# Safeguarding policy

**Tubers Safeguarding statement**

Tubers recognise its moral and statutory responsibility to safeguard and promote the welfare of all children and expects all staff to share this commitment. We recognise that all children, regardless of age, disability, gender reassignment, race, religion or belief, sex, sexual orientation or SEND have an equal right to protection from all types of harm or abuse. We endeavour to provide a safe and welcoming environment where children are respected and valued. We are alert to the signs of abuse, neglect and exploitation and follow our procedures to ensure that children receive effective support, protection, and justice. We listen to our pupils and take seriously what they tell us, children are aware of the adults they can talk to if they have a concern. When there are concerns for a child's welfare, we may need to share information and work in partnership with other agencies. We will ensure concerns are discussed with parents/carers first unless we have reason to believe that by doing so would be contrary to the child's welfare. This Child Protection and Safeguarding policy underpins and guides our safeguarding procedures and protocols.

**The purpose of this policy is:**

- To protect children and young people who receive Tubers services.
- Raise the awareness of all staff of the need to safeguard children and the overarching principles that guide Tuber's approach to safeguarding and child protection.
- Provide all staff with guidance on the procedures they should adopt in the event that they suspect a child, young person may be experiencing, or be at risk of experiencing, harm. Including (by DSL/DDSL) consideration of the use of appropriate assessments, resources, and agency support. ·
- Provide an environment in which children and young people feel safe, secure, valued, and respected, and that they will be listened to should they make a disclosure. ·
- Raise awareness that abuse can be both Familial and/or Contextual; and abusers can be both adult/s to child/ren or child/ren to child/ren. ·
- Demonstrate Tubers commitment to safeguarding and child protection of children, parents staff
- Provide a systematic means of monitoring children known or thought to be at risk of harm.
- To emphasise the need for high levels of communication between staff and the designated safeguarding leads internally, and with external agencies and partners, including our contribution to assessments, referrals, and support plans. ·
- To develop and promote effective working relationships with other partnership agencies, particularly Children's Social Care, Police and Health.
- Support children's development in ways that will foster security, confidence, positive attachments, safety and independence. ·

- Ensure that all staff working within Tubers who have substantial access to children have been checked as to their suitability, including verification of their identity, qualifications, and a satisfactory DBS check (according to guidance)2, and a single central record is kept for audit. ·
- Provide clarity and expectations on professional behaviours and code of conduct including lone working requirements and contact with children/families outside of the Tubers setting, including e-mail.

Reassuring victims that they are being taken seriously and that they will be supported and kept safe.

## Tubers Safeguarding Team Contact details

**Designated Safeguarding Lead (DSL) Rebecca Jones:** Safeguarding Lead uk & Head of Operations

**Telephone Number:** 01392 340246 / 07551 622490

**Email:** rebecca@tubers.uk

**Deputy Designated Safeguarding Lead (DDSL) Amy Rooney:** Deputy Designated Safeguarding lead & Provision Coordinator

**Email:** Provco.barnsley1@tubers.uk

**Safeguarding Officer Stephanie Murray:** Barnsley Mentor

## What is safeguarding?

Safeguarding is the action that is taken to promote the welfare of children and protect them from harm. This means:

- Protecting children from abuse and maltreatment
- Preventing harm to children's health or development
- Ensuring children grow up with the provision of safe and effective care
- Taking action to enable all children and young people to have the best outcomes.

## Terminology

**Safeguarding and promoting the welfare of children is defined as:**

- Providing help and support to meet the needs of children as soon as problems emerge.
- Protecting children from maltreatment, whether that is within or outside the home, including online.
- Preventing 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.
- Promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children.
- Taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework. (Working Together to Safeguard Children)

Child Protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including online.

Staff refers to all those working for or on behalf of Tubers, full or part time.

Child includes everyone under the age of 18 or 25 if a care leaver.

Parents refers to birth parents and other adults who are in a parenting role, for example stepparents, foster carers, adoptive parents, and LA corporate parents.

## Definitions

Safeguarding and promoting the welfare of children means:
- Protecting children from maltreatment
- Preventing 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 ● Taking action to enable all children to have the best outcomes.

Child protection is part of this definition and refers to activities undertaken to prevent children suffering or being likely to suffer significant harm.
Abuse is a form of maltreatment of a child and may involve inflicting harm or failing to act to prevent harm. Appendix 1 explains the different types of abuse.

Neglect is a form of abuse and is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Appendix 1 defines neglect in more detail.

Safeguarding children and child protection guidance and legislation applies to all children up to the age of 18. Child protection is part of the safeguarding process. It focuses on protecting individual children identified as suffering or likely to suffer significant harm. This includes child protection procedures which detail how to respond to concerns about a child.

## Our views on safeguarding

We believe that a child or young person should never experience abuse of any kind, ever. We have a responsibility to promote the welfare of children and young people and to keep them safe. We genuinely believe that safeguarding is everyone's responsibility and as such we are committed to practicing in a way that protects children and young people.

Our job at Tubers is to help children and young people become the very best they can be, but also to become responsible, resilient and safe.

This policy has been created based on laws and guidance that exist to protect children. We have a number of other policies and procedures including:

- Safe recruitment, induction and training
- Role of the Designated Safeguarding Lead
- Dealing with disclosures and concerns about a child or young person
- Managing allegations against staff
- Recording and information sharing
- Code of conduct
- Online safety
- Anti-bullying
- Complaints
- Health and safety

**We recognise that:**

- The welfare of the child is paramount in accordance with the Children Act 1989.
- All children, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse.
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- Working in partnership with children, young people, their parents/carers and other agencies is essential in promoting young people's welfare.

**We are committed to keeping children and young people safe by:**

- Valuing them, listening to and respecting them.
- Employing a Designated Safeguarding Lead.
  Adopting child protection and safeguarding practices through procedures and a code of conduct for staff and young people we work with, and their parents/carers.
- Developing and implementing an effective online safety policy and related procedures.
- Providing effective management for staff through supervision, support, training and quality assurance measures.
- Recruiting staff safely, ensuring all necessary checks are made.
- Recording and storing information professionally and securely and sharing information about safeguarding with children, their families and Tubers staff
- Using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, families and carers appropriately.
- Using our procedures to manage any allegations against staff appropriately.
- Creating and maintaining an anti-bullying 'no hate' environment and ensuring that we have a policy and procedure to help us deal effectively with any bullying that may arise.
- Ensuring that we have effective complaints measures in place.
- Ensuring that we provide a safe physical environment for our children, young people and staff by applying health and safety measures in accordance with the law and regulatory guidance.

We will remain vigilant and alert to online risks to children including, but not limited to:

- Grooming and the risk of online exploitation
- 'Sexting'
- Bullying
- The threat of online radicalisation
- Inappropriate content
- Illegal content

In terms of the overall safety of the children and young people we work with, we will be alert to indicators of other abuse including:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

## Supporting and Protecting Children:

We recognise that a child who is abused or witnesses' violence may feel neglected, helpless and humiliated and could experience barriers to making a disclosure and may feel unsafe to do so due to uncertainties about the consequences of disclosing. We understand that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn, there may be issues with sensory processing as well as the child exhibiting signs of emotional distress. We understand the impact on a child's mental health, behaviour, and education from familial and/or contextual abuse. Tubers may not only provide stability in the lives of children who have been abused or who are at risk of harm, but it plays a significant part in the prevention of harm to our children. Building trusting relationships with Tubers staff is critical in this.

