

St Michael in the Hamlet Safeguarding Policy (2018 – 2019)

Our school is a Rights Respecting School whereby all respect the United Nations Convention on the rights of the child and the responsibilities that come with those rights.

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1. Liverpool Schools' Safeguarding Charter

All staff and Governors at Michael in the Hamlet Primary School follow the Liverpool Schools' Safeguarding Charter and as such we will:

- Work in partnership with other agencies to safeguard and promote the welfare of all children in keeping with the LSCB's 'Levels of Need Framework' to secure improved outcomes for young people
- Ensure that safer recruitment practices and safeguarding policies and procedures set out a culture of vigilance and challenge
- Provide induction and regular training that enable all adults to recognise signs of abuse and neglect; act in the interests of the child and maintain an attitude 'it could happen here'.
- Work collaboratively with other agencies to promote early help for young people and families before their needs escalate to a point where intervention would be needed via a statutory assessment.
- Challenge ourselves and others to ensure actions are completed in a timely way and press for reconsideration if the situation does not improve.
- Quality assure all safeguarding practices including maintaining support and oversight of the Designated Safeguarding Lead and Safeguarding Team, their actions and decisions and record keeping.
- Ensure all adults working with young people follow an agreed code of conduct that promotes safe working practices and makes responsibilities and expectations clear, including the understanding that anyone can make a referral.
- Complete any actions arising from the Local Authority's 175 Safeguarding Audit in order to ensure policies and procedures follow LSCB, Local Authority and statutory guidance.
- Implement any learning arising from serious case reviews, for example the need to listen and respond to the views of children, especially when assessing their needs.
- Provide students with a curriculum which promotes their safeguarding and enables them to maintain healthy relationships.

2. Key Safeguarding points from Serious Case Reviews

At St Michel in the Hamlet all staff work where needed in partnership with other agencies to:

- provide early help and robust interventions before statutory services are required. This is particularly the case for poor school attendance
- focus on the child's needs (avoid focusing solely on the parent's wishes and needs)
- listen to the child away from their parents and record the child's wishes
- consider young people as children until they are 18 years old, including teenage mothers who may be in abusive relationships
- assess effectively the parent's motivation and capacity to improve the situation
- assess the impact of any family issues related to drugs, alcohol, mental health or domestic violence (avoid being over-optimistic of the parent's capacity to improve the situation)
- develop a greater understanding of the impact of neglect
- specifically consider the impact of domestic violence, including where young people are themselves the perpetrator of domestic abuse
- monitor carefully the parent's engagement, particularly any missed medical appointments
- review historical concerns in respect of the child and the parent's own history (avoid viewing incidents in isolation and not linking injuries; avoid 'start again' syndrome)
- demonstrate 'respectful uncertainty,' being appropriately sceptical of any explanations provided by the family for any maltreatment and injuries (avoid a lack of professional curiosity hence if you can't rule it out, then you have to rule it in)
- complete holistic assessments in a timely way
- ensure any actions for all agencies and the parents are sufficiently focussed, challenging and completed in a timely way
- attend all professional meetings, ensuring written reports are provided
- ensure the child is seen and spoken to away from their parents on a regular basis (avoid professional drift)
- risk assess all appropriate adults, taking care to consider any new male partners
- observe the child's interaction with parents and key adults, particularly any new male partners
- understand their responsibility to share information in a timely way with other agencies who are working with the family
- understand their responsibility to escalate their concerns and challenge other agencies, including the need to consider care proceedings

- consider issues related to cultural diversity
- collaboratively risk assess with other agencies children who are self-harming
- ensure there is managerial oversight of safeguarding decisions and actions
- ensure decisions, actions, information shared etc. are recorded and that records are transferred and a copy kept securely until the child is 25 years old
- monitor school attendance rigorously, including any unexplained absences, ensuring chronic attendees are visited and their welfare confirmed on a weekly basis
- consider that challenging children's behaviour may be the result of neglect and other forms of abuse e.g. child sexual exploitation
- recognise that some children are more vulnerable to abuse or neglect
- consider the impact of street gang activities
- ensure LSCB procedures are followed
- ensure all staff are appropriately inducted, trained and supervised and have awareness of the indicators related to all forms of abuse, including Forced Marriage, Female Genital Mutilation and Child Sexual Exploitation
- ensure a 'Code of Conduct' is in place that sets out every colleague's responsibility to report and challenge inappropriate behaviours towards children, including the need to 'whistle-blow' where appropriate (training should raise awareness of potential indicators of grooming behaviour)
- consider the safeguarding needs of unborn babies, risks around co-sleeping, and the heightened risk for babies that arise in homes where there is domestic violence or substance misuse

3. Statutory Responsibilities for School Leaders and Governors

Section 175 of the Education Act 2002 places a duty on local authorities (in relation to their education functions and governing bodies of maintained schools and further education institutions, which include sixth-form colleges) to exercise their functions with a view to safeguarding and promoting the welfare of children who are pupils at a school, or who are students under 18 years of age attending further education institutions. The same duty applies to independent schools (which include Academies, Studio and Free Schools) by virtue of regulations made under section 157 of the same Act.

Schools must ensure:

- a. They have regard for the DfE statutory guidance 'Keeping Children Safe in Education (DFE 2014) and Working Together to Safeguard Children DfE 2013
- b. The Child Protection Policy is reviewed annually and available to parents normally via the school's website.
- c. There is a named Designated Safeguarding Lead who is a member of the school leadership team. They must attend training at least every two years. Other staff should be trained to deputise for the role of Designated Safeguarding Lead.
- d. Part one of Keeping Children Safe in Education DfE 2014 must be read by all staff.

