Coventry Alternative Provision (CAP)

Child Protection and Safeguarding Policy 2023/24

This policy has been provided by Coventry Alternative Provision as a *minimum requirement* and must be reflected in practice.

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Child Protection and Safeguarding Policy

CAP and CELC

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1 Definitions

1.1 'Safeguarding' is defined in Keeping Children Safe in Education (2023) as;

- protecting children from maltreatment;
- preventing the impairment of children's mental and physical health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; <u>and</u>
- taking action to enable all children to have the best outcomes.

1.2 'Child Protection' is the intervention that occurs when children have been significantly harmed or are at risk of significant harm.

1.3 'Child' refers to everyone under the age of 18.

1.4 'Parent' refers to birth parents and other adults in a parenting role for example adoptive parents, stepparents and foster carers.

1.5 'Staff' or 'members of staff' refers to all teaching, non-teaching, support, supply, peripatetic, contract staff, governors, volunteers and trustees working in or on behalf of **the provider**.

1.6 Within this policy, we use the term 'victim', although it is recognised that not everyone considers themselves to be a victim or would want to be described in this way. We also recognise the importance of not using the terminology of 'perpetrator' in relation to children in cases where the behaviour can be harmful to both parties. The appropriate use of terminology will be determined on a case-by-case basis.

2 Introduction

2.1 We recognise that safeguarding, child protection, and promoting the welfare of children is an essential part of our duty of care to all students. As such, all staff have a responsibility to provide a safe environment in which children can learn. We understand that safeguarding, child protection and promoting the welfare of all children is everyone's responsibility and that everyone has a role to play in protecting children. We recognise that our service is part of a wider safeguarding system for children and work closely with other agencies to promote the welfare of children. We maintain an attitude of 'it could happen here' and will consider what is in the best interests of each child in line and upholding the Human Rights Act 1998 and Equality Act 2010.

2.2 The purpose of this policy is to;

- Promote safeguarding and child protection and to demonstrate CAPs commitment to keeping children safe;
- Provide all members of staff with the information required to meet their safeguarding duty and protect children from harm;
- Provide stakeholders with clear information relating to CAPs safeguarding and child protection procedures;
- Ensure that staff understand, can recognise and can respond to the indicators of abuse, exploitation or neglect;
- Ensure that all staff are aware of their mandatory reporting duty in relation to Section 5B of the Female Genital Mutilation Act 2003; and

• Ensure that children are protected from maltreatment or harm.

2.3 CAP is committed to the following principles;

- All children have the right to be protected from harm.
- Children should feel safe and secure and cannot learn unless they do so.
- All staff are responsible for keeping children safe and have a responsibility to act if they think a child is at risk of harm.
- All staff take on a responsibility to promote children's welfare.
- Providing support to families and/or children as soon as a problem emerges is essential to improving outcomes for children and families.

2.4 Safeguarding aims.

2.4.1 The safeguarding aims of CAP, in line with Keeping Children Safe in Education (September 2023) are to;

- work to identify children who are suffering or likely to suffer abuse, exploitation or neglect and act to protect them;
- work with relevant services and agencies to ensure that children are protected from harm;
- provide a learning environment for children which is safe and secure;
- teach children how to keep themselves safe and provide structures for them to raise concerns if they are worried or at risk of harm;
- support children's mental health and wellbeing;
- ensure that we adhere to safer recruitment guidance and legislation, deal promptly with allegations of abuse against staff and take bullying and harassment seriously;
- train staff effectively in all safeguarding issues (including online safety) and in their responsibilities for identifying and protecting children that are or may be at risk of harm;
- have a designated safeguarding lead and designated deputies, who will provide support to staff, students, and families;
- recognise that all children may be vulnerable to abuse, but be aware that some children have increased vulnerabilities due to special educational needs or disabilities or particular protected characteristics (LGBTQ+, etc);
- maintain a robust recording system for any safeguarding or child protection information;
 - CPD records will be kept up to date with any training received.
- ensure that everyone delivering CAP understands the safeguarding procedures; and to
- regularly review policies and procedures to ensure that children are protected to the best of our ability.

2.5 This policy adheres to the following documents;

- Keeping Children Safe in Education (2023)
- Working Together to Safeguard Children 2018 (updated 2022)
- <u>Guidance for Safer Working Practice for those working with children and young people in</u> education settings (May 2019)
- <u>Guidance for Safer Working Practice for those working with children and young people in</u> education settings addendum (April 2020)
- What to do if you are worried a child is being abused: Advice for practitioners (2015)

2.6 We continue to work closely with the Local Authority <u>CAP</u> and the Coventry Safeguarding Children Partnership to safeguard children across the city.

2.7 Please note that there are a number of other documents (statutory and non-statutory) that inform our policy and practice. A list of these can be found in Annex B of Keeping Children Safe in Education (September 2023).

2.8 This policy should be read in conjunction with the following policies;

These policies can all be found on the CAP Website.

(Insert list of other relevant policies and hyperlink to them – e.g. behaviour policy, attendance policy, anti-bullying, anti-radicalisation, online safety – list not exhaustive). Links to these policies can be found in Appendix A.

2.9 Scope

2.9.1 This policy applies to the CAP team, all teaching, non-teaching, support, supply, peripatetic, contract staff, governors, volunteers and trustees or any other staff roles working in or on behalf of *the Provider*. All references in this document to 'staff' or 'members of staff' should be interpreted as relating to the aforementioned unless otherwise stated.

2.9. Rather than duplicating content from Keeping Children Safe in Education (September 2023) in this policy, it should be understood that CAP will always refer to this document as the benchmark for all safeguarding practice.

3 Roles and Responsibilities

If you have leadership structures additional to the below (e.g. in MATs) then please add in their roles relating to safeguarding in your organisation.

3.1 The Role of the Proprietors (amend as necessary)

3.1.1 The Provider Senior Leadership take strategic **leadership responsibility for** our safeguarding arrangements. The person responsible for this role is ______(input designated person) **As part of these overarching responsibilities the Head of safeguarding will;**

• Have a strategic leadership responsibility for *the provider* safeguarding arrangements.

- Aware of the obligations under the <u>Human Rights Act 1998</u>, the <u>Equality Act 2010</u> and the <u>Public Sector Equality Duty</u>
- Ensure that they comply with their duties under legislation;
- Ensure a whole *provider* approach to safeguarding, including the use of mobile and smart technology in provision;
- Ensure that policies, procedure and training are effective and comply with the law at all times and that they allow concerns to be responded to in a timely manner;
- Ensure the provider considers local authority, CAP and Coventry Safeguarding Children Partnership policies and supply information as requested by the safeguarding partners (the Local Authority, a clinical commissioning group for an area within the local authority and the chief office of police for a police area within the local authority);
- Ensure the provider have an effective child protection policy, that it is published on the provider website (enter link) or available by other means (state where) and review this annually;
- Ensure the provider have a staff behaviour policy or Code of Conduct which refers to low level concerns, allegations against staff and whistleblowing procedures alongside acceptable use of technologies;
- Ensure that all staff and governors undergo safeguarding and child protection training on induction (including online safety and filters and monitoring processes) and this is regularly updated;
- Ensure the provider contribute to multi-agency working in line with statutory guidance;
- Ensure that there are clear systems and processes in place for identifying when children may be experiencing mental health problems;
- Ensure that children are taught about safeguarding, including online safety as a whole centre approach and curriculum planning but recognising that a one size fits all approach may not be appropriate for all children. See section 12 of this policy for further information;
- Put in place and follow appropriate safeguarding responses for children who are absent from education;
- Appoint an appropriate member of staff from the senior leadership team to the role of Designated Safeguarding Lead;
- Understand the local criteria for action and local protocol for assessment;
- Recognise the importance of information sharing between practitioners and local agencies but take a risk-based approach to level of information that is provided to temporary staff, volunteers and contractors;
- Ensure that appropriate filters and monitoring systems are in place to keep children safe online and share information regarding online abuse and risks including where to access advice with parents and carers;
- Respond to allegations of abuse against the headteacher whilst ensuring there are procedures in place to manage safeguarding concerns or allegations against staff (including supply staff, volunteers and contractors); and
- Ensure safer working practice is embedded and effective within policies.