**Tubers will support all children by:**

- Encouraging and nurturing self-esteem and self-confidence with Tubers Mentors, while consistently addressing and challenging aggression, bullying (including cyberbullying), and other negative behaviours or attitudes in the most suitable manner for each child.
- Promoting a caring, safe, and positive environment within Tubers and providing children with good lines of communication with trusted adults, supportive friends, and an ethos of protection including the availability of anonymous methods for reporting concerns by children and systematically gathering their voice to evaluate the impact of systems and processes.
- Responding empathetically and compassionately to any requests for time out to deal with sensory overwhelm, distress and anxiety.
- Signposting and referring into specialist support services where possible.
- Liaising and working together with all other settings, support services and those agencies involved in the safeguarding of children.
- Notifying children's social care as soon as there is a significant concern.
- Ensuring appropriate information is shared confidentially at key transition points in a child's journey to ensure continued support (incl. School medical records).

**The Tubers community will protect children by:**

Working to establish and maintain an ethos where children feel secure, are encouraged to talk, and are always listened to.
Ensuring that all children know there are adults in the school whom they can approach if they are worried or in difficulty.

**Roles and Responsibilities**

Including regular consultation with children, parents, and staff, gathering their voice.
Including safeguarding across Tubers to equip children with the skills they need to stay safe from harm and to know to whom they should turn for help; this will, for example include anti-bullying work, information about child-on-child abuse (sexual harassment and sexual violence, consent), online-safety,

We will follow the statutory guidance as set out in the latest Keeping Children Safe in Education (and associated documents and guidance), adhering to the roles, responsibilities and expectations

**The Designated Safeguarding Lead (DSL):** The designated safeguarding lead should take lead responsibility for safeguarding and child protection (including online safety). This should be explicit in the role holder's job description.

**Roles and responsibilities will include:**

- Availability – being available during Tubers working hours.
- Manage referrals – to e.g. Children's Social Care, Channel programme, Disclosure and Barring service, the Police.
- Working with others – e.g. A point of contact with safeguarding partners, a source of support and advice for staff, to promote supportive engagement with parents and/or carers.
- Information sharing and managing the child protection files.
- Raising Safeguarding and Child Protection Awareness.
- Updating training, knowledge and skills required to carry out the role of DSL.
- Providing support to staff.
- Holding and sharing information.
- Overseeing and acting upon filtering and monitoring reports and checks to these systems.

**The Deputy Designated Safeguarding Lead/s (DDSL)**: Is trained to the same standard as the Designated Safeguarding Lead and, in the absence of the DSL, carries out those functions necessary to ensure the ongoing safety and protection of pupils. In the event of the long-term absence of the DSL the deputy will assume all of the functions above. Whilst the activities of the designated safeguarding lead can be delegated to appropriately trained deputies, the ultimate lead responsibility for child protection, as set out above, remains with the designated safeguarding lead, this lead responsibility should not be delegated.

**Roles and responsibilities will include:**

- Knowing what to do if a child tells them they are being abused, exploited, or neglected.
- Being able to reassure victims that they are being taken seriously and that they will be supported and
- Maintaining an attitude of 'it could happen here' where safeguarding is concerned.
- Identifying concerns early, provide help for children, promote children's welfare and prevent concerns from escalating.
- To provide a safe environment in which children can learn.
  kept safe.
- Recognising the barriers for children when wanting to make a disclosure (verbal or non-verbal).
- Identifying children who may benefit from early help, (providing support as soon as a problem emerges) and the part they play in these support plans.
- Raising any concerns for a child following Tubers safeguarding policies and procedures
- Being aware of Local Authority referral processes and supporting social workers and other agencies following any referral.
- Being aware of systems within Tubers which support safeguarding e.g. Safeguarding policy, behaviour policy, code of conduct & online safety
- Attending regular safeguarding and child protection training.
- Recognising that children missing, or absent education can act as a vital warning sign to a range of safeguarding issues including neglect, sexual abuse and child sexual and criminal exploitation.

## Confidentiality

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

- All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children and that the Data Protection Act 20183 is not a barrier to sharing information where the failure to do so would place a child at risk of harm.

- All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing.

## Dealing with disclosures

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

- In line with KCSIE all children's safeguarding files will be kept confidential and stored securely. Safeguarding files will be kept separate from children' s files

If we are in a situation where a child discloses abuse to us, we will:

- Listen carefully to the child or young person.
- Let them know they've done the right thing.
- Tell them it's not their fault.
- Say we will believe them.
- We won't talk to the alleged abuser.
- Explain what we will do next. (If age-appropriate, we will explain to the child that we will need to report the abuse to someone who will be able to help).
- Never delay reporting the abuse.

## If a child is in immediate danger:

Make a referral to children's social care and/or the Police immediately if a child is in immediate danger or at risk of harm. Anyone can make a referral.

Tell the Designated Safeguarding Lead (DSL) as soon as possible if you make a referral directly. We work in partnership with other agencies in the best interests of the children. The academy will, where necessary, liaise with the Police, and any relevant external agency including GP, school nurse, and make a referral to children's social care.

Where the child already has a safeguarding social worker, the request for service should go immediately to the social worker involved, or in their absence to their team manager.

The following link provides additional guidance for reporting child abuse to your local council:
https://www.gov.uk/report-child-abuse-to-local-council

**If a child discloses a safeguarding issue to you, you should:**

- Do not promise to keep it a secret;
- Listen to and believe them;
- Allow them time to talk freely, ask open questions only and do not ask leading questions;
- Stay calm and do not show that you are shocked or upset; tell the child they have done the right thing in telling you;
- Do not tell them they should have told you sooner;
- Explain what will happen next and that you will have to pass this information on;
- Speak directly to the DSL/Deputy DSL immediately. Please contact a member of the leadership team if you are unable to find a member of the safeguarding team;
- Record on Safeguarding Report Forms the conversation as soon as possible in the child's own words. Stick to the facts and do not put your own judgment on it. The record must include dates and times to ensure there is an accurate record; alternatively, if appropriate and there is an immediate risk of harm, make a referral to children's social care and/or the Police directly, and tell the DSL as soon as possible that you have done so.

## Recognising and Responding to Safeguarding Concerns

**Recognising:**

Any child, in any family, anywhere, could become a victim of abuse. Staff should always maintain an attitude of "It could happen here". We also recognise that abuse, neglect, exploitation and safeguarding issues are complex and are rarely standalone events that can be covered by one definition or label. Staff are aware that in most cases multiple issues will overlap one another.

Abuse, neglect, and exploitation are forms of maltreatment of a child. Somebody may abuse, neglect or exploit a child by inflicting harm or by failing to act to prevent harm. Children may be abused in the 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. They may be abused by an adult or adults or by another child or children.

Abuse, neglect and exploitation may also take place outside of the home, contextual safeguarding, and this may include (but not limited to), sexual exploitation, criminal exploitation, serious youth violence, radicalisation.

Staff are aware that behaviours linked to drug taking, alcohol abuse, truanting and sexting put children in danger and that safeguarding issues can manifest themselves via child-on-child abuse.

Further information about the four categories of abuse; physical, emotional, sexual and neglect, (familial and contextual) and indicators that a child may be being abused can be found in appendices 1 - 17 and in Keeping Children Safe in Education Part 1/Annex A/Annex B.

There are also a number of specific safeguarding concerns that we recognise our pupils may experience.

