



SAFEGUARDING AND CHILD PROTECTION POLICY

September 2021

This policy must be reviewed annually unless there are any changes in legislation or guidance in the interim, in which case the policy must be updated as and when necessary.

Review Date: September 2022

Approved by Governors: November 2021

"Every Child Matters to Us"

*As a Gold Award UNICEF Rights Respecting School, this policy is particularly vital in safeguarding the rights of **every** child in our school.*

This policy and procedures must have regard to the following:

- Statutory Framework for the Early Years Foundation Stage (2021) Section 3 – The Safeguarding and Welfare Requirements
- Keeping Children Safe in Education 2021
- Working Together to Safeguard Children 2018
- Shropshire Safeguarding Community Partnership (SSCP) Procedure Guidance
- What to do if you are worried a child is being abused 2015 - Advice for practitioners.
- Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers 2018

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Safeguarding and Child Protection Policy and Procedures

1. Policy statement:

At Crowmoor we believe that it is always unacceptable for a child or young person to experience abuse of any kind and recognise that safeguarding the welfare of all children and young people is everyone's responsibility. We follow Shropshire Safeguarding Community Partnership (SSCP) procedures and acknowledge that the welfare of the child is paramount.

At Crowmoor it is our duty to respond promptly and appropriately to all concerns, incidents or allegations of abuse or neglect of a child. We work in partnership with children, young people, their parents, carers and other agencies. Our statutory duties and supporting guidance are set out in Working Together to Safeguard Children 2018 and Keeping Children Safe in Education 2021.

Safeguarding and promoting the welfare of children is defined for the purposes of this policy as:

- 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; and
- Taking action to enable all children to have the best outcomes.

This policy is also based on the following legislation and guidance:

- The Children Act 1989 and 2004 - Safeguarding and promoting the welfare of children is defined as; protecting children from maltreatment, preventing impairment of children's health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and undertaking that role to enable those children to have optimum life chances and to enter adulthood successfully.

Section 3 (5) of the Children Act 1989 states that the law empowers anyone who has care of a child to do all that is reasonable in the circumstances to safeguard his/her welfare.

- Counterterrorism and Security Act 2015 – preventing people being drawn into terrorism and promotion of British values to ensure children are kept safe from radicalisation
- Female Genital Mutilation Act 2003 – Serious Crime Act 2015 - mandatory reporting of FGM from 31st October 2015
- Education and Training (Welfare of Children) Act 2021
- The Rehabilitation of Offenders Act 1974, which outlines when people with criminal convictions can work with children
- Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, which defines what 'regulated activity' is in relation to children
- Statutory guidance on the Prevent duty, which explains schools' duties under the Counterterrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- Keeping Children Safe in Education 2021
- The Statutory Framework for the Early Years Foundation Stage (EYFS) 2021

- The Ofsted Compulsory Childcare Register
- [Shropshire Safeguarding Partnership Threshold Guidance](#)
- [West Midlands Procedures](#)

During COVID-19 the Crowmoor have implemented a Safeguarding and Child Protection Addendum to ensure that additional safeguarding measures have been put in place. Staff are to refer to the Addendum for specific procedures during COVID-19 as well as following this policy.

This policy and procedure will also link to other setting/school policies & procedures;

- Behaviour
- Staff Code of Conduct
- Anti-Bullying
- Safer Recruitment
- Special Educational Needs
- Attendance
- Trips and Visits
- Health and Safety
- Relationship, sex and health education
- E-safety/ICT
- Looked After Children
- Preventing Extremism and Radicalisation
- Whistleblowing

2. Procedure

2.1 Adult Roles & Responsibilities

All staff (including students and volunteers) in this Crowmoor are familiar with the definitions and signs and symptoms of abuse or neglect stated in Working Together to Safeguard Children March 2018 as set out in the [West Midlands Procedures](#).

All staff are aware of their individual roles in safeguarding and promoting the welfare of children including their responsibility to be alert to any issues for concern in the child's life at home or elsewhere. We ensure that all staff (including students and volunteers) undergo an induction process where they are given copies of the procedures they must follow if they suspect abuse or neglect. On-going support is provided through regular supervision and appraisals to ensure these policies and procedures are put into practice to protect children.

As part of induction, training will include the school's behaviour policy and the school's procedures for managing children who are missing education, as well as the staff code of conduct, and the child protection policy. Keeping Children Safe in Education 2021 Part 1 must be read by all members of the staff. Governing bodies and proprietors, working with the senior leadership team and especially the designated safeguarding lead, should ensure that those staff who do not work directly with children read either Part one or Annex A. All Designated Safeguarding Leads, management and governing bodies should read KCSiE 2021 in its entirety.

All staff are expected to update their safeguarding and child protection training at least every three years. In addition, all staff members should receive regular safeguarding and child protection updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. At Crowmoor all staff are given a quiz to check their knowledge of KCSIE, as are governors and DSLs. Shropshire Safeguarding Community Partnership materials are shared with all staff and governors throughout the year e.g videos on how to make referrals, threshold criteria for safeguarding. There are brief updates at weekly staff meetings to keep staff updated on pupils in their classes. Staff attend core groups on pupils in their classes, as well as CIN and Early Help Meetings.

The Designated Senior Safeguarding Lead (DSL) who will take the lead for safeguarding and child protection issues is: Alan Parkhurst (Headteacher)

The other Designated Safeguarding Leads are: Jayne Parkhurst (SENDCo, Deputy Headteacher), Hannah Cave (SBM), Tracy Dowell (EYFS/KS1 Lead).

The safeguarding link governor who oversees this work is: Tim Wasdell

Our Designated Safeguarding Lead will update their child protection/safeguarding training every two years and has specific responsibilities as listed in **Appendix B (SCHOOLS)**

2.2 Record Keeping

When a concern about a child's welfare or safety is raised it will be discussed with the designated lead and recorded. The designated lead will decide if the concern should be shared with another agency (see **decision making** below) or kept on record in case future concerns arise.

Records should include:

- a 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 records will be stored on our CPOMS system, which is password protected and to access the highest level of record requires two factor authentication. Most historic documents were scanned in any records not scanned in are kept in a separate confidential file in a locked cupboard, in a secure place with restricted access, the Head's Office.

Where children leave the school or college (including in year transfers) the designated safeguarding lead should ensure their child protection file is transferred to the new school or college as soon as possible, and within 5 days for an in-year transfer or within the first 5 days of the start of a new term. When a child/pupil transfers to another school within this or another authority, the confidential information held is forwarded via CPOMS or under confidential cover and separate from the child's/pupil's main file to the DSL for child protection in the receiving school. If sent hardcopy a signed receipt will be obtained. This should be transferred separately from the main pupil file, ensuring secure transit and confirmation of receipt should be obtained (**Appendix C**).

In addition to the child protection file the DSL will consider sharing information with the new setting/school/college in advance of a child leaving.

Information sharing is vital in identifying and tackling all forms of abuse and neglect, and in promoting children's welfare, including their educational outcomes. Schools and colleges have clear powers to share, hold and use information for these purposes. We follow the guidance in the HM Government (HMG) 2018 guide 'Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers' and the HMG 2015 guide 'What to do if you are worried a child is being abused'.

Staff should be proactive in sharing information 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 the local authority children's social care. Governing bodies and proprietors are aware that among other obligations, the Data

Protection Act 2018, and the UK General Data Protection Regulation (UK GDPR) place duties on organisations and individuals to process personal information fairly and lawfully and to keep the information they hold safe and secure.

When information is being accumulated prior to possible referral we will start a chronology of events – on CPOMS if this is not available we will use the [Shropshire chronology template](#). Some chronologies will need to be produced for a specific reason for example, when a new relationship is started, during multi-agency meetings, from the start of a significant event, or from the start of the date parameters set by a statutory case review. The chronology should then continue throughout the intervention, or for as long as is required.

The designated lead and assistant leads will regularly review (fortnightly) all child protection chronologies to decide if the accumulation of events is having a detrimental impact on a child and must be referred to Compass. If the designated lead decides not to refer, the reason will be noted on the child's chronology.

2.3 Decision making – ‘Accessing the right service at the right time’

We take a holistic approach to safeguarding all children in our care and recognise that different families need a different level of support at different times. To enable us to recognise at which level a family might require support; we use the Shropshire Safeguarding Community Partnership Multi-Agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire. Shropshire [Threshold Document](#)

This guidance identifies four levels to ensure all children receive the support and intervention they need to achieve a positive life experience. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of parents and carers and we aim to develop good, professional relationships to ensure that we have a shared understanding of each child's needs and hope that the parents and carers cooperate in doing the best for their child and do not hold the intervention against the school or school staff.

It should be noted that if parents demonstrate a lack of co-operation or appreciation about the concerns we identify, this may raise the level of the need and required level of action.

Level 1 – Universal

Children with no additional needs and where there are no concerns. Typically, these children are likely to live in a resilient and protective environment where their needs are met. These children will require no additional support beyond that which is universally available.

Consent must be sought to access services and share information with others. Any information sharing between agencies without consent must be clear as to its legal basis.

Ensure privacy information is shared with the family and a consent form completed.

Support is provided by services identified as universal in local communities and are available to all. These include: schools, colleges, early years and childcare provision, primary healthcare provision (i.e. GP, hospitals), and the voluntary and community sector.

Universal support will most likely be provided by a single agency and/or existing support from family, friends, the community.

It is these Universal Services who are best placed to ensure children and families have access to the Early Help Offer. The needs of the child/young person are appropriately met within this framework.

Universal Services are constant and remain involved if/when the child/family move up to other levels of need.

Level 2 – Children in need of Early Help

These children can be defined as needing some additional support without which they would be at risk of not meeting their full potential.

Their identified needs may relate to their health, educational, or social development, and are likely to be short term needs. If ignored these issues may develop into more worrying concerns for the child.

In addition to the Whole Family Assessment, specific local tools and pathways should be used where there are concerns about possible harm to the child.

Early Help aims to provide a multi-agency response when a single agency is not able to progress and help the child and their family.

The existing single agency or multi-agency team should work with the family and each other to complete a Whole Family Assessment and Action Plan.

At this stage a lead professional/practitioner should be identified who can build a relationship with the whole family and ensure that the whole family's needs are met and any actions progressed.

Consent must be sought to access services. Any information sharing between agencies without consent must be clear as to its legal basis.

Ensure privacy information is shared with the family and a consent form completed.

Due to the budget funding cuts suffered by the school over the last four years,(subjected to review by a Lord Agnew adviser) there are no distinct pastoral staff employed anymore ,the Learning Mentor and Family Support Worker roles both being made redundant. The only TAs left are SEND posts. As a school we provide a Breakfast Club for PP children children, other children have a place paid for at the Breakfast and After-school clubs at the private on site Nursery. The teaching staff are responsible for filling in web-stars with parents when they are not teaching.

Level 3 –Targeted Early Help

This level applies to those children identified as requiring targeted support and who meet at least 2 of the 6 Strengthening Families criteria in the Whole Family Assessment. It is likely that for these children their needs and care are compromised.

These children will be those who are vulnerable to harm or experiencing adversity. In addition to the Whole Family Assessment, specific local tools and pathways should be used where there are concerns about possible harm to the child.

These children are potentially at risk of developing acute/ complex needs if they do not receive targeted early help.

If a child continues to have unmet needs which cannot be met by Universal or Early Help support, then the existing single agency or multi-agency team should work with the family and each other to review the Whole Family Assessment and Action Plan and follow the Request for Intervention Pathway to request more intensive family support from a Targeted Early Help Family Support Worker.

Consent must be sought from the family to access services. Any information sharing between agencies without consent must be clear as to its legal basis.

Ensure privacy information is shared with the family and a consent form completed

Level 4 – Complex Significant Needs

These are children whose needs and care at the present time are likely to be significantly compromised and or they are suffering or likely to suffer significant harm and so who require intervention from Shropshire Council Children's Social Care.

An immediate referral to Compass should be made for assessment under Section 17 or Section 47 of the Children Act 1989.

Specific local tools and pathways and the Shropshire Threshold Matrix should be used to support their referral and help practitioners to assess significant harm to the child.

Child in Need

Section 17 of the Children Act (1989) states that a child shall be considered in need if:

- They are unlikely to achieve, maintain or have the opportunity of achieving or maintaining a reasonable standard of health or development without the provision of services by a local authority.
- Their health and development is likely to be significantly impaired, or further impaired, without the provisions of such services

and/or;

- They are disabled.

Child Protection

Section 47 of the Children Act 1989 states that the authority shall make necessary enquiries to enable them to decide whether they should take action to safeguard or promote the child's welfare where there is reasonable cause to suspect a child is suffering or likely to suffer significant harm.

Where it is suspected that a child may be suffering or be at risk of suffering significant harm; referring practitioners must inform parents or carers that they are making a referral to Compass, and seek consent unless to do so may:

- Place the child at increased risk of significant harm; or
- Place any other person at risk of injury; or
- Obstruct or interfere with any potential Police investigation; or
- Lead to unjustified delay in making enquiries about allegations of significant harm.

Guidance for assessment practice can be found on page 13 of the Shropshire Threshold document.

(Taken from: Multi-agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire 2021) *Threshold Document*

2.4 Partnership with families

A copy of this policy is made available to all parents prior to their child joining our School on the website (hard copies are provided if required) as well as details of the complaints procedure. In general, any concerns will be discussed with parents and we will offer support or signpost support. All conversations, whatever the outcome, should be recorded appropriately to show that they took place, identify what was agreed and evaluate how effectively they enabled needs to be met. In this way quality conversations can demonstrate their impact on successful practice, including improvements in decision making and joint working. Conversations should continue to inform the on-going planning and reviewing.

Practitioners working with families at a Universal, Early Help or Targeted level will need to obtain the consent of the family before any information is held or shared with other agencies. If the practitioner does not gain the family's consent and in future has ongoing concerns, they should consider contacting Compass for advice and guidance. Except for child protection matters, referrals to Compass cannot be accepted without parents having been consulted first.

Consent is not required for child protection referrals where it is suspected that a child may be suffering or be at risk of suffering significant harm; however, the referring practitioner, would need to inform parents or carers that they are making a referral, unless to do so may:

- Place the child at increased risk of Significant Harm; or
- Place any other person at risk of injury; or
- Obstruct or interfere with any potential Police investigation; or
- Lead to unjustified delay in making enquiries about allegations of significant harm.

The child's interest must be the overriding consideration in making such decisions. Decisions should be recorded. If consent is withheld by the parent:

- If it is felt that the child's needs can be met through Early Help, then discussion with the family should take place about the completion of an Early Help Assessment and provision of services through an Early Help Plan. Early help consultations are available from the Early Help Advisors for support in managing these situations.
- For another agency familiar with the child and family to make the approach about information sharing to the family.
- No assessment should take place. The rationale for this decision will be recorded on the concerns form.
- The combination of the concerns and the refusal to consent to enquiries being made may result in the concerns being defined as child protection concerns. In this case, information sharing may proceed without parental consent. The consultation and the decision to proceed without consent must be recorded on the case papers.

If a child has been injured or is in imminent danger of being injured then we will contact the emergency services, medical or police, immediately on 999.

When making a level 4 referral to Compass we will ensure we have a record of all details required detailed on a [Shropshire Multi-Agency Referral Form](#)

2.5 Specific legal duties to report

Legislation has recognised and criminalised the following types of abuse and placed duties on education settings to report offences to the authorities:

- **Radicalisation and the Prevent Duty**

The government set out its definition of British values in the 2015 Prevent Strategy – this promotes the values of:

- democracy
- the rule of law
- individual liberty
- mutual respect
- tolerance of those of different faiths and beliefs

If a member of staff has a concern about a pupil/s they should follow the school's/settings normal safeguarding procedures, including discussing with the school's/settings designated safeguarding lead as set out in the Child Protection/safeguarding policy.

The designated lead should contact West Mercia Prevent Team:

Sgt Calum Forsyth – 07970 047227

DC Holly Aungiers – 01386 591815

Prevent@westmerciam.pnn.police.uk

The school has a separate '**Preventing Extremism and Radicalisation Policy**'. Appendix E

- **Female Genital Mutilation (FGM)**

Whilst all staff should speak to the designated safeguarding lead (or deputy) about any concerns about female genital mutilation (FGM), there is a specific legal duty on teachers. If a teacher, during their work in the profession, discovers that an act of FGM appears to have been carried out on a girl under the age of 18, the teacher must report this to the police.

Please refer to <https://www.gov.uk/government/publications/female-genital-mutilation-leaflet>

I/We may not seek parental consent if this may put the girl at increased risk.

- **Domestic abuse and honour-based violence**

Children living in households where there is domestic abuse such as coercion or violence, including honour-based violence, could be at significant risk of harm. We will seek support for victims and their children through Compass.

Depending on the level of risk, I/we may or may not consult parents before contacting Compass.

2.6 Specific safeguarding issues

To ensure that our children and young people are protected from harm, we need to understand what types of behaviour constitute abuse and neglect. Staff are made aware of specific safeguarding issues (listed below) through child protection training, reading up to date guidance such as Keeping Children Safe in Education 2021, Statutory Framework for the Early Years Foundation Stage stated in Section 3 – The Safeguarding and Welfare Requirements and accessing SSCP procedures at <http://www.safeguardingshropshireschildren.org.uk/>

All staff are made aware that mental health problems can, in some cases, be an indicator of abuse. The DSL will liaise with the school mental health lead Jayne Parkhurst to ensure information is being shared. As A mental health Pathfinder School, we work closely with the Team and utilise their referral processes as well as the SEND Policy. Staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following the child protection policy, and speaking to the designated safeguarding lead or a deputy. [The Mental Health and Behaviour in Schools](#) guidance sets out how schools and colleges can help prevent mental health problems by promoting resilience as part of an integrated, whole school/college approach to social and emotional wellbeing, which is tailored to the needs of their pupils.

Children may need a social worker due to safeguarding or welfare needs. Local authorities will share this information with the school, and the DSL will hold and use this information so that decisions can be made in the best interests of the child's safety, welfare and educational outcomes.

Crowmoor ensures that the DSL is continually updated in all areas below. They are familiar with the referral pathways and specific toolkits and guidance available on the [SSCP website](#).

All staff should have an awareness of safeguarding issues that can put children at risk of harm. Behaviours linked to issues such as drug taking and or alcohol misuse, deliberately missing education and consensual and non-consensual sharing of nudes and semi-nudes images and/or videos (UCKIS) can be signs that children are at risk.

Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example, information for schools, colleges and early years settings can be found on the TES, MindEd and the NSPCC websites. Staff can access government guidance as required on the issues listed below via [Annex B in Keeping Children Safe in Education](#) and other government websites.

<ul style="list-style-type: none"> Bullying including cyberbullying (cyber crime). Child Criminal Exploitation: County Lines (CCE) Child missing from education, home or care Child sexual exploitation (CSE) Children and the court system Children with family members in prison Domestic violence Drugs Health and Wellbeing e.g. fabricated or induced illness, medical conditions, mental health and behaviour. Faith based abuse So - called honour-based abuse (including Female Genital Mutilation and Forced Marriage. Gangs and youth violence Gender-based violence/violence against women and girls (VAWG) Homelessness 	<ul style="list-style-type: none"> Homelessness Hate Hate related Incident Reporting Form Missing children and adults' strategy Modern Slavery Private fostering Preventing radicalisation Relationship abuse Peer on Peer Abuse e.g., Sexting (youth produced sexual imagery), Sexual Violence & Sexual Harassment Trafficking Private Fostering Online safety
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All staff should be aware that safeguarding incidents and/or behaviours can be associated with factors outside the school or college and/or can occur between children outside of these environments. All staff, but especially the DSL and deputy DSLs should consider whether children are at risk of abuse and exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms (but not limited to) sexual exploitation, criminal exploitation, and serious youth violence. Please see link [Contextual Safeguarding](#):

Both Child sexual exploitation (CSE) and Child criminal exploitation (CCE) are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation. The DSL can obtain local information regarding Exploitation from SSCP and by attending local briefings .The Senior DSL has attended CSE and CCE Training provided by Shropshire Council and HMCTS/MA.

Peer on Peer / child on child abuse Appendix H

Staff should recognise that children can abuse their peers. Abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up”. Victims of peer abuse should be supported as they would be if they were the victim of any other form of abuse, in accordance with this policy. A zero-tolerance approach will be adopted by all staff at our school.

Peer on peer abuse occurs when a young person is exploited, bullied and/or harmed by their peers who are the same age or similar age.

Staff are aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to:

- bullying (including cyberbullying);
- Abuse in personal intimate relationships between peers
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence such as rape, assault by penetration and sexual assault
- sexual harassment such as sexual comments, remarks, jokes or online
- Causing someone to engage in sexual activity without consent
- sexual or sexist name calling
- inappropriate or unwanted sexualised touching
- consensual and non-consensual sharing of nudes and semi nudes images and or videos (also known as sexting or youth produced sexual imagery);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.
- sexting (also known as youth produced sexual imagery);
- revenge porn
- initiation/hazing type violence and rituals.

