Peer on Peer Abuse

Virginia Primary recognises that during the closure a revised process may be required for managing any report of such abuse and supporting victims. Where the school receives a report of peer on peer abuse, we will follow the principles as set out in part 5 of KCSIE and of those outlined within our Safeguarding and Child Protection Policy.

The school will listen and work with the child, parents/carers and any multiagency partner required to ensure the safety and security of that child. Concerns and actions must be recorded onto a record of concern form (ROC) given to the DSL or deputy DSLs and appropriate referrals made in line with our Safeguarding and Child Protection Policy.