3.2. The Role of the Centre Manager

- 3.2.1 The centre manager will;
 - Ensure that this policy is reviewed annually at minimum and ratified by the governing body or SLT;
 - Ensure that this policy and associated procedures are adhered to by all staff;
 - Ensure that all staff are made aware of the named for safeguarding and the Designated Safeguarding Lead;
 - Ensure that the role of 'Designated Safeguarding Lead' is explicit in the role-holder's job description including leading on filters and monitoring processes;
 - Decide whether to have one or more deputy safeguarding leads and ensure they are trained to the same standard as the Designated Safeguarding Lead;
 - Organise appropriate cover for the role of Designated Safeguarding Lead for any out of hour/out of term activities;
 - Appoint a 'Designated Tutor for Looked-After and Previously Looked-After Children' to promote the educational achievement of children looked after;
 - Appoint a lead for online safety; (DSL will still retain ultimate responsibility for this)
 - Promote a whole centre approach to safeguarding;
 - Promote resilience to social and emotional wellbeing, which is tailored to the needs of the children;
 - Ensure that all recruitment follows the 'Safer Recruitment' guidance, and a single, central record is maintained with details of all members of staff who are in contact with children;
 - Respond to low level concerns and allegations of abuse against all other members of staff including supply staff, volunteers, and contractors;
 - Refer cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service and Teaching Regulation Agency as required;
 - Ensure that the organisation collaborates with CAP, Children's Services, the Police, Health services and other services to; promote the welfare of children; provide a co-ordinated offer of early help assessments when need is identified; contribute to inter-agency plans for children subject to children protection plans and to protect children from harm;
 - Safeguard children's wellbeing and maintain public trust in the teaching profession as part of their professional duties (Teaching Standards, 2012); and

3.1.2 The Role of the Organisation Directors

The Organisation Directors will;

- Ensure that this policy is reviewed annually and shared with the Local Authority. (CAP)
- Ensure that this policy and associated procedures are adhered to by all staff.
- Ensure that all staff are made aware of the Designated Safeguarding Lead and Deputy Safeguarding Officer.
- Ensure that the role of 'Designated Safeguarding Lead' is explicit in the roleholder's job description.
- Decide whether to have one or more deputy safeguarding leads and ensure they are trained to the same standard as the Designated Safeguarding Lead.

- Organise appropriate cover for the role of Designated Safeguarding Lead for any out of hour/out of term activities.
- Ensure DSL is aware of their duties around online safety.
- Respond to allegations of abuse against all other members of staff.
- Refer cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required.
- Ensure that the service works with social care, the police, health services and other services to; promote the welfare of children; provide a coordinated offer of early help when need is identified; contribute to inter-agency plans for children subject to children protection plans and to protectchildren from harm.
- Ensure that children's Services (from the host local authority or placing authority) have access to **the** centre to conduct, or to consider whether to conduct a section 47 or section 17 assessment, as per Keeping Children Safe in Education (September 2023).
 - Ensure that confirmation is provided to CAP that all Keeping Children Safe in Education 2023 guidance is followed and adhered to by the organisation.

3.3 The Role of the Designated Safeguarding Lead

3.3.1 Please confirm the details below for Designated Safeguarding Lead at your organisation.

Designated Safeguarding Lead

Provider Name: Employee Name:

The Designated Safeguarding Lead/s will;

- Take overall lead responsibility for safeguarding and child protection at the provider (including online safety and filters and monitoring);
- Liaise with the safeguarding partners and work with other agencies in line with Working Together to Safeguard Children (2018);
- Always be available during term time school hours for staff in *the organisation or CAP* to discuss safeguarding concerns. If they are not available, a deputy will be made available;
- Undergo training to provide them with the knowledge and skills required to carry out this role updated a minimum of biannually;
- Act as a source of support and expertise on matters relating to safeguarding and child protection to ensure that other members of staff can carry out their safeguarding duty;
- Be best placed to advise on the response to safeguarding concerns;
- Identify if children may benefit from early help and discuss with the referring school.;
- Act as a point of contact with the safeguarding partners;
- Make referrals to Coventry's Multi-Agency Safeguarding Hub (MASH) where children have been harmed or are at risk of significant harm;

- Make referrals to the Channel programme where there is a radicalisation concern and/or support staff that make a referral to Channel;
- Support staff with regards to their responsibilities under the Prevent duty and provide advice and support on protecting children from radicalisation;
- Refer cases to the police where a crime may have been committed¹;
- Ensure all staff have read and understood Part 1 and/or Annex A of Keeping Children Safe in Education (September 2023);
- Update their knowledge and skills regularly and keep up with any developments relevant to their role;
- Provide staff in school with the knowledge, skills and support required to safeguard children;
- Take responsibility for the accurate and timely recording of safeguarding and child protection concerns and take overall responsibility for safeguarding and child protection files;
- Take responsibility for the transfer of safeguarding files when a child leaves the provider.;
- Attend or ensure an appropriate representative attends multi-agency safeguarding or child protection meetings;
- Promote supportive engagement with parents and/or carers in safeguarding and promoting the welfare of children;
- Work closely with other relevant education professionals (e.g. CAP, SENCO, Virtual School Head) to ensure children with additional vulnerabilities are safeguarded;
- Help to promote educational outcomes of child who have experienced or are experiencing safeguarding or child protection issues by sharing relevant information with staff and the leadership team, including CAP;
- Promote a 'culture of safeguarding', in which every member of *the provider* community acts in the best interests of the child;
- Ensuring *the provider* knows who its cohort of children or have or have had a social worker are, understanding their academic progress and attainment, and maintaining a culture of high aspirations;
- Regularly meet (every half term at a minimum) with the safeguarding link to review safeguarding in *the provider* and
- Liaise with the SLT responsible for Safeguarding regarding safeguarding cases and issues.
- Liaise with the senior mental health lead when safeguarding concerns are linked to mental health if the organisation has an identified role.
- Be Aware of the requirement for children to have an Appropriate Adult PACE code C 2019

3.3.2 Further details on the role of the Designated Safeguarding Lead can be found in Annex C of Keeping Children Safe in Education (September 2023).