Children can experience peer-on-peer sexual abuse in a wide range of settings, including:

- at school
- at home or in someone else's home
- in public spaces
- online

It can take place in spaces which are supervised or unsupervised. Within a school context, for example, peer-on-peer sexual abuse might take place in spaces such as toilets, the playground, corridors and when children are walking home. All staff should understand, that even if there are no reports in their schools or colleges it does not mean it is not happening, it may be the case that it is just not being reported

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

All staff should be aware of the associated risks and understand the measures in place to manage these. Advice for schools and colleges is provided in the Home Office's Preventing youth violence and gang involvement and its Criminal exploitation of children and vulnerable adults: county lines guidance.

Compliance with the Public-Sector Equality Duty (PSED) is a legal requirement for schools and colleges that are public bodies.

Under the PSED, schools and colleges that are public bodies have a general duty to have regard to the need to eliminate unlawful discrimination, harassment and victimisation, to advance equality of opportunity between different groups and to foster good relations between different groups. The duty applies to all protected characteristics and means that whenever significant decisions are being made or policies developed, thought must be given to the equality implications such as, for example, the elimination of sexual violence and sexual harassment.

At Crowmoor School we will ensure that the following areas are covered within the curriculum to try and minimise the risk of peer on peer abuse:

- healthy and respectful relationships;
- what respectful behaviour looks like;
- consent;
- gender roles, stereotyping, equality;
- body confidence and self-esteem;
- prejudiced behaviour;
- that sexual violence and sexual harassment is always wrong; and
- addressing cultures of sexual harassment.

Schools often deliver this currently, through planned, high-quality, Sex and Relationship Education (SRE) and Personal, Social, Health and Economic (PSHE). Please refer to the school RSHE policy for more information.

If staff have any concerns regarding peer on peer abuse, they should speak to their designated safeguarding lead (or deputy). The school would respond to an incident of Peer on Peer abuse by recording the incident on a Concern Reporting Form (Appendix F) and by following guidance as set out in [Sexual violence and sexual harassment between children in schools and colleges](#) published by Department for Education and [Part 5 of Keeping Children Safe in Education 2021](#). In summary the process and procedures for managing a sexual violence or sexual harassment incident are;

Whole school approach:

*Pre-planned risk assessment proforma in place
Training for staff on how to report incidents
Training on how to manage reports
Peer on peer policy in place*

Responding to a report:

*Victims are reassured, supported and kept safe
Record the concern
Inform the DSL if not involved in the initial report.*

Risk Assessment:

*Risk assessment for victim
Risk assessment for alleged perpetrator
Risk assessment for all other children involved
Initial consideration of children sharing a classroom and/or having direct contact in school
Initial consideration of contact between children travelling to and from school*

Support

Support for victim and alleged perpetrator

Managing the report:

*Consider the options to manage the report, including manage internally, early help, referral to children's social care and report to police
Consider bail conditions
Manage delays in the criminal process*

The school monitors whether there are any patterns of peer on peer abuse by recording on CPOMS/Behaviour spreadsheet and will determine necessary support and intervention.

It is vital that staff at Crowmoor understand that the child who is perpetrating the abuse may also be risk of harm. Staff should make every effort to ensure that the perpetrator is also treated as a victim

and undertake assessments to conclude this. Sensitive work must be undertaken with the child who is perpetrating, by helping them to understand the nature of their behaviour and the effect it has on others may prevent abuse.

Staff must be able to use their professional judgement in identifying when what may be perceived as “normal developmental childhood behaviour” becomes abusive, dangerous and harmful to others. Designated leads may need to consult with the SSCP Threshold document to help with their decision making.

The Designated Safeguarding Lead has attended Brook Traffic Light Training which will support in identifying developmentally typical behaviours or those that may be referred to as problematic or harmful.

Children do not always feel able to speak out about their experiences of peer-on-peer sexual abuse. They may be afraid of:

- being considered a ‘snitch’
- getting in trouble themselves
- how they will be perceived by others
- teachers or other adults not being discrete
- their parents being informed

A helpline was launched by the NSPCC on 1st April 2021 to support potential victims of sexual harassment and abuse. Run by the NSPCC it aims to provide advice and support to both children and adults who are victims of abuse in school. It will also include how to contact the police to report crimes. The advice line is also available to support professionals and parents. **NSPCC helpline number is 0800 136 663.**

This dedicated helpline will offer support to:

- all children and young people making current and non-recent disclosures of abuse
- any children or young people who want to talk about being involved or witnessing any incidents
- any adults who have experienced non-recent abuse
- parents and carers who have any concerns about their own or other children
- professionals who work in schools and need support in this or related issues.

This school promotes the use of this helpline by;

- Posters around the school
- Promoted in school assemblies & staff meetings
- Newsletters to parents
- On the school website

2.7 Safeguarding children with special educational needs and disabilities

It is recognised that children with special educational needs or disabilities (SEND) can present additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group of children. These can include: assumptions that indicators of possible abuse such as behaviour, mood and injury, relate to the child’s impairment without further exploration;

children with SEND can be disproportionately impacted by issues such as bullying, without necessarily showing outward signs; communication barriers.

It is important, therefore, to be particularly sensitive to these issues when considering any aspect of the welfare and safety of such children, and to seek professional advice where necessary.

Any reports of abuse involving children with SEND will therefore require close liaison with the Designated Safeguarding Lead (or deputy) and the SENCO (name) or the named person with oversight for SEN in a college.

2.8 Alternative Provision

The cohort of pupils accessing Alternative Provision often have complex needs, it is important that governing bodies and proprietors are aware of the additional risk of harm that their pupils may be vulnerable to. The Department has issued two pieces of statutory guidance to which commissioners of Alternative Provision should have regard: [Alternative Provision](#) and [DfE Statutory Guidance Education for children with health needs who cannot attend school](#)

Crowmoor ensures that any alternative provision used for pupils is quality assured. A quality assurance checklist (Appendix G) is used to evidence that safeguarding procedures are being followed and the necessary vetting checks for staff at the Alternative Provision have been undertaken.

2.9 Children Missing Education

All children, regardless of their circumstances, are entitled to a full-time education, which is suitable to their age, ability, aptitude and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area. Effective information sharing between parents, schools, colleges and local authorities is critical to ensuring that all children are safe and receiving suitable education.

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. School and college staff should follow their procedures 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. Where reasonably possible the school will hold at least two emergency contacts for every child in the school in case of emergency and in case there are welfare concerns at home.

Schools and colleges should put in place appropriate safeguarding policies, procedures and responses for children who go missing from education, particularly on repeat occasions. It is essential that all staff are alert to signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns such as travelling to conflict zones, female genital mutilation and forced marriage. Further information about children at risk of missing education can be found in the Children Missing Education guidance or Shropshire Council Learning Gateway. [Children missing education information \(Shropshire Council\)](#)

2.10 Elective Home Education

Many home educated children have an overwhelmingly positive learning experience. We would expect the parents' decision to home educate to be made with their child's best education at the heart of the decision. However, this is not the case for all, and home education can mean some children are less visible to the services that are there to keep them safe and supported in line with their needs.

Please see link to [Elective Home Education \(Shropshire Council\)](#)

2.11 Safeguarding children who are Looked After

Staff are aware the most common reason for children becoming looked after is because of abuse and/or neglect. Appropriate staff have the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. Appropriate staff members also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her. The designated safeguarding lead has details of the child's social worker and the name of the virtual school head in the authority that looks after the child.

The designated teacher for looked after children will work with the Local Authority to promote the educational achievement of registered pupils who are looked after or who have left care through adoption, special guardianship, child arrangement orders or who are adopted from state care outside of England and Wales. The appointment of a designated teacher is a statutory requirement for governing bodies of maintained schools and proprietors of academies.

The designated safeguarding lead should have details of the child's social worker and the name of the virtual head teacher. The designated safeguarding lead should work closely with the designated teacher.

The Designated Teacher for LAC is Jayne Parkhurst

2.12 Injuries

At the beginning of each session or school day parents are requested to notify us of any accidents, incidents or injuries which may affect their child before leaving him/her at the setting/school. A note will be made of any existing injuries and how the injury was received will be recorded. A body map may be used to indicate any marks/bruises (Refer to body map in [Multi-agency referral form \(MARF\)](#))

2.13 Safe use of ICT (See separate policy) and mobile phones

It is essential that children are safeguarded from potentially harmful and inappropriate online material. At Crowmoor School we ensure that there are appropriate filters and appropriate monitoring systems in place. We have an effective whole school approach to online safety empowers us as a school, to protect and educate pupils, students, our staff in their use of technology and establishes mechanisms to identify, intervene in, and escalate any concerns where appropriate. Children are not allowed access to mobile phones in school.

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

- **content:** being exposed to illegal, inappropriate or harmful content, for example: pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation and extremism.
- **contact:** being subjected to harmful online interaction with other users; for example: peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.
- **conduct:** personal online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images (e.g. consensual and non-consensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying; and

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

Training – The Governing bodies and proprietors should ensure that, as part of the requirement for staff to undergo regular updated safeguarding training, including online safety and the requirement to ensure children are taught about safeguarding, including online safety, that safeguarding training for staff, including online safety training, is integrated, aligned and considered as part of the whole school or college safeguarding approach and wider staff training and curriculum planning. The IT Co-ordinator provides annual training to all staff on online safety.

Where children are being asked to learn online at home the school will follow advice from the Department of Education; [safeguarding and remote education](#).

Our Policy for Remote Learning via Teams is detailed in our COVID Risk assessment, all interactions with parents or pupils are fully recorded and children must be properly dressed, not in their bedrooms with an adult supervising their engagement in learning at home and pupils will be expected to comply with rules on behaviour that are applied at school.

The use of mobile phones and other electronic devices such as computers, tablets, and game devices are commonplace. However, as a society, we are beginning to recognise that although these devices have brought great benefit, we also need to ensure that we help children to understand there are dangers and how to keep themselves safe. This includes:

- Keeping personal details secure
- Understanding that not all content is appropriate, truthful or legal
- What to do if they do accidentally access inappropriate or illegal content
- What to do if they are upset by something they receive
- What to do if they are going to physically meet someone they have met on-line

Staff can use their personal mobile phones during their break times in designated areas. During working hours, they must be kept out of the reach of children in lockers, in a secure area accessible only to staff. All staff are made aware of their duty to follow this procedure, and to challenge anyone not adhering to it.

Visitors to the setting (including parents) are not allowed to use or bring camera enabled phones on site, unless they are having no access to areas containing pupils or are in the continuous supervision of a School staff member.

We believe that photographs validate children's experiences and achievements and are a valuable way of recording milestones in a child's life. Parental permission for the different ways in which we use photographs is gained as part of the initial registration at Crowmoor We take a mixture of photos that reflect the school environment, sometimes this will be when children are engrossed in an activity either on their own or with their peers. To safeguard children and adults and to maintain privacy, cameras are not to be used during intimate care situations by adults or children.

We use tapestry to record significant learning moments in pupil's learning journeys. This Data is accessed only through secure password protected means and the data is stored in encrypted fashion on servers in the UK. The LA provides anti-virus software. Children are only allowed access to internet enabled devices under adult supervision. Children are regularly instructed on online safety and how to react and pull up the safety screen if inappropriate images/content is seen.

Through induction, staff and volunteers are made aware of our 'acceptable use of technology' policy both at home and in the workplace. If any staff or volunteers breach this policy, then we will take disciplinary action which may result in a referral to the Disclosure and Barring Service.

2.14 Escalating / de-escalating concerns

Just because a child is assessed at a point in time as meeting certain threshold criteria does not mean that they always will. An assessment is an on-going process, not an event; children's needs often change over time. The Designated Lead for Safeguarding will maintain an overview of all children with a plan to ensure children's needs are being met at the right level of intervention. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of the parents and carers – a lack of co-operation or appreciation about the concern may of itself raise the level of the need and required response.

2.15 The impact of abuse

The impact of child abuse should not be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach, and the rest of their childhood and their adulthood may be characterised by anxiety or depression, self-harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships and long-term medical or psychiatric difficulties.

2.16 Taking action

Key points to remember for taking action are:

- in an emergency take the action necessary to help the child, for example, call 999
- report your concern to the DSL immediately
- if the DSL is not able to be contacted ensure action is taken to report the concern to children's social care
- do not start your own investigation
- share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family
- complete a record of concern (Appendix F)
- seek support for yourself if you are distressed.

If you suspect a child is at risk of harm

There will be occasions when you suspect that a child may be at serious risk, but you have no 'real' evidence. The child's behaviour may have changed, or you may have noticed other physical but inconclusive signs. In these circumstances, you should try to give the child the opportunity to talk. The signs you have noticed may be due to a variety of factors and it is fine to ask the child if they are alright or if you can help in any way. Staff at Crowmoor have been made aware of the Shropshire [Children Reporting Concern guidance](#).

Use the welfare concern form (see **Appendix F**) to record these early concerns. If the child does begin to reveal that they are being harmed, you should follow the advice in the section below 'If a child discloses information to you'.

If, following your conversation, you remain concerned, you should discuss your concerns with the designated person.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following the procedures set out in this policy and by speaking with the DSL.

If a child tells you that they've been abused

It takes a lot of courage for a child to tell someone that they are being neglected and or abused. They may feel ashamed, particularly if the abuse is sexual, their abuser may have threatened what

will happen if they tell, they may have lost all trust in adults, or they may believe, or have been told, that the abuse is their own fault.

If a child talks to you about any risks to their safety or wellbeing you will need to let them know that you must pass the information on – you are not allowed to keep secrets. The point at which you do this is a matter for professional judgement. If you jump in immediately the child may think that you do not want to listen, if you leave it till the very end of the conversation, the child may feel that you have misled them into revealing more than they would have otherwise.

All staff should be able to reassure victims that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting abuse, sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

During your conversation with the child:

Allow them to speak freely.

- Remain calm and do not overreact – the child may stop talking if they feel they are upsetting you.
- Give reassuring nods or words of comfort – ‘I’m so sorry this has happened’, ‘I want to help’, ‘this isn’t your fault’, ‘You are doing the right thing in talking to me’.
- Do not be afraid of silences – remember how hard this must be for the child.
- Under no circumstances ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the child’s mother think about all this.
- At an appropriate time tell the child that to help them you must pass the information on.
- Do not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused.
- Avoid admonishing the child for not disclosing earlier. Saying ‘I do wish you had told me about this when it started’ or ‘I can’t believe what I’m hearing’ may be your way of being supportive but the child may interpret it that they have done something wrong.
- Tell the child what will happen next. The child may agree to go with you to see the designated person. Otherwise let them know that someone will come to see them before the end of the day.
- Report verbally to the designated person.
- Write up your conversation as soon as possible on the record of concern form and hand it to the designated person.
- Seek support if you feel distressed.

Refer to **Appendix F**

2.17 Prevention in the Curriculum

Crowmoor recognises the importance of developing pupils' awareness of behaviour that is unacceptable towards them and others, and how they can help keep themselves and others safe. We use assemblies to emphasise how to say no to behaviour that makes pupils uncomfortable or upsets them and how to report it to trusted adults. We utilise UNICEF materials and PHSE curriculum resources to assist in safeguarding teaching.

Relationships Education and Relationships and Sex Education and/or PSHE programmes in each key stage provides personal development opportunities for pupils to learn about keeping safe and who to ask for help if their safety is threatened. As part of developing a healthy, safer lifestyle, pupils are taught to, for example,

- Safely explore their own and others' attitudes.
- Recognise and manage risks in different situations and how to behave responsibly.
- Judge what kind of physical contact is acceptable and unacceptable.
- Recognise when pressure from others (including people they know) threatens their personal safety and well-being and develop effective ways of resisting pressure; including knowing when and where to get help.
- Use assertiveness techniques to resist unhelpful pressure.
- The importance of Internet safety

2.18 Managing allegations of abuse made against staff (this includes apprentices & supply staff), students or volunteers

As part of our whole school approach to safeguarding, this school will ensure that we promote an open and transparent culture in which all concerns about all adults working in or on behalf of the school or college (including supply teachers, volunteers and contractors) are dealt with promptly and appropriately.

There are two levels of concern;

1. Allegations that may meet the harms threshold.
2. Allegation/concerns that do not meet the harms threshold – which may be referred to as 'low level concerns'.

Further information about the two levels of concern can be found in our separate LA produced : **Shropshire HR KCSiE Allegations of Abuse Against Staff policy & KCSiE Low Level Safeguarding Concerns policy**

Allegations which might indicate that a person would pose a risk of harm to children if they continue to work in regular or close contact with children in their present position will be taken seriously. We have a duty to inform Ofsted of any serious allegations made against a person which suggests he or she has:

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

We also have a duty of care towards our staff. We provide support for anyone facing an allegation and provide employees with a named contact if they are suspended. It is essential that any allegations of abuse made against members of staff or volunteers are dealt with very quickly, in a fair and consistent way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

If there are concerns about a staff member then this should be referred to the headteacher or principal. Where there are concerns about the headteacher or principal, this should be referred to the chair of governors, chair of the management committee or proprietor of independent school as appropriate. In the event of allegations of abuse being made against the headteacher, where the headteacher is the sole proprietor of an independent school, allegations should be reported directly to the designated officer of the local authority. Staff may consider discussing any concerns with the schools designated safeguarding lead and make any referral via them.

Where the school or college identify a child has been harmed, that there may be an immediate risk of harm to a child or if the situation is an emergency, they should contact children's social care and as appropriate the police immediately. There are two aspects to consider when an allegation is made:

- Looking after the welfare of the child - the designated safeguarding lead is responsible for ensuring that the child is not at risk and referring cases of suspected abuse to the local authority children's social care.
- Investigating and supporting the person subject to the allegation - the case manager should discuss with the LADO, the nature, content and context of the allegation, and agree a course of action.

The LADO may ask for additional information, such as previous history, whether the child or their family have made similar allegations previously and the individual's current contact with children. There may be situations when the LADO will want to involve the police immediately, for example if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

The initial sharing of information and evaluation may lead to a decision that no further action is to be taken regarding the individual facing the allegation or concern; in which case, this decision and a justification for it will be recorded by both the Registered Person/Headteacher and the LADO, and agreement reached on what information should be put in writing to the individuals concerned and by whom. The Registered Person/Headteacher will then consider with the LADO what action should follow both in respect of the individual and those who made the initial allegation.

If further action is required, we will follow the advice of the LADO and co-operate with any investigations. We will follow instructions about what can be disclosed to the accused and whether he/she should be suspended whilst further investigations take place. This is not an indication of admission that the alleged incident has taken place but is to protect the staff as well as children and families throughout the process. Clear advice will be given to workers on the process of investigation by other agencies. We will follow advice about how to inform families about the allegation.

There is a legal requirement for employers to make a referral to the DBS where they think that an individual has engaged in conduct that harmed (or is likely to harm) a child; or if a person otherwise poses a risk of harm to a child. [Safeguarding Vulnerable Groups Act 2006](#)

Whistleblowing

Whistle blowing is a mechanism by which adults can voice their concerns in good faith, without fear of repercussion. Any behaviour by colleagues that raises concern regardless of source will be recorded and reported to the designated practitioner or appropriate agency. Refer to the LA Derived Whistleblowing Policy.

2.19 Recruiting Staff(The School has adopted the LA Policy)

We provide adequate and appropriate staffing resources to meet the needs of children. (More information can be found in our recruitment and retention policy).

Job adverts and application packs refer to our safeguarding policy and procedures.

Applicants for posts are clearly informed that positions are exempt from the Rehabilitation of Offenders Act 1974. We ensure that we meet our responsibilities under the Safeguarding Vulnerable Groups Act 2006.

Where applicants are rejected because of information that has been disclosed, we will inform the applicant about their right to know and to challenge incorrect information.

We refer to [Keeping Children Safe in Education 2021](#) in respect of references and Enhanced Disclosure and Barring Service checks for staff and volunteers to ensure that no disqualified or unsuitable person works with or has access to the children.

Keeping Children Safe in Education 2021 states that schools will be required to complete a risk assessment for each volunteer to decide whether they need to do an enhanced DBS check or not. (Note that even if it is decided an enhanced DBS is to be requested, if the volunteer is not in regulated activity, then schools are not legally allowed to do a barred list check).

We have procedures for recording the details of visitors, including prospective candidates, to the setting and ensure that we have control over who comes into the premises so that no unauthorised person has unsupervised access to the children.

Where pupils are placed in an alternative provision, the schools should obtain a written statement from the provider that they have completed all the vetting and barring checks that are necessary on their staff.

2.20 Staff Supervision (including students and volunteers)

To ensure that all staff are alert to any issues for concern, staff receive regular training and updates in safeguarding and child protection through a range of training and supervision activities. This includes both formal and informal supervision, annual appraisals, staff meetings and access to SSCP approved training. Individual supervision offers staff an opportunity to receive coaching to improve their practice with children and address any issues resulting in poor performance. Individual supervision also provides a safe space in which to raise any concerns they may have about the conduct of other adults connected with the setting. DSLs are encouraged to engage in external supervision provided by Shropshire's Educational Psychology Service. Other staff are able to request regular formal supervision from senior staff or ad hoc sessions if an incident has been particularly harrowing. Confidential counselling is available to all staff. The School has a Well-being Policy and has bought in outside trainers to support staff well-being.

If a member of staff is taking medication which may affect their ability to care for children, the staff member should seek medical advice. The setting will ensure that staff members only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member's ability to look after children properly.