· Child missing or absent from education · Child missing from home or care · Child sexual exploitation (CSE), child criminal exploitation (CCE) · Bullying including cyberbullying · Domestic abuse · Drugs · Fabricated or induced illness · Faith abuse · Female genital mutilation (FGM) · Forced marriage · Gangs and youth violence Gender-based violence/violence against women and girls (VAWG) · Mental health difficulties · Private fostering · Radicalisation · Youth produced sexual imagery (sexting) · Teenage relationship abuse · Trafficking · Child on child abuse · Upskirting · Serious violence · Sexual harassment

There will be occasions when staff may suspect that a Child may be at risk but have no 'real' evidence. The Child's behaviour may have changed, their artwork could be bizarre, and they may write stories or poetry that reveal confusion or distress, or physical or inconclusive signs may have been noticed.

We recognise that the signs may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is very ill, or an accident has occurred. However, they may also indicate a child is being abused or is in need of safeguarding.
In these circumstances staff will try to give the child the opportunity to talk. It is fine for staff to ask the Child if they are OK or if they can help in any way.

## Reporting a concern about a child

Following an initial conversation with the young person, if the member of staff remains concerned, they should discuss their concerns with the DSL and put them in writing.

Records should include:

- Clear and comprehensive summary of the concern.
- Details of how the concern was followed up and resolved.
- A note of any action taken, decisions reached and the outcome.
- All concerns however small must be recorded and shared with the DSL as this information could provide the 'missing' piece of the bigger picture of the lived experience for the child.

4.

If the pupil does begin to reveal that they are being harmed, staff should follow the following advice.

1. Offer reassurance, listen and take seriously what is being disclosed.
2. It is important to ascertain relevant information, but it is not your job to investigate, verify what is being said or examine the individual disclosing this; this is the statutory responsibility of the child protection services and/or the police.
3. Explain the process to the individual; that you will need to pass this information on, to whom, the reasons why and possible actions.

Any concerns will be recorded, including the child's voice, body map and other relevant information in line with Tubers recording procedures. Concerns may also be shared with the DSL/DDSL verbally, these conversations will be recorded in writing.

**If a pupil discloses to a member of staff**

We recognise that it takes a lot of courage for a child to disclose that they are being abused. They may feel ashamed, guilty or scared, their abuser may have threatened that something will happen if they tell, they may have lost all trust in adults or believe that what has happened is their fault. Sometimes they may not be aware that what is happening is abuse.

A child who makes a disclosure may have to tell their story on a number of subsequent occasions to the police and/or social workers. Therefore, it is vital that their first experience of talking to a trusted adult is a positive one.

**During their conversation with the pupil staff will;**

- Listen to what the child has to say and allow them to speak freely.
- Remain calm and not overact, act shocked or disgusted – the pupil may stop talking if they feel they are upsetting the listener.
- Reassure the child that it is not their fault and that they have done the right thing in telling someone.
- Not be afraid of silences – staff must remember how difficult it is for the pupil and allow them time to talk.
- Take what the child is disclosing seriously.
- Ask open questions and avoid asking leading questions.
- Avoid jumping to conclusions, speculation or making accusations.

**Notifying Parents**

- Not automatically offer any physical touch as comfort. It may be anything but comforting to a child who is being abused.
- Avoid admonishing the child for not disclosing sooner. Saying things such as 'I do wish you had told me about it when it started' may be the staff member's way of being supportive but may be interpreted by the child to mean they have done something wrong.
- Tell the child what will happen next, that they cannot keep secrets and that information will be shared to ensure the right level of support is given.

Tubers will normally seek to discuss any concerns about a pupil with their parents/carers. This must be handled sensitively and normally the DSL/DDSL will make contact with the parent in the event of a concern, suspicion or disclosure of abuse that the child has been harmed in some way.

However, if Tubers believes that notifying parents could increase the risk to the child or exacerbate the problem, advice will first be sought from children's Local Authority Safeguarding Team e.g. familial sexual abuse.

Where there are concerns about forced marriage or honour-based abuse parents should not be informed a referral is being made as to do so may place the child at a significantly increased risk. In some circumstances it would be appropriate to contact the police.

## Making a referral

Concerns about a child or a disclosure should be immediately raised with the DSL who will help decide whether a referral to children's Local Authority Safeguarding Team or other support (e.g. Early Help) is appropriate in accordance with The Local Authority Threshold Tool4.

If the DSL is uncertain about whether a concern raised should be referred to the Local Authority Safeguarding Team, a consultation will be sought with the Local Authority to seek further support and guidance.

If a referral is needed, the DSL should make this rapidly and have the necessary systems in place to enable this to happen. However, anyone can make a referral and if for any reason a staff member thinks a referral is appropriate and one hasn't been made, they can, and should, consider making a referral themselves.

The child (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the child.

If after a referral the child's situation does not appear to be improving the designated safeguarding lead (or the person that made the referral) should press for re-consideration to ensure their concerns have been addressed, and most importantly the child's situation improves.

If a child is in immediate danger or is at risk of harm a referral should be made to children's Local Authority Safeguarding Team and/or the police immediately. Anybody can make a referral.
https://theathenaprogramme.co.uk/blog/how-to-manage-low-level-concerns-before-they-escalate-in-schools/

**Supporting our Staff**

We recognise that staff working at Tubers who have become involved with a child who has suffered harm or appears to be likely to suffer harm may find the situation stressful and upsetting.
We will support such staff by providing an opportunity to talk through their anxieties with the DSLs and to seek further support as appropriate.

**Children who are particularly vulnerable**

Tubers recognises that some children are more vulnerable to abuse, neglect, exploitation and contextual safeguarding concerns and that additional barriers exist when recognising abuse for some children. We understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures which fail to acknowledge children's diverse circumstances, rather than the individual child's personality, impairment, or circumstances.

In some cases possible indicators of abuse such as a child's mood, behaviour or injury might be assumed to relate to the child's impairment or disability rather than giving a cause for concern. Or a focus may be on the child's disability, special educational needs or situation without consideration of the full picture. In other cases, such as bullying, the child may be disproportionately impacted by the behaviour without outwardly showing any signs that they are experiencing it.

Some children may also find it harder to disclose abuse due to communication barriers, lack of access to a trusted adult or not being aware that what they are experiencing is abuse. Tubers ensure that staff are appropriately aware and trained and that disclosures are handled sensitively. They should seek multi agency support , advice and guidance from specialist organisations as appropriate as well as signposting children to appropriate support services e.g. LGBTQ+ services and organisations.

- Is frequently missing/goes missing from education, care or from home.
- Is misusing drugs or alcohol themselves.
- Is at risk of modern slavery, trafficking or exploitation.
-

**Any child may benefit from early help, but all Tubers staff should be particularly alert to the potential need for early help for a child who:**

- Are disabled and have specific additional needs.
- Has special educational needs (whether or not they have a statutory education, health and care plan).
- 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.
  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 and/or exploitation.
- Is at risk of being radicalised or exploited.
- Is a privately fostered child.
- Has an imprisoned parent.
- Is experiencing mental health, wellbeing difficulties.
- Is persistently absent.
- Has experienced multiple suspensions, is at risk of being permanently excluded from Tubers ● Is at risk of 'honour' based abuse such as FGM or forced marriage.
- LGBTQ+, Gender questioning and gender diverse children.

**Whistleblowing**

We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.

All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues, poor or unsafe practice and potential failures in Tuber's safeguarding arrangements. If it becomes necessary to consult outside Tubers, they should speak in the first instance, to the LADO following Tubers Whistleblowing Policy.

The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 line is available from 8:00 AM to 8:00 PM, Monday to Friday and email: help@nspcc.org.uk
*Please refer to Tubers Whistleblowing Policy

**Allegations against staff**

All Tubers staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with children to be conducted in view of other adults. Guidance about conduct and safe practice, including safe use of mobile phones by staff will be given at induction.

