The Eaglewood School

"Raising Aspiration and Changing Lives"

Child Protection Policy, Procedure and Guidance

This policy has been written in consultation with:
KCSiE 2022 and 2018 Working Together to Safeguard Children documents

Safeguarding is defined as protecting children from maltreatment, preventing impairment of health and/or development, ensuring that children grow up in the provision of safe and effective care and taking action to enable all children to have the best life chances.

POLICY DETAILS

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Eaglewood School Child Protection Policy

Policy Statement

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all children.
We make every effort to provide a safe and welcoming environment underpinned by a culture of openness where both children and adults feel secure, able to talk and believe that they are being listened to.
We maintain an attitude of "it could happen here" where safeguarding is concerned.
The purpose of this policy is to provide staff, volunteers and governors with the framework they need in order to keep children safe and secure in our school, and to inform parents and guardians how we will safeguard their children whilst they are in our care.
Specific guidance is available to staff within the procedure documents.

Definitions

Within this document:

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

The term ***staff*** applies to all those working for or on behalf of the school, full time or part time, in either a paid or voluntary capacity. This also includes parents and governors.

Child refers to all young people who have not yet reached their 18th birthday. On the whole, this will apply to pupils of our school; however the policy will extend to visiting children and students from other establishments

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

Abuse could mean neglect, physical, emotional or sexual abuse or any combination of these. Parents, carers and other people can harm children either by direct acts and / or failure to provide proper care. Explanations of these are given within the procedure document.

Aims

- To provide staff with the framework to promote and safeguard the wellbeing of children and in so doing ensure they meet their statutory responsibilities.
- To ensure consistent good practice across the school.
- To demonstrate our commitment to protecting children.

Principles and Values

- Children have a right to feel secure and cannot learn effectively unless they do so.
- All children have a right to be protected from harm.
- All staff have a key role in prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a child is at risk of harm, either in the school or in the community, whilst taking into account any contextual safeguarding.
- We acknowledge that is essential that we work in partnership with other agencies that protect children and reduce risk and so we will engage in partnership working throughout the child protection process to safeguard children.
- Whilst the school will work openly with parents as far as possible, it reserves the right to contact Children's Social Care or the police, without notifying parents if this is believed to be in the child's best interests.
- All adults working within the school should maintain professional curiosity if they are concerned about a child.

Leadership and Management

We have established clear lines of accountability, training and advice to support the process of child protection and individual staff within that process.
In this school, any individual can contact the Designated Safeguarding Lead (DSL) or their Deputy (DDSL) if they have concerns about a child or young person.

DSL is ***Nigel Himmel*** and their **Deputy DSL** are ***John Wood, Taryn Maclarty, Lara Young, Eleanor Fletcher and Claire Whitlock.*** There is a nominated safeguarding Governor, ***Paul Brown***, who will take leadership responsibility for safeguarding. The Chair of Governors ***David Richards*** will receive reports of allegations against the Headteacher and act on the behalf of the governing body.

As an employer we follow safer recruitment guidance as set out in KCSiE 2022.

Training

All staff in our school are expected to be aware of the signs and symptoms of abuse and must be able to respond appropriately. Training is provided as required but never longer than annually. Separate training is provided to all new staff on appointment by DSL on induction. DSL will attend training at least every year to enable them to fulfil their role. Governor training is provided as required by KCSiE 2022.

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

Referral

Following any concerns raised, the DSL will assess the information and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm, or risk of significant harm has been reached, or if it is not clear if the threshold is met, the DSL will contact Children's Social Care and, if appropriate, the police. If the DSL or DDSL is not available or there are immediate concerns, the staff member will refer directly to Children's Social Care and the police if appropriate. We will use the guidance from NPCC to determine when to contact the police.

Generally, the DSL will inform the parents prior to making a referral. However, there are situations where this may not be possible or appropriate, particularly when informing parents, may place the child at further risk

***N.B**. The exception to this process will be in those cases of known FGM where there is a mandatory requirement for the teacher to report directly to the police. The DSL should also be made aware.*

Confidentiality

- We maintain that all matters relating to child protection are to be treated as confidential and only shared as per the 'Information Sharing Advice for Practitioners' (DfE 2015) guidance
- There is a lawful basis for child protection concerns to be shared with agencies who have a statutory duty for child protection.
- Information will be shared with individuals within the school who 'need to know'.
- All staff are aware that they cannot promise a child to keep a disclosure confidential

As a school we will educate pupils to recognise when they are at risk and how to get help when they need it through:

- The content of the curriculum will be tailored to the specific needs and vulnerabilities of individual children, including child who are victims of abuse, and children with SEND
- A school ethos which helps children to feel safe and able to talk freely about their concerns, believing that they will be listened to and valued.
- Every child having access to a 'trusted adult' in the school. At Eaglewood School this would normally be their tutor
- Children will be taught about how to keep themselves and others safe when on-line

Dealing with concerns allegations against staff

If a concern is raised about the practice or behaviour of a member of staff, this information will be recorded and passed to the headteacher **Nigel Himmel**. The headteacher will make an assessment to determine if the matter is a 'low level concern' or an 'allegation'. The Local Authority Designated Officer (LADO) will be contacted for all allegations and the relevant guidance will be followed. If the headteacher needs advice or guidance they will contact the LADO. If the allegation

is against the headteacher, the person receiving the allegation will contact the LADO or Chair of Governors directly. (Annex 4)

The Local Authority Designated Officers (LADOs) are:-
Barbara Piddington
Fiona Armfield
Shona McMinn (from 17/10/22)
t: 01962 876364

Chair of Governors
David Richards - Head of Engineering
Faculty of Engineering and Physical Sciences
University of Southampton
t: 02380 592848 m: 079500 33365

Dealing with children abusing children

If a concern is raised that a child under 18 abusing another child under 18, the 'Child on Child Abuse' guidance will be followed (Annex 5).

Legal context

Section 175 of the education act 2002; the Education (Independent School Standards) Regulations 2014; the Non-Maintained Special Schools (England) Regulations
Children Act 2004 & 1989

Guidance
Hampshire Safeguarding Children Partnership protocols and guidance and their procedures
Working Together to Safeguard Children (2018)
Keeping Children Safe in Education (2022)
FGM Act 2003 Mandatory Reporting Guidance (2016)

Policy review

As a school, we review this policy at least annually in line with DfE, HSCP and HCC requirements and other relevant statutory guidance.