3.4 The Role & Responsibilities of all Staff within Provider

3.4.1 Provider staff play a particularly important role because they are in a position to identify concerns early in order to provide help for children. All staff involved in *delivery* of CAP;

- Have a responsibility to provide a safe environment, where children can learn;
- Will be able to identify indicators of abuse, exploitation, or neglect; with an awareness of safeguarding issues that put children at risk of harm and behaviours associated with these risks;

- Should know what to do if a child tells them that he/she is being abused, exploited, or neglected but that children may not feel ready or know how to tell someone that they are being abuse, exploited or neglected and/or recognise their experience as harmful;
- Will be aware of indictors of child-on-child abuse and procedures to deal with this;
- All staff, but especially the DSL and deputies, will also consider whether children are at risk of abuse or exploitation in situations outside their families;
- Will be made aware of; the safeguarding and child protection policy; the CAP behaviour policy; the staff behaviour policy; information about the safeguarding response to children missing in education; the role of the designated safeguarding lead and CAP systems in *the PROVIDER* that support safeguarding and child protection;
- Will be provided with a copy of Part 1/Annex A of Keeping Children Safe in Education (September 2023) annually and receive annually updated training on their safeguarding roles and responsibilities;
- Will receive regularly updated safeguarding and child protection training including online safety;
- Will receive safeguarding updates throughout the year as part of continuous professional development;
- Should be able to contribute to the development of safeguarding policy and practice;
- Will be made aware of the early help assessment process and understand their role in it;
- Should be prepared to identify children who may benefit from early help and will discuss early help requirements with the safeguarding lead in the first instance;
- May be required to support social workers and other agencies following a referral;
- Will be made aware of the process for making referrals to Children's Services (through the MASH), understand statutory assessments and the role that they may be expected to play in such assessments;
- Should be prepared to make referrals to the MASH if they have concerns about a child's welfare and understand the role that they may be expected to play in such assessments;
- Understands the referral process to the (LADO) and the role they play should they have concerns or allegations are made against any member of staff;
- Should always seek advice from the Designated Safeguarding Lead if they are unsure; and
- All teachers should safeguard children's wellbeing and maintain public trust in the teaching profession as part of their professional duties (Teaching Standards, 2012).

3.5 Multi-Agency Working

3.5.1 **The provider** is committed to multi-agency working and operates under Working Together to Safeguard Children (2018) and local safeguarding arrangements.

3.5.2 **The provider** will work with CAP, Children's Services the Police, Health services, local Early Help practitioners and other relevant agencies to promote the welfare of children and protect them from harm.3.5.3 We work closely with our local Family Hub to ensure children receive appropriate, co-ordinated Early Help Assessments (where appropriate – schools should lead on this process).

4 Types of abuse

4.1 As outlined above, all staff will be trained in indicators of abuse, exploitation and neglect and should be able to recognise signs of these. We recognise that abuse, exploitation, and neglect along with other

safeguarding issues are complex and often multidimensional and therefore don't fall solely under one category. Types of abuse or harm can take many forms including directly inflicting harm on a child or failing to protect a child from harm online as well as face to face both inside and outside of the school/college **as well as online, including** the multi-faceted occurrence of factors causing emotional harm.

The four main types of abuse that staff are trained to recognise are;

- Physical abuse;
- Sexual abuse;
- Emotional abuse;
- Neglect.

Type of abuse	Information
Abuse	A form of maltreatment of a child. Somebody may abuse or
	neglect a child by inflicting harm, or by failing to act to
	prevent harm. Harm can include ill treatment that is not
	physical as well as the impact of witnessing ill treatment of
	others. This can be particularly relevant, for example, in
	relation to the impact on children of all forms of domestic
	abuse. Children may be abused in a family or in an
	institutional or community setting by those known to them
	or, more rarely, by others. Abuse can take place wholly
	online, or technology may be used to facilitate offline abuse.
	Children may be abused by an adult or adults, or another
	child or children.
Physical abuse	A form of abuse which 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

4.2 Types of abuse (Taken from Keeping Children Safe in Education, 2023)

	and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
Sexual abuse	Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education and all staff should be aware of this and of <i>the provider</i> policy and procedures for dealing with this.
Neglect	The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, 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); or ensure access to appropriate medical care or treatment. It may also include

neglect of, or unresponsiveness to, a child's basic emotional
needs.

4.3 Indicators of abuse can be found in Appendix B.

4.4 If a child is in immediate danger or at risk of harm, a referral will be made to children's services (through the MASH) and any member of staff can make this referral. A Designated or Deputy Designated Safeguarding Lead should be available at all times, but in exceptional circumstances the member of staff should speak to a member of the Senior Leadership Team or seek advice directly from Children's Service and then take appropriate action. The Designated Safeguarding Lead should be made aware as soon as possible.

4.5 Staff, parents and the wider community should report any concerns that they have about the welfare of children, however minor or seemingly insignificant. Staff should not assume that someone else will report concerns.

4.6 **The provider** recognises that any child can be the victim of abuse and may benefit from early help. However, the school will be particularly vigilant to potential need for early help if a child;

- is disabled or has certain health conditions and has specific additional needs;
- has special educational needs (whether or not they have a statutory education, health and care plan);
- has a mental health need;
- is a young carer;
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines;
- is frequently missing/goes missing from care or from home;
- is a risk of modern slavery, trafficking, sexual or criminal exploitation;
- is misusing drugs or alcohol themselves;
- has a family member in prison, or is affected by parental offending;
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse;
- has returned home to their family from care;
- is showing early signs of abuse and/or neglect;
- is at risk of being radicalised or exploited;
- is at risk of 'honour-based' abuse such as Female Genital Mutilation or Forced Marriage;
- is persistently absent from education, including persistent absences for part of the school day.
- is a privately fostered child.

4.7 The provider recognises that abuse can take many different forms. Staff will also receive training on the following issues and action will be taken if *the provider* believes that a child is at risk of or is the victim of;

• bullying, including cyberbullying, prejudice based and discriminatory.

- child criminal exploitation and sexual exploitation including involvement in county lines);
- domestic abuse;
- emotional abuse;
- fabricated or induced illness;
- faith-based abuse;
- female genital mutilation;
- forced marriage;
- gangs or youth violence;
- gender-based violence;
- hate;
- mental health;
- neglect;
- peer on peer abuse;
- physical abuse;
- radicalisation;
- relationship abuse;
- serious violence and harassment;
- sexual abuse;
- sexual violence or sexual harassment (including peer on peer abuse);
- sharing of consensual or non-consensual nude and semi-nude images/videos;
- So-called 'honour-based' abuse;
- trafficking and modern slavery.

4.8 The provider will also take action to protect;

- Children missing education;
- Children missing from home or care.

4.8.1 There are other familial issues that can have a detrimental impact on children.

We work with other agencies in line with Keeping Children Safe in Education (2023) to support children and families in the following circumstances;

- Children facing the court procedures and/or children in the court system;
- Children with family members in prison;
- Children who are homeless;
- Children who need a social worker.

4.9 Children potentially at greater risk of harm

• 4.9.1 *The provider* recognises that some children need a social worker due to abuse, neglect or complex family circumstances and that abuse, and trauma can leave children vulnerable to further harm, as well as educational disadvantage.