2.21 Resolution of professional disagreements

When practitioners are working together in the complex business of safeguarding children there will inevitably be occasions when there are professional differences of opinion or concerns about practice decisions, actions or lack of actions to a referral, assessment or the progress of child's plan. In these circumstances practitioners have a duty to take action to address professional disagreements as soon as they arise in a way that is appropriate and proportionate

Examples of case-specific professional disagreements include:

- When there is disagreement about the response to a referral made by one agency to another agency or service (e.g. decision making).
- When there is disagreement about the outcome of an assessment.
- When there is serious concern about the implementation of a child's Plan and disagreement about how this should be addressed (e.g. agreed actions not being followed through).
- When there is serious concern about the effectiveness of a child's Plan in bringing about the necessary changes and disagreement about how this should be addressed (e.g. drift/delay).
- When there is disagreement over the sharing of information in a case.

Designated Safeguarding Leads and managers will consult with the procedures for resolving professional disagreements by accessing it on the West Midlands Child Protection Procedures [website](#) . Designated Safeguarding Leads will record any actions taken and outcomes on file.

2.22 Use of Crowmoor premises for non-school activities

The governing bodies or proprietors hire or rent out school or college facilities/premises to organisations or individuals (for example to community groups, sports associations, and service providers to run community or extra-curricular activities) they ensure that appropriate arrangements are in place to keep children safe.

When services or activities are provided by the governing body or proprietor, under the direct supervision or management of their school or college staff, their arrangements for child protection will apply. However, where services or activities are provided separately by another body this is not necessarily the case. The governing body or proprietor should therefore seek assurance that the body concerned has appropriate safeguarding and child protection policies and procedures in place (including inspecting these as needed); and ensure that there are arrangements in place to liaise with the school or college on these matters where appropriate. The governing body or proprietor should also ensure safeguarding requirements are included in any transfer of control agreement (i.e. lease or hire agreement), as a condition of use and occupation of the premises; and that failure to comply with this would lead to termination of the agreement.

Signature:	Date Policy adopted:
Position	Review Date:

Appendix A



Single & Multi-agency Chronology Practice Guidance

To be used when writing a report on behalf of your agency

This guidance applies to all agencies working with children and/or adults and their families.

Date Completed	In progress
Status	FINAL, v6
Review Date	2 years from publication
Approving Body/Group	Shropshire Safeguarding Community Partnership
Date of Approval	27 th November 2020

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Introduction

A chronology is a series of [significant events](#) and changes that occur in a person or household's life. It should provide a summarised account of significant events based upon your agency's contacts with the person or family. The impact it has had on the child and/or adult, any action taken and comments on the appropriateness or not of the actions that were taken at that time should also be included. A chronology should be a summary that gives an "at a glance" overview and should not replace case notes or records which should include more detailed information.

Purpose

The reasons why practitioners should use chronologies in their practice include the following:

- When a statutory case review Domestic Homicide Review, Child Practice Safeguarding Review, Safeguarding Adult Review or Anti-Social Behaviour Case Review is being undertaken.
- To place the person and/or household at the centre of the practitioner's thinking.
- To help identify risks and patterns.
- It can help develop a better understanding of the immediate or cumulative impact of harm and/or events.
- To help make links between the past and the present, helping to understand the importance of historic information for the worker and the family.
- It is a useful reflective tool, which can be used within supervision for critically reflective practice and to identify next steps.
- A good chronology can draw attention to seemingly unrelated events or information, enabling the significance of issues to be better understood.
- To evidence where there is persistent and chronic neglect or self-neglect.
- To enable a new worker to become familiar with the circumstances including reducing the risk of starting again.
- Strengthen working with the adult and/or child and their family to understand and make sense of their own past and current situation.
- To capture learning in a timely way and identify who is responsible for taking what action.
- To evidence progress to empower the family or individual to sustain changes made and help them to be more resilient to understand what interventions have been

tried, if they have been successful in that past, and identifying what works and what doesn't for the, person and/or family.

A chronology is an, effective way to see what's happening in the life of a child or adult and the impacts on them and their family. It helps identify patterns and issues, positive change, is invaluable in assessing risk and when analysing the likely impact of events, especially where there may be no single 'incident', e.g. in respect of identifying neglect or self-neglect.

A chronology is an essential tool in analysis and planning at all stages, and especially when cases are transferred. It's also an essential tool in life story work and for adults with care and support needs, children, young people and families.

When to start/use a chronology

This document explains what the Shropshire Safeguarding Community Partnership considers good practice regarding the completion of chronologies. For different agencies, a chronology will be started for different reasons. Some chronologies are automatically generated from electronic record systems so this template may not always need to be used.

In the case of statutory case reviews, Shropshire Safeguarding Partnership's Business Unit, will always expect this template to be used. This is because these reviews are required by law and before we can start the work of identifying any learning, all agencies and the Partnership need to be clear about who was involved, when, for what reasons and how this affected things.

Some chronologies will need to be produced for a specific reason for example, when a new relationship is started, during multi-agency meetings, from the start of a significant event, or from the start of the date parameters set by a statutory case review. The chronology should then continue throughout the intervention, or for as long as is required.

How to record a chronology

- **Accurately – record the date of the event** and/or when the chronology was updated not the date it was entered into the chronology.
- **Chronologically** - record events /issues as they happen and in order.
- **In context** – record the information given, how it was received and who the information was from e.g. "telephone call from substance misuse worker stating that.....", "report provided by Police to review conference confirmed....."
- **Factually and succinctly** – record factual information in a succinct way to assist with decision-making e.g. completed parenting intervention, decluttered home environment, started to engage with substance misuse appointments after a period of disengagement, "family changed GP to [name] GP practice", "alleged assault on [name] by [name]". Deciding on the level of detail to be included is a matter of professional

judgement but chronologies should add value and not replicate the case management records.

- **In compliance** - use the agreed format in the Excel SSCP Chronology Template as this allows for information to be simple to read and easy to merge.
- **Kept up to date** – chronologies should be maintained, regularly reviewed and analysed in order to be a relevant and useful tool, unless the chronology is being used as part of a statutory review.
- **Individualised** – In the case of a family of children or adults with care and support needs each person undergoing an assessment/receiving support must have their own chronology. For some teams for example Targeted Early Help, it may be one chronology per family that is completed. Internal policies may dictate this.

What is a “significant event”?

Significant can be defined as “important, leading to a different result or important change”. Professional judgment will need to be used to determine events that are significant in the chronology. The following is guidance only and not an exhaustive list:

- Contact referrals about the child and/adult or other family members.
- Assessments with start and finish dates and outcome decisions.
- Details of being open to services/interventions/plans and decisions made.
- Multiple changes in address or eviction.
- Suspicious or significant injuries, including non-accidental injuries or reports of suspected abuse.
- When anti-social behaviour started, what happened and who was responsible (if known)
- A person left home alone when they are too young or have care and support needs.
- Some attendances at Accident & Emergency or other hospital admissions, non-attendance at health service appointments, cancellation of care packages or multiple changes of General Practitioner.
- Physical, emotional, and mental illness, substance abuse or dependencies on medication etc. in an adult with care and support needs, child **or** in a care-giver or household member. This might be an acute illness but with ongoing consequences (e.g. Meningitis or Stroke) or a chronic, degenerative or life-limiting condition (e.g. Epilepsy, Cancer, Multiple Sclerosis).
- Changes in pre-existing or acquired disabilities (through accident or illness).
- Absence of a significant care giver through incarceration, divorce/separation etc.

- Births and deaths of significant people.
- Home or placement move, homelessness.
- Change in family composition, new partners, separations, unexpected visitors, unknown adults in the house.
- Criminal or civil proceedings and outcomes, changes in legal status.
- Incidents of domestic abuse, substance misuse, periods of mental ill health.
- Missing episodes.
- This can be a summary of lateness, absence or attendance patterns, not each date/time, with the impact summarised.
- Attempted suicide, self-harming, overmedication of a child or adult with care and support needs.
- Disclosure of any form of harm or abuse.
- Reports received from third parties sharing concerns which may or may not have included requests for further action.

Multi-agency chronologies

Research, practice and learning from case reviews has shown the importance of multi-agency chronologies in assisting professionals in their work with children, adults and families.

A multi-agency chronology merges together chronologies created by different agencies and presents a complete view of what is happening in the person's life. This may highlight events, which on their own may appear to be insignificant, but in the context of other events, or information held by another agency, builds a more informed picture of the impact upon the child and/or adult and their family.

The identification of significant events and their impact on the person can assist in understanding historic, present and future risk and support the multi-agency decision-making process.

Consent

If a multi-agency chronology is to be compiled it is good practice to obtain consent from the person the chronology is written about and/or their family members before contacting other agencies for information. For support and guidance on information sharing refer to your agency's information sharing policy and also:

In respect of children the West Midlands Safeguarding Procedures - [1.1 Information Sharing](#) & [2.10 Information Sharing & Confidentiality](#)

In respect of adults with care and support needs, the Keeping Adult's Safe in Shropshire [Information Sharing Protocol and Practice Guidance](#)

When to create a multi-agency chronology?

It is considered good practice to create a multi-agency chronology for complex cases, especially if there is significant risk. One example of when agencies may need to consider a multi-agency chronology is when there are concerns about Fabricated or Induced Illness, especially in a child or an adult with care and support needs.

It is likely that the lead professional will take on the responsibility for creating the multi-agency chronology following discussion with the relevant partners.

The effectiveness of the multi-agency chronology relies on agencies completing their individual chronologies using the agreed format (see Appendix 1 SSCP Chronology Template) to enable the chronologies to be easily collated.

The process of creating a multi-agency chronology will work best when agencies are working closely together and there is a shared sense of responsibility amongst all for gathering, recording and passing the information to the lead professional. To assist with this, the requirement for the development of a multi-agency chronology should be recorded as part of the child, adult's or family's plan and timescales agreed.

The multi-agency chronology should be regularly reviewed and used to inform decision-making in all child/adult safeguarding planning meetings.

Multi-agency chronologies will always be created when statutory case reviews are being undertaken.

Appendix 1

SSCP Chronology Template



SSCP%20Chronology%20Template,%20v

Appendix B

The role of the Designated Safeguarding Lead

Governing bodies and proprietors should ensure an appropriate senior member of staff, from the school or college leadership team, is appointed to the role of designated safeguarding lead. 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.

This person should have the appropriate status and authority within the school or college to carry out the duties of the post. The role of the designated safeguarding lead carries a significant level of responsibility, and they should be given the additional time, funding, training, resources and support they need to carry out the role effectively.

Their additional responsibilities include providing advice and support to other staff on child welfare, safeguarding and child protection matters, taking part in strategy discussions and interagency meetings, and/or supporting other staff to do so, and to contributing to the assessment of children.

Deputy designated safeguarding leads

It is a matter for individual schools and colleges as to whether they choose to have one or more deputy designated safeguarding leads. Any deputies should be trained to the same standard as the designated safeguarding lead and the role should be explicit in their job description.

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.

Availability

During term time the designated safeguarding lead (or a deputy) should always be available (during school or college hours) for staff in the school or college to discuss any safeguarding concerns.

Whilst generally speaking the designated safeguarding lead (or deputy) would be expected to be available in person, it is a matter for individual schools and colleges, working with the designated safeguarding lead, to define what "available" means and whether in exceptional circumstances availability via phone and or Skype or other such media is acceptable.

It is a matter for individual schools and colleges and the designated safeguarding lead to arrange adequate and appropriate cover arrangements for any out of hours/out of term activities.

Manage referrals

The designated safeguarding lead is expected to refer cases:

- of suspected abuse and neglect to the local authority children's social care as required and support staff who make referrals to local authority children's social care;

- to the Channel programme where there is a radicalisation concern as required and support staff who make referrals to the Channel programme;
- where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required; and
- where a crime may have been committed to the Police as required. NPCC - When to call the police should help understand when to consider calling the police and what to expect when working with the police.

Working with others

The designated safeguarding lead is expected to:

- act as a source of support, advice and expertise for all staff;
- act as a point of contact with the safeguarding partners;
- liaise with the headteacher or principal to inform him or her of issues- especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
- as required, liaise with the “case manager” (as per Part four) and the local authority designated officer(s) (LADO) for child protection concerns in cases which concern a staff member;
- liaise with staff (especially teachers, pastoral support staff, school nurses, IT Technicians, senior mental health leads and special educational needs coordinators (SENCOs), or the named person with oversight for SEN in a college and Senior Mental Health Leads) on matters of safety and safeguarding and welfare (including online and digital safety) and when deciding whether to make a referral by liaising with relevant agencies so that children’s needs are considered holistically;
- liaise with the senior mental health lead and, where available, the Mental Health Support Team, where safeguarding concerns are linked to mental health;
- promote supportive engagement with parents and/or carers in safeguarding and promoting the welfare of children, including where families may be facing challenging circumstances;
- work with the headteacher and relevant strategic leads, taking lead responsibility for promoting educational outcomes by knowing the welfare, safeguarding and child protection issues that children in need are experiencing, or have experienced, and identifying the impact that these issues might be having on children’s attendance, engagement and achievement at school or college. This includes:
 - ensure that the school or college knows who its cohort of children who have or have had a social worker are, understanding their academic progress and attainment, and maintaining a culture of high aspirations for this cohort; and,
 - support teaching staff to provide additional academic support or reasonable adjustments to help children who have or have had a social worker reach their potential, recognising that even when statutory social care intervention has ended, there is still a lasting impact on children’s educational outcomes.

Information sharing and managing the child protection file

The designated safeguarding lead is responsible for ensuring that child protection files are kept up to date. Information should be kept confidential and stored securely. It is good practice to keep concerns and referrals in a separate child protection file for each child.

Records should include:

- a 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.

They should ensure the file is only accessed by those who need to see it and where the file or content within it is shared, this happens in line with information sharing advice as set out in Keeping Children Safe in Education 2021 Part one and Part two of the guidance.

Where children leave the school or college (including in year transfers) the designated safeguarding lead should ensure their child protection file is transferred to the new school or college as soon as possible, and within 5 days for an in-year transfer or within the first 5 days of the start of a new term. This should be transferred separately from the main pupil file, ensuring secure transit, and confirmation of receipt should be obtained.

Receiving schools and colleges should ensure key staff such as designated safeguarding leads and SENCOs or the named person with oversight for SEN in colleges, are aware as required. Lack of information about their circumstances can impact on the child's safety, welfare and educational outcomes. In addition to the child protection file, the designated safeguarding lead should also consider if it would be appropriate to share any additional information with the new school or college in advance of a child leaving to help them put in place the right support to safeguard this child and to help the child thrive in the school or college. For example, information that would allow the new school or college to continue supporting children who have had a social worker and been victims of abuse and have that support in place for when the child arrives.

Raising Awareness

The designated safeguarding lead should:

- ensure each member of staff has access to, and understands, the school's or college's child protection policy and procedures, especially new and part-time staff;
- ensure the school's or college's child protection policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this;
- ensure the child protection policy is available publicly and parents know referrals about suspected abuse or neglect may be made and the role of the school or college in this
- link with the safeguarding partner arrangements to make sure staff are aware of any training opportunities and the latest local policies, procedures and guidance and required audit processes from the Shropshire Safeguarding Community Partnership (SSCP)
- help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues that children who have or have had a social worker are experiencing with teachers and school and college leadership staff.

Training, knowledge and skills

The designated safeguarding lead (and any deputies) should undergo training to provide them with the knowledge and skills required to carry out the role. This training should be updated at least every two years.

The designated safeguarding lead should undertake Prevent awareness training. Training should provide designated safeguarding leads with a good understanding of their own role, how to identify, understand and respond to specific needs that can increase the vulnerability of children, as well as specific harms that can put children at risk, and the processes, procedures and responsibilities of other agencies, particularly children's social care, so they:

- understand the assessment process for providing early help and statutory intervention, including local criteria for action and local authority children's social care referral arrangements;
- have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so;
- understand the importance of the role the designated safeguarding lead has in providing information and support to children social care in order to safeguard and promote the welfare of children;
- understand the lasting impact that adversity and trauma can have, including on children's behaviour, mental health and wellbeing, and what is needed in responding to this in promoting educational outcomes;

- are alert to the specific needs of children in need, those with special educational needs and disabilities (SEND), those with relevant health conditions and young carers;
- understand the importance of information sharing, both within the school and college, and with the safeguarding partners, other agencies, organisations and practitioners;
- understand and support the school or college with regards to the requirements of the Prevent duty and can provide advice and support to staff on protecting children from the risk of radicalisation;
- can understand the unique risks associated with online safety and be confident that they have the relevant knowledge and up to date capability required to keep children safe whilst they are online at school or college;
- can recognise the additional risks that children with special educational needs and disabilities (SEND) face online, for example, from online bullying, grooming and radicalisation and are confident they have the capability to support children with SEND to stay safe online;
- obtain access to resources and attend any relevant or refresher training courses; and,
- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school or college may put in place to protect them.

In addition to the formal training set out above, their knowledge and skills should be refreshed (this might be via e-bulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, and at least annually, to allow them to understand and keep up with any developments relevant to their role.

Providing support to staff

Training should support the designated safeguarding lead in developing expertise, so they can support and advise staff and help them feel confident on welfare, safeguarding and child protection matters. This includes specifically to:

- ensure that staff are supported during the referrals processes; and
- support staff to consider how safeguarding, welfare and educational outcomes are linked, including to inform the provision of academic and pastoral support.

Understanding the views of children

It is important that children feel heard and understood. Therefore, designated safeguarding leads should be supported in developing knowledge and skills to:

- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, and in any measures the school or college may put in place to protect them; and
- understand the difficulties that children may have in approaching staff about their circumstances and consider how to build trusted relationships which facilitate communication

Holding and sharing information

The critical importance of recording, holding, using and sharing information effectively is set out in Parts one, two and five of Keeping Children Safe in Education 2021 guidance, and therefore the designated safeguarding lead should be equipped to:

- understand the importance of information sharing, both within the school and college, and with other schools and colleges on transfer including in-year and between primary and secondary education, and with the safeguarding partners, other agencies, organisations and practitioners;
- understand relevant data protection legislation and regulations, especially the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR); and
- be able to keep detailed, accurate, secure written records of concerns and referrals and understand the purpose of this record-keeping

Appendix C

FILE TRANSFER RECORD AND RECEIPT



PART 1: To be completed by sending / transferring setting, school or college

NAME OF CHILD:	
DOB:	
NAME OF CROWMOOR SENDING CP FILE:	
ADDRESS OF CROWMOOR SENDING CP FILE:	
METHOD OF DELIVERY:	BY HAND SECURE POST ELECTRONICALLY
DATE FILE SENT:	
NAME OF DSL TRANSFERRING FILE:	
NAME OF PERSON TRANFERRING TO:	
SIGNATURE:	

PART 2: To be completed by receiving setting, school or college

NAME OF CROWMOOR RECEIVING FILE:	
ADDRESS OF CROWMOOR RECEIVING FILE:	
DATE RECEIVED:	
NAME OF PERSON RECEIVING FILE:	
DATE CONFIRMATION OF RECEIPT SENT:	
SIGNATURE:	



Shropshire Multi-Agency Referral Form (MARF)

This form should be used to make **contact** with Children’s Social Care, should your request for a referral not be accepted then your information will remain as a contact on the child’s electronic record. **PLEASE NOTE** the parent will be notified of your contact and the actions taken, you will be copied into this letter as notification/feedback on your contact into Children’s Social Care.

BEFORE PROCEEDING PLEASE ensure you have referred to the [Threshold Document](#) on the local pages of the [West Midlands Safeguarding Procedures](#).

You MUST inform those with parental responsibility of your contact and seek consent for a referral to be made.

Consent is not required for child protection referrals where it is suspected that a child may be suffering or be at risk of suffering significant harm; however, it is considered good practice to inform an adult with parental responsibility that you are making a referral, unless to do so may:

- **Place the child at increased risk of Significant Harm**
- **Place any other person at risk of injury**
- **Obstruct or interfere with any potential Police investigation**
- **Lead to unjustified delay in making enquiries about allegations of significant harm**

The child’s interest must be the overriding consideration in making such decision. Decisions should be recorded within your own agency’s records.

If the matter is urgent then please telephone First Point of Contact (FPOC) on 0345 6789021 or if you are concerned about an immediate risk telephone the police on 999. Following a **verbal request for a referral** the MARF must be fully completed and forwarded within 24 hrs to the Compass Team email account (you will need to do this securely*): Compass.Referrals@shropshire.gov.uk

First Point of Contact (FPOC)	0345 678 9021
Out of hours Emergency Duty Team	0345 678 9040

Have you obtained parental consent to make a referral and share information?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you haven’t obtained parental consent , why not?	
1. Child / Young Person Details (if more than one child can you please list all the children’s details in the boxes below, a separate MARF for each child is not required).	