**In line with KCSiE part 4 guidelines,**

1. All employees must record in writing any concerns they have about the practice or behaviors of a member of staff and share it with their line manager or alternative line manager where appropriate.
2. The line manager will make an assessment to determine if the matter is a 'Low level concern 'or an 'allegation' (this means the concern may meet the harm threshold)
3. LADO will be contacted for all 'allegations and relevant guidance will be followed. LADO can also be contacted for advice or guidance.
4. Where concerns are considered to be "Low Level" by the line manager, they should be managed in line with part 4 of KCSIE and Tubers wider policies and procedures

Suspension of the member of staff, against whom an allegation has been made, needs careful consideration, and the Line manager r will seek the advice of the LADO and Tubers HR department.

Staff and parents are reminded that publication of material that may lead to the identification of a member of staff who is the subject of an allegation is prohibited by law. Publication includes verbal conversations or writing including content placed on social media sites.

*Please refer to Tubers Allegations against staff policy

**Physical Intervention**

Tubers acknowledge that staff must only ever use physical intervention as a last resort, when a child is endangering him/herself or others, and that at all times it must be the minimal force necessary to prevent injury to another person.

Staff who are likely to need to use physical intervention will be appropriately trained.

We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures.

We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.

*Please refer to Tubers physical intervention policy

**Confidentiality, Sharing Information and GDPR**

All staff will understand that child protection issues warrant a high level of confidentiality, not only out of respect for the children and staff involved but also to ensure that information being released into the public domain does not compromise evidence.

Staff should be proactive in sharing as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to Local Authority Children's Social Care.

Staff should only discuss concerns with the DSL or DDSL. That person will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis.

At the point a child formally transfers to their new setting, their safeguarding file will be transferred securely in line with GDPR expectations as soon as possible but within 5 working days.

**Information sharing is guided by the following principles:**

- Necessary and proportionate
- Relevant
- Adequate
- Accurate
- Timely
- Secure

Fears about sharing information cannot be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

Tubers will ensure that images of children used within publications, publicity and on the website, have written parental consent prior to any images being taken and used. This consent will be obtained in line with Tubers annual data collection process.

## Categories of Abuse

- Physical Abuse
- Emotional Abuse (including Domestic Abuse)
- Sexual Abuse (including child sexual exploitation)
- Neglect

### Signs of Abuse in Children:

The following non-specific signs may indicate something is wrong:
· Significant change in behaviour
· Extreme anger or sadness
· Aggressive and attention-needing behaviour
· Suspicious bruises with unsatisfactory explanations

· Lack of self-esteem
· Self-injury
· Depression and/or anxiousness
· Age-inappropriate sexual behaviour
· Child Sexual Exploitation
· Criminality
· Substance abuse
· Mental health problems
· Poor attendance
· Unexplainable and/or persistent absences from education

**Risk Indicators**

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

- Must be regarded as indicators of the possibility of significant harm
- Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)

- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low
- May require consultation with and / or referral to Local Authority Children's Services

The absence of such indicators does not mean that abuse or neglect has not occurred.
In an abusive relationship the child may:

- Appear frightened of the parent(s)/ carers.
- Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and specific needs)

The parent or carer may:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses ● Have unrealistic expectations of the child

  warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits
- Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

**Recognising Physical Abuse**

The following are often regarded as indicators of concern:

An explanation which is inconsistent with an injury
Several different explanations provided for an injury
Unexplained delay in seeking treatment
The parents/carers are uninterested or undisturbed by an accident or injury
Parents are absent without good reason when their child is presented for treatment
Repeated presentation of minor injuries (which may represent a "cry for help" and if ignored could lead to a more serious injury)
Family use of different doctors and A&E departments
Reluctance to give information or mention previous injuries

**Bruising**

Children can have accidental bruising, but the following must be considered as non-accidental unless there is evidence, or an adequate explanation provided:

- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, handprints or a hairbrush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

Mongolian Blue Spot: Bruising in non-mobile children is rare and may indicate abuse or neglect. Birth marks, especially Mongolian Blue Spots, can mimic bruising. Mongolian Blue Spot can be identified (see below), however if in any doubt as to the cause of the bruise refer to Southwest Child Protection Procedures Local Authority guidance and consultation.

Areas of skin hyperpigmentation – flat, not raised, swollen or inflamed,
Not painful to touch
Usually present at birth/ develop soon afterwards
Will not change in shape or colour within a few days
Normally uniform blue/ grey in colour across the mark
Common in African, Middle Eastern, Mediterranean and Asian children
While most occur at the lower back and buttocks, they can appear anywhere (e.g. back of shoulder or limb).
Scalp/ face rarely affected
Can be single/ multiple, vary in size, but mostly few centimetres diameter
Gradually fade over many year

**Bite Marks**

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child.

**Fractures**

A medical opinion should be sought where there is any doubt over the origin of the bite

**Burns and Scalds**

It can be difficult to distinguish between accidental and non-accidental burns and scalds and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)

Linear burns from hot metal rods or electrical fire elements

Burns of uniform depth over a large area

Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)

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

Fractures may cause pain, swelling and discolouration over a bone or joint. Non-mobile children rarely sustain fractures.

There are grounds for concern if:

The history provided is vague, non-existent or inconsistent with the fracture type

There are associated old fractures

Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement

There is an unexplained fracture in the first year of life

**Scars**

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

**Recognising Emotional Abuse**

**Recognising Signs of Sexual Abuse**

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse. The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

Developmental delay
Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
Indiscriminate attachment or failure to attach
Aggressive behaviour towards others
Scapegoated within the family
Frozen watchfulness, particularly in pre-school children
Low self-esteem and lack of confidence
Withdrawn or seen as a “loner” – difficulty relating to others

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about, and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional/behavioural.

**Some behavioural indicators associated with this form of abuse are:**

·Inappropriate sexualised conduct
Sexually explicit behaviour, play or conversation, inappropriate to the child’s age
Continual and inappropriate or excessive masturbation
Self-harm (including eating disorder), self-mutilation and suicide attempts
Involvement in prostitution or indiscriminate choice of sexual partners
An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

**Some physical indicators associated with this form of abuse are:**

Pain or itching of genital area

Child abandoned or left alone for excessive periods
Blood on underclothes
Pregnancy in a younger girl where the identity of the father is not disclosed
Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

**Recognising Neglect**

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:
Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
A child seen to be listless, apathetic and irresponsive with no apparent medical cause
Failure of child to grow within normal expected pattern, with accompanying weight loss
Child thrives away from home environment
Child frequently absent from school
Child left with adults who are intoxicated or violent

**Anti-Bullying/Cyberbullying**

Tubers policy on anti-bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms e.g. cyber, racist, homophobic and gender related bullying. We keep a record of known bullying incidents
All staff are aware that children with SEND and / or differences/perceived differences are more susceptible to being bullied / victims of child abuse.

If the bullying is particularly serious, or the anti-bullying procedures are seen to be ineffective, the DSL will consider implementing child protection procedures.

The subject of bullying is addressed regularly within children's safeguarding training

**Bullying, Prejudice and Racist Incidents**

Our policy on racist incidents is set out in the Equality and diversity Policy and acknowledges that repeated prejudice or racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of bullying, prejudice and racist incidents

## Radicalisation and Extremism

The Prevent Duty for England and Wales (2023)8 under section 26 of the Counter-Terrorism and Security Act 2015 places a duty on education and other children's services to have due regard to the need to prevent people from being drawn into terrorism.