- e. All adults working within the school are aware of the school's code of conduct and the DCSF *Guidance for Safer Working Practices for Adults Working with Children* (2009)
- f. All staff and volunteers should have child protection training which is regularly updated. This should include specific issues including *Female Genital Mutilation*, *Child Sexual Exploitation*, children missing from education and the importance of the early identification of abuse and neglect. New staff and volunteers should have induction training which includes child protection procedures.
- g. There is a strategy for providing *Early Help* together with other agencies and supporting children and families by carrying out *Early Help Assessments* drawing upon the LSCB's *Levels of Need Framework*.
- h. There are procedures in keeping with the LSCB for dealing with any allegations made against any adult working within the school.
- i. There is a nominated governor, usually the chair, who is the case manager for managing any allegations against the Head Teacher.
- j. They follow safer recruitment procedures, including the statutory pre-employment checks on all staff working with young people. At least one member of every recruitment panel has attended safer recruitment training.
- k. They maintain a *Single Central Record*.
- l. They comply with the duty to refer to *Disclosure and Barring Service* if a person in regulated activity has been dismissed or removed due to safeguarding concerns or would have been had they not resigned.
- m. They provide a safe environment where the views of children and families are listened to and where children are taught about safeguarding and how to keep themselves safe, including on the internet or when using new technology

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4. School policies underpinned by the Safeguarding policy

Use of Social Media	E-Safety
Child Protection	Managing allegations against staff (LA)
Care & Control	Whistle blowing (LA)
Confidentiality	Emotional Health and Well-being
PSHE/Citizenship	Critical Incident
Health & Safety	Attendance
Inclusion	Collecting Children
Behaviour Management	Sex & Relationships Education
Missing Child	Equal Opportunities
Anti-bullying/Cyberbullying	Multicultural/Racial Equality
Administering of Medicine/First aid	Drugs Education
External Visitors	Trips and Visits
Retention of Data	Safer Recruitment
Images Policy	SEN
Extended School Provision	Intimate Care
Escalation Policy	Laptop/iPad Policy

Records

- Single Central Record and Visitors book
- Child Protection files inc Operation Encompass and EHAT's
- Vulnerable children data
- Pupil premium Data
- Record of Incident sheets- behaviour/CP/racism/bullying/homophobia
- Risk assessments (trips/H&S)
- Child Protection training Records/Certificates
- LA Safeguarding Audit for SMH and action plan

Other

Safeguarding statements around school and on letterheads
 Procedures for staff recruitment and staff induction- safeguarding
 Posters in class/office for staff/parents and chn re: safeguarding
 Safeguarding as standard agenda item for all meetings
 Ednet- all LA and National policies and relevant safeguarding info
 Staff, Governor, visitor and student lanyards and documentation
 School Prospectus
 Staff Handbook
 Procedures for incidents around school e.g. Fire Alarm
 Information/support materials for parents/children on website
 Safeguarding Curriculum for Children
 Health and Safety Records, checklists and procedures

5. Definitions of abuse and neglect as defined by the DfE:

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. They 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 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: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs

6. Groups of children who are vulnerable to abuse and neglect

It is important to recognise that some children may be more vulnerable to abuse including:

- children with special educational needs
- children with disabilities
- children in care (looked after children)
- children living in chaotic homes including where there is domestic violence, substance misuse or mental health concerns
- young carers
- asylum seekers
- those vulnerable to prejudice and discrimination, isolation, social exclusion
- those at risk of female genital mutilation (FGM), forced marriage and other forms of honour based violence
- children living away from home or moving home frequently
- children vulnerable to being bullied or to bullying others

7. Indicators of abuse and neglect

The following are possible signs of abuse or neglect and should be reported to the Designated Safeguarding Lead Lisa Richards. It is important to consider all physical and behavioural changes in children. A child may:

- ask you if you will keep a secret before offering to tell you something
- talk about a friend who has a problem
- have unexplained or untreated injuries
- be severely bruised or injured
- talk of being in pain or discomfort
- be unwilling to change in front of other children for P.E.
- be unwilling to discuss injuries, marks or bruises
- always covering arms and legs even in hot weather
- be fearful of medical help or parents being contacted
- be left in unsafe situations or be involved in risk taking behaviour
- be afraid of parents or carers and unwilling to go home
- be fearful of particular adults

- flinch when approached
- continually run away
- have sudden behavioural changes including becoming aggressive, irritable, lethargic or withdrawn
- have low self esteem, self-harm or feel suicidal
- display extreme anger or sadness or depression, display aggression or attention seeking behaviour
- have sudden changes in weight (loss or gain) or eating disorders
- scavenge or scrounge food
- be constantly hungry or tired
- have poor social relationships or be socially isolated
- display sudden speech disorders
- have punctuality or attendance issues including unexplained attendances
- be frequently unclean, inappropriately or inadequately dressed
- experience being constantly 'put down', insulted, sworn at or humiliated
- display sexualised behaviour seemingly inappropriate for their age including sexualised behaviour towards others
- present artwork, play or write displaying sexual themes
- take on a parental role within the home
- have unexplained amounts of money
- take about terrifying dreams
- soil or wet themselves or regress to other childhood behaviours including thumb sucking
- begin or revisit rocking behaviour
- have urinary infections
- have soreness or bleeding in genital or anal areas or in the throat
- misuse drugs or alcohol

8. What to do during a disclosure

During a disclosure:

- Stay calm, providing a safe place for the child to disclose
- Listen to the child without interrupting them
- Avoid becoming upset
- Give the child adequate physical space

Things to say to a child during a disclosure:

- "What's happened is not your fault"
- "I'm glad you told me"
- "I am sorry this happened to you"
- "I will support you"

Never:

- promise to keep a secret
- express shock or embarrassment
- question the truth of what is being said
- ask leading or probing questions
- take photographs of a mark or injury
- ask the child to write a statement (however the child may ask to write something down if they are embarrassed)
- ask a child to sign a statement you have written
- express anger towards abuser

Following the Disclosure

- Leave the child with another adult whilst you report your concerns **VERBALLY** immediately to the Designated Safeguarding Lead Lisa Richards
- Record your concerns on the school's child protection/safeguarding concern form kept in the grey filing cabinets in both offices and pass to Lisa Richards in a sealed envelope marked **CHILD PROTECTION CONFIDENTIAL**
- Use the child's own language and exact words and write down what the child tells you e.g. 'The child told me...'
- Differentiate between fact, opinion, interpretation, observation and allegation.
- Be accurate e.g. 'She showed me a burn mark on her right forearm. She told me her mother did this with a cigarette'
- Opinions should be clearly stated e.g. 'I thought this might be because...In my opinion...'
- Note down any witnesses or anyone who might corroborate your record
- Record the date and time of the incident and add your signature to the record.
- **Place the child protection/child welfare form in the hand of the Designated Safeguarding Lead, Head Teacher or other senior member of staff**
- Consider how best to manage your own feelings and seek out your line manager or the Safeguarding Lead if you continue to be personally anxious or affected by the disclosure.
- Following reporting your concerns remember that the disclosure not be discussed with other staff without the agreement of the Designated Safeguarding Lead.