Child's First Name		Child's Surname / Last Name	
Any alternative name			
Date of Birth or Estimated Date of Delivery	Gender (M/F)	Gender Identity	Language or preferred method of communication e.g. sign language
Religion	NHS number		
Name of Parents / Carers: Include all adults involved in the care of the child		Date of Birth	Contact Telephone Number
Who holds parental responsibility?		Does the child have any special needs disability?	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Home Address:		Any other relevant addresses:	
Post Code		Post Code	
2. Ethnic Origin (please check as applicable)			
White:	<input type="checkbox"/> White English / Welsh / Scottish / Northern Irish / British <input type="checkbox"/> White Irish <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Any other White background please specify.....		
Mixed / Multi-Ethnic Group:	<input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other Mixed Multi-Ethnic background, please specify.....		
Asian / Asian British:	<input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Asian background, please specify.....		
Black / African / Caribbean / Black British:	<input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Any other Black / African / Caribbean background, please specify...		
Other ethnic group:	<input type="checkbox"/> Arab <input type="checkbox"/> Any other ethnic group, please specify.....		
3. Other Significant Family Members / Adults and children e.g. siblings, grandparents and any other people residing in the home			
Name	Relationship	Contact Phone Number	Address

4. Contact information: **of other agencies involved if known** (please add others you think may be relevant)

Agency	Name	Address	Telephone
GP			
Health Visitor			
School			
School Nurse			
Other Agency			

5. Have you discussed Early Help with the family prior to making this request for a referral? This is not designed to be a barrier but may offer the family the opportunity to engage in the support needed to address your concerns about the child(ren).

Yes <input type="checkbox"/> If yes please give details of the early help offered.	No <input type="checkbox"/> If Early Help wasn't discussed or offered why not?
---	---

6. Reason for request for referral
 What evidence / information are your concerns based on, please identify your specific concerns. State how long you have known the child and in what capacity, i.e. as teacher, doctor etc Please give as much concise and evidence-based information as possible to help us in our assessment.

7. What are your concerns for the child?

8. Which level threshold level do you feel this referral meets

<p>Level 1 Universal Children with no additional needs and where there are no concerns. Typically, these children are likely to live in a resilient and protective environment where their needs are met. These children will require no additional support beyond that which is universally available.</p>	<p>Level 2 Early Help These children can be defined as needing some additional support without which they would be at risk of not meeting their full potential. Their identified needs may relate to their health, educational, or social development, and are likely to be short term needs. If ignored these issues may develop into more worrying concerns for the child or young person. These children will be living in greater adversity than most other children or have a greater de-</p>	<p>Level 3 – Targeted Early Help This level applies to those children identified as requiring targeted support. It is likely that for these children their needs and care are compromised. Only a small fraction of children will fall within this band. These children will be those who are vulnerable or experiencing the greatest level of adversity. Children with additional needs: These children are potentially at risk of developing acute/ complex needs if they do not receive early targeted intervention.</p>	<p>Level 4 –Complex Significant Needs These are children whose needs and care at the present time are likely to be significantly compromised thereby requiring assessment under Section 47 or Section 17 of the Children Act 1989. These children may become subject to a child protection plan and need to be accommodated (taken into care) by Children’s Social Care either on a voluntary basis or by way of Court Order. Section 17-1989 Children Act states a child shall be taken to be in need if: (a) He is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority under this Part; (b) His health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services; or (c) He is disabled.</p>
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	gree of vulnerability than most if their needs are not clear, not known or not being met a lead professional will coordinate a whole family assessment and plan around the child.		
--	---	--	--

9. What support do you think this child/family require? For example, help managing the child(ren)'s behaviour, help managing the home conditions, respite, etc

10. Is there a perceived risk that could place those making contact with this family in danger i.e violence to staff, dangerous dog, etc?

Yes No

If yes, please specify what the identifies risk is:

If you are making a request for a Child in Need referral, agreement **must** be sought from the parent/carer (and where appropriate the young person). If parental agreement is not obtained it will not be possible to progress a Child in Need referral.

If you are making a referral of a child protection concern and are unsure about whether to advise the parent/carer about the referral, you should consult your agency about this issue. If you remain unsure about whether the parent/carer should be contacted/informed about the referral i.e. due to evidence being compromised, or someone being placed at risk, please consult Children's Services in the first instance.

11. Referrer details	
Name and Status	
Email Address	

Work Address	
Contact Telephone Number	
Signature	
Date	

The MARF must be fully completed and forwarded within 24 hrs of a telephone referral to the Compass Team Compass.Referrals@shropshire.gov.uk
 Or

By post:

Compass
 Mount Mckinley
 Shrewsbury Business Park
 Anchorage Avenue
 Shrewsbury
 SY2 6LG

* Government organisations have been advised to adhere to the TLS encryption delivery of email over the internet. Shropshire Council and Compass team will soon be sending out all secure data using TLS encryption.

Do you send and receive TLS 1.2 encrypted email? Please contact your support desk if you need advice or support.

Notification of the outcome of your request for a referral:

Shropshire’s procedures note The Children and Young People’s Services should acknowledge receipt of a written referral within ONE working day. If the referrer has not received an acknowledgement within THREE working days they should make contact with the relevant manager in the Children and Young People’s Services Team.

Please note as from 02.01.19 our process of notification is changing, as from 02.01.19 the parent will be notified of your contact and the actions taken, you will be copied into this letter as notification/feedback on your contact.

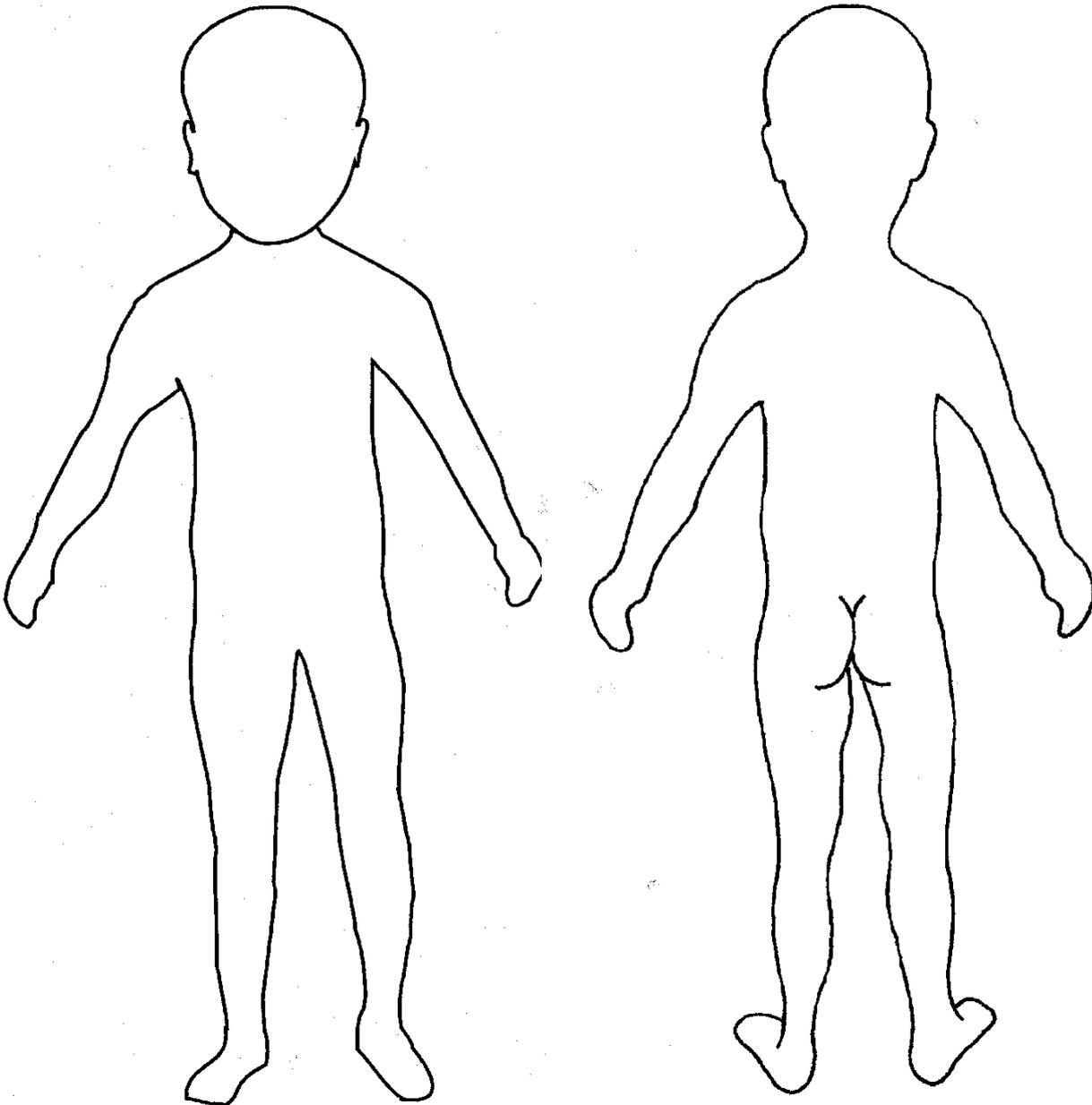
BODYMAP

(This must be completed at time of observation)

Name of Child: _____ Date of Birth: _____

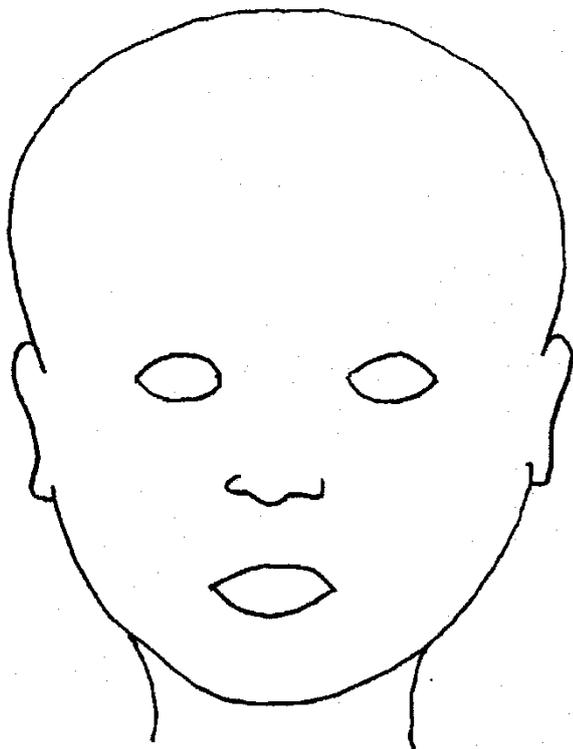
Name of observer: _____ Job title: _____

Date and time of observation: _____

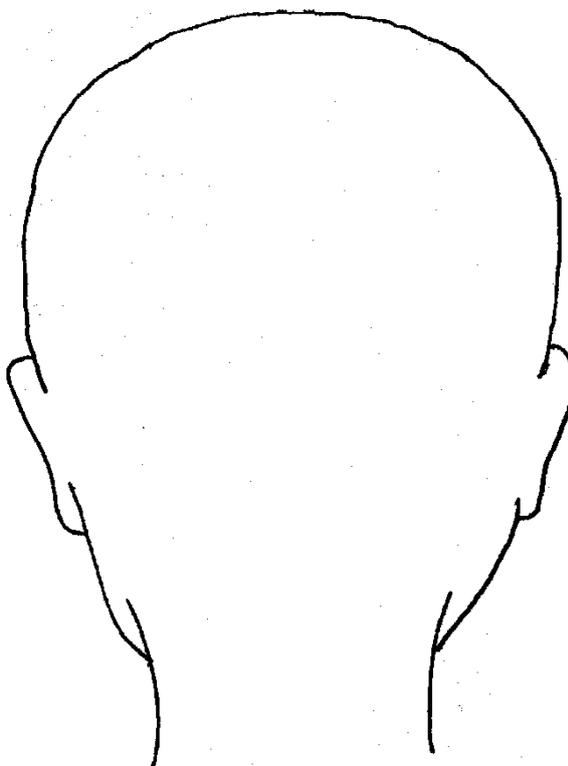


Name of child:

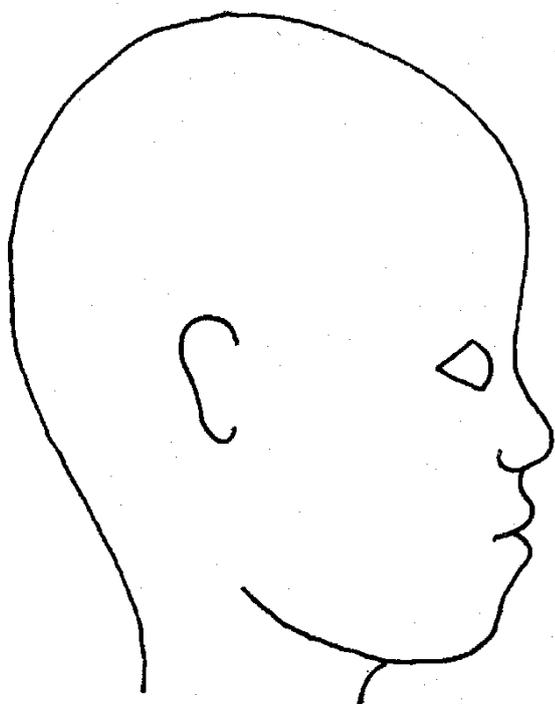
Date and time of
observation:



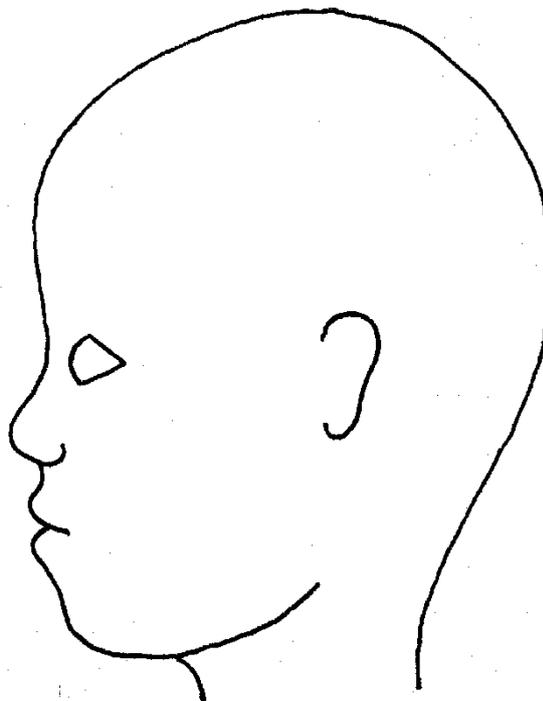
FRONT



BACK



RIGHT

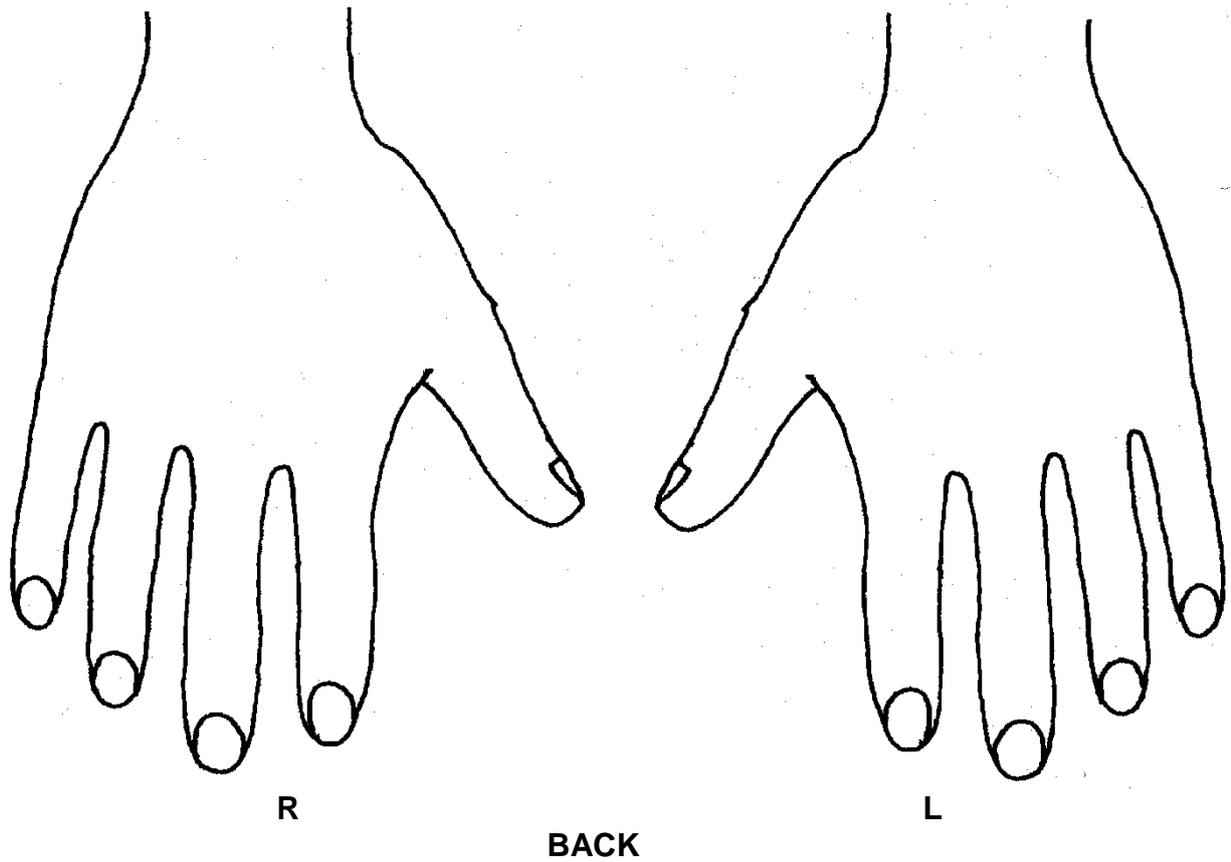


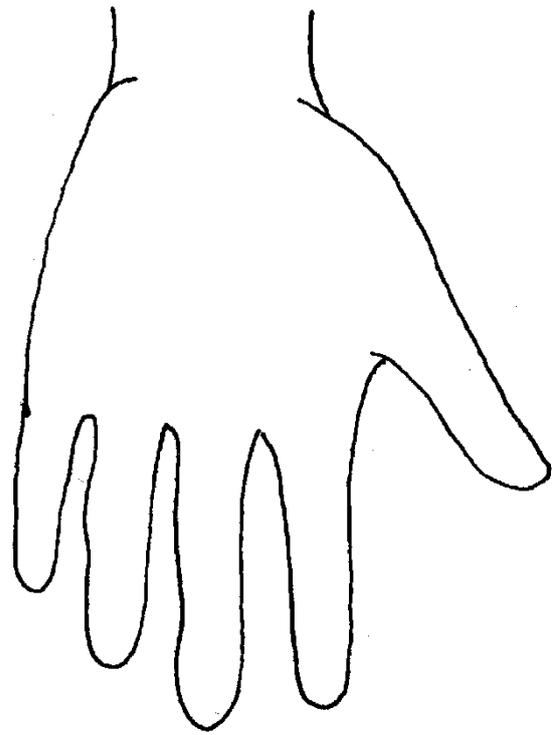
LEFT

Appendix 3

Name of child: _____

Date and time of
observation: _____

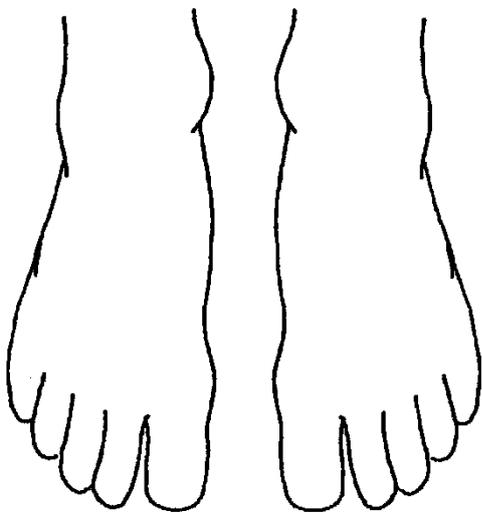




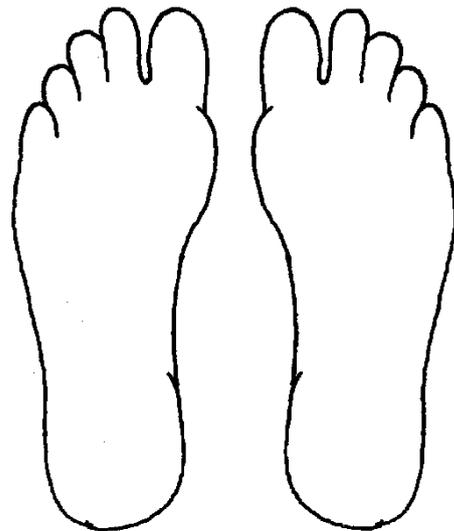
Appendix 4

Name of Child: _____

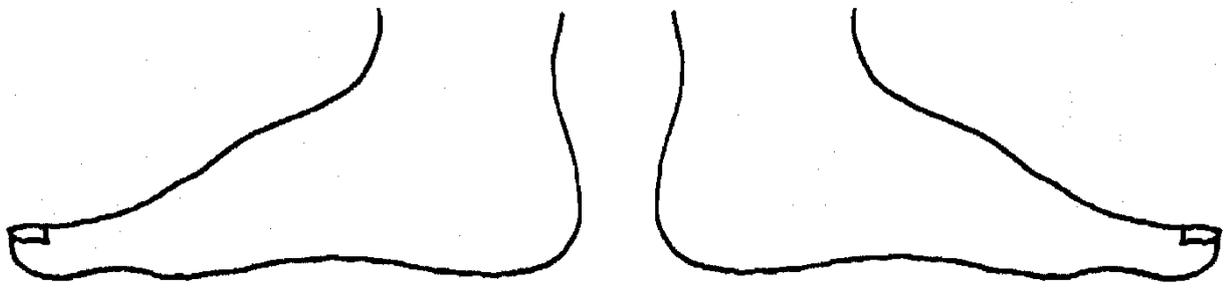
Date and time of observation: _____



R TOP L



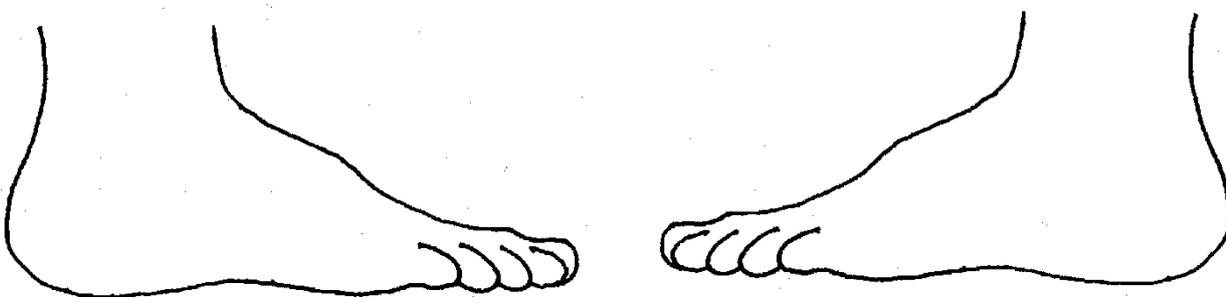
R BOTTOM L



R

L

INNER



R

L

OUTER

Safeguarding children and young people against radicalisation and violent extremism



Crowmoor Primary School Guidance

Approved by Governors 8th November 2021

Due for review September 2022

[Show amendments](#)

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Introduction

The current threat from terrorism and extremism can involve the exploitation of vulnerable people, including children and young people. This can include involving them in extremist activity in the UK or abroad.