Extremism is defined as 'vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

Some children are at risk of being radicalised; adopting beliefs and engaging in activities which are harmful, criminal or dangerous.

Tubers is clear that exploitation of vulnerable children and radicalisation should be viewed as a safeguarding concern and follows the Department for Education guidance on preventing children and young people from being drawn into terrorism

Tubers seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.

Tubers staff receive PREVENT training to help identify early signs of radicalisation and extremism. Indicators of vulnerability to radicalisation.

Tubers Line managers and Designated Safeguarding Lead (DSL) will assess the level of risk within Tubers and put actions in place to reduce that risk. Risk assessment may include the use of Tubers premises by external agencies, anti-bullying policy and other issues specific to the Tubers' profile, community and philosophy.

When any member of staff has concerns that a child may be at risk of radicalisation or involvement in terrorism, they should speak with the DSL. They should then follow normal safeguarding procedures. If the matter is urgent then the Police must be contacted by dialling 999. In non-urgent cases where police advice is sought then dial 101 or the national police Prevent advice line on 0800 011 3764.

### Indicators Of Vulnerability to Radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.

Extremism is defined by the Government in the Prevent Strategy as:

Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

Extremism is defined by the Crown Prosecution Service as: The demonstration of unacceptable behaviour by using any means or medium to express views which:

- Encourage, justify or glorify terrorist violence in furtherance of particular beliefs.
- Seek to provoke others to terrorist acts.
- Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or ● Foster hatred which might lead to inter-community violence in the UK.

  There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.

Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.

**Indicators of vulnerability include:**

Identity Crisis – A child is distanced from their cultural / religious heritage and experiences discomfort about their place in society.

Personal Crisis – A child may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging.

Personal Circumstances – migration; local community tensions; and events affecting a child's country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy.

Unmet Aspirations – the child may have perceptions of injustice; a feeling of failure; rejection of civic life.

Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration.

Special Educational Need – students / pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.

**More critical risk factors could include:**

· Being in contact with extremist recruiters.

· Accessing violent extremist websites, especially those with a social networking element.

· Possessing or accessing violent extremist literature.

· Using extremist narratives and a global ideology to explain personal disadvantage.

· Justifying the use of violence to solve societal issues.
· Joining or seeking to join extremist organisations; and

· Significant changes to appearance and / or behaviour.

· Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.

The Prevent duty ensures educational establishments have 'due regard' to the need to prevent people from being drawn into terrorism.

Channel is the voluntary, confidential support programme which focuses on providing support at an early stage to individuals that have been identified as being vulnerable to radicalisation. Prevent referrals may be passed to the multi-agency Channel panel to determine whether individuals require support. The Prevent Duty can be accessed via this link.

Guidance on Channel https://www.gov.uk/government/publications/channel-guidance

Further information can be obtained from the Home Office website.

**Domestic Abuse (incl Operation Encompass)**

Domestic abuse represents one quarter of all violent crime. It is actual or threatened physical, emotional, psychological or sexual abuse. It involves the use of power and control by one person over another. It occurs regardless of race, ethnicity, gender, class, sexuality, age, and religion, mental or physical ability. Domestic abuse can also involve other types of abuse.

We use the term domestic abuse to reflect that a number of abusive and controlling behaviours are involved beyond violence.

**How does it affect children?**

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse). All of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn. In some cases, children may blame themselves for the abuse or may have had to leave the family home as a result. Children who witness domestic abuse are at risk of significant harm.

Children affected by domestic abuse reflect their distress in a variety of ways. They may change their usual behaviour and become withdrawn, tired, start to wet the bed and have behavioural difficulties. They may not want to leave their house or may become reluctant to return. Others will excel, using their time in your care to escape from their home life. None of these signs are exclusive to domestic abuse so when you are considering changes in behaviours and concerns about a child, think about whether domestic abuse may be a factor.

**What should I do if I suspect a family is affected by domestic abuse?**

Contact: IDAS (Independent Domestic Abuse Services) on North Yorkshire and Barnsley (03000 110 110) or Sheffield (0808 808 2241)

For further information and advice:

Barnsley
-https://www.barnsley.gov.uk/services/community-safety-and-crime/domestic-abuse-and-sexual-violence/
Doncaster - https://dscp.org.uk/parents-carers/domestic-abuse/
Rotherham - https://www.saferrotherham.org.uk/priorities/reducing-domestic-abuse

**What are the signs to look out for?**

Sheffield -https://www.sheffield.gov.uk/public-health/get-help-with-domestic-abuse

If you are concerned about a vulnerable adult, please contact Adult Social Care Barnsley (01226 774 466), Doncaster (01302 737391), Rotherham (01709 822 330) and Sheffield (0114 273 4908) (Mon - Fri)
All information can be found on the local authority websites for each page listed below:

Barnsley - https://www.barnsley.gov.uk/services/adult-social-care/
Doncaster - http://doncaster.gov.uk/services/adult-social-care
Rotherham - https://www.rotherham.gov.uk/adult-social-care
Sheffield - https://www.sheffield.gov.uk/social-care/adults

In an emergency, please contact the local authority out of hours teams that are available 24/7: Barnsley (01226 787 789), Doncaster (01302 796 000), Rotherham (01709 822 330) and Sheffield (0114 273 4908)

Education Psychology Resources: https://www.the-educational-psychologists.co.uk/resources

South Yorkshire Police list a number of resources and services available to women and young people experiencing the trauma of domestic abuse and sexual violence:
https://www.southyorkshire.police.uk/advice/advice-and-information/daa/domestic-abuse/support-organisations/

IDAS are a specialist charity in Yorkshire supporting people affected by domestic violence and sexual violence: North Yorkshire and Barnsley (03000 110 110) or Sheffield (0808 808 2241) or visit their website:
https://idas.org.uk/

National Domestic Abuse Helpline Refuge runs the National Domestic Abuse Helpline, available 24 hours a day 0808 2000 247 and its website offers guidance and support for potential victims. Refuge:
https://www.refuge.org.uk/

**Operation Encompass**

Operation Encompass helps police and schools work together to provide emotional and practical help for children. Police will inform the ‘key adult’ within Tubers if they have been called to an incident of domestic abuse, where there are children in the household before registration the next day.

**Exploitation (incl. Child Sex Exploitation, Child Criminal Exploitation & County Lines)**

Both CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity. This power imbalance could be due to age, gender, sexual identity, cognitive ability, physical strength, status, and /or access to economic or other resources. The abuse could be linked to an exchange for something the victim perceives that they need or want and/or will be to the financial benefit or other advantage (such as increased status) of the perpetrator or facilitator.

The abuse can be perpetrated by individuals or groups, males or females, and adults or children (who themselves may be experiencing exploitation). The abuse can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse. It may involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence.

Victims can be exploited even when the activity appears consensual, and it should be noted exploitation as well as being physical can be facilitated and/or take place online. The experience of girls who are criminally exploited can be very different from boys; the indicators may not be the same and both boys and girls that are being Any concerned that a child is being or is at risk of being sexually or criminally exploited should be passed without delay to the DSL. We are aware there is a clear link between regular absence/truanting, CSE and CCE. Staff should consider a child to be at potential CSE/CCE risk in the case of regular school absence/truanting and make reasonable enquiries with the child and parents to assess this risk.

Children's Safeguarding Partnership Adolescent Safety Framework Safer Home Assessment11 on all occasions when there is a concern that a child is being or is at risk of being sexually or criminally exploited or where indicators have been observed that are consistent with a child who is being or who is at risk of being sexually
or criminally exploited. These assessments will indicate to the DSL whether e.g. a Safer Me Early Help approach or referral to the Exploitation Hub/Local Authority Safeguarding Hub is required. If the DSL is in any doubt, they will contact the Safeguarding Hub consultation.