9. Child Protection and Child Welfare Flowchart

If a member of staff or volunteer has concerns about a young person's welfare because the child has disclosed abuse towards them, or the member of staff is concerned by physical or behavioural changes in the child which may indicate abuse or neglect, they must report their concerns **immediately to the Designated Safeguarding Lead Lisa Richards or a senior member of staff. Consideration should be given for the need to immediately protect the child by contacting the police or ensuring emergency medical treatment.** The member of staff or volunteer should record their concerns in writing, describing exactly what the child has said and/or what they have observed. *(All adults within the school must follow the School's Code of Conduct and attend regular safeguarding training. All adults must read Part 1 of the DfE guidance Keeping Children Safe in Education 2014).*



Allegations or concerns about an adult working within the school should be shared with the headteacher or Designated Safeguarding Lead. Concerns about the headteacher should be reported to the Chair of Governors Amanda Patmore or Local Authority Designated Officer. (tel 0151 233 3700)



The Designated Safeguarding Lead will draw upon Liverpool Safeguarding Children's Board: 'Responding to Need Guidance and Levels of Need Framework' (www.liverpoolscb.org/) and ring Careline to share the school's concerns. This may lead the school to make a written referral to Children's Services. The Designated Safeguarding Lead will agree with Careline (tel 0151 233 3700) how the parent/carers will be informed, if that is appropriate. **Anybody can make a referral (tel 0151 233 3700). If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration.**

Given that 'concerns should always lead to help for the child at some point' the school should undertake, with other agencies, an Early Help Assessment when the child's level of need has not met the threshold for statutory assessment.

10. Record Keeping

- All Child Protection, Child in Need or Early Help Assessments are locked away securely with limited access to named colleagues. Child protection records are kept separately to the child's normal file.
- Ofsted have the right to request to see a child's file, to be assured that the school is recording and sharing information appropriately.
- The Local Safeguarding Board can request a copy of a child's file as part of a serious case review, critical incident review or multi-agency case audit.
- A copy of the safeguarding records are forwarded to any educational setting that the child leaves to attend (new school, pupil referral unit, special school, student support centre and including further education colleges for children below the age of 18).
- The child's original records are archived and kept securely until the child reaches the age of 25. The CT and/or the Safeguarding Lead discuss the child's needs with the new setting at the point at which records are transferred.
- School retains evidence of how the records were transferred (signed receipt).

Records should indicate:

- The build-up of low level concerns over time
- Discussions with other agencies
- Any issues or actions arising from meetings, including case conferences, Child in Need meetings and Early Help review meetings.
- How parents have been challenged and supported appropriately
- Decisions to share information
- Decisions not to share information
- How agencies have been challenged
- How actions have been completed in a timely manner
- If the case records have been audited as part of management supervision
- The child's views, wishes and feelings
- Any non-verbal behaviour by a child unable to verbalise their feelings

Records should be legible and indicate clearly who has provided the information. All pages in the file should be numbered and a chronology of events and actions provided at the front of the file.

11. Safeguarding Supervision

Supervision is a structured conversation between a colleague who has direct oversight of cases involving child welfare, safeguarding or child protection issues and their line manager. At St Michael in the Hamlet this meeting takes place at least every half term. Supervision aims to:

- Support the caseworker to understand and manage their own emotions and well-being.
- Review the actions and decisions made for a child to ensure policy, guidance and best practice are being followed.
- Enable the caseworker to reflect and analyse barriers to progress so that appropriate actions can be developed and the child's needs met.
- Enable the caseworker to manage their workload, identify priorities and work with other agencies to manage risk.
- Enable the school to consider if any risks around the child have increased and whether the school needs to escalate their concerns with Children's Services and other agencies

The supervision form in the appendix section is used to record these meetings. Supervision compliments the day to day conversations at St Michael in the Hamlet Safeguarding Team have about safeguarding and the regular cycle of school meetings which may include safeguarding as an agenda item. Supervision also compliments other school strategies to quality assure its safeguarding practices, including the Safeguarding audit.

12. Information sharing

1. **Remember that the Data Protection Act is not a barrier to sharing information** but provides a framework to ensure that personal information about living persons is shared appropriately.
2. **Be open and honest** with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. **Seek advice** if you are in any doubt, without disclosing the identity of the person where possible.
4. **Share with consent where appropriate** and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case.

5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.

6. Necessary, proportionate, relevant, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.

7. Keep a record of your decision and the reasons for it - whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Always consult with Careline before informing parents of your referral to ensure you don't put the child at further risk or impede a police investigation.

13. Early help (Early Help Assessment Tool)

The DfE in Keeping Children Safe in Education states:

'school and college staff are particularly important as they are in a position to identify concerns early and provide help for children, to prevent concerns from escalating'

At St Michael in the Hamlet School we work with other agencies to provide Early Help and carry out Early Help Assessments. For children with additional or unmet needs that require a multi-agency co-ordinated approach and plan, an **Early Help Assessment** is drawn up to provide early intervention where a child does not meet the thresholds for statutory assessment by Children's Services. The lack of parental engagement may well lead to the need for a Child in Need/Child Protection Referral.

We match our concerns to the LSCB's levels of need guidance and consult with Careline.

Lisa Richards and Gill Larsen have attended EHAT lead professional training. EHAT documentation is locked securely in the Safeguarding cabinet.

Governors should monitor the effectiveness of the school's engagement in multi-agency early help and the number of Early Help Assessments undertaken by the school.