The Prevent strategy, published by the Government in 2011, is part of an overall counter-terrorism strategy called CONTEST. The aim of the Prevent strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. This involves identifying individuals at risk of being drawn into terrorism, assessing the risk and developing appropriate support to address that risk.

This duty is known as the ‘Prevent’ duty. It applies to a wide range of public-facing bodies which are listed in schedule 6 of the Act as specified authorities in England and Wales, and Scotland. The specified authorities are those judged to have a role in protecting vulnerable children, young people and adults and/or the national security. The duty came into effect 1st July 2015, all schools and childcare providers must have due regard to the statutory guidance issued under section 29 of the Counter-Terrorism and Security Act 2015. Schools and Childcare providers^[1], Registered early years childcare providers and registered later years childcare providers are subject to the Duty under section 26 of the Counter-Terrorism and Security Act 2015, in the exercise of their functions, to have “due regard to the need to prevent people from being drawn into terrorism”.

Working Together to Safeguard Children 2018 specifies that local safeguarding partners, local authorities and their partners should be commissioning and providing services for children who are likely to suffer, or may have suffered [significant harm](#), due to radicalisation and extremism.

In addition, the Counter-Terrorism and Security Act 2015 sections 36 to 41 set out the duty on local authorities and partners to establish and cooperate with a local Channel programme of ‘Channel panels’ to provide support for people, children and adults who are vulnerable to being drawn into terrorism. at a pre-criminal stage, It is essential that Channel panel members, partners to local panels and other professionals ensure that children, young people and adults are protected from harm.

Channel is about ensuring that vulnerable children and adults of any faith, ethnicity or background receive support before their vulnerabilities are exploited by those that want them to embrace terrorism, and before they become involved in criminal terrorist related activity.

An agency or individual can make a referral to access Channel specialism if they suspect that someone is vulnerable to being drawn into terrorism.

[1] Including early years and later years childcare provision in schools that is exempt from registration under the Childcare Act 2006 and those registered under Chapter 2 or 2A of Part 3 of the Childcare Act 2006, including childminders. Also those registered under Chapter 3 or 3A of Part 3 of the Childcare Act 2006, including childminders.

Definition

“Radicalisation is defined as the process by which people come to support terrorism and extremism and, in some cases, to then participate in terrorist groups”.

“Extremism is 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.”

HM Government Prevent Strategy, 2011

Since the publication of the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism. There have been attempts to radicalise vulnerable children and young people to develop extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation.

Keeping children safe from these risks is a safeguarding matter and should be approached in the same way as safeguarding children from other risks. Children should be protected from messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right/Neo Nazi/White Supremacist ideology, various paramilitary groups, and extremist Animal Rights movements.

Risks

Children and young people can be drawn into violence or they can be exposed to the messages of extremist groups by many means. These can include through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet via social media or other websites. This can put a young person at risk of being drawn into criminal activity and has the potential to lead to the child or young person suffering [significant harm](#).

This may take the form of a ‘[grooming](#)’ process where the vulnerabilities of a young person are exploited to form an exclusive friendship which draws the young person away from other influences that might challenge the radical ideology. The risk of radicalisation can develop over time and may relate to a number of factors in the child’s life. Identifying the risks requires practitioners to exercise their professional judgement and to seek further advice as necessary. The risk may be combined with other vulnerabilities or may be the only risk identified.

Online content in particular social media may pose a specific risk in normalising radical views and promoting content that is shocking and extreme; children can be trusting and may not necessarily appreciate bias, which can lead to being drawn into such groups and to adopt their extremist views.

Recent case evidence indicates that specific groups such as young Muslim women have been targeted for radicalisation and [grooming](#), which has led to attempts to travel to the Middle East placing them at risk. Any information about a young person or child that raises concerns should be discussed with their parents, schools, Children’s Services and the police as part of the risk assessment.

Indicators

Issues that may make an individual vulnerable to radicalisation can include:

- Identity crisis: Distance from cultural/religious heritage and uncomfortable with their place in society.
- Personal crisis: Family tensions; sense of isolation; adolescence; low self-esteem; disassociating from existing friendship group and becoming involved with a new and different group of friends; searching for answers to questions about identity, faith and belonging.
- Personal circumstances: Migration; local community tensions; events affecting country or region of origin; alienation from UK values; having a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy.
- Unmet aspirations: Perceptions of injustice; feeling of failure; rejection of community values.
- Criminality: Experiences of imprisonment; previous involvement with criminal groups.

Those closest to the individual may first notice the following changes of behaviour:

- General changes of mood, patterns of behaviour, secrecy.
- Changes of friends and mode of dress.
- Use of inappropriate language.
- Possession of violent extremist literature.
- The expression of extremist views.
- Advocating violent actions and means.
- Association with known extremists.
- Seeking to recruit others to an extremist ideology.

There is an obvious difference between espousing radical and extreme views and acting on them, and practitioners should ensure that assessments place behaviour in the family and social context of the young person and include information about the young person's peer group and conduct and behaviour at school. Holding radical or extreme views is not illegal, but inciting a person to commit a criminal act in the name of any belief is in itself an offence.

Protection and action to be taken

Any practitioner identifying concerns about the child or young person should report them to the designated safeguarding lead in their organisation, who will discuss these concerns with the police. The Local Safeguarding [Referrals Pathway Procedure](#) should be followed. Consideration of referrals to the Channel programme may be appropriate in some cases. Response should be proportionate, with the emphasis on supporting vulnerable children and young people, unless there is evidence of more active involvement in extremist activities.

Consideration should be given to the possibility that sharing information with parents may increase the risk to the child and therefore may not be appropriate. However, experience has shown that parents are key in challenging radical views and extremist behaviour and should be included in interventions unless there are clear reasons why not.

Wherever possible the response should be appropriately and proportionately provided from within the normal range of universal provision of the organisation working with other local agencies and partners. Responses could include curriculum provision, additional tutoring or mentoring, additional activities within and out of school and family support.

Where a higher level of targeted and multi-agency response is indicated a formal multi-agency assessment should be conducted. The assessment process may lead to a Strategy Discussion, [Section 47](#) Enquiries and an Initial [Child Protection Conference](#), if there are concerns about the child or young person suffering [significant harm](#).

Where concerns are identified in respect of potential signs of radicalisation which indicate the child or young person is vulnerable, the person raising the concerns should discuss their concerns with the Local Authority or WM CTU lead. who will decide whether a referral to Channel/ or other safeguarding response is required were vulnerability evident Universal Plus services are sufficient to manage concerns.

Where there is an identified risk that a child or young person may be involved in supporting or following extremism, further investigation by the police will be required, prior to other assessments and interventions.

Issues

Protecting children and young people from radicalisation and extremism requires careful assessment and working collaboratively across agencies as initially concerns may be inconclusive and protecting a child or

young person against a potential risk can be dependent on a wider range of factors. Sharing information effectively and keeping the child and young person in focus should be the main aim of any interventions and services.

Reporting online material which promotes extremism, such as illegal or harmful pictures or videos, can be done through the [government website](#). Although professionals should follow the [Referral process](#), non-professionals may make a report anonymously.

Further information

- [Educate Against Hate](#)
- [Prevent Strategy](#)
- [Prevent Duty Guidance: for England and Wales](#)
- [Channel Duty Guidance: Protection vulnerable people from being draw into terrorism](#)
- [ADCS resources Radicalisation and Extremism](#)
- [Advice for Local Authorities – Protecting Children at Risk of Harm from Radicalisation or from being Taken into Conflict Zones](#)



Appendix F

CONCERN REPORTING FORM

Logging a concern about a child's safety or welfare

Part 1 – For staff use

Child Name:			
Date of birth:		Year Group / class:	
Name of referrer:		Role of referrer:	
Details of concern:	<i>(Use body map if appropriate)</i>		
<p><i>What are you worried about? Who? What (if recording a verbal disclosure by a child use their words)? Where? When (date and time of incident)? Any witnesses?</i></p> <p><i>What is the pupil's account/perspective?</i></p>			
Reported to:		Role of person reported to:	
Signed:			
Date:			

Part 2: For DSL/Deputy DSL to complete

Action taken:		Advice sought:	
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		<i>(from whom and what was advice given)</i>	
Concern / referral discussed with parent / carer? If yes note discussion		<i>If not, state reasons why</i>	
Referral made: <i>Record names of individuals/agencies who have given information regarding outcome of any referral (if made).</i>		<i>If not, state reasons why</i>	
Feedback to referring member of staff:			<i>By whom</i>
Response to / action taken with pupil:			<i>By whom</i>
Other notes / information: <i>When making a referral about an acute specialist need/child protection follow up with a MARF</i> Any other action required:			
Signature of DSL		<i>Date</i>	

Appendix G

Alternative Provision Quality Assurance Checklist

Name of alternative provision:			
Name of person completing checklist (from host school):			
If the alternative provision hasn't been quality assured by the Local Authority or another recognised provider the host School must quality assure the placement. This quality assurance document must be completed prior to working with a new alternative provision and annually thereafter.			
		On file/ evidence of check	Date & Initial
1	Has the provision been quality assured by the Local Authority? Y/N If so, written evidence must be obtained evidencing quality assurance.		
2	Is the alternative provision registered as an independent school with the DfE? Y/N The criteria to be registered as an independent school is that; - full-time ¹ education is provided for five or more pupils of compulsory school age Or -full-time education is provided for one or more pupils with an EHC plan or who is "looked after" by a local authority 1 - There is no legal definition of what constitutes 'full-time' education. However, DfE would consider an institution to be providing full-time education if it is intended to provide, or does provide, all, or substantially all, of a child's education.		
3	What is the provider's DfE number? (If applicable)		
4	Copy of signed Service Level Agreement (SLA) /contract (attached)		
5	Is there a clear governance structure within the Alternative provision? Y/N		
6	Does the referral process include the requirement for a detailed pupil profile from the host school prior to agreement of placement? Y/N		
7	Pupil's attendance should be monitored daily. Is this included in the SLA? Y/N Copy of providers Attendance policy attached.		
8	Is there a procedure for when pupils fail to attend? Y/N		
9	Is there adequate access to resources for all pupils who access the provision? Y/N		
10	Is there inclusive practice with regards to positive behaviour management, attendance and punctuality? Y/N - Pro-actively promote and support the regular attendance of pupils - Effective reward/incentive strategies to promote participation		
11	Is there regular assessment and review of pupil progress? Y/N Provision agree to share weekly progress reports		
12	Are risk assessments completed for activities that pupils may undertake? Y/N (copy attached)		
13	Is there a full and clear pupil induction procedure regarding health and safety and fire evacuation? Y/N		
14	Are there robust procedures in place to safeguard children in line with KCSIE? Y/N Copy of providers Safeguarding/Child protection policy attached.		
15	Has evidence of staff receiving accredited child protection training been seen? Y/N		

	Has evidence of DSL receiving training for their role been seen? Y/N Have contact details for DSL been provided? Y/N (attached).		
16	Copy of public liability insurance document attached.		
17	Is there a policy for when members of staff are working alone with pupils? Y/N (copy attached)		
18	Does the provider have an ICT policy that includes mobile phones? Y/N (copy attached)		
19	Copy of health and safety policy attached.		
20	Has written confirmation from the provider that staff vetting checks have been undertaken been received? Y/N Checks include; <ul style="list-style-type: none"> • an identity check; • a barred list check; • an enhanced DBS check/certificate; • a prohibition from teaching check; • further checks on people who have lived or worked outside the UK • a check of professional qualifications, where required; and • a check to establish the person's right to work in the United Kingdom. Has confirmation of these checks been added to the host school Single Central Record on the agency tab?		
21	Is there a Designated First Aid Officer and suitable equipment available? Y/N <ul style="list-style-type: none"> - Qualified First Aiders identified - Recording system for accidents including informing host school and home - Historical or current RIDDOR investigations - Evidence of full first aid kit 		
22	Has confirmation been received from the provider that a representative will attend or contribute to multi-agency meetings (e.g. Child protection conferences and core group) when necessary? Y/N		

Action Plan

If 'no' is answered to any of the questions in Part 2 an action plan must be formulated to obtain information

Action reference number.	Area for improvement	Intended action

Signed by host school _____ Date _____

Signed by Alternative Provision _____ Date _____



Peer on Peer Abuse Policy

This policy will be reviewed annually unless there are changes in legislation or guidance in the interim period, in which case it will be updated to reflect the changes as and when necessary. It should be read in conjunction with the Child Protection Policy.

October 2021

Review date: October 2022

Our School, recognises that children are vulnerable to and capable of abusing their peers. We take such abuse as seriously as abuse perpetrated by an adult. This includes verbal as well as physical abuse.

The School's Responsibilities

The members of the Full Governing Body (FGB), Headteacher and senior leadership team, and all staff (including all volunteer staff members) at the schools within Crowmoor are committed to the prevention, early identification, and appropriate management of peer-on-peer abuse (as defined below).

In particular, we:

- believe that in order to protect children, all schools should
- (a) be aware of the nature and level of risk to which their students are or may be exposed, and put in place a clear and comprehensive strategy which is tailored to their specific safeguarding context; and
- (b) take a whole-school community contextual safeguarding approach to preventing and responding to peer-on-peer abuse,
- regard the introduction of this policy as a preventative measure. We (a) do not feel it is acceptable merely to take a reactive approach to peer-on-peer abuse in response to alleged incidents of it; and (b) believe that in order to tackle peer on peer abuse proactively, it is necessary to focus on all four of the following areas: (i) systems and structures; (ii) prevention; (iii) identification; and (iv) response/intervention
- recognise national and increasing concern about this issue, and wish to implement this policy in order to mitigate harmful attitudes and peer-on-peer abuse in the school setting, and
- encourage parents to hold us to account on this issue, so that if their child is feeling unsafe as a result of the behaviour of any of their peers, they should inform their child's school so that it can ensure that appropriate and prompt action is taken in response.

This policy;

- Crowmoor's overarching policy for any issue that could constitute peer-on-peer abuse. It relates to, and should be read alongside, the School's Child Protection Policy and any other relevant policies including, but not limited to, bullying (including cyber-bullying), youth involved sexual imagery, online safety, IT use, data protection and retention of records, children missing in education, student behaviour and discipline, exclusions, and (where relevant) weapons.
- sets out our strategy for improving prevention, and identifying and appropriately managing peer-on-peer abuse. In producing this policy we have followed national, local guidance, liaised with our local authority, shared the policy with parents and staff, and our full governing body has approved the policy.
- applies to all members of the full governing body, the executive and senior leadership team, and staff. It is reviewed annually, and updated in the interim, as may be required, to ensure that it continually addresses the risks to which students are/or may be exposed. A number of staff and students are involved in each annual review, which involves, and is informed by, an assessment of the impact and effectiveness of this policy over the previous years.

What is peer-on-peer abuse?

Peer-on-peer abuse is sexual, emotional or physical abuse that happens between children of a similar age or stage of development. It can happen between any number of children, and can affect any age group (Department for Education (DfE), 2018).

It can be harmful to the children who display it as well as those who experience it.

Children can experience peer-on-peer abuse in a wide range of settings, including:

at school

at home or in someone else's home

in public

spaces

online

(NSPCC, 2018).

It can take place in spaces which are supervised or unsupervised. Within a school context, for example, peer-on-peer abuse might take place in spaces such as toilets, the playground, corridors and when children are walking home (Contextual Safeguarding Network, 2020).

As children develop healthily, it's normal for them to display certain types of behaviour. It's important that adults who work or volunteer with children can identify if any behaviour has become harmful or abusive, and respond proportionally to keep all the children involved safe.

We recognise that peer on peer abuse can manifest itself in many ways such as:

- Child Sexual Exploitation
- Sexting or youth produced digital imagery
- Upskirting
- Bullying
- Radicalisation
- Abuse in intimate relationships
- Children who display sexually harmful behaviour
- Gang association and serious violence (County Lines)
- Technology can be used for bullying and other abusive behaviour

Some of these behaviours will need to be handled with reference to other policies in school such as the behaviour policy, anti-bullying policy, child protection policy and online safety policy.

This policy concentrates on peer on peer abuse in the context of sexual harassment and sexual violence, physical abuse and emotional abuse. It is compliant with the statutory guidance on peer-on-peer abuse as set out in Keeping Children Safe in Education (September 2021) and should be read in conjunction with the Safeguarding Partnership regional policy and procedures, and any relevant practice guidance issued by it.

In regard to Harmful Sexual behaviour we are adopting the NSPCC definition of HSB as: -

"Sexual behaviours expressed by children...that are developmentally inappropriate, may be harmful towards self or others, or be abusive towards another child...or adult."

We will also use Simon Hackett's continuum model to demonstrate the range of sexual behaviours and the Brook Traffic Light System (Appendix 3).

Physical Abuse

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

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

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

Online Behaviour

Many forms of peer on peer abuse have an element of online behaviour including behaviours such as cyberbullying and sexting.

Policies and procedures concerning this type of behaviour can be found in the anti-bullying policy, online safety policy, and child protection and safeguarding policy

Vulnerable Groups

We recognise that all children can be at risk however we acknowledge that some groups are more vulnerable. This can include: experience of abuse within their family; living with domestic violence; young people in care; children who go missing; children with additional needs (SEN and/or disabilities); children who identify or are perceived as LGBT and/or have other protected characteristics under the Equalities Act 2010.

Whilst research tells us girls are more frequently identified as being abused by their peers and, girls are more likely to experience unwanted sexual touching in schools this is not confined to girls.

Boys are less likely to report intimate relationship abuse and may display other behaviour such as antisocial behaviour. Boys report high levels of victimisation in areas where they are affected by gangs. We recognise that both boys and girls experience peer on peer abuse, but they do so in gendered ways.

Identifying peer on peer abuse

All staff should be aware of indicators, which may signal that children are at risk from, or are involved with serious violent crime. These may include, but may not be limited to:

- bullying (including cyberbullying);
- Abuse in personal intimate relationships between peers
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence such as rape, assault by penetration and sexual assault
- sexual harassment such as sexual comments, remarks, jokes or online
- causing someone to engage in sexual activity without consent
- sexual or sexist name calling
- inappropriate or unwanted sexualised touching
- consensual and non-consensual sharing of nudes and semi nudes images and or videos (also known as sexting or youth produced sexual imagery);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.
- sexting (also known as youth produced sexual imagery);
- revenge porn
- initiation/hazing type violence and rituals.