• 4.9.2 The Designated Safeguarding Lead will hold information relating to social workers working with children in **the provider**.

4.9.3 This information will inform decisions about safeguarding and promoting welfare (including the provision of pastoral and/or academic support).

4.10 Children absent from Education.

- 4.10.1 *The provider* understands that children that are absent from education for prolonged periods and/or repeat occasions can act as a vital warning sign to a range of safeguarding issues including neglect, child sexual and criminal exploitation particularly county lines.
- 4.10.2 *The provider* will report information to the Local Authority when problems are first emerging **and** if **there is a need** for the removal of a child from the provision.

4.11 Elective Home Education

4.11.1 *CAP* recognises that many home educated children have a positive learning experience and the decision is one with the child's best interests at heart. However, CAP cannot accept applications for students who are not on roll at a school.

4.12 Children requiring Mental Health support

4.12.1 **The provider** recognises that safeguarding and promoting the welfare of children includes preventing the impairment of children's mental health or development.

4.12.2 All staff will be aware that mental health problems may be an indicator that a child is suffering or is at risk of suffering abuse, neglect or exploitation.

4.12.3 Staff will not attempt to make a diagnosis of a mental health problem unless they are appropriately trained.

4.12.4 We recognise that staff are well-placed to observe behaviour that may indicate that a child is experiencing a mental health problem or is at risk of developing one. There are clear systems and processes in place for identifying possible mental health problems. If staff are concerned that a child is suffering a mental health problem, they should notify CAP and the referring school of the concerns immediately.

4.12.5 If staff are concerned that a child is experiencing a mental health problem that is also a safeguarding concern, they must report this to the Designated Safeguarding Lead (or deputy Designated Safeguarding Lead) immediately.

4.12.6 If your provider has a Mental Health First Aider or has a designated member of staff responsible for the promotion of mental health and wellbeing across the organisation (senior lead), include a paragraph detailing this here.

4.12.7 Further information, guidance and advice regarding mental health can be found on page 44 of Keeping Children Safe in Education 2023.

4.13 Children who are Lesbian, Gay, Bi or Trans (LGBT+)

The fact that a child or a young person may be LGBT is not in itself an inherent risk factor for harm. However, children who are LGBT can be targeted by other children. In some cases, a child who is perceived by other children to be LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT.

Risks can be compounded where children who are LGBT lack a trusted adult with whom they can be open. It is therefore vital that staff endeavour to reduce the additional barriers faced and provide a safe space for them to speak out or share their concerns with members of staff.

LGBT inclusion is part of the statutory Relationships Education, Relationship and Sex Education and Health Education curriculum and there is a range of support available to help educational establishments counter homophobic, biphobic and transphobic bullying and abuse.

5 Responding to signs of abuse

5.1 If a member of staff, parent or member of the public is concerned about a child's welfare, they should report it to the designated safeguarding lead as soon as possible. On occasions when the designated safeguarding lead is not available, it should be reported to the deputy safeguarding lead without delay. Although any member of staff can make a referral to Children's Services where possible there should be a conversation with the Designated Safeguarding Lead.

5.2 If anyone other than the Designated Safeguarding Lead makes a referral to Children's Services or to the police, they should inform the DSL as soon as possible.

5.3 All staff will be alert to indicators of abuse and will report any of the following to the Designated Safeguarding Lead immediately;

- Any concern or suspicion that a child has sustained an injury outside what is reasonably attributable to normal play;
- Any concerning behaviours exhibited by children that may indicated that they have been harmed or are at risk of harm, including unusual changes in mood or behaviour, concerning use of language and/or concerning drawings or stories.
- Any significant changes in attendance or punctuality;
- Any significant changes in a child's presentation;
- Any concerns relating to people who may pose a risk of harm to a child; and/or
- Any disclosures/allegations of abuse that children have shared.

5.4 There will be occasions where a child discloses/alleges abuse directly to a member of staff. If this happens, the member of staff will;

• listen carefully to the child and believe what they are saying;

- not promise confidentiality, as information may need to be passed on so the child and family can receive additional support;
- only ask for clarification if something is unclear and will not ask 'leading' questions;
- report disclosure to the designated safeguarding lead as soon as possible, certainly by the end of the day;
- only discuss the issue with colleagues that need to know about it; and
- will write up the disclosure and pass it to the designated safeguarding lead. It is likely they will have had a discussion with the DSL prior to this but delay should be avoided.

5.5 The designated safeguarding lead will make a decision about the action that needs to be taken following a member of staff raising a concern about a child or following a direct disclosure recording a clear rationale. The DSL may consider the following options;

- Managing support for the child internally within the provider, however CAP and school must be informed;
- Seek advice from the social worker advice line in the MASH;
- Instigate agency intervention and work directly with the family to improve the situation, with CAP and the referring school;
- Support School with an Early Help Assessment to provide multi-agency help to a family.
- In cases where children are deemed to be at significant risk of harm, the DSL will refer cases to the MASH for consideration for statutory intervention. Parental consent will be obtained wherever possible before referring cases to the MASH. However, if *the provider* is worried that telling parents will mean the child is at greater risk of harm, we may do this without informing them.
- If parents do not consent to a referral but the school believes that a child is at significant risk of harm, a referral will still be made to Children's Services.

5.6 For further information about the Coventry Safeguarding Children Partnership's 'Right Help, Right Time' guidance, which is used by *the provider* to make decisions about protecting children, please visit <u>http://www.coventry.gov.uk/righthelprighttime.</u>

5.7 See page 24 for flowchart of actions that will be taken where there are concerns about a child (taken from Keeping Children Safe in Education, **September 2023**).

5.8 In cases where members of staff become aware that Female Genital Mutilation (FGM) has been carried out on a female below the age of 18, they have a mandatory duty to report this to the police without delay and will do so. Staff should refer this to the DSL first, but the legislation requires regulated health and Children's Service professionals and <u>teachers</u> in England and Wales to make a report to the police where, in the course of their professional duties, they either;

- are informed by a girl under 18 that an act of FGM has been carried out on her; or
- observe physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth.

If you believe a child is at risk of FGM, a referral to the MASH is also required.

- 5.9 *The provider* has a duty to refer any children who are living in a private fostering arrangement to the local authority. Private fostering is when a child under the age of 16 (or under 18 if disabled) is cared for by someone who is not their parent or a close relative. This is a private arrangement made between a parent and a carer, expected to last 28 days or more, or the school are aware the 28 days has been exceeded.
- 5.10 All providers working in collaboration with CAP are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 in the exercise of their functions to have "due regard" to the need to prevent people from being drawn into terrorism. See Appendix B for further information on the CAP Prevent duty.

5.11 If any member of staff is unsure about signs of abuse or neglect, they should speak to the Designated Safeguarding Lead.