Resources and guidance can be found at:

liverpool.gov.uk/ehat

14. Safeguarding Quality Assurance

- Governors and school leaders should examine the evidence to confirm the school is meeting its statutory responsibilities (section 3.1 of this handbook)
- Governors should examine the evidence that the school provides Early Help to children and works in partnership with other agencies
- The Head Teacher and Chair of Governors should regularly review the Single Central Record and confirm the appropriate pre-employment checks have been undertaken
- Governors should scrutinise the evidence presented in respect of the Local Authority 175 Safeguarding Audit
- Governors and school leaders should monitor the actions arising from the Local Authority 175 Safeguarding Audit
- Governors should ensure the school has undertaken statutory training (safer recruitment, regular child protection training for all staff, Designated Safeguarding Lead, induction of new staff and volunteers, first aiders)
- Governors should explore how the school is assured that all staff are aware of specific guidance, for example: child protection procedures, female genital mutilation, child sexual exploitation, staff and volunteers' code of conduct,
- Governors should explore the range of evidence that Ofsted will evaluate (section 3.2 of this handbook)
- Governors should examine the arrangements for managerial oversight of the Designated Safeguarding Lead and safeguarding team
- Governors should examine the arrangements for and outcomes of the scrutiny of safeguarding records
- Governors should examine how the curriculum is mapped to help young people stay safe
- Governors should conduct a learning walk to review safeguarding practices, taking the opportunity to explore with pupils if they feel safe
- The safeguarding governor should have a structured conversation with the Designated Safeguarding Lead to review school practice and prepare a termly report to the full governing body

15. Complaints

Complaints about safeguarding should follow the school's complaints policy. The school and Local Authority also have whistle blowing procedure.

Appendix 1.

Child protection / child welfare concern form

Concerns should be reported **immediately** to the Designated Safeguarding Lead. Following verbally reporting your concerns complete this form and hand it to the Designated Safeguarding Lead. The school's child protection procedures should always be followed.

Name of Student: _____

Staff Name (printed): _____

Signed: _____

Date: _____ Time: _____

Summary of disclosure or concern:

(Differentiate between facts and opinions, use the child's own words)

Actions taken and recorded by the Designated Safeguarding Lead:

(include any names and contact details of those spoken to, the views of the child)

Appendix 2

Specific guidance in relation to forced marriage, female genital mutilation, child sexual exploitation, children with disabilities and neglect

Forced Marriage (FM) and Honour Based Violence (HBV) guidance

Cases of forced marriage and honour based violence can involve complex and sensitive issues. It is important to remember the '**Once Chance Rule**' which reminds us to believe them and act immediately to protect them as we may only get one opportunity. Schools will find the following information will support them to understand their responsibilities. Schools should always contact **Careline** if they believe a child is at risk of harm or in significant need. They should contact police to provide immediate protection to the child.

The Law: Forcing someone to marry against their will is now a criminal offence. The maximum penalty for the new offence of forced marriage is seven years imprisonment. Law enforcement agencies will also be able to pursue perpetrators in other countries where a UK national is involved under new powers defined in legislation. The new criminal offences will work alongside existing civil legislation (Forced Marriage Protection Orders - FMPOs) allowing victims to pursue a civil or criminal option.

Definitions:

An Arranged Marriage: Whilst both the spouses' families take a lead role to arrange the marriage the choice to accept the arrangements remains with the individuals themselves.

A Forced Marriage: Duress is often involved to force someone in to marriage against their wishes. This can include someone with learning difficulties who is unable to consent. Duress can include physical, financial, sexual or emotional pressure.

Honour Based Violence: 'Honour' based violence is a crime which is committed to protect or defend the perceived honour of the family and/or community.

Both Forced Marriage and Honour Based Violence is a fundamental abuse of someone's human rights.

What are the justification behind Forced Marriage and so called honour killings/violence?

- As a response to a perceived "dishonour"
- Controlling unwanted behaviour and sexuality
- Preventing unsuitable relationship outside, for example ethnic, culture, religious or caste group
- Strengthen family links
- Ensuring land, property and wealth remain within the family
- Cultural/religious belief
- Issues related to immigration
- Peer and family pressure

Communities: **Anyone** can be at risk of forced marriage and honour based violence, but some communities are more at risk than others including Pakistan, Bangladesh, India, Africa, Turkey, Afghanistan, Iran and Iraq.

If you become aware of cases of forced marriage and honour based violence consider the following advice. Do the following:

- See them immediately in a secure and private place where the conversation cannot be overheard.
- See them on their own - even if they attend with others
- Consider the need for immediate protection and placement away from family
- **Refer them to Careline (follow the Liverpool forced marriage protocol on www.liverpoolscb.org)**
- Remember if a child is at risk you cannot keep a secret but must refer them to
- Careline and Police

Never: mediate with the family, fail to report, under estimate the risk, use a family member as an interpreter or send the child away

Useful Contacts:

National Support

- Forced Marriage Unit 0207008 015, fmufco.gov.uk
- Child Helpline: 0800 1111 www.childline.org.uk
- Karma Nirvana Helpline: 0800 5999 247
- NSPCC: 080 8800 5000
- Iranian/Kurdish Women's Right Organisation 0207 9206460

Local Contacts:

- Merseyside Forced Marriage & HBV Protocol: www.liverpoolscb.org
- Savera Liverpool (DAS for BAMER Communities): 07716 266 484
- <http://www.saveraliverpool.co.uk/>
- Amadudu (BME Refugee): 0151 734 0083
- South Liverpool DVS; 0151 494 2222
- LDAS 0151 263-7474
- Irish Community Care: 0151 237 3987
- ABC DVP: 0151 482 2484
- WHISC: 0151 707 1826
- Liverpool Domestic Abuse service: 0151 263 7474

Useful Words

You may overhear some of the following words which may raise your concerns. Equally knowledge of these words may build trust with the victim.

Izzat - mainly used in South Asian families meaning Honour

Namus - used very often in Middle Eastern Context - interested as honour as it directly relates to women's virtue and overall sexual integrity

Ird (Bedouin) - code of honour for women, linked to sexual integrity "protected by men" and linked to Sharaf

Sharaf - general honour code which includes responsibility for protecting Ird

Sharam - used mainly in South Asian communities meaning 'shame'

Diss - used mainly in Western urban context taken from the meaning 'disrespect'

Female Genital Mutilation:

The World Health Organisation (WHO) defines 'Female Genital Mutilation', also referred to as 'Female Genital Cutting' and 'Female Circumcision' as: all procedures that involve partial or total removal of the external female genitalia or other injury to the female genital organs for non medical reasons.

According to the WHO, between 100 and 140 million girls and women worldwide have undergone some sort of FGM and each year a further 2 million girls are at risk.

