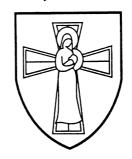


St Mary's Catholic Primary School, Bodmin



Child Protection and Safeguarding Policy September 2024

Document Control

Changes History

Version	Date	Amended by	Recipients	Purpose
2.0	July 2020		CAST Board All Plymouth CAST Staff	Updated in light of KCSiE 2020
3.0	Sept 2021		CAST Board All Plymouth CAST Staff	Substantial re-write to improve clarity and reflect KCSiE Sep 2021
4.0	June 2022		CAST Board All Plymouth CAST Staff and Schools	Updated to reflect changes to KCSiE 2022
5.0	June 2023		CAST Board All Plymouth CAST Staff and Schools	Updated to reflect changes to Trust policies and KCSiE 2023
6.0	February 2024		CAST Board All Plymouth CAST Staff and Schools	Updated to reflect changes to EYFS Statutory Framework 2024
7.0	September 2024		CAST Board All Plymouth CAST Staff and Schools	Updated to reflect changes to Trust policies and KCSiE 2024

Approvals

This policy requires the following approvals:

Board	Chair	CEO	Date Approved	Version	Date for Review
*			Sep 2021		Sep 2022
*			July 2022		
*			July 2023		July 2024
*			March 2024		July 2024
*			September 24		July 25

National/Local Policy

 \square This policy must be localised by Academies

1

[☑] This policy must not be changed, it is a CAST Policy (However, schools must change logo, contact details and review and revise in light of the highlighted and red text to reflect school context)

Position with the Unions

Does the policy require consultation with the National Unions under our recognition agreement? ☐ Yes ☒ No	
If yes, the policy status is: □ Consulted and Approved □ Consulted and Not Approved □ Awaiting Consultation	1

Distribution

This document has been distributed to:

Position	Date	Version	
CAST DSLs and Governors	July 2023	5.0	
CAST DSLs, HTs and Governors	March 2024	6.0	
CAST DSLs, HTs and Governors	September 2024	7.0	

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Child Protection and Safeguarding Policy

Safeguarding Governor: Alison Wagstaff

Designated Safeguarding Lead: Alison McDonald

Status & Review Cycle: Annual

Next Review Date: Summer 2025

Safeguarding Statement

St Mary's Catholic Primary School recognises our moral and statutory responsibility to safeguard and promote the welfare of all pupils. We endeavour to provide a safe and welcoming environment where children are respected, valued, listened to, and in which their self-confidence grows. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice. Child protection forms part of the school's safeguarding responsibilities. The Child Protection and Safeguarding policy underpins and guides **St Mary's Catholic Primary School** procedures and protocols to ensure its pupils and staff are safe.

Key Personnel

Role	Name	Email	Telephone
Trust Safeguarding Lead	Kevin Butlin	kevin.butlin@plymouthcast.org.uk	07513 136390
Designated Safeguarding Lead (DSL)*	Alison McDonald	head@st-marys- bod.cornwall.sch.uk	01208 73218
Deputy DSL(s)*	Anna Cox	pastorallead@st-marys- bod.cornwall.sch.uk	01208 73218
Deputy DSL(s)*	Justin Holmes	dephead@st-marys- bod.cornwall.sch.uk	01208 73218
Headteacher*	Alison McDonald	head@st-marys-bod.cornwall.sch.uk	01208 73218
Chair of Governors*	Alison Wagstaff	awagstaff@st-marys- bod.cornwall.sch.uk	01208 73218
Designated Governor for Safeguarding	Alison Wagstaff	awagstaff@st-marys- bod.cornwall.sch.uk	01208 73218
School Improvement Officer (SIO)	Jo Flower	Jo.flower@plymouthcast.org.uk	
LADO	Cornwall LADO	lado@cornwal.gov.uk	01872 326536
LA Virtual Headteacher	Emma Philips Awena Virtual Schoo	virtualschool@cornwall.gov.uk	01872 324278

^{*}Out of hours contact details will be made available to staff

Terminology

Safeguarding and promoting the welfare of children is defined 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.

Child Protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Staff refers to all those working for or on behalf of the school, full or part time, temporary or permanent, in either a paid or voluntary capacity, including governors.

Child includes everyone under the age of 18.