In all cases if the assessment identified any level of concern the DSL should contact their local MACE {(Missing and Child Exploitation) and email the completed (e.g. Safer Me) assessment.

**Female Genital Mutilation (FGM)**

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms, and other indicators of FGM. If a member of staff, in the course of their work, discovers that an act of FGM appears to have been carried out, the member of staff must report this to the Police.

The DSL will use the appropriate Local Authority Assessment tool e.g. the Exploitation Toolkit, the Devon Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act 2003 ("the 2003 Act"). It is a form of child abuse and violence against women. FGM comprises all procedures involving partial or total removal of the external female genitalia for non-medical reasons.

Section 5B of the 2003 Act1 introduces a mandatory reporting duty which requires regulated health and social care professionals and teachers in England and Wales to report 'known' cases of FGM in under 18s which they identify in the course of their professional work to the police. The duty came into force on 31 October 2015.

**What is FGM**

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons.
4 types of

procedure:

Type 1 Clitoridectomy – partial/total removal of clitoris

Type 2 Excision – partial/total removal of clitoris and labia minora

Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Belief that:

· FGM brings status/respect to the girl – social acceptance for marriage

· Preserves a girl's virginity

· Part of being a woman / rite of passage

· Upholds family honour

· Cleanses and purifies the girl

· Gives a sense of belonging to the community

· Fulfils a religious requirement

· Perpetuates a custom/tradition

· Helps girls be clean / hygienic

**Why is it carried out?**

· Is cosmetically desirable

· Mistakenly believed to make childbirth easier

**Is FGM legal?**

FGM is internationally recognised as a violation of human rights of girls and women. Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act (2003). It is a form of child abuse and violence against women. A mandatory reporting duty requires teachers to report 'known' cases of FGM in under 18s, which are identified in the course of their professional work, to the police**.**

The duty applies to all persons in Tubers. The duty applies to the individual who becomes aware of the case to make a report. It should not be transferred to the Designated Safeguarding Lead; however, the DSL should be informed.

If a member of staff is informed by a girl under 18 that an act of FGM has been carried out on her, or a mentor observes 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 the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth, the staff member hold personally make a report to the police force in which the girl resides by calling 101. The report should be made by the close of the next working day.

Tubers staff are trained to be aware of risk indicators of FGM. Concerns about FGM outside of the mandatory reporting duty should be reported as per Tubers' child protection procedures. Staff should be particularly alert to suspicions or concerns expressed by female pupils about going on a long holiday during the summer period.

There should also be consideration of potential risk to other girls in the family and practicing community.

Where there is a risk to life or likelihood of serious immediate harm the teacher should report the case immediately to the police, including dialling 999 if appropriate.

There are no circumstances in which any member of staff should examine a girl.

Circumstances and occurrences that may point to FGM happening are:

· Child talking about getting ready for a special ceremony

· Family taking a long trip abroad

· Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon,

Egypt,
Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)

· Knowledge that the child's sibling has undergone FGM

· Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

· Prolonged absence.

· Behaviour changes on return from a holiday abroad, such as being withdrawn and appearing subdued

· Bladder or menstrual problems

· Finding it difficult to sit still and looking uncomfortable

· Complaining about pain between the legs

· Mentioning something somebody did to them that they are not allowed to talk about

· Secretive behaviour, including isolating themselves from the group

· Reluctance to take part in physical activity
· Disclosure

**The 'One Chance' rule**

As with Forced Marriage (outlined below) there is the 'One Chance' rule. It is essential that settings take action **without delay** and make a referral to children's services, this also applies to Honour-based Abuse.

**Forced Marriage**

A forced marriage is a marriage in which one or both people do not (or in cases of people with learning disabilities cannot) consent to the marriage but are coerced into it. Coercion may include physical, psychological, financial, sexual, and emotional pressure. It may also involve physical or sexual violence and abuse.

Forced marriage is an appalling and indefensible practice and is recognised in the UK as a form of violence against women and men, domestic/child abuse, and a serious abuse of human rights. Since June 2014 forcing

· Repeated urinal tract infection

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

A forced marriage is not the same as an arranged marriage which is common in several cultures. The families of both spouses take a leading role in arranging the marriage but the choice of whether or not to accept the arrangement remains with the prospective spouses.

Tubers staff should never attempt to intervene directly as a school or through a third party. Contact should be made with the Local Authority Safeguarding Hub.

**Honour-based Abuse**

Honour based abuse (HBV) can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such abuse can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

Honour based abuse might be committed against people who.

· Become involved with a boyfriend or girlfriend from a different culture or religion.

· Want to get out of an arranged marriage.

· Want to get out of a forced marriage.

It is a violation of human rights and may be a form of domestic and/or sexual abuse. There is no, and cannot be, honour or justification for abusing the human rights of others.

**Private Fostering Arrangements**

A private fostering arrangement occurs when someone other than a parent or close relative cares for a child for a period of 28 days or more, with the agreement of the child's parents. It applies to children under the age of 16 or 18 if the child is disabled. Children looked after by the local authority or who are placed in residential schools, children's homes or hospitals are not considered to be privately fostered.

Private fostering occurs in all cultures, including British culture and children may be privately fostered at any age.

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

https://www.rotherham.gov.uk/child-protection/report-concern-child-young-person

· Wear clothes or take part in activities that might not be considered traditional within a particular culture.

By law, a parent, private foster carer or other persons involved in making a private fostering arrangement must notify children's services as soon as possible. However, when a member of staff becomes aware that a child may be in a private fostering arrangement, they will raise this with the DSL and the DSL will notify MASH of the circumstances.

## Concerned about something else

In general, if you ever have any concerns relating to a child or young person, please contact:

Barnsley - Call **01226 772423** Monday to Friday from 9am to 5pm.

https://www.barnsley.gov.uk/services/children-young-people-and-families/safeguarding-families-in-barnsley/safeguarding-children/what-to-do-if-youre-worried-about-a-child/

Doncaster - Call **01302 737777** in the **evening or at weekends call 01302 796000**

https://www.doncaster.gov.uk/doitonline/safeguarding-concern-child-at-risk-report-form

Rotherham - Call **01709 336 080** (MASH)

## Additional Resources

Further advice on child protection is available from:

Sheffield Safeguarding Partnership: https://www.safeguardingsheffieldchildren.org/

Rotherham Safeguarding Children Partnership: https://www.rscp.org.uk/

Barnsley Safeguarding Children Partnership: https://www.barnsley.gov.uk/services/children-young-people-and-families/

Childline: http://www.childline.org.uk/pages/home.aspx

Anti-Bullying Alliance: http://anti-bullyingalliance.org.uk/

Childnet International –making the internet a great and safe place for children. Includes resources for professionals and parents: http://www.childnet.com/

The National Crime Agency's CEOP Education team (includes resources for professionals and parents): https://www.ceopeducation.co.uk

**Children's Front Door**
Safer Internet Centre: http://www.saferinternet.org.uk/

Knife Crime:
https://www.college.police.uk/guidance/knife-crime-evidence-briefing/understanding-causes-knife-crime

Knife Crime One Minute Guide:
https://southyorkshire-pcc.gov.uk/app/uploads/2023/03/Guidelines-for-Evidence-Based-Knife-Education-1st-Edition.pdf

Lucy Faithful Foundation: Shore - Lucy Faithful Foundation The Children's Society: Preventing Child Sexual Exploitation | The Children's Society CSA Centre: Resources for education settings | CSA Centre