The International Centre for Reproductive Health estimates that in the UK 279,500 women have undergone FGM, and approximately 22,000 girls under the age of 18 are at risk each year.

FGM is practised in more than 28 countries across Africa, Asia and the Middle East Burkina Faso, Djibouti, Egypt, Eritrea, Ethiopia, The Gambia, Guinea, Liberia, Mali, Mauritania, Sierra Leone, Somalia and Sudan. UK communities most at risk include Kenyan, Somali, Sudanese, Sierra Leoni, Egyptian, Nigerian and Eritrean as well as non-African communities including Yemeni, Afghani, Kurdish, Indonesian and Pakistani.

National Legislation

In England, Wales and Northern Ireland all forms of FGM are illegal under the Female Genital Mutilation Act 2003. A person is guilty of an offence if he/she, excises, infibulates or otherwise mutilates the whole or any part of a girl's labia majora, labia minora or clitoris except for operations performed on specific physical and mental health grounds by registered medical or nursing practitioners. It is also an offence to assist a girl to mutilate her own genitalia. FGM is an offence which extends to acts performed outside of the UK and to any person who advises, helps or forces a girl to inflict FGM on herself. Any person found guilty of an offence under the Female Genital Mutilation Act 2003 will be liable to a fine or imprisonment of up to 14 years, or both.

FGM is considered to be a form of child abuse as it is illegal and is performed on a child whom is unable to resist or give informed consent.

At what age is FGM carried out?

The age at which FGM is carried out varies greatly. It can be carried out any time from shortly after birth up to adulthood. Girls between 4 and 14 years of age are most at

risk. In adults FGM may be carried out immediately before marriage and immediately after child birth.

FGM is usually carried out by an older woman in a practicing community, for whom it is a way of gaining prestige. It can also be a lucrative source of income.

The procedure is normally carried out by several women unexpectedly approaching a girl and holding her down on the floor. Hazards include lack of medical expertise, lack of anaesthesia and lack of hygiene. Instruments used can include unsterilized household knives, razor blades, broken glass and stones.

Types of FGM

FGM has been classified by the World Health Organisation into 4 types:

Type 1 - (Sonna) Cutting away the clitoral hood, with or without the removal of the clitoris

Type 2 - (Excision) Removal of the clitoris with partial or total removal of the labia minora

Type 3 - (Infibulation) Removal of the clitoris, labia minora and labia majora with stitching of the vaginal opening

Type 4 -Involves tribal cutting or burning of the vaginal orifice or the use of corrosives to narrow the vaginal passage. This may include pricking, piercing, incision and scraping.

Justifications used by those who practice FGM

In reality, there is no social, moral or religious justification for FGM. However, those who support FGM may use the following reasons or 'myths' to try to explain the practice. They may say FGM:

- Is part of being a woman;
- Is a rite of passage;
- Gives a girl social acceptance, especially for marriage;
- Gives the girl and her family a sense of belonging to the community;
- Fulfils a religious requirement mistakenly believed to exist;
- Perpetuates a custom / tradition;
- Helps girls and women to be clean and hygienic;
- Is mistakenly believed to make childbirth safer for the infant.

HM Government (2011) Female genital mutilation: multi-agency practice guidelines indicate:

Signs, symptoms or indicators of a young person at risk of FGM

- A child talking about a special ceremony
- A family arranging a long holiday abroad
- Knowledge that an older sibling has undergone FGM
- A child belonging to one of the high risk communities listed above
- A young person talking of getting ready for marriage, becoming a woman or being cut
- A young person becoming withdrawn and anxious
- A young person being concerned about a forthcoming holiday

Signs, symptoms or indicators of children who may have been subject to FGM

- Prolonged absence from school
- Changes in behaviour following a holiday e.g. becoming more secretive
- Becoming more withdrawn or subdued or isolating themselves from others
- Looking uncomfortable or finding it difficult to sit still
- Complaining about pain in their groin
- Menstrual problems or bladder/urinary tract infections
- Talking about having to keep a secret
- Avoiding physical activity

Professionals should be aware of the ONE CHANCE RULE whereby a young person may say something that suggests they are at risk.

What schools should do:

- Contact Careline and the police without delay
- Listen to the child alone

What schools should NEVER do:

- Delay sharing information
- Attempt to mediate with the family or the community
- Inform the parents they have made a referral **without** the consent of police and Children's Services

Remember: The parents may believe they are doing the right thing by their child and informing them may put the child at risk because they may act to silence her or bring forward their plans to take her abroad or undertake FGM.

We must remember that FGM is gender based violence and not a cultural practice or celebration of a girl's development.

NSPCC FGM Helpline: 0800 028 3550 Email: fgmhelp@nspcc.org.uk

The Same services listed at the end of the Forced Marriage, can be contacted for support and advice for FGM.

Child Sexual Exploitation

Schools should follow the Pan-Merseyside protocol and pathway available on the LSCB website: <http://www.liverpoolscb.org/>

Child Sexual Exploitation is largely a 'hidden problem'. The law defines anyone below the age of 18 as children. Legally a child below the age of 13 is not capable of consenting to sex. Whilst the legal age that someone can consent to sex is 16 years of age, consensual non-exploitative sex between children of similar age below 16 is unlikely to lead to a prosecution. However it is clear children are unable to freely consent to sexual activity when threatened by violence, when there is an imbalance in power or when they are under the influence of alcohol or drugs. Sadly there is evidence that too many professionals and communities describe the victims as making 'life style choices by engaging in risky behaviour' and even 'promiscuous', 'prostituting themselves' or 'liking the glamour'. Here there is a clear failure to acknowledge the initial manipulative grooming process or the threats or actual violence. Unfortunately these children's own challenging behaviours and criminal activities are seen ahead of the underlying causes, even when sexual exploitation is recognised. It is evident that poor assessments do not always lead to sexual exploitation even being identified. In addition, isolation from friends and family and a growing dependence on abusers is a characteristic of child exploitation cases.

A definition of sexual exploitation:

'Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.' National Working Group

Research by Barnardo's (Puppet on a String: The urgent need to cut children free from sexual exploitation, 2011) indicates that there are different forms of sexual exploitation:

1. *Inappropriate relationships which usually involve an older perpetrator who has power or control over the young person (physical, emotional or financial). The*

young person may believe they are in a loving relationship or may simply be expected to have sex for food and shelter.