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

1. Introduction

Safeguarding legislation and guidance

The following safeguarding legislation and guidance has been considered when drafting this policy:

- Section 175 of the Education Act 2002 (maintained schools only)
- Section 157 of the Education Act 2002 (Independent schools only, including academies and CTCs)
- The Education (Independent Schools Standards) (England) Regulations 2003 (Independent schools only, including academies and CTCs)
- The Safeguarding Vulnerable Groups Act 2006
- The Teacher Standards 2012
- Working Together to Safeguarding Children 2023
- Keeping Children Safe in Education 2024
- Information Sharing 2018
- What to do if you're worried a child is being abused 2015
- Early Years Foundation Stage Statutory Framework 2024

2. Policy Principles

The welfare of the child is paramount.

At **St Mary's Catholic Primary School** we are committed to safeguarding children and young people and we expect everyone who works in our school to share this commitment.

Adults in our school take all welfare concerns seriously and encourage children and young people to talk to us about anything that worries them.

We will always act in the best interest of the child.

- All children regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection, safeguarding and opportunities.
- We recognise that all adults, including temporary staff¹, volunteers and governors, have a full and active part to play in protecting our pupils from harm and have an equal responsibility to act on any suspicion or disclosure that may suggest a child is at risk of harm.
- All staff believe that our school should provide a caring, positive, safe and stimulating environment that

- promotes the social, physical, mental wellbeing and moral development of the individual child.
- Pupils and staff involved in child protection issues will receive appropriate support and supervision.

3. Policy Aims

- Safeguarding incidents and/or behaviours can be associated with factors outside the school or college
 and/or can occur between children outside the school/college. All staff, but especially the Designated
 Safeguarding Lead (or Deputy) should be considering the context within which such 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.
- To demonstrate the school's commitment with regard to safeguarding and child protection to pupils, parents and other partners.
- To support the child's development in ways that will foster security, confidence and independence.
- To provide an environment in which children and young people feel safe, secure, valued and respected, and feel confident to, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
- To raise the awareness of all teaching and non-teaching staff of the need to safeguard children, and of their responsibilities in identifying and reporting possible cases of abuse.
- To provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, the school, contribute to assessments of need and support packages for those children.
- To emphasise the need for good levels of communication between all members of staff.
- To develop a structured procedure within the school which will be followed by all members of the school community in cases of suspected abuse.
- To develop and promote effective working relationships with other agencies and Local Authority, especially the Police and MARU.
- To ensure that all staff working within our school who have substantial access to children have been checked as to their suitability, including an online search, verification of their identity, qualifications, and a satisfactory DBS check (according to guidance)², and a single central record is kept for audit.

4. Values

Supporting children.

- We recognise that a child who is abused or witnesses violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.
- We recognise that a child may not feel ready or know how to tell someone they are being abused, exploited or neglected and/or may not recognise their experiences as harmful.
- We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.
- We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn as well as exhibiting signs of mental health problems.
- We understand the impact on a child's mental health, behaviour and education when experiencing difficulties, abuse and/or neglect.

Our school will support all children by:

- encouraging self-esteem, self-assertiveness, consent, respect and responsibility through the curriculum as well as our relationships, whilst not condoning aggression or bullying;
- promoting a caring, safe and positive environment within the school;
- responding sympathetically to any requests for time out to deal with distress and anxiety;
- offering details of helplines, counselling or other avenues of external support;

- liaising and working together with all other settings, support services and those agencies involved in the safeguarding of children;
- notifying MARU as soon as there is a significant concern;
- providing continuing support to a child about whom there have been concerns who leaves the school
 by ensuring that appropriate information is copied under confidential cover to the child's new setting
 and ensuring the school medical records are forwarded as a matter of priority;
- children are taught to understand and manage risk through our personal, social, health and economic (PSHE) education and Relationship and Sex Education and through all aspects of school life. This includes online safety; and
- by accessing and utilising the necessary resources, guidance and toolkits to support the identification of children requiring mental health support, support services and assessments and the subsequent systems and processes.

Prevention / Protection

 We recognise that the school plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults, supportive friends, and an ethos of protection.