Date approved by governing body: **September 2022**

Date to be reviewed by governing body: **September 2023**

Roles and responsibilities within Eaglewood School

Staff responsibilities

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

- Establish and maintain an environment where children feel secure, are encouraged to talk and are listened to.
- Ensure children know that there are adults in the school who they can approach if they are worried or have concerns.
- Plan opportunities within the curriculum for children to develop skills they need to recognise, assess and manage risk appropriately and keep themselves safe.
- Attend training in order to be aware of and be alert to the signs of abuse.
- Maintain an attitude of "it could happen here" with regards to safeguarding.
- Be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation
- Recognise that abuse, neglect, or other adverse childhood experiences, can have an impact on the mental health, behaviour and education of children.
- Record their concerns if they are worried that a child is being abused and report these to the DSL as soon as practical that day. If the DSL is not contactable immediately a DDSL should be informed.
- Record their concerns on white record of concern forms and report these in person to the DSL or DDSL's as soon as possible (DSL and DDSL will record on CPOMs).
- Be prepared to refer directly to social care, and the police if appropriate, if there is a risk of significant harm and the DSL or DDSL is not available.
- Follow the allegations procedures (Annex 4) if the disclosure is an allegation against a member of staff.
- Follow the procedures set out by the HSCP and take account of guidance issued by the DfE.
- Support pupils in line with their child protection plan.
- Treat information with confidentiality but never promising to "keep a secret".
- Notify the DSL or DDSL of any child on a child protection plan or child in need plan who has unexplained absence.
- Have an understanding of 'Early Help' and be prepared to identify and support children who may benefit from this intervention.
- Liaise with other agencies that support pupils and provide early help.
- Ensure they know who the DSL and DDSL are and know how to contact them.
- Have an awareness of the Child Protection Policy, the Behaviour Policy, the Staff Behaviour Policy (or Code of Conduct), child on child abuse procedures, the safeguarding response for children who go missing from education and the role of the DSL.

Senior Management Team responsibilities:

- Contribute to inter-agency working in line with 'Working Together to Safeguard Children 2018 guidance'.
- Provide a co-ordinated offer of early help when additional needs of children are identified.
- Ensure staff are alert to the various factors that can increase the need for early help (*para 19 KCSiE 2022*).
- Working with Children's Social Care, support their assessment and planning processes including the school's attendance at conference and core group meetings.
- Carry out tasks delegated by the governing body such as training of staff, safer recruitment and maintaining a single central register.
- Provide support and advice on all matters pertaining to safeguarding and child protection to all staff regardless of their position within the school.
- Treat any information shared by staff or pupils with respect and follow agreed policies and procedures.
- Ensure that allegations or concerns against staff are dealt with in accordance with guidance from Department for Education (DfE) and the Hampshire Safeguarding Children Partnership (HSCP) procedures.
- Determine if a concern about a member of staff is a 'low level concern' or an allegation ([1] See Keeping Children Safe in Education 2022 Part 4 section 2 paragraph 406 on).

Governing Body responsibilities

- Ensure the school has effective safeguarding policies and procedures including a Child Protection Policy, a Staff Behaviour Policy or Code of Conduct, a Behaviour Policy and a response to children who go missing from education.
- Ensure HSCP is informed in line with local requirements about the discharge of duties via the annual safeguarding audit.
- Recruitment, selection and induction follows safer recruitment practice, including all appropriate checks.
- Allegations against staff are dealt with by the headteacher. Allegations against the headteacher are dealt with by the Chair of Governors.
- A member of the Senior Leadership Team is appointed as Designated Safeguarding Lead (DSL) and has this recorded in their job description.
- Staff have been trained appropriately and this is updated in line with guidance
- Any safeguarding deficiencies or weaknesses are remedied without delay
- A nominated governor for safeguarding is identified.

DSL responsibilities *(to be read in conjunction with DSL role description in KCSiE)*

In this school the DSL is *Nigel Himmel*
The Deputy DSL are *John Wood, Taryn Maclarty, Lara Young, Eleanor Fletcher and Claire Whitlock*

In addition to the role of all staff and the senior management team the DSL will:

- Refer cases to social care, and the police where appropriate, in a timely manner avoiding any delay that could place the child at more risk.
- Assist the Governing Body in fulfilling their safeguarding responsibilities set out in legislation and statutory guidance.
- Attend appropriate training and demonstrate evidence of continuing professional development to carry out the role.
- Ensure every member of staff knows who the DSL and the Deputy are, have an awareness of the DSL role and know how to contact them.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and their responsibility for referring any concerns about a child to the DSL and concerns about an adult to the headteacher.
- Ensure that those staff that need to know, are aware of those children who have experienced, or are experiencing abuse in order to promote their educational outcomes and provide the appropriate support.
- Ensure whole school training occurs regularly with at least annual updates so that staff and volunteers can fulfil their responsibilities knowledgeably.
- Ensure any members of staff joining the school outside of the agreed training schedule receive induction training prior to the commencement of their duties.
- Keep records of child protection concerns securely and separate from the main pupil file and use these records to support the assessment and likelihood of risk.
- Ensure that safeguarding records are transferred accordingly (separate from pupil files) and in a timely fashion when a child transfers school, including in-year transfers.
- Ensure that where a pupil transfers school and is on a child protection plan or is a child looked after, their information is passed to the new school immediately and that the child's social worker is informed. Consideration is given to a transition meeting prior to moving if the case is complex or on-going.
- Be aware of the training opportunities and briefings provided by HSCP to ensure staff are aware of the latest local guidance on safeguarding.
- Develop, implement and review procedures in the school that enable the identification and reporting of all cases, or suspected cases, of abuse.
- Meet any other expectations set out for DSLs in KCSiE 2022.

Eaglewood School Child Protection Procedures

Overview

The following procedures apply to all staff working in the school and will be covered by training to enable staff to understand their role and responsibility.
The aim of our procedures is to provide a robust framework which enables staff to take appropriate action when they are concerned that a child is being harmed or is at risk of harm.

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

All staff are aware that very young children, those with disabilities, special needs, certain medical conditions or with language deficit/English as a second language may have more difficulty in communicating concerns or feelings. They may be more likely to communicate concerns with behaviours rather than words. Additionally, staff will question the cause of knocks and bumps in children who have limited mobility, which will include children (for example younger siblings) visiting the site in addition to pupils.

If a member of staff suspects abuse, spots signs or indicators of abuse, or they have a disclosure of abuse made to them they must:

1. Make an initial record of the information on our cause for concern sheet. Available in the staff room and Reception.

2. Report it to the DSL or DDSL in person immediately.

3. The DSL will consider if there is a requirement for immediate medical intervention. Urgent medical attention should not be delayed if the DSL is not immediately available

4. Make an accurate record (which may be used in any subsequent court proceedings) as soon as possible and within 24 hours of the occurrence, of all that has happened, including details of:

    - Dates and times of their observations.
    - Dates and times of any discussions in which they were involved.
    - Any injuries.
    - Explanations given by the child / adult.
    - What action was taken.
    - Any actual words or phrases used by the child.

    The records must be signed and dated by the author.

5. In the absence of the DSL or their Deputy, be prepared to refer directly to Children's Social Care (and the police if appropriate) if there is the potential for immediate, significant harm. All phone numbers are available in reception.

Following a report of concerns the DSL must:

1. Decide whether or not there are sufficient grounds for suspecting significant harm, in which case a referral must be made to Children's Social Care and the police if it is in keeping with the National Police Chiefs Council "When to call the Police" guidance. The rationale for this decision should be recorded by the DSL.

2. Normally the school should try to discuss any concerns about a child's welfare with the family and where possible seek their agreement before making a referral to Children's Social Care. However, in accordance with DfE guidance, this should only be done when it will not place the child at increased risk or could have an impact on a police investigation. Where there are doubts or reservations about involving the child's family, the DSL should clarify with Children's Social Care or the police whether the parents should be told about the referral and, if so, when and by whom. This is important in cases where the police may need to conduct a criminal investigation. The child's views should also be taken into account when appropriate.