Prevention

The Crowmoor actively seeks to raise awareness of and prevent all forms of peer-on-peer abuse by:

- Educating all members of the full governing body (FGB), Executive and Senior Leadership Team, staff and volunteers, children, and parents about this issue. This will include training all FGB members, Executive and Senior Leadership Team, staff and volunteers on the nature, prevalence and effect of peer-on-peer abuse, and how to prevent, identify and respond to it. This includes (a) Contextual Safeguarding;
- (b) The identification and classification of specific behaviours; and
- (c) The importance of taking seriously all forms of peer-on-peer abuse (no matter how low level they may appear) and ensuring that no form of peer-on-peer abuse is ever dismissed as banter or teasing.
 - Educating children about the nature and prevalence of peer-on-peer abuse via PSHE and the wider curriculum.
 - Pupils are frequently told what to do if they witness or experience such abuse, the effect that it can have on those who experience it and the possible reasons for it, including vulnerability of those who inflict such abuse.
 - They are regularly informed about the School's approach to such issues, including its policy towards all forms of peer-on-peer abuse.
 - Engaging parents on this issue by:
 - (a) Talking about it with parents, both in groups and one to one;
 - (b) Asking parents what they perceive to be the risks facing their child and how they would like to see the School address those risks;
 - (c) Involving parents in the review of School policies and lesson plans; and (d) Encouraging parents to hold the School to account on this issue.
 - Ensuring that all peer-on-peer abuse issues are fed back to the school's designated safeguarding lead or deputies so that they can spot and address any concerning trends and identify pupils who maybe in need of additional support. This is done by way of a weekly staff meeting at which all concerns about pupils, including peer-on-peer abuse issues, are discussed;
 - Challenging the attitudes that underlie such abuse (both inside and outside the classroom);
 - Working with FGB members, local authority, Executive and Senior Leadership Team, all staff and volunteers, pupils and parents to address equality issues, to promote positive values, and to encourage a culture of understanding and respect amongst all members of the School community;
 - Creating conditions in which our pupils can aspire to and realise safe and healthy relationships;
 - Creating a culture in which our pupils feel able to share their concerns openly, in a nonjudgmental environment, and have them listened to; and
 - Responding to cases of peer-on-peer abuse promptly and appropriately.

Policy Development

The policy has been developed in consultation with the Executive Headteacher, Head of School, Full Governing Body members and staff.

The Context

Peer-on-peer abuse takes place on a spectrum. Understanding where a child's behaviour falls on a spectrum is essential to being able to respond appropriately to it. It is essential that responses to incidents are proportionate and contextual.

In this policy we recognise the importance of distinguishing between problematic and abusive sexual behaviour (Harmful Sexual Behaviour HSB).

Simon Hackett (2010) has proposed a continuum model to demonstrate the range of sexual behaviours presented by children and young people, from those that are normal, to those that are highly deviant:

Normal	Inappropriate	Problematic	Abusive	Violent
Developmentally expected	• Single instances of inappropriate sexual behaviour	• Problematic and concerning behaviours	• Victimising intent or outcome	• Physically violent sexual abuse
Socially acceptable	• Socially acceptable behaviour within peer group	• Developmentally unusual and socially unexpected	• Includes misuse of power	• Highly intrusive
Consensual, mutual, reciprocal	• Context for behaviour may be inappropriate	• No overt elements of victimisation	• Coercion and force to ensure victim compliance	• Instrumental violence which is physiologically and/or sexually arousing to the perpetrator
Shared decision making	• Generally consensual and reciprocal	• Consent issues may be unclear	• Intrusive	• Sadism
		• May lack reciprocity or equal power	• Informed consent lacking, or not able to be freely given by victim	
		• May include levels of compulsivity	• May include elements of expressive violence	

Determining the level of incidents

While determining the level of incidents is not always clear-cut we use this as a guide.

Chronological and developmental ages of everyone involved

- Difference in their power or authority in relation to age, race, gender, physical, emotional or intellectual vulnerability
- All alleged physical and verbal aspects of the behaviour and incident
- Whether the behaviour involved inappropriate sexual knowledge or motivation
- What was the degree of physical aggression, intimidation, threatening behaviour or bribery □
The effect on the victim
- Any attempts to ensure the behaviour and incident is kept a secret
- The child or young person's motivation or reason for the behaviour, if they admit that it occurred
- Whether this was a one-off incident, or longer in duration

An example of this is the consensual sharing of an image between 16 year olds might be inappropriate but would sit on the continuum as 'inappropriate', however if these images were shared wider without consent this could be deemed as 'problematic & abusive'.

NB: The Designated and Deputy Safeguarding Leads will attend Brook Traffic Light Training during the academic year 2021/22 which will further support in identifying developmentally typical behaviours or those that may be referred to as problematic or harmful. This policy will be reviewed following this training.

When should schools seek support?

Cases of peer on peer abuse are often complex, may involve multiple young people, and consent may be unclear. This is especially difficult when young people may be victims but also involved in the harm of others. In some instances it may be most appropriate, for schools to respond internally. However in other instances, cases may require a referral to the police and/or social care.

We understand that this is not always clear. As such, the DDSL and DDSL's will refer to the flow chart (Appendix 2) and consider the following when deciding if an incident require referral to:

Cases that may be best responded to in-school sit between 'Normal/Healthy' and the 'inappropriate' section on Hackett's continuum.

- Single instances of inappropriate sexual behaviour
- Socially acceptable behaviour within peer group
- Context for behaviour may be inappropriate
- Generally consensual and reciprocal

Incidents where a referral to police/ social care is always required are defined under Hackett as 'violent and abusive'

- Victimising intent or outcome
- Includes misuse of power
- Coercion and force to ensure compliance
- Intrusive
- Informed consent lacking or not able to be freely given
- May include elements of expressive violence
- Physically violent sexual abuse
- Highly intrusive
- Instrumental violence which is psychologically and/or sexually arousing to the child responsible for the behaviour
- Sadism

Cases of peer on peer abuse are not always clear cut and there are many grey areas. These grey areas fall under the inappropriate/ problematic section of the continuum. The Education MASH team (local multi-agency safeguarding hub) and the Education Safeguarding Lead are available via phone and email to offer support to schools in order to ensure the appropriate safety plans/referrals/ support is in place for the victim and child alleged to have caused harm. □

Problematic and concerning behaviour

- Developmentally unusual and socially unexpected
- No overt elements of victimisation
- Consent issues maybe unclear
- May lack reciprocity or equal power
- May include levels of compulsivity

When dealing with harmful sexual behaviour to assess where the alleged behaviour falls on a spectrum and to decide how to respond. This could include, for example, whether it:

- is socially acceptable
- involves a single incident or has occurred over a period of time
- is socially acceptable within the peer group

- is problematic and concerning
- involves any overt elements of victimisation or discrimination e.g. related to race, gender, sexual orientation, physical, emotional, or intellectual vulnerability
- involves an element of coercion or pre-planning
- involves a power imbalance between the child/children allegedly responsible for the behaviour
- involves a misuse of power

Response to peer-on-peer abuse

The designated safeguarding lead for each school or their deputy will take a leading role using their professional judgement and supported by other agencies such as social care or the police as required. All responses to peer on peer abuse will be informed by the flow charts, continuum and by liaising with the safeguarding lead.

It is important to deal with a situation of peer abuse immediately and sensitively. It is necessary to gather the information as soon as possible to ascertain what has happened and if any other students are aware or involved. It is equally important to deal with it sensitively and think about the language used and the impact of that language on both the children and the parents when they become involved. Avoid language that may create a 'blame' culture and leave a child labelled. An example is instead of calling a child a 'perpetrator' we may instead say 'child alleged to have caused harm'.

Staff will talk to the children in a calm and consistent manner. Staff will not be prejudiced, judgmental, dismissive or irresponsible in dealing with such sensitive matters. Children should be made aware of who they can talk to should they feel they have not been treated in this manner.

The immediate response to a report

- The school will take all reports seriously and will reassure the victim that they will be supported.
- All staff understand the next steps once a child has reported peer on peer abuse and will take the concern to the DSL/DDSL to make them aware.
- Staff will not promise confidentiality as the concern will need to be shared further (for example, with the designated safeguarding lead or social care) staff will however only share the report with those people who are necessary to progress it.
- A written report will be made as soon after the discussion as possible recording the facts as presented by the child. These may be used as part of a statutory assessment if the case is escalated later.
- Assess the needs of the victim and child alleged to have caused harm.
- Where the report includes an online element the school or college will follow advice on searching, screening and confiscation. The staff will not view or forward images unless unavoidable and only if another member of staff (preferably the DSL) is present.
- The DSL will be informed as soon as possible and consider a referral to the police and social care using the flow charts (Appendix 2).
- The DSL must complete a Safety Plan (Appendix 5) whereby sexual violence has occurred. This must be shared with the MASH.

When recording behaviour it is essential that;

- Record as soon as possible, as you can quickly forget or confuse detail
- Be clear, explicit and non-avoidant, and avoid vague statements or euphemisms
- Follow the prompts on your safeguarding and child protection recording form
- Use proper names for body parts but record exactly any language or vocabulary used by the child. Use the child's exact words in quotation marks.
- Note where and when the incident happened and whether anyone else was present.

Gather the facts

When making young people aware of an allegation it is essential that before you speak to them any further you offer them the option to have parents or a person they trust present. You should make them aware that parents will be informed even if they wish to progress without parents present. Speak to all the young people involved separately in order to gain a statement of facts from them. Use consistent language and open questions for each account. Ask the young people to tell you what happened. Use open questions, 'where, when, why, who'. (What happened? Who observed the incident? What was seen? What was heard? Did anyone intervene?). Do not interrogate or ask leading questions.

Decide on your next course of action

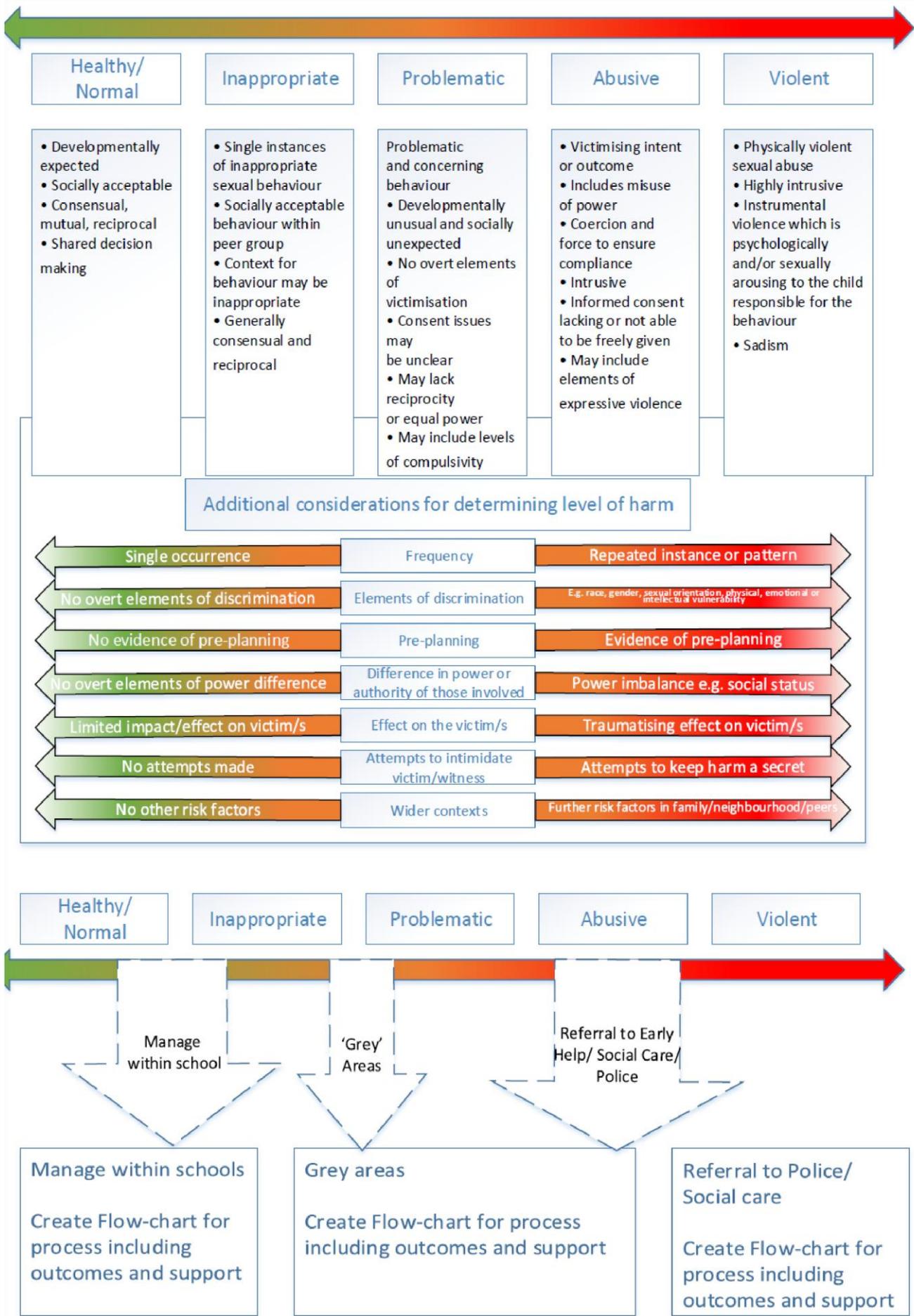
If you believe any young person to be at risk of significant harm you must report to the Designated Safeguarding Lead immediately; they will follow the school's Safeguarding and Child Protection Policy.

If MASH and the police intend to pursue this further, they may ask to interview the young people in school or they may ask for parents to come to school to be spoken to. It is important to be prepared for every situation and the potential time it may take.

Informing parents/carers

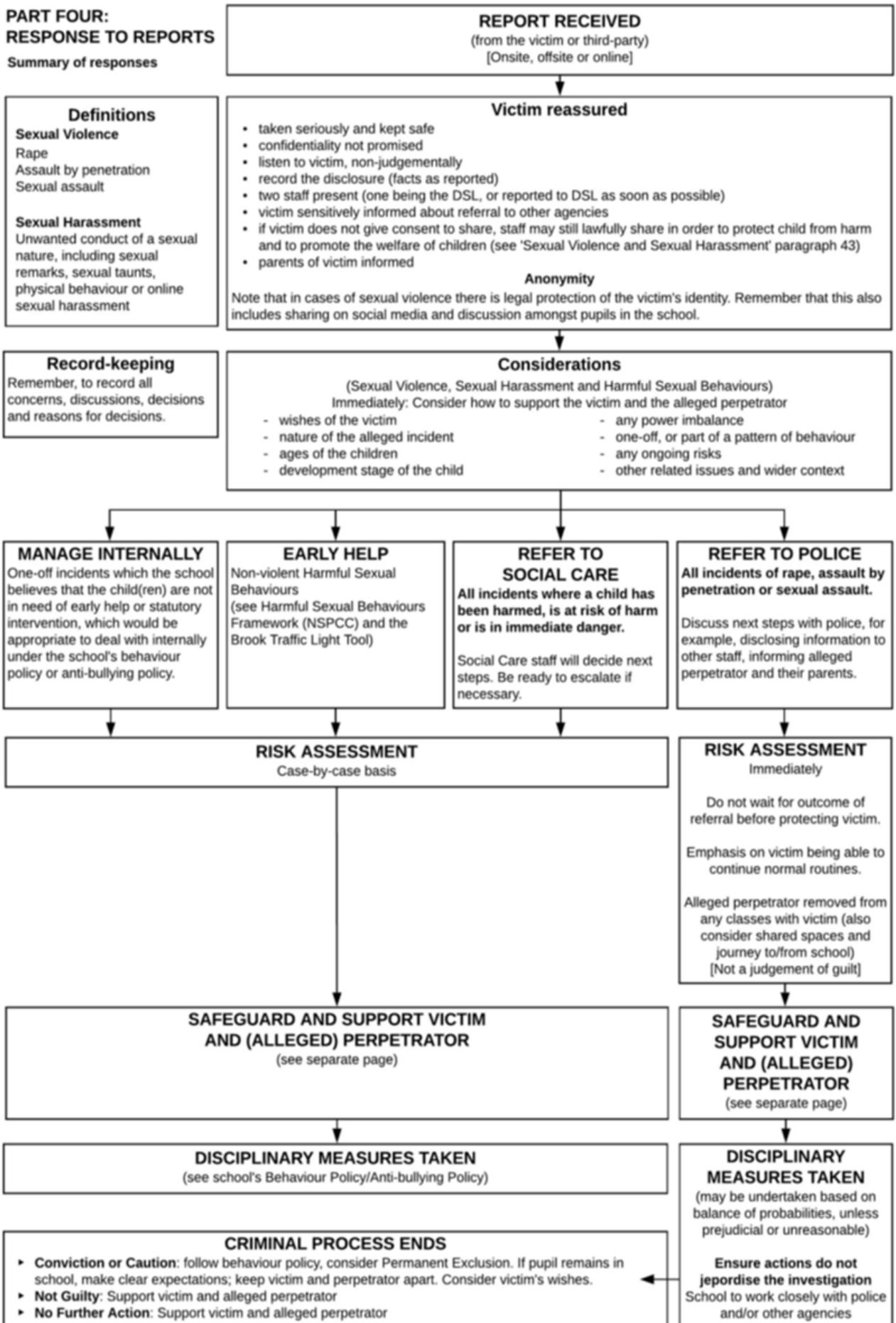
The best way to inform parents/carers is face to face. Although this may be time consuming, the nature of the incident and the type of harm/abuse a young person may be suffering can cause fear and anxiety to parents/carers whether their child is the child who was harmed or who harmed another. In all circumstances where the risk of harm to the child is evident then the school should encourage the young person to share the information with their parent/carer (they may be scared to tell parents/carers that they are being harmed in any way).

Referral pathways (Appendix 2)



**PART FOUR:
RESPONSE TO REPORTS**

Summary of responses



Definitions
Sexual Violence
Rape
Assault by penetration
Sexual assault

Sexual Harassment
Unwanted conduct of a sexual nature, including sexual remarks, sexual taunts, physical behaviour or online sexual harassment

Victim reassured

- taken seriously and kept safe
- confidentiality not promised
- listen to victim, non-judgementally
- record the disclosure (facts as reported)
- two staff present (one being the DSL, or reported to DSL as soon as possible)
- victim sensitively informed about referral to other agencies
- if victim does not give consent to share, staff may still lawfully share in order to protect child from harm and to promote the welfare of children (see 'Sexual Violence and Sexual Harassment' paragraph 43)
- parents of victim informed

Anonymity
Note that in cases of sexual violence there is legal protection of the victim's identity. Remember that this also includes sharing on social media and discussion amongst pupils in the school.

Record-keeping
Remember, to record all concerns, discussions, decisions and reasons for decisions.

Considerations
(Sexual Violence, Sexual Harassment and Harmful Sexual Behaviours)
Immediately: Consider how to support the victim and the alleged perpetrator

- wishes of the victim
- nature of the alleged incident
- ages of the children
- development stage of the child
- any power imbalance
- one-off, or part of a pattern of behaviour
- any ongoing risks
- other related issues and wider context

MANAGE INTERNALLY
One-off incidents which the school believes that the child(ren) are not in need of early help or statutory intervention, which would be appropriate to deal with internally under the school's behaviour policy or anti-bullying policy.

EARLY HELP
Non-violent Harmful Sexual Behaviours (see Harmful Sexual Behaviours Framework (NSPCC) and the Brook Traffic Light Tool)

REFER TO SOCIAL CARE
All incidents where a child has been harmed, is at risk of harm or is in immediate danger.

Social Care staff will decide next steps. Be ready to escalate if necessary.

REFER TO POLICE
All incidents of rape, assault by penetration or sexual assault.

Discuss next steps with police, for example, disclosing information to other staff, informing alleged perpetrator and their parents.

RISK ASSESSMENT
Case-by-case basis

RISK ASSESSMENT
Immediately

Do not wait for outcome of referral before protecting victim.

Emphasis on victim being able to continue normal routines.

Alleged perpetrator removed from any classes with victim (also consider shared spaces and journey to/from school) [Not a judgement of guilt]

SAFEGUARD AND SUPPORT VICTIM AND (ALLEGED) PERPETRATOR
(see separate page)

SAFEGUARD AND SUPPORT VICTIM AND (ALLEGED) PERPETRATOR
(see separate page)

DISCIPLINARY MEASURES TAKEN
(see school's Behaviour Policy/Anti-bullying Policy)

DISCIPLINARY MEASURES TAKEN
(may be undertaken based on balance of probabilities, unless prejudicial or unreasonable)

CRIMINAL PROCESS ENDS

- ▶ **Conviction or Caution:** follow behaviour policy, consider Permanent Exclusion. If pupil remains in school, make clear expectations; keep victim and perpetrator apart. Consider victim's wishes.
- ▶ **Not Guilty:** Support victim and alleged perpetrator
- ▶ **No Further Action:** Support victim and alleged perpetrator

Ensure actions do not jeopardise the investigation
School to work closely with police and/or other agencies

Manage internally

1. In some cases of sexual harassment, for example, one-off incidents, it may be appropriate to handle the incident internally, perhaps through utilising the behaviour and bullying policies and by providing pastoral support with the support of the Early Intervention Practitioner, Mrs T. Phillips. This decision is considered on the outcome of contact with the MASH and submission of a completed safety plan.

This decision will be made based on the principle that sexual violence and sexual harassment is never acceptable and will not be tolerated. All decisions, and discussions around making these decisions will be recorded and stored by the DSL on the child's CP File.

It is important to ensure that details of sanctions for the child alleged to have caused harm are not shared with any other persons other than those providing care for them. This is to maintain confidentiality and privacy for the child involved.