2. The 'Boyfriend' model is where the perpetrator grooms the young person to believe they are in a relationship before coercing or forcing them to have sex with friends and others. Barnardo's report a rise in this type of peer activity which is sometimes linked to gang activity.

3. Organised/networked sexual exploitation or trafficking. This is undertaken by networks of serious organised criminals who organise sex parties and prostitute young girls and boys. This may involve girls being traded and moved around the country. Young boys and girls will also be forced into recruiting other victims.

Barnardos provides the following key guidance:

Who is most at risk?

Young people who are socially, emotionally and economically vulnerable are at particular risk of sexual exploitation.

The following are typical vulnerabilities in children prior to abuse:

- Living in a chaotic or dysfunctional household (including parental substance use, domestic violence, parental mental health issues, parental criminality).
- History of abuse (including familial child sexual abuse, risk of forced marriage, risk of 'honour'-based violence, physical and emotional abuse and neglect).
- Recent bereavement or loss.
- Gang association either through relatives, peers or intimate relationships
- Attending school with young people who are sexually exploited.
- Learning disabilities.
- Unsure about their sexual orientation or unable to disclose sexual orientation to their families.
- Friends with young people who are sexually exploited.
- Homeless.
- Lacking friends from the same age group.
- Living in a gang neighbourhood.
- Living in residential care.
- Living in a hostel, bed and breakfast accommodation or a foyer.
- Low self-esteem or self-confidence.
- Young carer.
- Excluded from school

The following signs and behaviour are generally seen in children who are already being sexually exploited:

- Associating with significantly older men
- Getting into cars of an unknown male, including being picked up at school or care home
- Having keys to unknown premises or having hotel keys/key cards

- Unusual association with taxi drivers/firms
- Missing from home or care, absence from school.
- Regularly returning home late or going missing overnight or for several days
- Knowledge of different towns or cities
- Being defensive about where they have been and what they have been doing
- Physical injuries and having marks or scars on the body which they try to conceal
- Drug or alcohol misuse.
- Involvement in criminal offending behaviour
- Becoming disruptive at home or school
- Repeat sexually-transmitted infections, pregnancy and terminations.
- Change in physical appearance including looking tired or ill and sleeping during the day
- Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites.
- Disclosure of a sexual assault which is later withdrawn
- Estranged from their family and being hostile and aggressive with parents/carers
- Receipt of gifts from unknown sources. (e.g. money, mobile phones, clothes, jewellery)
- Having multiple mobile phones and/or sim cards
- Overt sexualised dress, Sexting
- Changes in physical appearance (more/less make up, poor self image)
- Recruiting others into exploitative situations.
- Poor mental health.
- Self-harm or thoughts of or attempts at suicide
- Displaying sexually inappropriate or harmful behaviours

Adults and young people should be aware of the grooming process which involves:

Targeting Stage:

- Observing and identifying a vulnerable young person and befriending them and gaining their trust.

Friendship Forming Stage:

- Making the young person feel special
- Spending time alone with them
- Giving gifts, compliments, food, shelter
- Listening and remembering
- Keeping secrets and being a listening 'ear'
- Offering support and protection
- Pretending 'to understand them'
- Testing out physical contact e.g. accidental touching

Loving Relationship Stage

- Establishing a sexual relationship
- Becoming their boyfriend/girlfriend
- Lowering their inhibitions e.g. by showing them pornography

- Engaging in forbidden activities e.g. night clubs, alcohol and drugs
- Being inconsistent by building up hope and then punishing them

Abusive Relationship Stage

- Becomes 'an unloving' sexual relationship
- Withdrawal of love and friendship
- Isolating them from family and friends
- Manipulating the young person by suggesting that the young person 'owes them'
- Threatening behaviour
- Physical and sexual assaults
- Giving them drugs and alcohol
- Making them have sex with other people
- Reinforcing dependency by stating to the young person they are 'damaged goods'
- Developing feelings of guilt, shame and fear within the young person

The DFE offer the following reasons why disabled children are more vulnerable to abuse:

- Many disabled children are at an increased likelihood of being socially isolated, with fewer outside contacts than non disabled children
- Their dependency on parents and carers for practical assistance in daily living, including intimate personal care, increases their risk of exposure to abusive behaviour
- They have an impaired capacity to resist or avoid abuse
- They may have speech, language and communication needs which may make it difficult to tell others what is happening
- They often do not have access to someone they can trust to disclose that they have been abused
- They are especially vulnerable to bullying and intimidation
- Looked after disabled children are not only vulnerable to the same factors that exist for all children living away from home, but are particularly susceptible to possible abuse because of their additional dependency on residential and hospital staff for day-to-day physical care needs.

Examples:

- A bruise in a site that might not be of concern on an ambulant child, such as the shin, might be of concern on a non-mobile child
- Not getting enough help with feeding, leading to malnourishment
- Poor toileting arrangements

- Lack of stimulation
- Unjustified and/or excessive use of restraint
- Rough handling, extreme behaviour modification e.g. deprivation of liquid, medication, food or clothing
- Unwillingness to try to learn a child's means of communication
- Ill-fitting equipment e.g. callipers, sleep boards, inappropriate splinting
- misappropriation of a child's finances
- Invasive procedures which are unnecessary or are carried out against the child's will.

Neglect

'Child neglect in 2011 - An annual review by Action for Children in partnership with the University of Stirling':

Neglect is extremely damaging to children in the short and long term. The experience of neglect affects physical, cognitive and emotional development; friendships, behaviour and opportunities. For many people, the most obvious form of neglect is poor physical care. It is certainly very damaging for children's health and development to be inadequately fed and clothed. But neglect can also take many other forms, not all of them accompanied by the obvious physical signs of being severely under- or over-weight, dirty and scruffy. .