3. If there are grounds to suspect a child is suffering, or is likely to suffer, significant harm the DSL (or Deputy) must contact Children's Social Care via the Inter-Agency Referral Form (IARF), making a clear statement of:

   - the known facts
   - any suspicions or allegations
   - whether or not there has been any contact with the child's family.

   If there is indication that the child is suffering significant harm, a call will also be made to Children's Reception Team (CRT) on 01329 225379.

4. If a child is in immediate danger and urgent protective action is required, the police must be called. The DSL must then notify Children's Social Care of the occurrence and what action has been taken.

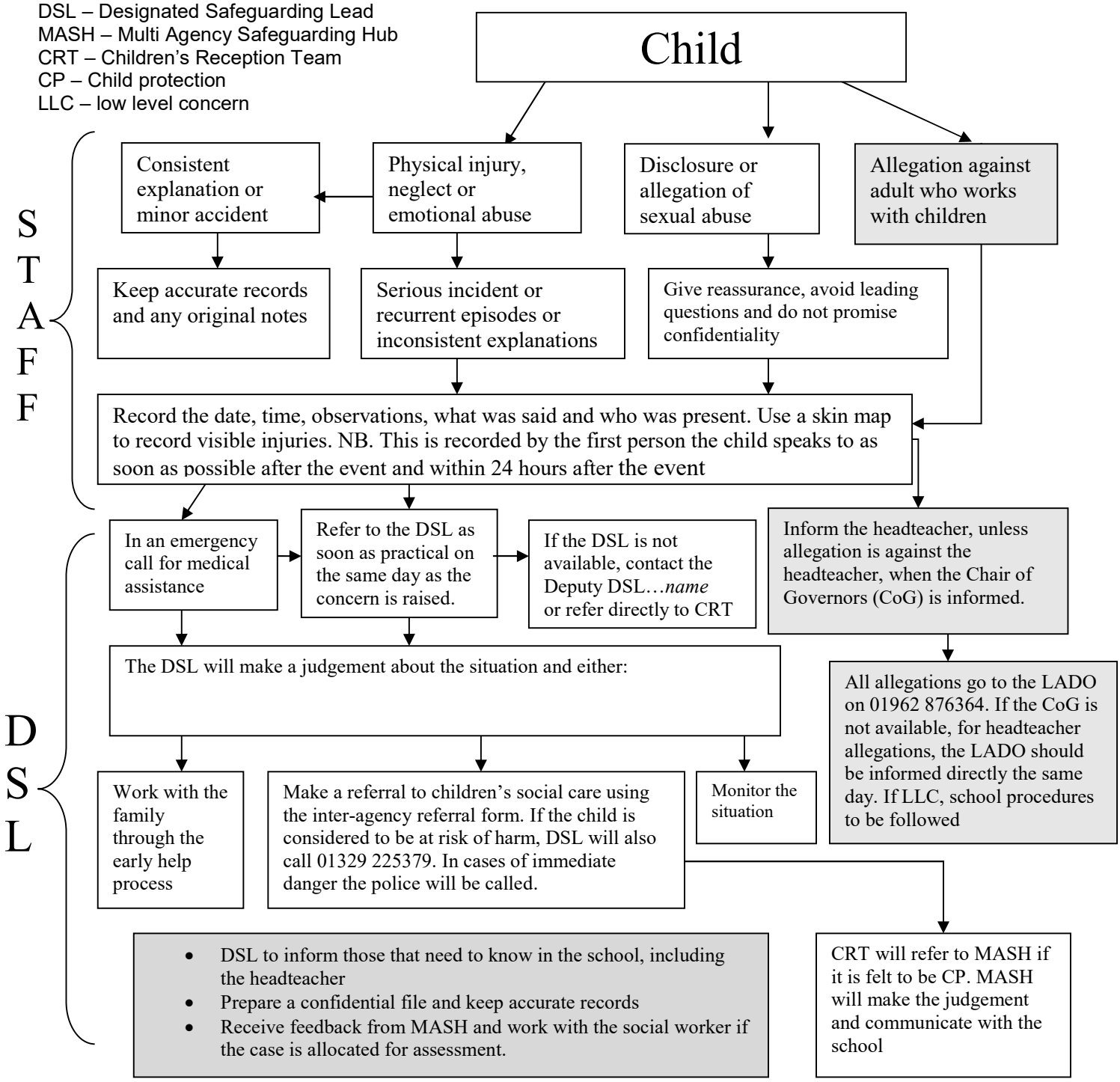
5. When a pupil needs *urgent* medical attention and there is suspicion of parental abuse causing the medical need, the DSL or their Deputy should take the child to the accident and emergency unit at the nearest hospital and inform Children's Social Care. Advice should be sought from Children's Social Care about informing the parents, remembering that parents should normally be informed that a child requires urgent hospital attention.

6. If there is not a risk of significant harm, the DSL will either actively monitor the situation or consider the Early Help process.

7. In cases of allegations against staff or low level concerns, the HSCP procedure or the school Low Level Concerns (LLC) procedure will be followed.

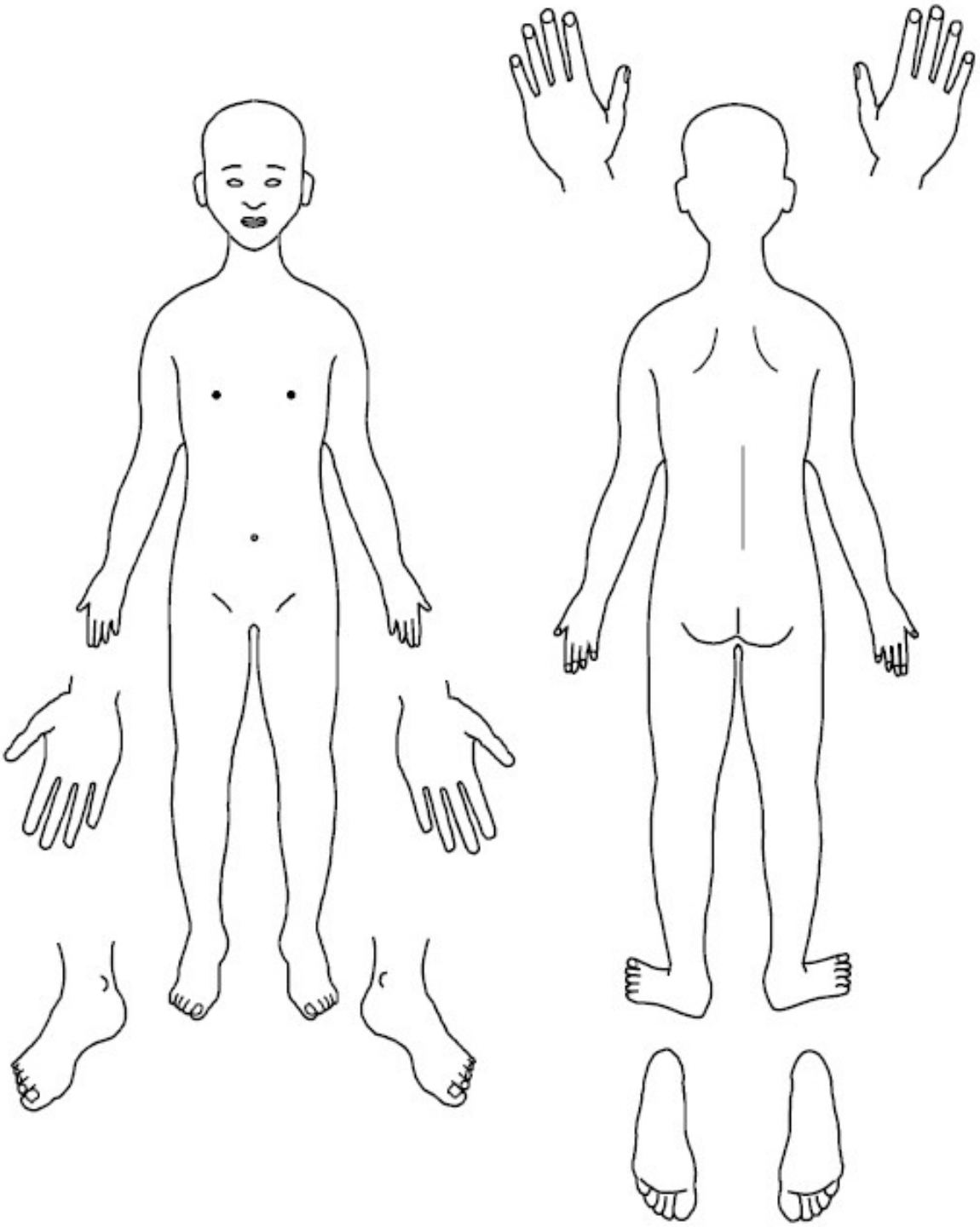
Annex 1 - Flowchart for child protection procedures