2. In line with 1 above, we may decide that the children involved do not require statutory interventions but may benefit from early help. Early help means providing support as soon as a problem emerges, at any point in a child's life. Providing early help is more effective in promoting the welfare of children than reacting later. Early help can be particularly useful to address non-violent harmful sexual behaviour and may prevent escalation of sexual violence.
3. Where a child has been harmed, is at risk of harm, or is in immediate danger, we will make a referral to the MASH following locally agreed protocols.

Where statutory assessments are appropriate, the designated safeguarding lead or a deputy will be working alongside, and cooperating with, the relevant lead social worker. Collaborative working will help ensure the best possible package of coordinated support is implemented for the victim and, where appropriate, the child alleged to have caused harm and any other children that require support.

Safety Plan

When there has been a report of peer on peer abuse that sits under the abusive and violent sections on the flow chart, the designated safeguarding lead (or a deputy) will make an immediate risk and needs' assessment (safety plan). Where there has been a report of sexual harassment, a safety plan must be completed and submitted to the MASH. The safety plan should consider:

- The victim, especially their protection and support;
- The child alleged to have caused harm; and
- All the other children (and, if appropriate, adult students and staff) at the school or college, especially any actions that are appropriate to protect them;

Safety plans will be recorded by being written and placed in the children's confidential records. These will be kept under review. The designated safeguarding lead (or a deputy) will ensure they are engaging with MASH.

Reporting to the Police

DSL's have a responsibility to report all alleged crimes to the police. The designated safeguarding lead (and their deputies) will also follow local processes for safeguarding referrals.

Where a report of rape, assault by penetration or sexual assault is made, the starting point is this will be passed on to the police as a matter of urgency. Whilst the age of criminal responsibility is ten, if the child alleged to have caused harm is under ten, the starting principle of reporting to the police remains.

Where a report has been made to the police, the school or college will consult the police and agree what information can be disclosed to staff and others, the child alleged to have caused harm and their parents or carers. They will also discuss the best way to protect the victim and their anonymity.

Where there is a criminal investigation, we will work closely with the relevant agencies to support all children involved (especially potential witnesses). Where required, advice from the police will be sought in order to help us.

Whilst protecting children and/or taking any disciplinary measures against the child alleged to have caused harm, we will work closely with the police (and other agencies as required), to ensure any actions the school or college take do not jeopardise the police investigation.

Separation

If the children involved are in the same class, the school will need to consider carefully whether to separate them while the concerns are being investigated. In situations of alleged rape and assault by penetration, the statutory guidance is clear that the child alleged to have caused harm should always be removed from classes they share with the victim.

The school need to consider how best to keep the victim and child alleged to have caused harm a reasonable distance apart while they are on the same premises, as well as on transport to and from school or college, where appropriate.

The school will need to consider how long these measures should be in place, especially if any police investigation is inconclusive. Lack of a conviction is not the same as the allegation being unfounded. The school or college must continue to provide support to the victim and child alleged to have caused harm for as long as necessary. Therefore, any separation arrangements must also be continued with for as long as is necessary to make sure children are safe.

There are different factors which must be considered prior to the separation of children occurring. These factors are the allegation itself, the context of the allegation, the wishes and feelings of the victim(s), and the threshold the allegation meets.

As part of the consideration as to whether or not the children are separated in school, safety mapping is recommended so that the victim can clearly identify where they feel safest in school and any areas they do not feel safe. This will also allow school to map out areas each child can frequent without concern or worry that the other will be there. These actions are in the best interests of both children and should not be perceived to be a judgment on the guilt of the child alleged to have caused harm.

It is essential that the alleged victim is able to express their wishes and feelings in respect of the action the school takes, in some circumstances the alleged victim may state that they do wish for separation to occur but rather that a seating plan is implemented. This is again considered alongside the context, the allegation itself and the threshold that is met.

If multiple young people are involved then the school will need to complete peer mapping and consult with the alleged victim(s) regarding safety mapping both within school and outside of school.

The end of the criminal process

If a child is convicted or receives a caution for a sexual offence, the school / federation will update its safety plan, ensure relevant protections are in place for all children. We will consider any suitable action following our behaviour policy. If the child alleged to have caused harm remains in school / federation we will be very clear as to our expectations regarding the child alleged to have caused harm now they have been convicted or cautioned. This could include expectations regarding their behaviour and any restrictions we think are reasonable and proportionate about the child alleged to have caused harm's timetable.

Any conviction (even with legal anonymity reporting restrictions) is potentially going to generate interest among other pupils or students in the school or college. We will ensure all children involved are protected, especially from any bullying or harassment.

Where cases are classified as “no further action” (NFA’d) by the police or Crown Prosecution Service, or where there is a not guilty verdict, we will continue to offer support to the victim and the child alleged to have caused harm for as long as is necessary. A not guilty verdict or a decision not to progress with their case will likely be traumatic for the victim. The fact that an allegation cannot be substantiated does not necessarily mean that it was unfounded. We will continue to support all parties in this instance.

It is also important to note that by law every child has the right to an education and therefore in instances where allegations have been withdrawn, NFA’d, unfounded or unsubstantiated children may be placed back into lessons together with a seating plan and safety mapping in place. This is decided on a case by case basis and with consideration to the wishes and feelings of the victim.

Support to victims and those instigating harm

Support for Children Affected by Sexual-Assault

What support they require depends on the individual young person. It may be that they wish to seek counselling or one to one support via a mentor. It may also be that they feel able to deal with the incident(s) on their own or with support of family and friends; in which case it is necessary that this young person continues to be monitored and offered support should they require it in the future. Within school children will be offered a named member of staff they can talk to and pastoral support.

Other interventions that could be considered may be that through the continued curriculum of Relationship and Sex Education (from 2020), PSHE and SMSC that certain issues can be discussed and debated more frequently.

If the young person needs further support it may be that a safety plan can be put in place for them whilst in school so that they have someone named that they can talk to, support strategies for managing future issues and identified services to offer additional support.

Support for victims of sexual assault is available from a variety of agencies (see Appendix 3).

We will support the victim of sexual assault to remain in school but if they are unable to do so we will enable them to continue their education elsewhere. This decision will be made only at the request of the child and their family. If they are moved, we will ensure the new school is aware of the ongoing support they may need. The DSL will support this move.

Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, we may take suitable action, if we have not already done so in line with the behaviour regulation policy. In all but the most exceptional of circumstances, the rape or assault is likely to constitute a serious breach of discipline and lead to the view that allowing the child alleged to have caused harm to remain in the same school or college would seriously harm the education or welfare of the victim (and potentially other pupils or students).

Where a criminal investigation into sexual assault leads to a conviction or caution, we may, if we have not already done so, consider any suitable sanctions using our behaviour regulation policy, including consideration of permanent exclusion.

Where the child alleged to have caused harm is going to remain at the school, the principle would be to continue keeping the victim and child alleged to have caused harm in separate classes and use safety mapping to consider the most appropriate way to manage potential contact on school and college premises and transport. The nature of the conviction or caution and wishes of the victim will be especially important in determining how to proceed in such cases.

Reports of sexual assault and sexual harassment will, in some cases, not lead to a report to the police (for a variety of reasons). In some cases, rape, assault by penetration, sexual assault or sexual harassment are reported to the police and the case is not progressed or are reported to the police and ultimately result in a not guilty verdict. None of this means the offence did not happen or that the victim lied. The process will have affected both victim and child alleged to have caused harm. Appropriate

support will be provided to both as required and consideration given to sharing classes and potential contact as required on a case-by-case basis.

All the above will be considered with the needs and wishes of the victim at the heart of the process (supported by parents and carers as required). Any arrangements should be kept under review.

For the young person who has displayed harmful behaviour

It is important to find out why the young person has behaved in such a way. It may be that the young person is experiencing their own difficulties and may even have been harmed themselves in a similar way. In such cases support such as one to one mentoring or counselling may also be necessary.

Particular support from identified services may be necessary through an early help referral and the young person may require additional support from family members (Appendix 4)

Once the support required to meet the individual needs of the young person is in place it is important that the young person receives a consequence for their behaviour in line with the school Behaviour policy. In the cases of sexually harmful behaviour it may be a requirement for the young person to engage in one to one work with a particular service or agency (if a crime has been committed this may be through the police or youth offending service). If there is any form of criminal investigation ongoing it may be that this young person does not want to be educated on site until the investigation has concluded. In which case, the young person will need to be provided with appropriate support and education elsewhere.

It may be that the behaviour that the young person has displayed may continue to pose a risk to others, in which case an individual risk assessment may be required. This should be completed via a multi-agency response (via a referral to MASH) to ensure that the needs of the young person and the risks towards others are measured by all of those agencies involved including the young person and their parents. This may mean additional supervision of the young person or protective strategies if the young person feels at risk of engaging in further inappropriate or harmful behaviour.

The school may also choose a consequence such as exclusion or internal exclusion/inclusion/seclusion for a period of time to allow the young person to reflect on their behaviour.

After care

It is important that following the incident the young people involved continue to feel supported and receive help even if they have stated that they are managing the incident. Sometimes the feelings of remorse, regret or unhappiness may occur at a much later stage than the incident. It is important to ensure that the young people do not engage in any further harmful behaviour either towards someone else or to themselves as a way of coping (e.g. self-harm). For this reason, regular reviews with the young people following the incident(s) are imperative.

Multi-agency working

Crowmoor actively engages with local partners in relation to peer-on-peer abuse, and works closely with Shropshire Council children's social care, and/or other relevant agencies, and other schools.

The relationships the schools has built with these partners are essential to ensuring that the schools are able to prevent, identify early and appropriately handle cases of peer-on-peer abuse. They help the School

- (a) To develop a good awareness and understanding of the different referral pathways that operate in its local area, as well as the preventative and support services which exist;
- (b) To ensure that our [pupils/students] can access the range of services and support they need quickly;
- (c) To support and help inform our local community's response to peer-on-peer abuse;

(d) To increase our awareness and understanding of any concerning trends and emerging risks in our local area to enable us to take preventative action to minimise the risk of these being experienced by our pupils.

Crowmoor of school actively refers concerns/allegations of peer-on-peer abuse where necessary to Shropshire Council children's social care, and/or other relevant agencies.

Children resident out of county but attending a Shropshire school will be reported to their home authority Social Care team.

In cases involving children who are subject to risk, harm and abuse and who have LAC status, the children's social worker must be informed and a coordinated approach to address any incidents or concerns will be required.

Appendix 1

Useful definitions

Sexual Harassment

This can be defined as 'unwanted conduct of a sexual nature' that can occur online and offline. In the context of this guidance this means 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.

It 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.

Sexting

Sexting is when someone shares sexual, naked or semi-naked images or videos of themselves or others or sends sexually explicit messages. They can be sent using mobiles, tablets, smartphones, laptops - any device that allows you to share media and messages. This is also known as youth produced sexual imagery

The UK Council for Internet Safety (UKCIS) Education Group has published Advice for Schools and Colleges on Responding to Sexting Incidents www.gov.uk/government/publications/sexting-in-schools-and-college

Upskirting

This 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. It is now a criminal offence and may constitute sexual harassment. Cases of 'up skirting' have a mandatory requirement for being reported.

Rape

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

Assault by Penetration

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

Sexual Assault

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

Consent

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

It is important to know that: -

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

It is also important to differentiate between consensual sexual activity between children of a similar age and that which involves any power imbalance, coercion or exploitation. Due to their additional training, the designated safeguarding lead (or deputy) should be involved and leading the school or college response. If in any doubt, they should seek expert advice.

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

Harmful Sexual Behaviour (HSB)

Children's sexual behaviour exists on a wide continuum, from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. A useful umbrella term is "harmful sexual behaviour". The term has been widely adopted in child protection and is used in this advice. Harmful sexual behaviour can occur online and/or offline and can also occur simultaneously between the two. Harmful sexual behaviour should be considered in a child protection context.

Useful guidance can be found in: -

NSPCC's and Research in Practice's Harmful Sexual Behaviour Framework:

www.nspcc.org.uk/globalassets/documents/publications/harmful-sexual-behaviour-framework.pdf

The Brook Sexual Behaviours Traffic Light Tool can also be very helpful in identifying sexual behaviours by children (Appendix 2)

Initiation/hazing

Hazing or initiation ceremonies refers to the practice of rituals, challenges, and other activities involving harassment, abuse or humiliation used as a way of initiating a person into a group. Hazing is seen in many different types of social groups, including gangs, sports teams and school groups. The initiation rituals can range from relatively low level pranks, to protracted patterns of behaviour that rise to the level of abuse or criminal misconduct. Hazing may include physical or psychological abuse. It may also include nudity or sexual assault.

Contextual Safeguarding

All staff, but especially the designated safeguarding lead (or deputy) should be considering the context within which incidents and/or behaviours occur. This is known as contextual safeguarding, which simply

means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare.

Legislation, guidance and Law

Additional areas for consideration can be found in Sexual Violence and Sexual Harassment between Children in Schools and Colleges guidance 2018)

www.gov.uk/government/publications/sexual-violence-and-sexual-harassment-between-children-in-schools-and-colleges

Keeping Children Safe in Education 2021

Human Rights Act 1998

It is essential to note that this guidance adheres to and encourages all persons to ensure that they are adhering to the Human Rights Act 1998, specifically the right to an education, the right to a Fair trial and protection from discrimination.

<https://www.equalityhumanrights.com/en/human-rights/human-rights-act>

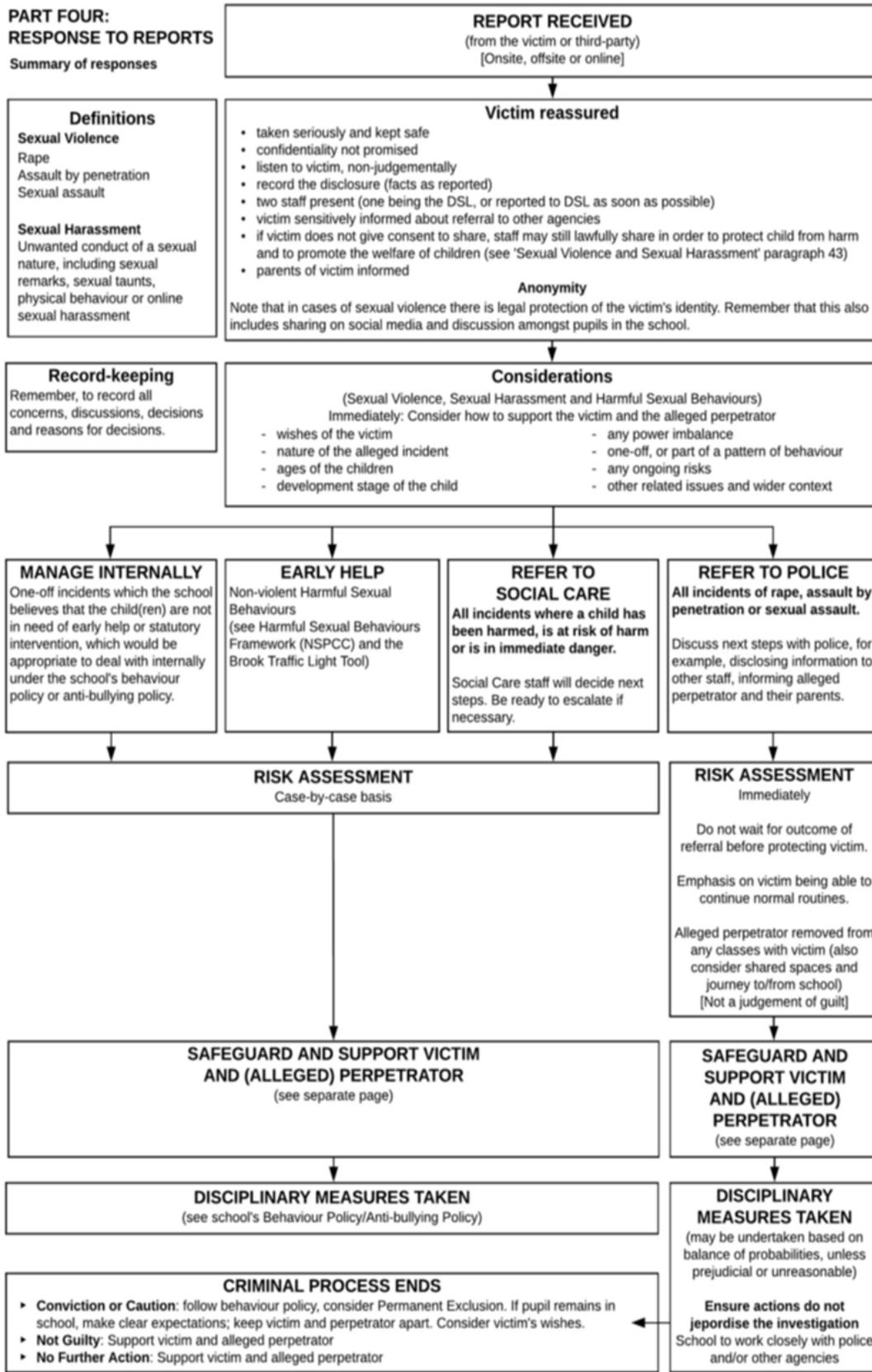
Equality Act 2010

This guidance is designed to ensure that the Equality Act is adhered to at all times. The Equality Act 2010 provides a basic framework for protection against direct and indirect discrimination, harassment and victimisation in education as well as other sectors.

<https://www.gov.uk/guidance/equality-act-2010-guidance>

West Midlands Procedures for Peer on Peer abuse

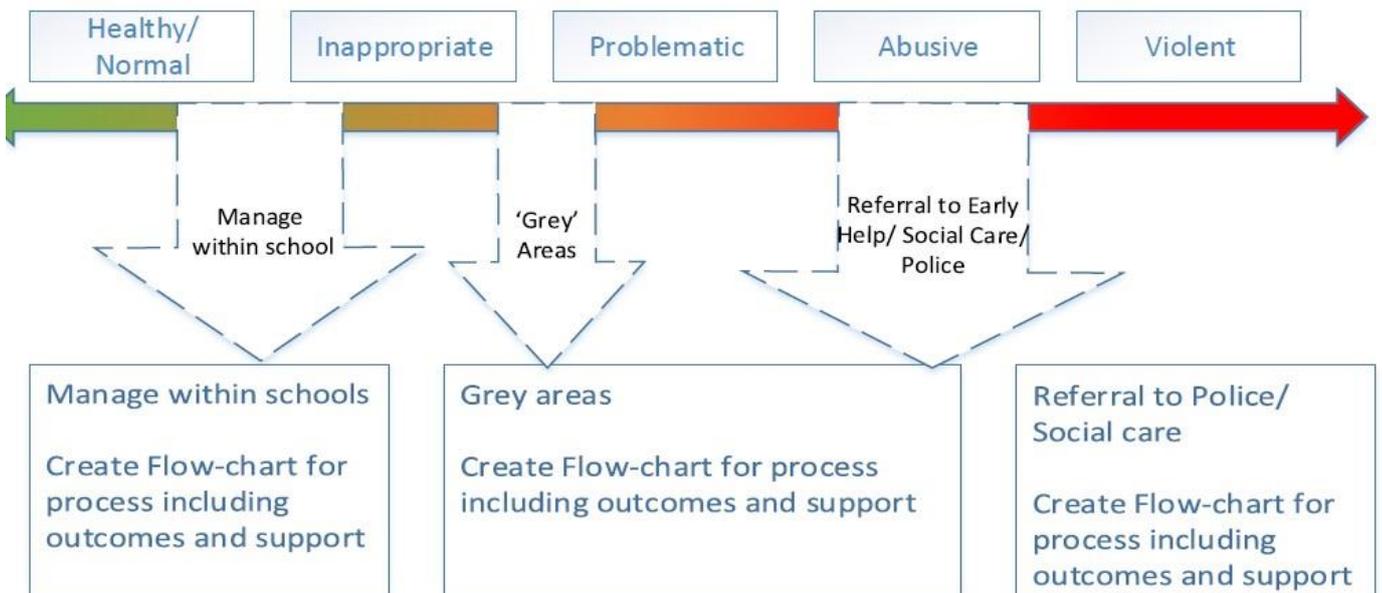
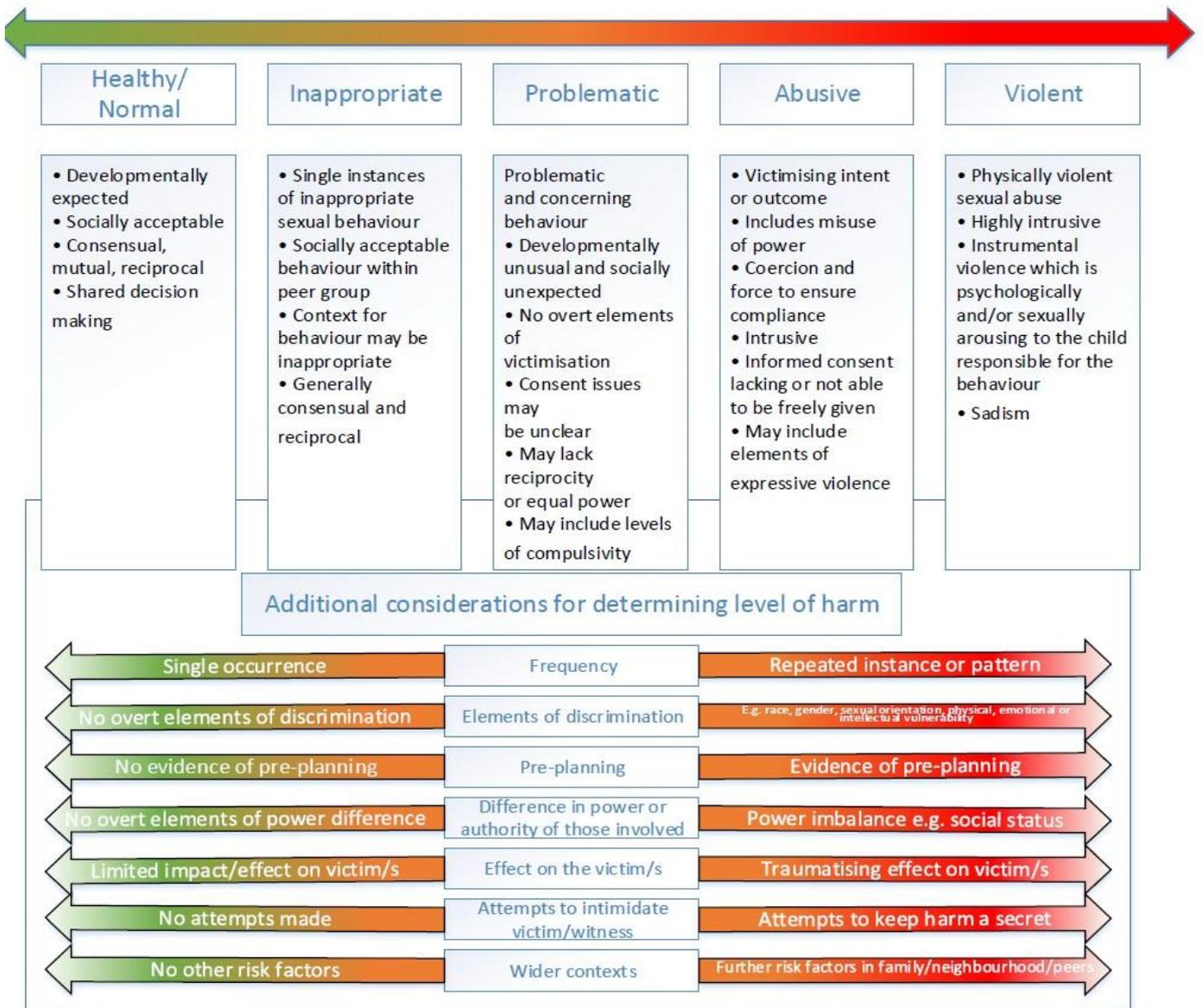
<https://westmidlands.procedures.org.uk/pkoso/regional-safeguarding-guidance/childrenwho-abuse-others>