Some sign, symptoms and indicators of neglect:

- being left alone in the house or in the streets for long periods of time
- lack of parental support for school attendance
- being ignored when distressed, or even when excited or happy
- lack of proper healthcare when required
- having no opportunity to have fun with their parents or with other children
- speech and language delay
- missed/failed development checks
- learning difficulties or poor educational progress
- poor attendance, including nursery
- general development delay
- young children picked up late from nursery/school
- poorly supervised both within and outside the home, enabling the child to engage in risk taking behaviour
- caring for young siblings
- frequent accidents or minor injuries/bruising
- poor dental care
- recurrent infections, nappy rash, head lice, skin conditions
- not registered with a GP or Children's Centre

- delay in seeking medical help, missing medical appointments, inadequate immunisations
- not agreeing to assessments or referrals for the child's behaviour or mental health
- failure to follow up a child's hearing or sight problems
- weight loss or gain, gross obesity
- lack of height gain
- excessively hungry, hoarding or stealing food, feeding problems
- inadequate unbalanced diet
- inappropriately dressed for the weather, inappropriate clothes for age, gender or size
- the child or their clothes are unclean or smell
- lack of parental stimulation
- poor parental attachment to the child
- parent ignores child's emotional needs and fails to provide appropriate stimulation
- lack of age appropriate boundaries set for the child
- child has behavioural difficulties, under stimulation, cries excessively, seeks attention or is withdrawn
- poor concentration or finds it difficult to settle in
- destructive or aggressive
- child socially isolated from peers, absence of friends

Appendix 3

Additional safeguarding advice for visitors and volunteers

Our school is committed to safeguarding children and promoting children's welfare and expects all staff, governors, volunteers and visitors to share this commitment and maintain a vigilant and safe environment. It is our willingness to work in a safe manner and challenge inappropriate behaviour that underpins this commitment.

By signing in and out of the visitors' book you are agreeing to follow the advice within this leaflet. All visitors must wear the visitor's badge provided by reception. An adult without a badge will be accompanied to the school's reception to confirm they have signed in.

Visitors must be accompanied at all times by a member of the school staff.

Unsupervised visitors: If your visit involves unsupervised contact with young people you will be asked to show the photographic ID badge provided by your employer and written confirmation that appropriate DBS checks have been made. Depending on your role and the organisation you are from you may be required to show your Enhanced DBS Certificate. We will note down the DBS number and date issued but will not make a copy of it. You will also need to read the school's Code of Conduct for Adults and Part 1 of the DFE's Guidance, 'Keeping Children Safe in Education' (2014). The school's Child Protection Policy is available on the school's website.

If you have ANY concerns about a child's welfare or well being or have a concern about the behaviour of any adult within the school towards a child:

- discuss your concerns without delay with the Designated Safeguarding Lead or the Headteacher or a member of the safeguarding team.
- Remember it is important to share your concerns even if you are unsure.
- Anyone can make a referral to Liverpool Children's Services (tel: 0151 233 3700)
- The Local Authority Designated Officer (L.A.D.O.) for Managing Allegations Against Staff can be contacted on 0151 225 8101. The school office can provide you with a copy of the school's procedures for Managing Allegations Against Staff.

If a child makes a disclosure to you:

- Avoid being shocked or embarrassed.
- Listen to the child without interrupting them.
- Do not promise to keep a secret.
- Do not ask the child any leading questions.
- Reassure them that 'it is not their fault and they have done the right thing to tell you'.
- Immediately following the disclosure report your concerns to the Designated Safeguarding Lead (see above) and write down what the child said using the child's own words and phrases. Sign and date this document and hand it to the Designated Safeguarding Lead.
- Consider how best to manage your own feelings
- Following reporting your concerns remember that the disclosure and the child's identity should remain confidential

The school has a full code of conduct to encourage safer working practices for all adults working with young people, including advice regarding 'e-safety'.

Remember

- provide a positive role model to young people
- dress appropriately ensuring your clothing is not likely to be viewed as offensive or revealing
- treat all members of the school's community with respect and tolerance
- work with children so that you are visible by a member of the school staff
- respect a child's privacy and dignity
- always be able to justify any physical contact you have with a young person
- always report any situations that arise that you may feel may give rise to a complaint or misunderstanding in respect of your own actions

Never:

- Photograph a child without the school's permission
- Never use your personal mobile phone in areas used by young people
- Ignore inappropriate behaviours towards children either by other children or adults

- Share personal details with a child
- Meet or contact the child out of school including by text, email, Facebook or other social media or give a child a lift home
- Discuss the school, children or adults working within the school on social media
- Make inappropriate comments to a child including racist, homophobic, sexist or sexualised comments
- Give gifts to a young person (unless part of the school's agreed rewards policy or with the agreement of your line manager) or show them preferential treatment

Key Safeguarding Staff:

Headteacher: Ruth Town

Designated Safeguarding Lead: Lisa Richards

Safeguarding Team: R Town, L. Richards, K. Crook, J. Agis, A. Patmore, G. Larsen, T. Calderbank

Chair of Governors: A Patmore

Safeguarding Governor: A. Patmore

Other Safeguarding Guidance:

In the case of a fire follow the following procedures:

- There should be no delay in ringing 999 and requesting fire and police....

If a child or member of staff needs emergency treatment or first aid:

- There should be no delay in ringing 999 and requesting an ambulance....

Appendix 5 Key contacts / Websites

- **Contacts:**
- **Careline:** 0151 233 3700 carelinechildrensservices@liverpool.gcsx.gov.uk
- **Local Authority Designated Officer (LADO):** 0151 225 8102/8122
- **School Improvement Liverpool:** phil.cooper@liverpool.gov.uk 0151 233 3901/4020
07921942091
- **LSCB Tel:** 0151 225 4928/ 4929/ 4956 <http://www.liverpoolscb.org/>
- **Early Intervention Team:** 0151 233 5233 (referrals via Careline)