DSL – Designated Safeguarding Lead
MASH – Multi Agency Safeguarding Hub
CRT – Children's Reception Team
CP – Child protection
LLC – low level concern



* *In the cases of known FGM, the teacher who was made aware will also make contact with the police*

Annex 2 – Skin Map



Name of Child: _____

Date of birth: _____ Date of recording: _____

Name of completer: _____

Any additional information:

Annex 3 - Dealing with disclosures

All staff should:

A member of staff who is approached by a child should maintain a positive attitude and try to reassure them. They should not promise complete confidentiality and should explain that they may need to pass information to other professionals to help keep the child or other children safe. The degree of confidentiality should always be governed by the need to protect the child.

Additional consideration needs to be given to children with communication difficulties and for those whose preferred language is not English. It is important to communicate with them in a way that is appropriate to their age, understanding and preferred communication method.

All staff should know who the DSL is and who to approach if the DSL is unavailable. Ultimately, all staff have the right to make a referral to the police or social care directly and should do this if, for whatever reason, there are difficulties following the agreed protocol, e.g. they are the only adult on the school premises at the time and have concerns about sending a child home.

Guiding principles, the seven R's

Receive

- Listen to what is being said, without displaying shock or disbelief
- Accept what is said and take it seriously
- Make a note of what has been said as soon as practicable

Reassure

- Reassure the pupil, but only so far as is honest and reliable
- Don't make promises you may not be able to keep e.g. 'I'll stay with you' or 'everything will be alright now' or 'I'll keep this confidential'
- Do reassure e.g. you could say: 'I believe you', 'I am glad you came to me', 'I am sorry this has happened', 'We are going to do something together to get help'

Respond

- Respond to the pupil only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details
- Do not ask 'leading' questions i.e. 'did he touch your private parts?' or 'did she hurt you?' Such questions may invalidate your evidence (and the child's) in any later prosecution in court
- Do not ask the child why something has happened
- Do not criticise the alleged perpetrator; the pupil may care about him/her, and reconciliation may be possible
- Do not ask the pupil to repeat it all for another member of staff. Explain what you have to do next and to whom you need to talk. Reassure the pupil that it will be a senior member of staff in confidence.

Report

- Share concerns with the safeguarding team as soon as possible in person.
- If you are not able to contact your DSL or the Deputy, and the child is at risk of immediate harm, contact the Children's Services Social Care department directly using the phone numbers printed at the bottom of the HCSP thresholds chart available in SLT offices.
- If you are dissatisfied with the level of response you receive following your concerns, you should press for re-consideration.

Record

- If possible, make some very brief notes at the time, and write them up as soon as possible
- Keep your original notes on file
- Record the date, time, place, persons present and noticeable nonverbal behaviour, and the words used by the child. If the child uses sexual 'pet' words, record the actual words used, rather than translating them into 'proper' words
- Complete a body map to indicate the position of any noticeable bruising or marks
- Record facts and observable things, rather than your 'interpretations' or 'assumptions'.

Remember

- Support the child: listen, reassure, and be available
- Complete confidentiality is essential. Share your knowledge only with appropriate professional colleagues
- Try to get some support for yourself if you need it
- All staff should be aware that children may not feel ready or know how to tell somebody that they are being abuse, exploited or neglected and/or they may not recognise their experiences as harmful.

Review (led by DSL)

- Has the action taken provided good outcomes for the child?
- Did the procedure work?
- Were any deficiencies or weaknesses identified in the procedure? Have these been remedied?
- Is further training required?

What happens next?

It is important that concerns are followed up and it is everyone's responsibility to ensure that they are. The member of staff should be informed by the DSL what has happened after the report being made. If they do not receive this information, they should be proactive in seeking it out.

If a staff member believes that their concerns have not been dealt with effectively or that the child remains at risk, they should initially ask the DSL to reconsider ensuring that the risks are understood. If this does not result in a satisfactory outcome, or the DSL rationale appears to miss the risk to the child, then the Whistleblowing procedures of the school should be followed. If the DSL is unhappy with the response from Children Social Care, they should consider following the HSCP escalation protocol.

Receiving a disclosure can be upsetting for the member of staff and schools should have a procedure for supporting them after the disclosure. This might include reassurance that they have followed the procedure correctly and that their swift actions will enable the allegations to be handled appropriately. For some staff, use of an employee-based counselling service may be appropriate.

Annex 4 - Allegations against adults who work with children

Working Together to Safeguard Children (2018) states that organisations should have clear policies for dealing with allegations against people who work with children. Those policies should make a clear distinction between an allegation, a complaint or a concern about the quality of care or practice.

Allegations as defined by KCSiE should be reported to the LADO. Complaints or concerns can be managed independently by the school or college under internal procedures.

Complaints could include: -

- Breaches of the code of Conduct
- Failure to follow policy, procedure or guidance
- Any breach of data protection or confidentiality
- Poor behaviour management
- Inappropriate use of social media
- Misadministration of medication

Concerns could include: -

- Inappropriate use of language, shouting or swearing
- Discussing personal or sexual relationships with, or in the presence, of pupils
- Making (or encouraging others to make) unprofessional comments which scapegoat, demean or humiliate children, or might be interpreted as such.

Lower Level Concerns LLC's , which do not reach the allegations harm threshold (or complaints criteria) should be dealt with under a school LLC procedure (Please refer to Allegations against Staff).

Procedure for Allegations that meet the harm threshold.

This procedure should be used in all cases when it is alleged a member of staff, supply staff, volunteer, Governor, or another adult who works with children has either:

- **behaved in a way that has harmed a child, or may have harmed a child; or**
- **possibly committed a criminal offence against or related to a child; or**
- **behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children; or**
- **behaved or may have behaved in a way that indicates they may not be suitable to work with children.**

When considering allegations of suitability, (the fourth criteria above) the LADOs would consider the following situations:

- Parents of children who are placed on a CIN plan or are receiving Early Help;
- Arrests for offences against adults;
- Presentation to other professionals around mental health, domestic abuse and/or substance misuse;
- Extreme political or religious viewpoints which could be considered Hate Crime;
- Concerns about behaviour in their private lives which may impact on children

In any of these situations the LADO criteria for intervention will be assessed against the likelihood and impact of transferable risk to children.