© 2017 Andrew Hall

Source: Sexual Violence and Sexual Harassment between children in schools and colleges (DfE, 2017)

SVSH Flow Chart for Schools 2017 v.1.0



Behaviours: age 0 to 5 - All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

<p>What is a green behaviour?</p> <p>Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability. They are reflective of natural curiosity, experimentation, consensual activities and positive choices</p> <p>What can you do?</p> <p>Green behaviours provide opportunities to give positive feedback and additional information.</p> <p>Green behaviours</p> <p>holding or playing with own genitals</p> <ul style="list-style-type: none"> • attempting to touch or curiosity about other children's genitals • attempting to touch or curiosity about breasts, bottoms or genitals of adults • games e.g. mummies and dad-dios, • doctors and nurses • enjoying nakedness • interest in body parts and what they do • curiosity about the differences between boys and girls 	<p>What is an amber behaviour?</p> <p>Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.</p> <p>What can you do?</p> <p>Amber behaviours signal the need to take notice and gather information to assess the appropriate action.</p> <p>Amber behaviours</p> <ul style="list-style-type: none"> • preoccupation with adult sexual behaviour • pulling other children's pants down/skirts up/trousers down against their will • talking about sex using adult slang • preoccupation with touching the genitals of other people • following others into toilets or changing rooms to look at them or touch them • talking about sexual activities seen on TV/online 	<p>What is a red behaviour?</p> <p>Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur</p> <p>What can you do?</p> <p>Red behaviours indicate a need for immediate intervention and action.</p> <p>Red behaviours</p> <ul style="list-style-type: none"> • persistently touching the genitals of other children • persistent attempts to touch the genitals of adults • simulation of sexual activity in play • sexual behaviour between young children involving penetration with objects • forcing other children to engage in sexual play
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All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

<p>What is a green behaviour?</p> <p>Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices</p> <p>What can you do?</p> <p>Green behaviours provide opportunities to give positive feedback and additional information.</p> <p>Green behaviours 5-9</p> <ul style="list-style-type: none"> • feeling and touching own genitals • curiosity about other children's genitals • curiosity about sex and relationships, e.g. differences between boys and girls, how sex happens, where babies come from, same-sex relationships • sense of privacy about bodies • telling stories or asking questions using swear and slang words for parts of the body 	<p>What is an amber behaviour?</p> <p>Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.</p> <p>What can you do?</p> <p>Amber behaviours signal the need to take notice and gather information to assess the appropriate action.</p> <p>Amber behaviours 5-9</p> <ul style="list-style-type: none"> • questions about sexual activity which persist or are repeated frequently, despite an answer having been given • sexual bullying face to face or through texts or online messaging • engaging in mutual masturbation • persistent sexual images and ideas in talk, play and art • use of adult slang language to discuss sex 	<p>What is a red behaviour?</p> <p>Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur</p> <p>What can you do?</p> <p>Red behaviours indicate a need for immediate intervention and action.</p> <p>Red behaviours 5-9</p> <ul style="list-style-type: none"> • frequent masturbation in front of others • sexual behaviour engaging significantly younger or less able children • forcing other children to take part in <ul style="list-style-type: none"> • sexual activities • simulation of oral or penetrative sex • sourcing pornographic material online
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All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

<p>What is a green behaviour?</p> <p>Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices</p> <p>What can you do?</p> <p>Green behaviours provide opportunities to give positive feedback and additional information.</p> <p>Green behaviours 9-13</p> <ul style="list-style-type: none"> • solitary masturbation • use of sexual language including swear and slang words • having girl/boyfriends who are of the same, opposite or any gender • interest in popular culture, e.g. fashion, music, media, online games, chatting online • need for privacy • consensual kissing, hugging, holding hands with peers 	<p>What is an amber behaviour?</p> <p>Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.</p> <p>What can you do?</p> <p>Amber behaviours signal the need to take notice and gather information to assess the appropriate action.</p> <p>Amber behaviours 9-13</p> <ul style="list-style-type: none"> • uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing • verbal, physical or cyber/virtual sexual bullying involving sexual aggression • LGBT (lesbian, gay, bisexual, transgender) targeted bullying • exhibitionism, e.g. flashing or mooning • giving out contact details online • viewing pornographic material • worrying about being pregnant or having STIs 	<p>What is a red behaviour?</p> <p>Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur</p> <p>What can you do?</p> <p>Red behaviours indicate a need for immediate intervention and action.</p> <p>Red behaviours 9-13</p> <ul style="list-style-type: none"> • exposing genitals or masturbating in public • distributing naked or sexually provocative images of self or others • sexually explicit talk with younger children • sexual harassment • arranging to meet with an online acquaintance in secret • genital injury to self or others • forcing other children of same age, younger or less able to take part in sexual activities • sexual activity e.g. oral sex or intercourse • presence of sexually transmitted infection (STI) • evidence of pregnancy
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All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

<p>What is a green behaviour?</p> <p>Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices</p> <p>What can you do?</p> <p>Green behaviours provide opportunities to give positive feedback and additional info</p> <p>Green behaviours</p> <ul style="list-style-type: none"> solitary masturbation sexually explicit conversations with peers obscurities and jokes within the current cultural norm interest in erotica/pornography use of internet/e-media to chat online having sexual or non-sexual relationships sexual activity including hugging, kissing, holding hands consenting oral and/or penetrative sex with others of the same or opposite gender who are of similar age and developmental ability choosing not to be sexually active 	<p>What is an amber behaviour?</p> <p>Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.</p> <p>What can you do?</p> <p>Amber behaviours signal the need to take notice and gather information to assess the appropriate action.</p> <p>Amber behaviours</p> <ul style="list-style-type: none"> accessing exploitative or violent pornography uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing concern about body image taking and sending naked or sexually provocative images of self or others single occurrence of peeping, exposing, mooning or obscene gestures giving out contact details online joining adult-only social networking sites and giving false personal information arranging a face to face meeting with an online contact alone 	<p>What is a red behaviour?</p> <p>Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur</p> <p>What can you do?</p> <p>Red behaviours indicate a need for immediate intervention and action.</p> <p>Red behaviours</p> <ul style="list-style-type: none"> exposing genitals or masturbating in public preoccupation with sex, which interferes with daily function sexual degradation/humiliation of self or others attempting/forcing others to expose genitals sexually aggressive/exploitative behaviour sexually explicit talk with younger children sexual harassment non-consensual sexual activity use of/acceptance of power and control in sexual relationships genital injury to self or others sexual contact with others where there is a big difference in age or ability sexual activity with someone in authority and in a position of trust sexual activity with family members
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Appendix 4

Support for Young People:

A helpline was launched by the NSPCC on 1st April 2021 to support potential victims of sexual harassment and abuse. Run by the NSPCC it aims to provide advice and support to both children and adults who are victims of abuse in school. It will also include how to contact the police to report crimes. The advice line is also available to support professionals and parents. **NSPCC helpline number is 0800 136 663.**

The Police are also there to offer support and guidance to both alleged victims and children alleged to have caused harm, they can be contacted on 101.

National charities:

[Victim Support](#)

A national charity dedicated to helping anyone affected by crime – not just victims and witnesses, but friends, family and anyone else caught up in the aftermath.

[Rape Crisis](#)

A national charity offering confidential help, advice and a range of Rape Crisis Centres around the UK.

[Galop](#)

A national charity providing advice and support to members of the LGBT community.

[Survivors UK](#)

A national charity supporting men who have been raped or sexually assaulted.

[Crimestoppers](#)

A national charity with a free helpline for reporting crime anonymously.

[Refuge](#)

Refuge supports women, children and men with a range of services, including refuges, independent advocacy, community outreach and culturally specific services.

[Women's Aid](#)

Women's Aid is a national charity working to end domestic abuse against women and children.

[Men's Advice Line: 0808 801 0327](#)

Confidential helpline for men experiencing domestic violence from a partner or ex-partner (or from other family members).

Useful Publications and Websites

Government Publications

Sexual harassment and sexual violence in schools

www.gov.uk/government/publications/sexual-violence-and-sexual-harassment-between-children-in-schools-and-colleges

Keeping Children safe in Education - www.gov.uk/government/publications/keeping-children-safe-in-education

Preventing youth violence and gang involvement www.gov.uk/government/publications/advice-to-schools-and-colleges-on-gangs-and-youth-violence Preventing and tackling bullying in schools
www.gov.uk/government/publications/preventing-and-tackling-bullying

Other useful documents

Sexting

Sexting in schools and colleges-Responding to incidents and safeguarding young people

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/609874/6_2939_SP_NCA_Sexting_In_Schools_FINAL_Update_Jan17.pdf

Peer-on-peer abuse

Farrer & Co - Peer-on-peer abuse toolkit, guidance on peer-on peer abuse policy and template peer-on-peer abuse policy www.farrer.co.uk/Global/Peer-on-peer%20abuse%20toolkit%202014.pdf

Anti-bullying alliance

There are some useful links on the section on sexual bullying:-

Sexual bullying: developing effective anti-bullying practice- A guide for school staff and other professional

www.anti-bullyingalliance.org.uk/sites/default/files/field/attachment/Sexual%20bullying%20%20anti-bullying%20guidance%20for%20teachers%20and%20other%20professionals%20-%20Feb17_1.pdf

Preventing abuse among children and young people-guidance from Stop it Now

www.stopitnow.org.uk/files/stop_booklets_childs_play_preventing_abuse_among_children_and_young_people01_14.pdf

What is Age appropriate? <http://www.stopitnow.org/ohc-content/what-is-age-appropriate>

NSPCC-Harmful sexual behaviour <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/harmful-sexual-behaviour/> NCB Harmful sexual behaviour

<https://www.ncb.org.uk/resources-publications/resources/workforce-perspectives-harmful-sexualbehaviour>

NSPCC –Is this sexual abuse?

<https://www.nspcc.org.uk/globalassets/documents/research-reports/nspcc-helplines-report-peersexual-abuse.pdf>

Online sexual harassment

Project deSHAME- Digital Exploitation and Sexual Harassment Amongst Minors in Europe
Understanding, Preventing, Responding <https://www.childnet.com/our-projects/project-deshame>

Sexism

It's Just Everywhere- a study on sexism in schools –and how we tackle it <https://ukfeminista.org.uk/wp-content/uploads/2017/12/Report-Its-just-everywhere.pdf>

•Relationship Education , Relationship and Sex Education HMSO

www.gov.uk/government/news/relationships-education-relationships-and-sex **Appendix 5**

Safety Plan

Safety Plan for Peer on Peer Abuse/ Harmful Sexual Behaviour

This Safety plan is intended to be used by schools whereby an incident(s) of peer on peer abuse has occurred or is likely to occur and is deemed to meet level 3 and above in the Right Help Right Time document. The Safety plan will show considerations made for both/all pupils involved and will highlight the plan in place to keep all pupils safe. This will also take into consideration the wishes and feelings of all children involved. Each section/question will be considered from the perspective of all pupils involved. Considerations will also be given for the impact on, and needs of, the wider school community. All concerns and proposed actions will be recorded. The school will work with the local multi-agency safeguarding hub (MASH), the Education Safeguarding Lead and other agencies as necessary when completing this risk assessment. This document should be reviewed frequently to ensure it is fit for purpose. The terms victim and child alleged to have caused harm are used to identify the children involved. NB: there should be no assumption of guilt on the part of the child alleged to have caused harm, pending investigation.

***A risk assessment should be completed for all cases relating to sexual violence or alleged sexual violence. Sexual violence is defined by the sexual offences act 2002 as "criminal acts: rape, assault by penetration and sexual assault".**

***This risk assessment should be completed with reference to Keeping Children Safe In Education, DFE Sexual Violence and Sexual Harassment in schools and colleges and the local**

West Midlands policy (2.24) <https://westmidlands.procedures.org.uk/pkoso/regional-safeguarding-guidance/children-who-abuse-others>

Basic information		
Referrer Name and role		
Referrer Contact details (email address and phone number)		
Name of school(s) for victim(s)		
Name of school(s) for child/ren alleged to have caused harm		
Did incident occur on school premises? If not where did the incident occur?		

CONSIDERATIONS	RISK (CONSIDER VICTIM, CHILD ALLEGED TO HAVE CAUSED HARM, OTHER PUPILS AND STAFF)	RISK LEVEL (HIGH, MEDIUM OR LOW)	ACTIONS TO REDUCE RISK	REVISED RISK LEVEL (HIGH, MEDIUM OR LOW)
What is the incident? Who was involved? Where did it happen				
Does this incident constitute a crime? Assault, sexual assault, rape, sharing of indecent images of children, etc etc. As such has this been referred to the police?				
Is it necessary to limit contact between the children involved? Refer to KCSiE and DFE guidance on sexual harassment and sexual violence in schools and colleges.				
Is there an actual or perceived threat from the child alleged to have caused harm to the victim and/or others?				

Is either the victim or the child alleged to have caused harm at risk of physical harm as a result of this incident (for example, bullying or 'retribution' by peers)?				
Do they share classes?				
<ul style="list-style-type: none"> Do they share break times? Do they share peer/friendship groups? 				
Do they share transport to/from school?				
CONSIDERATIONS	RISK (CONSIDER VICTIM, CHILD ALLEGED TO HAVE CAUSED HARM, OTHER PUPILS AND STAFF)	RISK LEVEL (HIGH, MEDIUM OR LOW)	ACTIONS TO REDUCE RISK	REVISED RISK LEVEL (HIGH, MEDIUM OR LOW)
Are they likely to come into contact with each other (or anyone else involved in/with knowledge of the incident) outside of school?				
How can such contact be limited?				
Is there a risk of harm from social media and gossip?				

Further action taken by the school or college: Please complete for each child involved.

Action	YES/NO	Date
Police informed		
Referral to MASH		
Referral to external support services		
Referral to internal support services		
Referral to CAMHS		
Referral to early help		
Other		

Action	YES/NO	Date
Police informed		
Referral to MASH		
Referral to external support services		
Referral to internal support services		
Referral to CAMHS		
Referral to early help		
Other		

Action	YES/NO	Date
Police informed		
Referral to MASH		
Referral to external support services		
Referral to internal support services		
Referral to CAMHS		
Referral to early help		
Other		

Action	YES/NO	Date
Police informed		
Referral to MASH		
Referral to external support services		
Referral to internal support services		
Referral to CAMHS		
Referral to early help		
Other		

Appendix I

Crowmoor Expectations for Recording Safeguarding Concerns and Incidents

CPOMS entries **MUST ALWAYS** be discussed with a DSL in person on the day they are made.

It cannot be emphasised or stressed enough how vital it is that all staff carry out their professional duty to discuss any recording made on CPOMS asap.

There are NO reasons for this not happening.

NB :

DO NOT Assign cases to a DSL at all, instead always alert in person!

Expectations

Records on Child Protection concerns/incidents should always include (particularly on CPOMS):

- A clear and comprehensive summary of the concern
- Details of how the concern was followed up by you (the person reporting the incident) and how it was resolved
- A note of action taken, decisions reached and the outcome

Recording

Examples of **poor** recording would be:

- A regular pattern of noting a child arriving not having had breakfast or being late or misbehaving with nothing else added or any listing of your actions.
- An irregular pattern of recording a child's dirty and dishevelled appearance when they arrive at school every morning with no listing of your contacting the parent to discuss and asking the Office to see if the family could have help from Gorsuch Langley Trust or getting some free uniform from out stock if the parent would find that helpful.(It is acceptable to keep a weekly record as long as that is uploaded every week with the days and dates included).

Good examples would be:

- John Smith arrived ten minutes late this morning, this was the third time in a fortnight. As class teacher I will ring Mum up to discuss if there are any problems with him coming to school. Mum said that he is refusing to get out of bed I said I would ring the EWO for advice, if she could do nothing I said to Mum we could offer Early help support and I will fill in a Webstar with her.
- Jane Smith arrived this morning and as she has missed breakfast four times since returning to school five weeks ago I now make a point of asking her discretely (or the TA Mrs Jones does) every morning if she has had breakfast. As usual we made her some toast and gave her a drink .I rang Mum up to alert her to the fact again and stressed that we could get her some support if Jane is not getting up early enough. I got her to agree to send Jane to Kick Start Breakfast Club . I will check daily with Miss Nicholas to see If she does take up this offer. I offered the Family Early Help support, through completing a Webstar.
- Jess Jones blew raspberries at her TA for the sixth time this fortnight(please see previous entries) and spittle went on her face. I talked calmly to Jess and said this would be upsetting for Miss Bevis, we discussed what had lead up to this incident and how Jess might avoid it happening again .I added this incident to the daily ABC sheet I have filled in each day since the first incident .I have also spoken to the SENDCo and as Jess is now behaving like this she is a concern so I have completed a PCP and shared this with her parents explaining what strategies school is putting in place and what might help at home after they told me Jess is even worse at home .I said that communication was key and initially I would maintain a visual reward card and they could do the same at home.

Conversations with Parents, Professionals or Pupils

All conversations, whatever the outcome, should be recorded appropriately on CPOMS to show that they took place, identify what was agreed and evaluate how effectively they enabled needs to be met. In this way quality conversations can demonstrate their impact on successful practice, including improvements in decision making and joint working. Conversations should continue to inform the on-going planning and reviewing .If a disclosure is made it must be written up as soon as possible but not in teaching time unless directed by a DSL that it is so serious it needs to be

Reports

Class teachers are completely and solely responsible for ensuring that the correct reports are provided by the cut off deadline for any meetings. The Office might remind but it is the teachers responsibility to look on the staff room board or check the electronic diary for the dates of any meetings as the teacher will be well aware of a child's status . It is the professional responsibility of all teachers to give a decision on whether a child should be made subject to Child Protection if a report requires that information. It is a yes /No decision which teachers must be able to give reasons for under the requirements of the Shropshire Thresholds, which all staff should know. If meetings are held in the holidays reports must still be provided.

Meetings

If a meeting is being held for one of your pupils the default position is you will attend, if there are siblings a discussion will need to be held to see if all teachers attend or just one to represent the school. If available and they deem it necessary DSL's will attend initial meetings and subsequent meetings but this is not happening unless they have specifically stood down the class teacher. The class teacher needs to discuss with the Office cover arrangements.

Whatever the circumstances and situation might be at school at a Child Protection Conference the decision will be made after hearing all the other professional's reports and your decision at the meeting must be based on this information.

Teachers attending meetings must ensure the date of the next meeting is given to the Office and put on the calendar.

**Please remember professionally, morally and legally:
Child Protection is every individual member of staff's
responsibility**

October 2021

Review in October 2023