If you are concerned that a child is being abused, or to request Early Help (L3) support you can call:

- Doncaster - 01302 734 110 or online referral: https://www.doncaster.gov.uk/doitonline/safeguarding-concern-child-at-risk-report-form
- Sheffield - 0114 203 7485 or online referral: https://www.safeguardingsheffieldchildren.org/p/processes/referring-a-safeguarding-concern-to-childrens-social-care
- Barnsley - 01226 753 406 or online referral: https://www.barnsley.gov.uk/media/24409/barnsley-social-care-referral-form-dec-2022-prev-request-for-contact.pdf
- Rotherham - 01709 336080 (MASH) or online referral: https://www.rotherham.gov.uk/xfp/form/281

Police non-emergency 101

For all LADO enquiries

Barnsley: 01226 772 341 or https://www.barnsley.gov.uk/services/children-young-people-and-families/safeguarding-families-in-barnsley/safe guarding-children/local-authority-designated-officer-lado/

**For general support and information**

Sheffield: 0114 273 4855 or https://www.safeguardingsheffieldchildren.org/p/processes/allegations-of-abuse-against-people-who-work-with-children-lado

Rotherham: 01709 823 914 or https://www.rotherham.gov.uk/xfp/form/946

Doncaster: 01302 737 332 or https://www.doncaster.gov.uk/services/schools/local-authority-designated-officer

- The Family Rights Group offers a free, confidential advice line at 0808 801 0366.
- Early Help & Partnership mailbox: Email for requests like triage, specific meetings, and newsletter information.
- Locality Delivery Teams: For support and information specific to your area, email the relevant locality's Early Help hub:

  Barnsley - earlyhelp@barnsley.gov.uk

  Sheffield - EarlyHelpAssessment@sheffield.gov.uk

  Rotherham - ehtriage@rotherham.gov.uk

  Doncaster - EarlyHelpHub@doncaster.gov.uk

**Changes to reflect the new Keeping Children Safe in Education (KCSIE) Department for Education (DfE, September 2023 update):**

Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

- We give special consideration to students who:
- Have special educational needs and/or disabilities.
- Are in need of a social worker.
- Are young carers.
- May experiences discrimination due to their race, ethnicity, faith and belief or no faith, age, gender identification; sexuality;
- Are pregnant or in receipt of paternity/maternity leave; ● Are married or in a civil partnership.
- Have English as an additional language.
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse, domestic abuse or poor mental health; Are at risk of FGM, sexual/criminal exploitation, forced marriage, or radicalisation.

- Are asylum seekers.
- Are looked after or who have been previously looked after; ● Are privately fostered.

## MENTAL HEALTH

KCSIE 2023 now has the inclusion of mental health within its definition of safeguarding. Supporting all children's mental health is a key priority and this includes preventing/acting on abuse caused by impairment of a child's mental health or development. All staff will be trained in the signs/symptoms of poor mental health and will record their concerns
using the mental health category as well as informing the DSL immediately if they perceive that the child is at risk of harm (including through self-harm or suicide).

Poor mental health is an indicator of potential harm and potential adverse childhood experiences.
Training for staff will include being aware of this link.

## ATTENDANCE

Attendance will be recorded using the trust management information system and any Childs who do not attend will be followed up with parents/carers and external agencies as appropriate from the first day of absence. Support will be provided to pupils and/or parents/carers who inform the academy that they do not wish to return under the current COVID-19 situation. This will be determined on an individual basis with consideration for all factors such as safeguarding/medical/mental health.

## Changes to reflect the new Keeping Children Safe in Education (KCSIE) Department for Education (DfE, September 2025 update):

## Online safety and safeguarding

The 2025 guidance adds disinformation, misinformation and conspiracy theories to the list of content risks under online safety. Disinformation is the deliberate creation and spread of false or misleading content, such as fake news. Misinformation is the unintentional spread of this false or misleading content (Cabinet Office, Department for Science, Innovation and Technology, 2023).

- **Supervise student use.** When students use generative AI, it should be done under close supervision with clear boundaries. Many public tools have age restrictions (e.g., 18+) that must be respected.
- **Filter and monitor content.** Educational settings must have robust filtering and monitoring systems to block access to harmful or inappropriate AI-generated content and detect concerning user prompts.

**Address deepfakes**. As generative AI makes it easier to create realistic fake images and videos, educational settings must educate students on the dangers of deepfakes and cyberbullying. Policies should be updated to cover AI-related online harms, including non-consensual sharing of explicit images.

- **Educate users**. Embed AI literacy into the curriculum. Students should learn how AI works, its limitations, and how to use it critically, ethically, and safely.

## Algorithmic bias and accuracy

- **Beware of bias**. AI models are trained on vast datasets that can reflect and amplify existing social, cultural, and gender biases. The resulting content may be stereotypical, misleading, or discriminatory.
- **Fact-check outputs.** Generative AI can "hallucinate" or confidently assert false information. Both Educators and students must critically evaluate AI-generated content and fact-check it against reliable sources.
- **Ensure fairness.** When using AI for administrative tasks like student performance analysis, Educational settings must ensure the tools are ethically sound and do not rely on biased data that could reinforce existing inequalities.

## Relevant regulation

Meeting these expectations could help educational settings to comply with:

- Keeping children safe in education part 1 - this emphasises the importance of safeguarding responsibilities, including preventing access to harmful content
- the filtering and monitoring standards for Educational settings

Meeting these expectations could help edtech developers or suppliers comply with the:

- Robustness
- Ensuring safe operation under various conditions, including unexpected changes and adversarial attacks

**General Data Protection Regulation (GDPR) Article 35** - this requires a Data Protection Impact Assessment for high-risk data processing, which could include monitoring for harmful content

**Information Commissioner's Office (ICO**) age appropriate design code - section 11 refers to monitoring, and that children should be clearly told if they are being tracked or monitored - the code can apply to providers of edtech services used in school environments

## Security

The generative AI product must be secured against malicious use or exposure to harm. This includes prioritising the technical objectives of:

- Reliability
- Security

### Data protection and privacy

- Handle personal data lawfully. Educational settings must be extremely careful when using personal data with AI tools to comply with regulations like the UK GDPR. Avoid entering personal, sensitive, or confidential information into "open" generative AI systems, as data could be used for training or become public.
- Understand the system. It is crucial to know the difference between "open" and "closed" AI systems.
- Open AI systems: Publicly available tools like ChatGPT or Google Gemini learn from user input. User data can be stored, shared, and used to train the model, meaning it is not private.
- Closed AI systems: Proprietary systems, often developed for specific institutions, offer greater security because external parties cannot access the data. However, Educational settings must still declare how they process data in their privacy notices.
- Conduct impact assessments. Before deploying any significant AI tool, Educational settings should complete a Data Protection Impact Assessment (DPIA) to identify and mitigate risks.

## CHILDREN MISSING FROM EDUCATION

The numbers of CME will be reported on by the academy regularly and will be reviewed by the Regional Safeguarding Lead. Any concerns will be immediately addressed (i.e. asking about the steps being taken to trace and track the movement of students and actions being taken to ensure their safety). An off-roll form must be completed by the academy and provided to the Regional Safeguarding Lead to identify the reasons why a child will be taken off the academy roll. The Regional manager must also review the form with the Regional Safeguarding Lead before a child is taken off roll.