In line with our referral process, when dealing with allegations or concerns against an adult, staff must:

- Staff will report any concerns about the conduct of any member of staff, supply staff or volunteer to the headteacher as soon as possible.

- If an allegation is made against the headteacher, the concerns need to be raised with the Chair of Governors as soon as possible. If the Chair of Governors is not available, then the LADO should be contacted directly.

- There may be situations when the headteacher or Chair of Governors will want to involve the police immediately, if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

- Once an allegation has been received by the headteacher or Chair of Governors, they will contact the LADO on 01962 876364 or child.protection@hants.gov.uk as soon as possible and before carrying out any investigation into the allegation.

- Inform the parents of the allegation unless there is a good reason not to

In liaison with the LADO, the school will determine how to proceed and if necessary, the LADO will refer the matter to Children's Social Care and/or the police.

When receiving information from outside agencies about school staff, the LADO will assess the potential for transferable risk, and make a disclosure to the school where there is the likelihood of transferable risk to children and there is a pressing need.

If the matter is investigated internally, the LADO will advise the school to seek guidance from their personnel/HR provider in following procedures set out in chapter 4 of 'Keeping Children Safe in Education' (2022) and the HSCP procedures.

Supply Staff

While supply staff are not employees of the school, it is still required that the school report the allegation to the LADO.

If the matter requires an internal investigation, this will be carried out by the school in liaison with an HR rep (acting as the employer) from the supply agency.

Lower Level Concerns (LLCs)

The LLC procedure (see Allegations against Staff) is part of the whole school approach to safeguarding. The purpose is to encourage an open and transparent culture, which enables the school identify concerning, problematic or inappropriate behaviour at an early stage. It should also empower staff to share LLCs with the DSL. LLCs will be managed independently by the school under internal procedures.

Examples of LLCs include, but is not limited to:-_

- being over friendly with children;
- having favourites;
- taking photographs of children on their mobile phone;
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or,
- using inappropriate sexualised, intimidating or offensive language.

We will:-

- Ensure that staff are clear about what constitutes appropriate behaviour, and are confident in distinguishing expected and appropriate behaviour from concerning, problematic or inappropriate behaviour, in themselves and others;
- Empower staff to share any low-level safeguarding concerns with the DSL
- Address unprofessional behaviour and support the individual to correct this at an early stage.
- Provide a responsive, sensitive and proportionate handling of such concerns when they are raised.
- Help identify any weakness in the school or colleges safeguarding system.

In line with the LLC procedure:-

- All LLCs will be shared responsibly with the DSL, recorded in writing and dealt with in an appropriate and timely manner.
- All LLCs will be reviewed, so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.
- If LLCs are found to be escalating and are reaching the harm threshold, A referral will be made to the LADO.

If there is any doubt about the level at which behaviour needs to be addressed, LADO advice will be taken.

Annex 5 - Sexual violence and sexual harassment between children in schools and colleges – Child on Child abuse

Policy & procedure

Context

This policy is about how staff should respond to all reports and concerns of child-on-child sexual violence and sexual harassment, including those that have happened outside of school premises, and or online. All staff are advised to maintain an attitude of "It could happen here"

Schools not recognising, acknowledging or understanding the scale of harassment and abuse, and /or downplaying some behaviours relating to abuse can lead to a culture of unacceptable behaviour, an unsafe environment and in a worst case scenario a culture that normalises abuse leading to children accepting it as normal and not coming forward to report it.

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

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This can adversely affect their educational attainment as well as their emotional well-being. Sexual violence and sexual harassment exist on a continuum and may overlap; they can occur online and offline (both physically and verbally) and are never acceptable. It is important that all victims are taken seriously and offered appropriate support. It is also important to recognise that some perpetrators may themselves also be victims.

Reports of sexual violence and sexual harassment are extremely complex to manage. It is essential that victims are protected, offered appropriate support and every effort is made to ensure their education is not disrupted. It is also important that other children and young people including school staff are supported and protected as appropriate.

Policy

We believe that all children have a right to attend school and learn in a safe environment. Children should be free from harm by adults in the school and by other children.

We recognise that children are capable of abusing their peers and this will be dealt with under our child protection policy and in line with KCSiE (2022)

This policy is underpinned by the principle that there is a zero-tolerance approach to sexual violence and sexual harassment. We are clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up.

We will minimise the risk of child on child abuse by: -

Prevention:

- Taking a whole school approach to safeguarding and child protection.
- Providing training to staff.
- Providing a clear set of values and standards, underpinned by the school's behaviour policy and pastoral support system, and by a planned programme of evidence-based content delivered through the curriculum.
- Engaging with specialist support and interventions.

Responding to reports of sexual violence and sexual harassment:

- Children making a report of sexual violence or sexual harassment will be taken seriously, kept safe and be supported.
- Understanding that our initial response to a report from a child is incredibly important and can encourage or undermine the confidence of victims of sexual violence and harassment to report or to come forward in the future.
- If the report includes an online element, staff will be mindful of the Searching, Screening and Confiscation: advice for schools (DfE 2018) guidance.
- Staff taking the report will inform the DSL or their Deputy as soon as practicably possible but at least within 24 hours.
- Staff taking a report will never promise confidentiality.
- Parents or carers will normally be informed (unless this would put the child at greater risk).
- If a child is at risk of harm, is in immediate danger, or has been harmed, a referral will be made to Children's Social Care (01329 225379).

Risk Assessment:

Following a report, the DSL will make an immediate risk and needs assessment on a case-by-case basis.

The risk assessment will consider:

- The victim, especially their protection and support.
- The alleged perpetrator, their support needs, and any disciplinary action.
- All other children at the school.
- The victim and the alleged perpetrator sharing classes and space at school.

The risk assessment will be recorded and kept under review.
Where there has been other professional intervention and/or other specialist risk assessments. These professional assessments will be used to inform the school's approach to supporting and protecting pupils.

Action: The DSL will consider: -

- The wishes of the victim.
- The nature of the incident including whether a crime has been committed and the harm caused.
- Ages of the children/young people involved.
- Developmental stages of the children/young people.
- Any power imbalance between the children/young people.
- Any previous incidents.
- On-going risks.
- Other related issues or wider context.