5.12 Child on Child Abuse

- 5.12.1 *The provider* understands that both adults and other children can perpetrate abuse, and can happen inside and outside of school, online or face to face. Child on Child abuse is taken very seriously and can include bullying (including cyber-bullying, prejudice-based and discriminatory bullying), abuse in intimate personal relationships between children, physical abuse, sharing of consensual or non-consensual images of videos, causing someone to engage in sexual activity without consent, sexual violence and/or harassment, upskirting, and initiation/hazing ceremonies. The school recognise that safeguarding issues can manifest as child-on-child abuse. (Include Behaviour policy with mention to sexual violence and sexual harassment)
- 5.12.2 All members of staff will be made aware of **the provider**'s policy and procedures with regards to child-on-child abuse. *The provider will ensure staff understand what is meant by child-on-child abuse and the organisation policy on child-on-child abuse by...*
- 5.12.3 The provider will work to prevent child on child abuse by ... (insert procedures here)
- 5.12.4 Although it is recognised that if there are no reported cases, such abuse may still be taking place. If an allegation of child-on-child abuse is made, *the provider* will investigate this and report to CAP and school *(include how the provider will carry out this investigation, record it and deal with the outcomes)*
- 5.12.5 In the event that an allegation of child-on-child abuse is made, victims, alleged perpetrators and any other children affected will be supported by *(insert provider-specific actions here)* and referral to the MASH will be considered.

5.12.6 **The school** will never pass off child on child abuse as 'banter', 'having a laugh. 'Part of growing up' or other such termination that does not recognise the harm caused. This should be a Zero-tolerance approach as this could lead to a culture of unacceptable behaviours. It is recognised with this, that all child-on-child abuse is unacceptable and will be taken seriously.

5.12.7 Boarding schools and residential settings should include additional information here about the possible additional risk relating to child on child abuse in this setting. See Annex D KCSIE for more information.

• **5.12.8** The provider will adhere to guidance set out in Keeping Children Safe in Education (2023) when responding to incidents of child-on-child abuse.

5.12.9 All staff will be made aware that 'upskirting' is a criminal offence.

5.13 Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE)

5.13.1 Both CCE and CSE are forms of abuse that occur when an individual or group take advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator through violence or threat of violence. CCE and CSE can affect both males and females and can include children that have been moved for the purpose of exploitation (trafficking).

5.13.2 CCE can include children being forced or manipulated into transporting drugs or money through county lines, working in cannabis factories, shoplifting, or pickpocketing, vehicle crime, threatening violence on others or even carrying weapons.

• 5.13.3 **The provider** is responsible for recognising children involved in CCE are victims of exploitation and should be recognised as such due to the the harm they have experienced even if they appear to have consented to the criminal activity.

5.13.4 CSE is a form of child sexual abuse including physical contact and non-contact online activities including the internet or by phone. This can happen over time or as a one off and may happen without the child recognising this as abuse or harmful.

5.13.5 **The provider** recognises that children of the age of 16 and 17 who can legally consent to a sexual relationship may also be the victims of CSE but may not recognise this.

5.14 Sharing of consensual or non-consensual nude and semi-nude images or videos.

5.14.1 "Sharing of consensual or non-consensual nude and semi-nude images or videos" refers to any sharing of youth-produced sexual imagery between children. This includes;

- A person under the age of 18 creating and sharing sexual imagery of themselves with a peer under the age of 18;
- A person under the age of 18 sharing 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 being in possession of sexual imagery created by another person under the age of 18.
- 5.14.2 The provider has a responsibility to educate children in the risks relating to 'sharing consensual or non-consensual nude images or videos' and how to keep themselves safe online. *(Link to Online Safety Policy/PHSE policy here).*

5.14.3 Any incidents or suspected incidents of 'sharing consensual or non-consensual nude images or videos' should be reported to the DSL without delay.

5.14.4 Once reported to the DSL, the DSL will decide on the appropriate course of action. This could include;

- Referrals to the MASH in regard to all parties involved (also the police if an urgent response required);
- Confiscation of mobile phones in line with guidance 'Searching, Screening and Confiscation, (January 2018);
- Support for young people involved to prevent reoccurrence;
- Sanctions in accordance with the behaviour policy;

5.14.5 Any incidents of 'sharing consensual or non-consensual nude images or videos' involving the following will result in a MASH and sometimes a Police referral;

- Adult involvement;
- Coercion or blackmail;
- Children under the age of 13;
- Extreme, or violent content;
- Immediate risk of harm.

5.14.6 Staff will not view images or videos on pupil devices. Confiscated devices will be stored securely and passed to the relevant agencies.

5.14.7 We will work with parents as necessary if their child is involved in the sharing of consensual or non-consensual nude images or videos.

5.14.8 We operate a culture of safeguarding and young people should feel confident to disclose if they have sent an inappropriate image of themselves. Children will always be supported to retrieve and delete the images.

5.15 Domestic Abuse

5.15.1 Domestic abuse can be a single incident or a pattern of incidents. It can also include psychological, physical, sexual, financial or emotional acts of abuse.

5.15.2 **The provider** recognises that children can be a victim of Domestic Abuse by seeing, hearing or experiencing the effects or suffering domestic abuse in their own personal relationships. These all have a detrimental impact on children's health, well-being, development, and ability to learn.

5.16 Searching, Screening and Confiscation

• 5.16.1 Where necessary, searching, screening and confiscation will be used to safeguard a child/children in *the provider*.

5.16.2 The school adheres to 'Searching, Screening and Confiscation: Advice for Schools (January 2018).

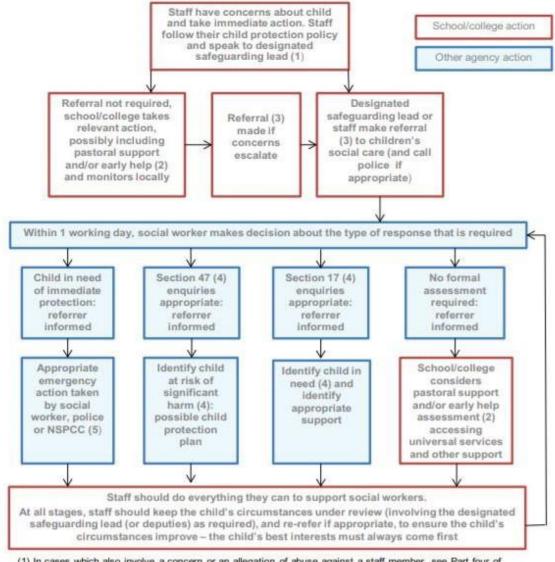
• Please add guidance on how a search should be performed in the Substance misuse policy.

5.17 Online Safety

- 5.17.1 **The provider** recognises that in today's world, children need to be safeguarded from potentially harmful and inappropriate online material with many children having unlimited and unrestricted access to the internet via their mobile phone. The breadth of issues can be categorised currently into four areas of risk as taken from Keeping Children Safe In Education 2022:
- Content being exposed to illegal, inappropriate, or harmful content (pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation, and extremism)
- Contact being subject to harmful online interaction with other users (peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit)
- Conduct online behaviour that increases the likelihood of, or causes, harm (making, sending and receiving explicit images)
- Commerce risks such as online gambling, inappropriate advertising, phishing and or financial scams
- 5.17.2 The provider understands that the above can take place on a student's phone or smart device (including smart watches) whilst at school/college or elsewhere. The provider has responded to this by having a whole organisation approach to online safety which aims to protect and educate students, this is covered during their induction. (Reference behaviour policy/acceptable use policy, mobile and smart technology policy and online safety curriculum as appropriate to highlight safety measures in place).