A child going missing from education is a potential indicator of abuse or neglect, and such children are at risk of being victims of harm, exploitation or radicalisation. There are many circumstances where a child may become missing from education, but some children are particularly at risk. These include children who: Are at risk of harm or neglect;

Come from Gypsy, Roma, or Traveller families;

Come from the families of service personnel;

Go missing or run away from home or care;

Are supervised by the youth justice system; come from new migrant families. We will follow guidelines for unauthorised absence and for dealing with children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of going missing in future. This includes informing the local authority if a child leaves the academy without a new school being named and adhering to requirements with respect to sharing information with the local authority, when applicable when removing a child's name from the admission register at non-standard transition points.

Staff will be trained in signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns which may be related to being missing, such as travelling to conflict zones, FGM and forced marriage.

If a staff member suspects that a child is suffering from harm or neglect, we will follow local child protection procedures, including with respect to making reasonable enquiries. We will make an immediate referral to the local authority children's social care team, and the Police if the child is in immediate danger or at risk of harm.

Parents/carers will be supported to ensure that they provide at least two emergency contacts for their child and that the academy is updated if these numbers change.

## Child Exploitation

A form of abuse that occurs where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual (CSE) or criminal (CCE) activity.

Child sexual exploitation (CSE) is where children are sexually exploited for money, power or status. This can involve violent, humiliating and degrading sexual assaults, but does not always involve physical contact and can happen online. For example, young people may be persuaded or forced to share sexually explicit images of themselves, have sexual conversations by text, or take part in sexual activities using a webcam.

Children or young people who are being sexually exploited may not understand that they are being abused. They often trust their abuser and may be tricked into believing they are in a loving, consensual relationship.

Child criminal exploitation (CCE) is where children are used to complete criminal activity (a) in exchange for something they need (i.e. food/money), (b) for the financial or other advantage of the perpetrator, or (c) through violence or the threat of violence. This can also occur through the use of technology.

CCE can include county lines (see below) or children being forced to work in cannabis factories, forced to shoplift or pickpocket or to threaten other young people.

County lines is a form of CCE that refers to gangs or organised criminal networks exploiting children to transport illegal drugs/drug money into one or more importing areas (within the UK) using 'deal lines' (dedicated mobile phone lines). Children can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

If a member of staff suspects CSE or CCE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the Police, if appropriate.

- Appearing with unexplained gifts or new possessions;
- Associating with other young people involved in exploitation; ●Having older boyfriends or girlfriends; ● Suffering from sexually transmitted infections or becoming pregnant; ●Displaying inappropriate sexualised behaviour;
- Suffering from changes in emotional well-being;
- Misusing drugs and/or alcohol;
- Going missing for periods of time, or regularly coming home late;
- Regularly missing school or education, or not taking part in education.

## Allegations of abuse made against other pupils (peer-on-peer or child-on-child abuse)

We recognise that children are capable of abusing their peers/other children. Abuse will never be tolerated or passed off as "banter" or "part of growing up".

flicking bras and upskirting (as per KCSIE 2020), dismissing or tolerating such behaviours risks normalising

Indicators of child exploitation per KCSIE 2020 child:

Most cases of pupils hurting other pupils will be dealt with under our academy behaviour policy, but this policy will apply to any allegations that raise safeguarding concerns. This might include where the alleged behaviour:

- Is serious, and potentially a criminal offense;
- Could put pupils in the school at risk;
- Is violent;
- Involves pupils being forced/coerced into drugs or alcohol;
- Involves criminal exploitation, such as threatening other children into criminal activity
- Involves sexual exploitation, abuse, violence or harassment, such as indecent exposure, sexual assault, or sexually inappropriate pictures or videos (including sexting).

Staff are made aware of the importance of: making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up; not tolerating or dismissing sexual violence or sexual harassment as “banter”, “part of growing up”, “just having a laugh” or “boys being boys”; challenging behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, them.

Upskirting typically involves taking a picture under a person’s clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. This is a criminal offense under the Voyeurism (Offences) Act 2019 and victims can be of any gender or identification.

When referring to sexual harassment we mean ‘unwanted conduct of a sexual nature’ that can occur online and offline. When we reference sexual harassment, we do so in the context of child-on-child sexual harassment. Sexual harassment is likely to: violate a child’s dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

Whilst not intended to be an exhaustive list, sexual harassment can include: sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names:

- Sexual “jokes” or taunting;
- Physical behaviour, such as: deliberately brushing against someone, interfering with someone’s clothes and displaying pictures, photos or drawings of a sexual nature; and online sexual harassment; non-consensual sharing of sexual images and videos;

● Sexualised online bullying;

● Unwanted sexual comments and messages, including, on social media; ● sexual exploitation; coercion and threat.

If a pupil makes an allegation of abuse against another pupil:

You must tell the DSL and record the allegation, but do not investigate it;
The DSL will contact the local authority children's social care team and follow its advice, as well as the Police if the allegation involves a potential criminal offense;

The DSL will put a risk assessment and support plan into place for all children involved – both the victim(s) and the child(ren) against whom the allegation has been made – with a named person they can talk to if needed; the wellbeing of all children involved is essential and the DSL will contact specialist mental health services, if appropriate.

We will minimise the risk of peer-on-peer/child-on-child abuse by: challenging any form of derogatory or sexualised language or behaviour; being vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female pupils, and initiation or hazing type consent;
ensuring pupils know they can talk to staff confidentially; ensuring staff are trained to understand that a pupil harming a peer could be a sign that the child is being abused themselves and that this would fall under the scope of this policy.
Where possible, speak to the DSL first to agree on a course of action. Alternatively, make a referral to local authority children's social care directly (see 'Referral' below).

You can also contact the charity NSPCC on 0808 800 5000 if you need advice on the appropriate action.

## Related Guidance:

Working Together to Safeguarding Children Keeping Children Safe in Education Alternative provision (2013; Updated 2016)
Preventing and tackling bullying (2013; Updated 2017)
Promoting the education of looked-after children (2014; Updated 2018)
Relationships Education, Relationships and Sex Education, and Health Education in England (2019)
Safeguarding children and protecting professionals in early years settings: online safety considerations (2019) School Admissions Code (2014; Updated 2015)
School attendance: guidance for Educational settings (Updated 2020)
School attendance: parental responsibility measures (2015; Updated 2020)

violence with respect to boys; ensuring our curriculum helps to educate pupils about appropriate behaviour and

- School complaints procedures: guidance for Educational settings (2020)
- Searching, Screening and Confiscation at School (2018)
- SEND code of practice: 0 to 25 years (2015; Updated 2020)
- Sexual violence & sexual harassment between children in Educational settings & colleges (2018)

Supervision of activity with children (2012)

Supporting pupils at school with medical conditions (2015; Updated 2017)

- Teaching online safety in Educational settings (2019)
- The Equality Act 2010: advice for Educational settings (2014; Updated 2018)
- The Educators' Standards (2011; Updated 2013)
- Use of Reasonable Force in Educational settings (2013)
- What to do if you're worried a child is being abused: advice for practitioners (2015)
- The Safeguarding Vulnerable Groups Act 2006 Information
- Sharing 2018

Date: Notes:

> January 2024 Policy Created by Annie Callan

> January 2024 Reviewed and Updated by Annie Callan

>January 2025 Reviewed by Annie Callan

>Oct 2025 KCSIE 2025 updates added. By Annie Callan and Rebecca Jones

>Nov 2025 Updated and combined Safeguarding and Child Protection policies. By Annie Callan By Rebecca Jones

>Nov 2025 Updated signposting, hyperlinks, and added DSL, DDSL, and Safeguarding Officer contacts.

>January 2026 Updated Yorkshire safeguarding children partnership contact information. By Rebecca Jones

Safeguarding Policy is next due for review by January 2027