Options: The DSL will manage the report with the following options: -

- Manage internally.
- Refer to Early Help.
- Refer to Children's Social Care.
- Report to the police (generally in parallel with a referral to Social Care)**.**

Ongoing Response:

- **All** concerns, discussions and decisions made, and the reasons for those decisions, should be recorded in writing. Records should be reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified and addressed.
- The DSL will keep the risk assessment under review.
- The DSL will manage each report on a case-by-case basis and will keep the risk assessment under review.
- Where there is a criminal investigation into a rape, assault by penetration or sexual assault, the alleged perpetrator should be removed from any classes they share with the victim during that investigation.
- The DSL will consider how best to keep the victim and perpetrator apart on school premises and transport where appropriate.
- Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, the school will take suitable action. In all but the most exceptional of circumstances, the rape or assault is likely to constitute a serious breach of discipline and lead to the view, that allowing the perpetrator to remain in the same school or college would seriously harm the education or welfare of the victim (and potentially other pupils and students).
- Where a criminal investigation into sexual assault leads to a conviction or caution, the school or college will, if it has not already, consider any suitable sanctions in light of their behaviour policy, including consideration of permanent exclusion. Where the perpetrator is going to remain at the school or college, the principle of keeping the victim and perpetrator in separate classes where possible would be maintained and continued. Consideration would be given to the most appropriate way to manage potential contact on

school and college premises and transport. The nature of the conviction or caution and wishes of the victim will be especially important in determining how to proceed in such cases.

- The victim, alleged perpetrator and other witnesses (children and adults) will receive appropriate support and safeguards on a case-by-case basis.
- When ongoing support is required by the victim, the victim should be asked whether they would find it helpful to have a designated trusted adult to talk about their needs. The choice of any such adult should be made by the victims (as far as reasonably possible) and this choice should be supported.
- The school will take any disciplinary action against the alleged perpetrator in line with behaviour and discipline in the school.
- The school recognises that taking disciplinary action and providing appropriate support are not mutually exclusive actions and will occur at the same time if necessary.

Unsubstantiated, unfounded, false, or malicious reports

- If a report is determined to be unsubstantiated, unfounded, false or malicious, the designated safeguarding lead should consider whether the child and/or the person who has made the allegation is in need of help or may have been abused by someone else and whether this is a cry for help. In such circumstances, a referral to children's social care may be appropriate.
- If a report is shown to be deliberately invented or malicious, the school, should consider whether any disciplinary action is appropriate against the individual who made it as per their own behaviour policy.

Physical Abuse

While a clear focus of child on child abuse is linked to sexual abuse and harassment, physical assaults and initiation violence and rituals from pupils to pupils can also be abusive.

These are equally not tolerated and, if it is believed that a crime has been committed, will be reported to the police.

The principles from the anti-bullying policy will be applied in these cases, with recognition that any police investigation will need to take priority.

References: –
KCSiE (DfE 2022)
Sexual Violence and Sexual Harassment between Children in Schools and Colleges (DfE 2022)

Annex 6 - Brook sexual behaviours traffic light tool

Behaviours: age 0 to 5

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability. They are reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours

- holding or playing with own genitals
- attempting to touch or curiosity about other children's genitals
- attempting to touch or curiosity about breasts, bottoms or genitals of adults
- games e.g. mummies and daddies,
- doctors and nurses
- enjoying nakedness
- interest in body parts and what they do
- curiosity about the differences between boys and girls

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours

- preoccupation with adult sexual
- behaviour
- pulling other children's pants down/skirts up/trousers down against their will
- talking about sex using adult slang
- preoccupation with touching the genitals of other people
- following others into toilets or changing rooms to look at them or touch them
- talking about sexual activities seen on TV/online

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours

- persistently touching the genitals of other children
- persistent attempts to touch the genitals of adults
- simulation of sexual activity in play
- sexual behaviour between young children involving penetration with objects
- forcing other children to engage in sexual play

This is intended to be used as a guide only. Please refer to the guidance tool at https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool for further information

Print date: 01/10/2015 - Brook has taken every care to ensure that the information contained in this publication is accurate and up-to-date at the time of being published. As information and knowledge is constantly changing, readers are strongly advised to use this information for up to one month from print date. Brook accepts no responsibility for difficulties that may arise as a result of an individual acting on the advice and recommendations it contains.
Brook sexual behaviours traffic light tool adapted from Family Planning Queensland. (2012). Traffic Lights guide to sexual behaviours. Brisbane: Family Planning Queensland, Australia.

Behaviours: age 5 to 9 and 9 to 13

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours 5-9

- feeling and touching own genitals
- curiosity about other children's genitals
- curiosity about sex and relationships, e.g. differences between boys and girls, how sex happens, where babies come from, same-sex relationships
- sense of privacy about bodies
- telling stories or asking questions using swear and slang words for parts of the body

Green behaviours 9-13

- solitary masturbation
- use of sexual language including swear and slang words
- having girl/boyfriends who are of the same, opposite or any gender
- interest in popular culture, e.g. fashion, music, media, online games, chatting online
- need for privacy
- consensual kissing, hugging, holding hands with peers

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours 5-9

- questions about sexual activity which persist or are repeated frequently, despite an answer having been given
- sexual bullying face to face or through texts or online messaging
- engaging in mutual masturbation
- persistent sexual images and ideas in talk, play and art
- use of adult slang language to discuss sex

Amber behaviours 9-13

- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- verbal, physical or cyber/virtual sexual bullying involving sexual aggression
- LGBT (lesbian, gay, bisexual, transgender) targeted bullying
- exhibitionism, e.g. flashing or mooning
- giving out contact details online
- viewing pornographic material
- worrying about being pregnant or having STIs

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours 5-9

- frequent masturbation in front of others
- sexual behaviour engaging significantly younger or less able children
- forcing other children to take part in
- sexual activities
- simulation of oral or penetrative sex
- sourcing pornographic material online

Red behaviours 9-13

- exposing genitals or masturbating in public
- distributing naked or sexually provocative images of self or others
- sexually explicit talk with younger
- children
- sexual harassment
- arranging to meet with an online acquaintance in secret
- genital injury to self or others
- forcing other children of same age, younger or less able to take part in sexual activities
- sexual activity e.g. oral sex or intercourse
- presence of sexually transmitted infection (STI)
- evidence of pregnancy

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Brook sexual behaviours traffic light tool adapted from Family Planning Queensland. (2012). Traffic Lights guide to sexual behaviours. Brisbane: Family Planning Queensland, Australia.

Behaviours: age 13 to 17

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours

- solitary masturbation
- sexually explicit conversations with peers
- obscenities and jokes within the current cultural norm
- interest in erotica/pornography
- use of internet/e-media to chat online
- having sexual or non-sexual relationships
- sexual activity including hugging, kissing, holding hands
- consenting oral and/or penetrative sex with others of the same or opposite gender who are of similar age and developmental ability
- choosing not to be sexually active

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours

- accessing exploitative or violent pornography
- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress,
- withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- concern about body image
- taking and sending naked or sexually provocative images of self or others
- single occurrence of peeping, exposing, mooning or obscene gestures
- giving out contact details online
- joining adult- only social networking sites and giving false personal information
- arranging a face to face meeting with an online contact alone

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours

- exposing genitals or masturbating in public
- preoccupation with sex, which interferes with daily function
- sexual degradation/humiliation of self or others
- attempting/forcing others to expose genitals
- sexually aggressive/exploitative behaviour
- sexually explicit talk with younger children
- sexual harassment
- non-consensual sexual activity
- use of/acceptance of power and control in sexual relationships
- genital injury to self or others
- sexual contact with others where there
- is a big difference in age or ability
- sexual activity with someone in authority and in a position of trust
- sexual activity with family members
- involvement in sexual exploitation and/or trafficking
- sexual contact with animals
- receipt of gifts or money in exchange for sex

This is intended to be used as a guide only. Please refer to the guidance tool at https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool for further information