5.17.3 *The* provider has also established mechanisms to identify, intervene in and escalate any concerns highlighted through our filter and monitoring systems for both staff and students. The effectiveness of this is regularly reviewed with staff aware of how to escalate concerns. (List name of system used and processes here I.e., what is filtered, who is alerted, and what happens next)

Actions where there are concerns about a child



 In cases which also involve a concern or an allegation of abuse against a staff member, see Part four of this guidance.

(2) Early help means providing support as soon as a problem emerges at any point in a child's life. Where a child would benefit from co-ordinated early help, an early help inter-agency assessment should be arranged. Chapter one of <u>Working Together to Safeguard Children</u> provides detailed guidance on the early help process.
(3) Referrals should follow the process set out in the local threshold document and local protocol for assessment. Chapter one of <u>Working Together to Safeguard Children</u>.

(4) Under the Children Act 1989, local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17 of the Children Act 1989. Under section 47 of the Children Act 1989, where a local authority has reasonable cause to suspect that a child is suffering or likely to suffer significant harm, it has a duty to make enquiries to decide whether to take action to safeguard or promote the child's welfare. Full details are in Chapter one of Working Together to Safeguard Children.

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

5.18 To raise concerns about children, members of staff should contact the Multi-Agency Safeguarding Hub (MASH) by telephone to discuss the referral. They should then complete the online Multi-Agency Referral Form (MARF) and submit this to the MASH. The school will follow up referrals if we do not receive feedback from Children's Services to ascertain the outcome of all referrals. Please also see CAP guidance Appendix c.

MASH Telephone number: 02476 788 555

MASH online referral form: http://www.coventry.gov.uk/safeguardingchildren

Out of hours Emergency Duty Team: 02476 832 222

Prevent/Channel Referrals: Refer to MASH (mash@coventry.gov.uk) and to CTU_GATEWAY@west-

midlands.pnn.police.uk

5.18.1 If a child's situation does not appear to be improving following a referral, the provider may re-refer the child. We will also consider using the <u>Coventry Safeguarding Children</u>
<u>Partnership's Managing Professional Disagreements policy</u> to ensure that our concerns have been addressed and that the situation improves for the child.

6 Record-keeping

6.1 All concerns, discussions and decision made will be recorded in writing and kept confidential and stored securely.

6.2 A written record of all safeguarding and/or child protection concerns, discussions and decisions made will be kept in individual children's files. This will be separate from the main provider file and will only be accessed by the relevant safeguarding staff.

• 6.3 *The provider* keeps all safeguarding files electronically, *using a system called Child Protection Online Management System (CPOMS) (change if not appropriate).*

6.4 Staff will submit all concerns in writing to the DSL at the earliest opportunity. This may be after having a verbal conversation, but conversations will also be followed up in writing.

- 6.5 In the event that a child moves provider, the safeguarding file will be transferred to the new setting securely if deemed appropriate Once received by the new provider, the original provider will not retain the information.
- 6.6 The provider will seek to hold at least two emergency contacts for every child.

6.7 All data processed by *the provider* is done so in line with the General Data Protection Guidelines and the Data Protection Act (2018). Please see the following policies for additional information;

(Insert link to data policy, privacy notice, any other relevant provider policy)

6.8 Further information regarding information sharing and data processing in relation to safeguarding can be found in Part One of Keeping Children Safe in Education (September 2023).

7 Photography and Images

- 7.1 Consent from parents to photograph children at CAP events for promotional reasons will be sought when the child joins *the* provider via the parent/carer induction.
- 7.2 Parents can withdraw consent at any time and must notify *the* provider/CAP if they do not wish their child's photographs to be used.

7.3 Photographs of children used publicly will not be displayed with their name or other identifiable personal information.

7.4 Photographs of children will be processed in line with the General Data Protection Regulation.

(Include linked list here of relevant data policies or school photography policies if there is one)

8 Early Help Assessment

8.1 *The provider* is committed to supporting families as soon as a possible problem arises. It is more effective to support a family through early help than reacting to a problem later. Everyone who comes into contact with children and their families and carers have a role to play in safeguarding children. *The provider* is committed to working closely withschools, CAP and the neighbouring family hub to work with families in the community to improve outcomes for children.

(Insert details for Family Hub here)

8.2 *The provider* works within the Coventry Safeguarding Children Partnership's <u>'Right Help, Right Time'</u> framework, available on the CSCP website.

9 Staff training

- 9.1 In order for staff to be able to understand and discharge their safeguarding and child protection duties, *the provider* has committed to training staff throughout the academic year. All staff members will be made aware of *the CAP and internal* safeguarding processes and structures and will receive training on these as part of their induction. As part of this training and their annual refresher, they will also receive;
- This 'Safeguarding and Child Protection Policy';
- The staff Code of Conduct
- Copies of Part 1 and/or Annex A of Keeping Children Safe in Education (September 2023)
- School procedures for Children Absent from Education
- The CAP *Behaviour* Policy
- (Insert others if necessary)

9.2 Staff at the Provider will;

(Insert list of the training that staff will undertake during the year. This isn't just September training but needs to be ongoing and can include Thrive, mental health, online safety, local authority training, DSL briefings etc, e-bulletins etc. Don't forget to include governor and volunteer training!). 9.3 **The provider** recognise that children may engage in risky behaviours that may put them at additional risk of danger. These can include drug taking, alcohol abuse, truanting and the sharing of consensual or non-consensual nude images or videos. Staff will also be trained in these areas in order to be able to further recognise if a child is at risk of harm.

9.4 All staff are aware that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. For example, children may feel embarrassed, humiliated, or being threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent staff from having a professional curiosity and speaking to the DSL if they have concerns about a child. It is also important that staff determine how best to build trusted relationships with children and young people which facilitate communication.

10 Safer Recruitment

10.1 *The provider* is committed to providing children with a safe environment, in which they can learn. We take safer recruitment seriously and all staff are subject to the following checks;

- Identity check;
- DBS clearance;
- Prohibition from teaching checks (where required);
- Barred List check;
- Section 128 checks (as required leadership and management);
- Reference check (two references required);
- Professional qualifications check;
- Right to work in the UK check;
- Further checks for those who have lived outside the UK;
- Disqualification Under the Childcare Act 2006 checks (as required); and
- Verification of the candidate's mental and physical fitness may also be **sought**.

10.2 A record of all checks completed for members of staff will be recorded on the Single Central Record.

10.3 All new members of staff will be required to obtain DBS clearance. **The provider** reserves the right to re-check DBS clearance for any member of staff where information is received that indicates they may pose a risk to children and may request candidates to register on the DBS update service.

10.4 At least one member of every interview panel will have undertaken Safer Recruitment training which it is recommended is refreshed every 2 years.

10.5 We take proportionate decisions on whether to check individuals above and beyond what is legally required dependant on individual circumstance.

• 10.6 Any visitor to **the provider** who has not been subject to the necessary checks will be supervised at all times and a risk assessment completed.