- **EHAT Coordinator:** pauline.ashton2@liverpool.gov.uk
- **E-Safety Lead Officer:** paul.bradshaw@liverpool.gov.uk
- **Local Authority Major Emergency Duty Team** 0151 236 2635 (Only to be used in emergencies. This is an ex-directory number and must not be issued publicly.)
- **Local Authority Press Office** 0151 225 2611
- **Legal** 0151 225 3020
- **Websites:**
- **Teacher Prohibition Orders Guidance and Hearing Outcomes:**
<https://www.gov.uk/government/collections/teacher-misconduct>
- **Teacher Status Check (information for employers):**
<https://www.gov.uk/teacher-status-checks-information-for-employers>:
- **Disclosure and Barring Service (DBS) checks, update service and DBS referrals:**
- <https://www.gov.uk/disclosure-barring-service-check/contact-disclosure-and-barring-service>
- <https://www.gov.uk/government/publications/dbs-referrals-form-and-guidance>
- <https://www.gov.uk/dbs-update-service>
- **DfE**
Safeguarding: <http://www.education.gov.uk/childrenandyoungpeople/safeguardingchildren>
- **Ofsted FAQ:** <http://www.ofsted.gov.uk/schools/for-schools/safeguarding-children>
- **NSPCC:** <http://www.nspcc.org.uk/> **Barnardos:**
<http://www.barnardos.org.uk/>
- **Advice on statutory guidance to schools:**
<https://www.gov.uk/government/publications/statutory-policies-for-schools>
- **DfE Safeguarding Guidance:** <https://www.gov.uk/childrens-services/safeguarding-children>
- **DfE Guidance to schools:**
- <https://www.gov.uk/government/collections/departmental-advice-schools>

Appendix 7 Preparing for Ofsted

Schools should refer to Ofsted's School Inspection Handbook (Section 5 Inspections) and the briefing paper to inspectors: Inspecting Safeguarding.

Inspectors will evaluate:

- At the start of the inspection an Ofsted inspector will now 'ask for a list of referrals made to the designated person for safeguarding in the school and those that were subsequently referred to the local authority, along with brief details of the resolution'
- Paragraphs 166-174 of Ofsted's School Inspection Handbook in respect of 'Behaviour and Safety'
- Whether the school is meeting its statutory requirements in respect of safeguarding training and safer recruitment practices, including pre-employment checks. (see section 3.1)
- If all staff have read part one of Keeping Children Safe in Education (DfE 2014)
- Staff's awareness of the practice of female genital mutilation (FGM) and child exploitation, children missing from education and the potential risks and indicators. Ofsted will check if all staff have read part 1 of Keeping Children Safe In Education (DfE April 2014).
- The school has a code of conduct for staff and volunteers.
- The Single Central Record (including a Prohibition or Interim Prohibition Order Check for teachers and a separate Children's Barred List Check)
- Whether pupils feel safe and their ability to assess and manage risk appropriately and keep themselves safe.
- The extent to which leaders and managers take steps to promote the safety of all pupils and ensure they are safe in school.
- The school records and documentation, for example the achievement and safety of pupils in alternative provision. Students placed in alternative provision should be safe at all times. If the school runs, or runs in partnership with other schools, an off-site unit for pupils whose behaviour is poor or with low attendance, an inspector should visit the unit briefly to assess safeguarding procedures, the quality of teaching and how effectively the unit helps to improve pupils' behaviour, learning and attendance.
- The policies and procedures for ensuring visitors to the school are suitable, checked and monitored.
- A small sample of case studies to consider the experience of particular individuals and groups.
- Views expressed by pupils, including different groups of pupils, of their experiences of others' behaviour and of their attitudes towards them.
- Rates, patterns of and reasons for fixed period and permanent exclusions. Any evidence of the use of 'unofficial exclusion' or any evidence that a pupil has been removed from a school unlawfully.

- The effectiveness of the school's actions to prevent and tackle discriminatory and derogatory language - this includes language that is derogatory about disabled people, and homophobic and racist language
- Overall and persistent absence and attendance rates for different groups of pupils. The rigour with which absence is followed up, particularly where there are safeguarding concerns and checks made when pupils ceased to attend. The punctuality over time in arriving at school and at lessons
- The impact of the school's strategies to improve behaviour and attendance
- The number of pupils taken off role as a result of factors related to behaviour, safety and attendance and the decision making process involved in taking pupils off roll.
- The views of parents, staff and governors.
- The extent to which pupils are able to understand, respond to and consider risk, eg the risks associated with extremism and the risks associated with e-safety, substance misuse, knives and gangs, relationships including sexual relationships, water, fire, roads and railways. The extent to which pupils are able to understand, respond to and calculate risk effectively, for example risks associated with child sexual exploitation, domestic violence, female genital mutilation, forced marriage, substance misuse, gang activity, radicalisation and extremism and are aware of the support available to them.
- The school's response to any extremist behaviour or discriminatory behaviour shown by pupils.
- The effectiveness of the school's risk assessments both within school and externally, and the school's action following any serious safeguarding incident.
- Areas of the school mentioned by pupils as being unsafe, including the playground and toilets.
- That the school systematically records every incident where restraint or physical intervention has been used. In some cases inspectors may consider the number and range of recorded incidents to ensure the school is managing very challenging behaviour and any referrals over time to the LADO (Local Authority Designated Officer for allegations against staff).
- For residential provision that the minimum standards are in place and are monitored.
- For special schools that the school has considered the specific risks that students with SEN or disabilities may experience or present. They will discuss with staff their awareness of specific safeguarding issues related to disabled pupils.

Appendix 8 Record of Safeguarding Supervision

Date:

Present:

Name	Role	Signature

Young people discussed:

Outcomes and actions agreed:

Action	By whom	Date achieved

Date of next meeting:

Appendix 9 Termly Reporting to governors template

Number of new Child Protection referrals made	
Number of new Child In Need referrals made	
Number of new Early Help Assessment Tools raised (EHATs) (previously Common Assessment Framework)	
Total number of students subject to child protection plans	
Total number of students subject to child needs plans	
Total number of students subject to EHATs	
Total number of students subject to EHATs that the school is the lead professional	
Number and circumstances of allegations against staff reported to LADO	
Number of Children in Care (LAC)	
Number of bullying incidents categories e.g. cyberbullying, homophobic, physical etc (reference gender, ethnicity and year group)	
Number of racist incidents	
Number of exclusions (reference SEN, gender, ethnicity and year group)	
Number of children taken off roll relating to safeguarding issues or complaints	
How many Operation Encompass notifications has the school had?	
How many have led to EHATs being raised?	
How many have led to a referral to Children's Services for statutory services?	

What actions have arisen in respect of the analysis of the above data and attendance, progress data and participation rates for vulnerable students?

The governors should consider how effectively safeguarding practices are quality assured by the school including:

- the management oversight (supervision) of the Designated Safeguarding Lead and Safeguarding Team
- the effectiveness of record keeping
- the monitoring of any actions arising from the LA Safeguarding 175 Audit

Policy Reviewed October 2018

Next review: October 2019