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Annex 7 - Sexual Violence and Sexual Harassment between Children Risk and Needs Assessment Template

(This template is offered as a framework and should be seen as a starting point for development to fit your school's individual context. Each reported incident should be managed on a case-by-case basis)

EXAMPLE assessment

Brook Traffic Light Assessment	What are the risks? Who might be harmed & how?	Action	Action by Who?	Action by when?	Action status or Date Completed & Outcome including further actions
Red Behaviour: Forcing other children to engage in sexual activity. Subject is a male child. A female child has been taken into the boys' toilets. Subject has exposed himself, grabbed the girl by the wrist and forced her to touch his genitals. Subject is under the age of criminal responsibilty. Subject has no known CP history There have been no previous concerns about the Subject.	All pupils in the class may be forced or coerced into sexual activity. Early indication is that female pupils may be more at risk.	Key members of staff with supervisory responsibility have been briefed by the DSL and will increase monitoring at break times. Subject will be escorted to the toilet.	DSL Staff AB, CD & EF ELSA	From Immediate effect	✓01/02/2020. Increased monitoring & toilet supervision in place
	Other children within the community	Subject's parents Informed re: Incident & behaviour and the risk plan put in place. Made aware of referral to CSD. Agreement for • Referral to CAMHS • Increased monitoring & toilet. supervisor • Keep safe work.	DSL	01/02/20	✓01/02/20 Contract of agreement has been signed by the parents to include increased. monitoring, toilet supervision and keep safe work.
		Referral to Children's social care	DSL	01/02/20	✓01/02/20 Children & Family Assessment to be completed by CAST
		Victims parents informed, and child's views gained. Child offered keep safe work.	DSL	01/02/20	✓Parents are satisfied with the school's actions & safeguarding measures so far. Child & family want child to remain in the same class. Keep safe work accepted.
		Referral to CAMHS	DSL	02/02/20	Referral made. ACTION – follow up with CAMHS as to the status of referral after 10 working days if not heard before
		Safeguarding measures to be reviewed.	DSL & Key Staff members	09/02/20	No additional concerns raised. ACTION - Review plan again in one weeks time
		Keep safe work to be completed. Combination of whole class and	ELSA	23/02/2020	OUTSTANDING Work planned and due to be

Brook Traffic Light Assessment	What are the risks? Who might be harmed & how?	Action	Action by Who?	Action by when?	Action status or Date Completed & Outcome including further actions
		targeted work to be carried out			delivered w/c 16/02
	Community Impact Assessment LOW The parents of the Subject and the victim are satisfied that the school is taking all necessary safeguarding measures to manage the risk. There are no indications at this stage for community unrest. This will be kept under review.	DSL and SLT to be aware of any community noises about the incidents.	DSL and SLT	05/04/2020	
	Media Media and communication team to be informed if community impact assessment risk increases	SLT to contact HCC communication team if required. Monitor during term	SLT	05/04/2020	
	Information Sharing. All information sharing has been completed in line with the school's CP and GDPR policies.	Relevant information to be recorded on each child's CP file as required.			
	Social Media There are no currents risks from community use of social media. This will be kept under review.	Monitoring of social media during the term	Key staff	05/04/2020	

Brook Traffic Light Assessment	What are the risks? Who might be harmed & how?	Action	Action by Who?	Action by when?	Action status or Date Completed & Outcome including further actions
Red Behaviour:					
Red Behaviour:					
Amber Behaviour:					

Annex 8 - Online Safety

As a school it is essential that we safeguard children from potentially harmful and inappropriate online material.

A comprehensive approach to online safety is outlined in our E-Safety policy and empowers staff to protect and educate pupils, students, and colleagues in their use of technology.

The breadth of issues classified within online safety is considerable, but can be categorised into four areas of risk:

- **content**: being exposed to illegal, inappropriate or harmful content, for example: pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation and extremism.

- **contact**: being subjected to harmful online interaction with other users; for example: peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes'.

- **conduct**: personal online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images (e.g consensual and non-consensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying; and

- **commerce** - risks such as online gambling, inappropriate advertising, phishing and or financial scams. If we feel pupils, students or staff are at risk, we will report it to the Anti-Phishing Working Group (https://apwg.org/).

We ensure that online safety is a running and interrelated theme when devising and implementing policies and procedures.

We will consider how online safety is reflected as required in all relevant policies and embedded across all areas of the curriculum, included in teacher training and within the role and responsibilities of the designated safeguarding lead as well as discussions with parents.

Annex 9 - Whistleblowing in a safeguarding context

While the school has a separate whistleblowing policy, this is a summary sheet that outlines the process when there is a concern that safeguarding issues have not been reported or followed correctly.

This does not replace the whistleblowing policy and should be read in conjunction with the Trust whistleblowing policy available via our website.

Whistleblowing is a term that is used when staff want to report a concern within their organisation that involves their manager or a person senior to them in the organisation which may prevent them from following the normal reporting systems.

There are a limited number of areas that can be called Whistleblowing, and the policy protects staff from being punished for raising concerns.

Within ***The Eaglewood School***, the headteacher ***Mr Nigel Himmel*** is the senior manager and responsible for all staff. If you are concerned that any member of staff within the school is not following safeguarding processes or behaving in a way that is placing children at risk, you should in the first place make the headteacher aware.

If your concern is about the Head teacher then you would raise this with the Chair of Governors.

Chair of Governors
David Richards - Head of Engineering
Faculty of Engineering and Physical Sciences
University of Southampton
t: 02380 592848
m: 079500 33365

If you would prefer to raise your concerns outside the school environment you are able to contact the NSPCC whistleblowing line on 0800 028 0285 or email help@nspcc.org.uk for national organisations or make contact with Hampshire County Council.

If you believe that a member of the school staff is harming a child (an allegation) and this has been reported to the headteacher and no action has been taken, or the member of staff you have concerns about is the headteacher, then you are able to contact the Local Authority Designated Officers (LADOs) on 01962 876364 or child.protection@hants.gov.uk

If you believe that a child is being abused by individuals outside the school, you should make a referral to Children's Social Care by calling 0300 555 1384 (office hours) or 0300 555 1373 (outside of office hours)

Annex 10 - Briefing sheet for temporary and supply staff

For supply staff and those on short contracts in *Eaglewood* school

While working in Eaglewood school, you have a duty of care towards the children/pupils/students here. This means that at all times you should act in a way that is consistent with their safety and welfare.
In addition, if at any time you have a concern about a child or young person, particularly if you think they may be at risk of abuse or neglect, it is your responsibility to share that concern with the school designated safeguarding lead (**DSL**), who is Nigel Himmel Head Teacher or **DDSL's** John Wood, Taryn Maclarty, Lara Young, Eleanor Fletcher and Claire Whitlock and can be found in school through reception.

This is not an exhaustive list but you may have become concerned as a result of:

- Observing a physical injury, which you think may have been non-accidental.
- Observing something in the appearance of a child or young person which suggests they are not being sufficiently well cared for.
- Observing behaviour that leads you to be concerned about a child or young person.
- a child or young person telling you that they have been subjected to some form of abuse.
- Observing adult behaviour that leads you to be concerned about their suitability to work with children or young people.