10.7 All safer recruitment practices at *the* provider comply with Keeping Children Safe in Education (September 2023). See Part 3 of Keeping Children Safe in Education (September 2023) for further information. (Attach Safer Recruitment policy for further details.

11 Allegations of abuse against staff

11.1 The provider takes all safeguarding matters including low level concerns and/or allegations that harm to a child has occurred against staff (including agency, volunteers and contractors) seriously and will manage them in line with this policy, Part Four of Keeping Children Safe in Education (September 2023) and the CSCP Guidance, <u>'Allegations Against Staff and Volunteers'</u>.

11.2 Allegations or concerns may include

- Staff having behaved in a way that has harmed a child, or may have harmed a child;
- Staff possibly committing a criminal offence against or related to a child;
- Staff behaving towards a child or children in a way that indicates that he or she may pose a risk of harm to children; or
- Staff behaving or possibly behaving in a way that indicates they may not be suitable to work with children (including behaviour outside of work). This is known as 'Transferable risk'.
- 11.3 If a concern or allegation of abuse arises against the Director, or should there be a conflict of interest to the Director, it must be immediately reported to CAP and the Board. *Independent schools where Headteacher is the sole proprietor need to add in here that staff will report concerns directly to the LAdo.*
- 11.4 If a concern or allegation of abuse arises against any member of staff, supply teacher, volunteer or contractor other than the director, it must be reported to the director/CAP without delay.

11.5 Concerns or allegations of abuse against staff must be reported to the Director/CAP as appropriate and not discussed directly with the person involved.

11.6 The Director and /or CAP should consider if the concern or allegation meets the harms threshold for Designated Officer intervention and seek guidance/advice if unsure by emailing <u>lado@coventry.gov.uk</u>. 'Low-level' concern does not mean it is not significant. This is a term used for any concern (no matter how small) that an adult working with a child may have breached the staff Code of Conduct and does not meet the harm threshold. Examples of which may include:

- Being overly 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;
- Humiliating pupils.

The details of the LAdo can be found of the front of this policy. Immediate referrals can be made via the following link

Child Protection and Safeguarding Policy 23/24

https://www.coventry.gov.uk/info/206/coventry_safeguarding_children_partnership/2628/local_autho rity_designated_officer_lado

 11.7 Concerns relating to a position of trust issue will be referred to the Local Authority designated officer within 24 hours. In accordance with *Keeping Children Safe in Education 2023,* the provider will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

11.8 If a child has suffered or may have suffered abuse or harm, a MASH referral will also be made.

11.9 In the instances where an allegation is dealt with internally, the Local Authority designated officer will provide information and support to *the provider* in managing the allegation.

11.10 A referral to the Disclosure and Barring Service will be made if a member of staff is dismissed or removed from their post as a result of safeguarding concerns, irrespective of whether they have resigned.

11.11 Supply Teachers and all contracted staff

11.11.1 Although **the provider** does not directly employ supply teachers and contractors, they will ensure that any concerns or allegations are referred to LADO and the relevant agency informed as the employer.

11.11.2 **The provider** will never cease to use a supply teacher for safeguarding reasons without liaising with the Local Authority Designated Officer and reaching an agreed outcome.

11.11.3 Governing bodies/proprietors will liaise with the supply agency to determine whether to suspend or redeploy the supply teacher whilst they carry out their investigation.

11.11.4 **The provider** will inform supply agencies of its process for managing allegations, including inviting the agency's human resource manager (or equivalent) to meetings and regularly updating agencies on relevant policies. **The provider** will usually take the lead because agencies do not have direct contact with children or staff, so will not be able to gather information.

11.12 Governors

11.12.1 If an allegation or concern is about a Governor, the organisation will follow local procedures.

11.13 Volunteers

11.13.1 Risk assessments and a DBS check will be requested for all volunteers. Under no circumstances will a volunteer prior to satisfactory checks being completed be alone with children unsupervised or allowed to work in regulated activity.

11.14 Whistleblowing

 11.14.1 The provider operates a culture of safeguarding and all staff should report any concerns about poor or unsafe practice, or the school's safeguarding processes to the senior leadership team.

11.14.2 Appropriate whistleblowing procedures are in place whereby the senior leadership team will take all concerns seriously.

11.14.3 In the event that a member of staff is unable to raise an issue with senior leadership in school, they should refer to Part 1 of Keeping Children Safe in Education for additional guidance on whistleblowing procedures. Additionally, they can report to CAP.

11.15 Complaints Procedure

The provider operates a complaint procedure which will be followed where a pupil or parent raises a concern about poor practice towards a pupil that initially does not reach the threshold for child protection action. Poor practice examples include unfairly singling out a pupil or attempting to humiliate them, bullying or belittling a pupil or discriminating against them in some way. Complaints are managed by the Director, other members of the senior leadership team and governors. (Add link to Complaint's policy here)

Complaints from staff are dealt with under **the provider**'s complaints and disciplinary and grievance procedures. (Also refer to Low level concerns)

Complaints which escalate into a child protection concern will automatically be managed under the school's child protection procedures.

12 Promoting safeguarding and welfare in the curriculum

- 12.1 *The provider* recognises the importance of teaching children how to stay safe and look after their mental health and are committed to equipping children with the skills and knowledge to have successful and happy lives.
- 12.2 The provider will teach children about safeguarding, including online safety this is included in the induction. (Include curriculum details here).
- 12.3 Training Providers and colleges play a crucial role in preventative education. Preventative education is most effective in the context of a whole-school or college approach that prepares pupils and students for life in modern Britain and creates a culture of zero tolerance for sexism, misogyny/misandry, homophobia, biphobic and sexual violence/harassment. The Training Providers /college will have a clear set of values and standards, upheld, and demonstrated throughout all aspects of school/college life. These will be underpinned by the Training Providers /college's behaviour policy and pastoral support system, and in some cases by a planned programme of evidence based RSHE delivered in regularly timetabled lessons and reinforced throughout the whole curriculum (RSHE) (include curriculum details here)

• 12.3 Children at *the provider* will receive the following as part of our promotion of safeguarding across the curriculum:

(Insert list of all activities within the curriculum here, refer to other policies/protective behaviours/parent sessions/SRE etc).

12.4 Education at home and remote education

If you are using alternative methods to educate children at home, outline them here. What are you using, links to other relevant policies, relevant safeguarding policy information, the fact that the school continues to operate under this policy and KCSIE/WTTSC when children are learning at home or at school.

13 Children Looked After

 13.1 The most common reason for children to be looked-after is because they have experienced abuse and/or neglect. *The provider* recognises that children looked after may have additional vulnerabilities by virtue of this. The Designated Lead for Looked-After and Previously Looked-After Children is...

13.2 Staff will receive training on how to best safeguard children who are Looked-After and **who have been** Previously Looked-After.

- The provider will work Coventry Virtual school to ensure student achievements are passed on effectively.
- 13.3 The school will work with Personal Advisors when children leave care (where applicable).

13.4 *The provider* is committed to working with other agencies to ensure the best outcomes for Looked-After and Previously Looked-After children.