In any of the circumstances listed here, you must write down what you saw or heard, date and sign your account, and give it to the DSL as soon as possible and no longer than 24 hours later. This may be the beginning of a legal process – it is important to understand that legal action against a perpetrator can be seriously damaged by any suggestion that the child has been led in any way.

If a child talks to you about abuse, you should follow these guidelines:

- Rather than directly questioning the child, just listen and be supportive.
- Never stop a child who is freely recalling significant events, but don't push the child to tell you more than they wish.
- Make it clear that you may need to pass on information to staff in other agencies who may be able to help – do not promise confidentiality. You are obliged to share any information relating to abuse or neglect.
- Write an account of the conversation immediately, as close to verbatim as possible. Put the date and timings on it, and mention anyone else who was present. Then sign it, and give your record to the DSL who should follow due process, including contacting Children's Social Care if appropriate.

The school has a policy on safeguarding children and young people which you can find, together with the local procedures to be followed by all staff, in the staff room attached to the Safeguarding display or on the Website.

If your concern involves the DSL or a member of the senior staff, contact the LADO on 01962 847364 or the NSPCC whistleblowing line on 0800 028 0285

Remember, if you have a concern, report it.

Annex 11 - What is child abuse?

The following definitions are taken from W*orking Together to Safeguard Children* HM Government (2018). In addition to these definitions, it should be understood that children can also be abused by being sexually exploited, through honour-based violence, forced marriage or female genital mutilation. To support the local context, all staff have access to the Hampshire Safeguarding Children Partnership (HSCP) threshold chart.

What is abuse and neglect?

Abuse and neglect are forms 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 a stranger. They may be abused by an adult or adults, or another child or children.

Physical abuse

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

Emotional abuse

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

Sexual abuse

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect

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

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

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

The HSCP neglect strategy is used to provide a more detailed summary of neglect and the local thresholds for referrals.

Indicators of abuse

Neglect

The nature of neglect

Neglect is a lack of parental care but poverty and lack of information or adequate services can be contributory factors.

Far more children are registered to the category of neglect on child protection plans than to the other categories. As with abuse, the number of children experiencing neglect is likely to be much higher than the numbers on the plans.

Neglect can include parents or carers failing to:

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

NSPCC research has highlighted the following examples of the neglect of children under 12:

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

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

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

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

Indicators of neglect

The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm. It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don't keep it to yourself. The HSCP neglect toolkit provides a more detailed list of indicators of neglect and is available to all staff

Physical indicators of neglect

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

Behavioural indicators of neglect

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

Emotional abuse

The nature of emotional abuse

Most harm is produced in *low warmth, high criticism* homes, not from single incidents.
Emotional abuse is difficult to define, identify/recognise and/or prove.
Emotional abuse is chronic and cumulative and has a long-term impact.

All kinds of abuse and neglect have emotional effects although emotional abuse can occur by itself.
Children can be harmed by witnessing someone harming another person – as in domestic violence.

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

Indicators of emotional abuse

Developmental issues

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

Behaviour

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

Social issues

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

Emotional responses

- Extreme fear of new situations

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

Physical abuse

The nature of physical abuse

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

A body map (Annex 2*)* can assist in the clear recording and reporting of physical abuse. The body map should only be used to record observed injuries and no child should be asked to remove clothing by a member of staff of the school.

Indicators of physical abuse / factors that should increase concern

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

In the social context of the school, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:

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

- the injury is accompanied by allegations of abuse or assault

You should be concerned if the child or young person:

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

Sexual abuse

The nature of sexual abuse

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

Sexual exploitation is seen as a separate category of sexual abuse. Indicators of CSE can be found in the schools safeguarding policy.

Characteristics of child sexual abuse:

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

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

Indicators of sexual abuse

Physical observations

- Damage to genitalia, anus or mouth
- Sexually transmitted diseases
- Unexpected pregnancy, especially in very young girls
- Soreness in genital area, anus or mouth and other medical problems such as chronic itching
- Unexplained recurrent urinary tract infections and discharges or abdominal pain

Behavioural observations

- Sexual knowledge inappropriate for age
- Sexualised behaviour or affection inappropriate for age

- Sexually provocative behaviour/promiscuity
- Hinting at sexual activity Inexplicable decline in school performance
- Depression or other sudden apparent changes in personality as becoming insecure or clinging
- Lack of concentration, restlessness, aimlessness
- Socially isolated or withdrawn
- Overly-compliant behaviour
- Acting out, aggressive behaviour
- Poor trust or fear concerning significant adults
- Regressive behaviour,
- Onset of wetting, by day or night; nightmares
- Onset of insecure, clinging behaviour
- Arriving early at school, leaving late, running away from home
- Suicide attempts, self-mutilation, self-disgust
- Suddenly drawing sexually explicit pictures
- Eating disorders or sudden loss of appetite or compulsive eating
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Become worried about clothing being removed
- Trying to be 'ultra-good' or perfect; overreacting to criticism.

Annex 12 – Concern Form Child Protection

Confidential

Concern Form Child Protection

At your first opportunity please pass to Nigel Himmel or John Wood

Use this pro forma to report any:

- Disclosures
- Suspected, non-accidental injuries
- Verbal discussions that give cause for concern
- Evidence of the use of drugs and/or alcohol
- Any other cause for concern (e.g. marks on body, concerning information regarding parents or other adult associates)

Name of student: .....**Time:** ..... **Date:** .....

Name of person raising concern: .....

Position: .....

Details of concern:

Signed: ..... **Print Name:**.....

Child Protection Officer or Deputy to complete below:

File/Contact parents/Contact Children's Services/Other

Action:
Signed…… Dated…….

Has feedback been given to initial member of staff Yes/No

DSL signature:	Date:	Time:
Further information:		

Proposed Action:	By whom	When

Category identified: CP / CIN / MH / e-safety

Annex 13 - Useful contacts

Key Personnel	Name (s)	Telephone No.
DSL	Nigel Himmel	01425 460994 N.himmel@eaglewoodschool.co.uk
Deputy DSL(s)	Taryn Maclarty John Wood Lara Young Claire Whitlock Eleanor Fletcher	01425 460994 T.maclarty@eaglewoodschool.co.uk J.wood@eaglewoodschool.co.uk l.young@eaglewoodschool.co.uk c.whitlock@eaglewoodschool.co.uk e.fletcher@eaglewoodschool.co.uk
School's named Prevent lead	Nigel Himmel	01425 460994 N.himmel@eaglewoodschool.co.uk
Schools Mental Health Lead	Lara Young	01425 460994 l.young@eaglewoodschool.co.uk
Nominated Safeguarding Governor	Paul Brown	Bransgore School 01425 672272
Chair of Governors	David Richards	David Richards - Head of Engineering Faculty of Engineering and Physical Sciences University of Southampton t: 02380 592848 m: 079500 33365
Children's Reception Team		01329 225379
Out of hours social care		0300 555 1373
Police	PC Samantha Chapman	101 or in emergencies 999

Safeguarding advisors / Local Authority Designated Officers (LADOs)	Barbara Piddington Fiona Armfield Shona McMinn (from 17/10/22)	HCC Safeguarding Unit 01962 876364 Child.protection@hants.gov.uk
School nurse	Sarah Gray	01425 460994 s.gray@eaglewoodschool.co.uk
CAMHs	Referral number	02380 743000
Early Help Hub Referral	Duty Worker	02380 627735