14 Children with Special Educational Needs and Disabilities (SEND) or physical health needs

- 14.1 As outlined in Keeping Children Safe in Education (2022), *The provider* is aware that children with additional needs or disabilities may be more vulnerable to abuse both online and offline and additional barriers may exist when recognising abuse and neglect. This could be because;
- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children;
- the potential for children with SEN and disabilities or certain medical conditions being disproportionally impacted by behaviours such as bullying, without outwardly showing any signs; and
- communication barriers and difficulties in overcoming these barriers.

• Being unable to understand the difference between fact and fiction in online content

14.2 Any reports of abuse involving children with SEND will therefore require close liaison with the designated safeguarding lead, CAP and SENCO. Staff will also be trained in recognising signs of abuse in children with SEN and disabilities or certain medical conditions.

14.3 Staff will take into account the needs of a child when responding to concerns of abuse or when taking a disclosure. We recognise that some children require specialist intervention to communicate and advice from the SENCO will be sought in these circumstances.

14.4 Safeguarding learning opportunities within the curriculum will be appropriately differentiated to ensure all children can access it.

15 Use of reasonable force

15.1 There may be occasions when staff are required to use reasonable force to safeguard children. We will not use any more force than is proportionate and necessary.

Insert information about Team Teach, how incidents are recorded, strategies used to de-escalate situations.

The following areas may be relevant to your settings. Please consider the headings and insert your policy as required. See KCSIE paragraph 162, Annex D and E for further guidance on what should be included.

16 Work Experience/ Alternative Provision

The School will continue to be responsible for the safeguarding of Students placed with an alternative provision provider or work experience (delete work experience if not applicable) and will be satisfied that this provider meets the needs of the pupil. Written confirmation from the provider that appropriate safeguarding checks have been carried out will be sought on individuals working at the establishment, *i.e.* those checks that the school would otherwise perform in respect of its own staff.

16.2 The DSL will continue to have oversight of all pupils accessing any part of their learning from an alternative provider or delivery online or offsite provided by any organisation or individual not employed by the school. The DSL will ensure that robust arrangements are in place for timely and effective information sharing of safeguarding information between the school and alternative/external providers.

16.3 The DSL will also take responsibility for ensuring that robust procedures are in place to confirm attendance and to enable the swift reporting of non-attendance and children going missing from alternative/ external providers at any time when they should be with that provider.

17 Children staying with host families (see Annex **D** KCSIE)

18 Boarding schools and residential settings

19 Summary

19.1 **The provider** is committed to safeguarding children and will always make safeguarding decisions that are in the best interests of each child. For further information or if you have any queries about this policy, please contact the school.

Appendix A

The Provider's safeguarding policy is intended to be used in conjunction with the following policies; (Either insert hyperlinks or make it clear where other policies can be found. Not all are statutory for all settings. This list is not exhaustive – you may have different policies or names of policies). Cross-reference with <u>this document</u> to ensure you have everything you need).

The school adheres to Coventry Safeguarding Children Partnership Policies, which can be found here:

- Allegations Against Staff or Volunteers (CSCP)
- <u>Allegations Against Members of Staff</u>
- Anti Bullying Policy
- Anti-Discrimination and Harassment Policy
- Attendance Policy
- Behaviour Policy
- Children/Young people with Medical Needs (Add in 'Managing Medical Incidents if relevant)
- Children Missing in Education Procedures
- Complaints Policy
- Critical Incident Plan
- Data Protection Policy and Privacy Notice
- Drugs and Alcohol Policy (could be in Behaviour Policy and Staff Code of Conduct)
- Equalities Policy
- Managing Professional Disagreements (CSCP)
- Health & Safety Policy
- HR & Governance Policy
- Online Safety Policy (must be a clear policy, either standalone or in this policy about use of mobile technology in school including children using their own phones Should also include how children are taught about online safety and the filtering and monitoring system.
- Intimate Care Policy
- IT Policy
- Lone Working Policy/Home visits policy
- Medicine & First Aid Policy
- Primary-Secondary Transition Policy
- PSHE Policy
- SRE Policy Self-harm/Mental Health Policy (could be in another policy e.g. medical, behaviour)
- Safer Recruitment Policy
- Site Security Policy
- SEND Policy
- Staff Code of Conduct
- Trips and Visits Policy
- Use of Reasonable Force Policy (could also be called Positive Handling Policy)
- Visitor Management (including external speakers information) Policy

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Whistleblowing Policy

Appendix B – Further Safeguarding Information

Types of Abuse

As outlined in paragraph 4.4, **the provider** will take action if we believe a child is at risk of or is suffering from abuse. Abuse is not limited to physical, emotional, sexual abuse and neglect. For further information on the definitions of the types of abuse below, please refer to **Keeping Children Safe in Education (2023)**, Annex A.

See below for policy information relating to other key safeguarding issues. All decisions taken in responding to concerns of abuse will be taken in the best interests of the child.

Include provider-specific statements about your stance/policy under each issue. See below for example to replicate for other areas. You don't need to add the definitions, this is about your own stance on these issues, what you do to prevent it and how you will respond.

Bullying, including cyber- or online-bullying

The provider takes all forms of bullying seriously and will respond sensitively and quickly to any reported bullying. Children should report any bullying to their form tutor, to the DSL or to any trusted member of staff and we will work to resolve it.

We also teach children about the dangers of bullying through our curriculum. See link to curriculum here:

Bullying can take many forms and we have several policies that cover different aspects of bullying. Please see the Anti-Bullying Policy, the Behaviour Policy and paragraph 5.8 of this policy for further information.

Child criminal exploitation (including involvement in county lines)

Domestic abuse – Include Operation Encompass

Fabricated or induced illness

Faith-based abuse

Female genital mutilation (A form of so-called 'honour-based' abuse)

Forced marriage (A form of so-called 'honour-based abuse)

Gangs or youth violence

Gender-based violence

Hate

Homelessness

(So-called) 'Honour-based' abuse (For FGM and Forced Marriage, types of so-called 'honour-based' abuse, see above)

Radicalisation and Extremism – Include detail around Prevent Duty, refer to paragraph in main body of policy and outline procedure when there is a concern around Prevent. Include that referrals to Channel will be made where this is a concern.

Relationship abuse

Serious Violence

Sexual violence or sexual harassment (including peer-on-peer abuse)

Sharing of consensual or non-consensual nude images and videos

Trafficking and modern slavery

Children absent from education, home or care

The provider will also take action to protect;

- Children absent from education
- Children missing from home or care

Children Absent from Education

Insert link to statutory guidance, link to your attendance policy and then outline your safeguarding procedures for children absent from education.

Children Missing from home or care

Insert link to statutory guidance, link to your attendance policy and then outline your safeguarding procedures for children missing education.

Private Fostering

The provider have a duty to refer any children who are living in a private fostering arrangement to the local authority.

We will do this through a MASH referral. It is important that parents/carers inform us if a child is going to be staying at an alternative address to that of their primary care-givers for more than *(insert your policy – legislation says 28 days but you may already have a policy that is less)*

Indicators of abuse

See below for possible indicators of abuse. (Taken from *What to do if you are worried a child is being abused*, 2015)

- 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.

The provider recognises that the above list of indicators is not exhaustive and staff will receive training on indicators of abuse.

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