The school community will therefore:

- work to establish and maintain an ethos where children feel secure, are encouraged to talk and are always listened to and respected;
- include regular consultation with children e.g. through safety questionnaires, participation in antibullying week, asking children to report whether they have had happy/sad lunchtimes/playtimes;
- ensure that all children know there are adults in the school whom they can approach if they are worried or in difficulty;
- include safeguarding across the curriculum, including PSHE, opportunities which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help; in particular this will include anti-bullying work, online-safety, road safety, pedestrian and cycle training; provide focused activities to prepare key year groups for transition to new settings and/or key stages e.g. more personal safety/independent travel;
- be aware of the specific vulnerabilities and needs of individual children, and provide support and communication strategies and enhanced vigilance as necessary;
- respond quickly and sensitively to school, local, regional, national and international events by providing support etc as required; and
- ensure all staff, pupils and parents are aware of school guidance for their use of mobile technology and the safeguarding issues around the use of mobile technologies and their associated risks have been shared.

5. Safe School, Safe Staff

We will ensure that:

- all staff and volunteers read KCSiE Part 1 and Annex B annually and sign to say they read and understood it;
- all staff receive information about the school's safeguarding arrangements, the school's safeguarding statement, staff behaviour policy (code of conduct)³, child protection and safeguarding policy, behaviour policy, the safeguarding response to children who go missing from education, the role and names of the Designated Safeguarding Lead and their deputy(ies), and sign to say they have read, understood and will abide by it;
- all staff receive mandatory safeguarding and child protection training at **induction**, this includes: the child protection policy; behaviour policy, staff code of conduct/behaviour policy; the safeguarding response to children who go missing from education; and, the role of the Designated Safeguarding Lead (including the identity of the Designated Safeguarding Lead and any deputies)
- all staff receive safeguarding and child protection training, including online safety, in line with advice

from Plymouth CAST, SSS online safeguarding training, and our Local Authority which is regularly updated (for example, via email, e- bulletins and staff meetings), as required, but at least annually;

- all members of staff are trained in and receive regular updates in online safety and reporting concerns;
- all staff and governors have annual Level 2 child protection awareness training, updated by the DSL as appropriate, to maintain their understanding of the signs and indicators of abuse;
- DSLs attend training every two years; and in addition to formal training, their knowledge and skills are refreshed at regular intervals, at least annually.
- Safer Recruitment training is available to all relevant staff and governors who are involved in the recruitment process
- the Child Protection and Safeguarding policy is made available via the school website or other
 means and that parents/carers are made aware of this policy and their entitlement to have a copy
 via the school handbook/newsletter/website. All parents/carers are made aware of the
 responsibilities of staff members with regard to child protection procedures through the publication
 of the Child Protection and Safeguarding policy and reference to it in the school's handbook;
- the school provides a coordinated offer of Early Help when additional needs of children are identified and contributes to early help arrangements and inter-agency working and plans.
- our lettings policy will seek to ensure the suitability of adults working with children on school sites at any time, for example, by having evidence of DBS checks having been undertaken;
- community users organising activities for children are aware of the school's Child Protection and Safeguarding policy, guidelines and procedures;
- The name of the designated members of staff for child protection, the Designated Safeguarding Lead and deputy(ies), are clearly advertised in the school with a statement explaining the school's role in referring and monitoring cases of suspected abuse; and
- all Governors will be given a copy of Part 2 and Annex A of Keeping Children Safe in Education 2024 and will sign to say they have read, understood and will abide by the information contained.

6. Roles and Responsibilities

- All members of The Local CAST Board (LCB) understand and fulfil their responsibilities, namely to
 ensure that there is a Child Protection and Safeguarding policy together with a staff code of
 conduct
- The LCB should be aware of their obligations under the Human Rights Act 1998, the Equality Act 2010 (including the Public Sector Equality Duty) and local multi-agency safeguarding arrangements.
- Child protection, safeguarding, recruitment and managing allegations policies and procedures, including the staff code of conduct are consistent with Plymouth CAST and statutory requirements, are reviewed annually and that the Child Protection and Safeguarding policy is publicly available on the school website or by other means.
- Ensures that all staff including temporary staff and volunteers are provided with the school's child protection and safeguarding policy and staff Code of Conduct.
- All staff have read Keeping Children Safe in Education (2024) Part 1 and Annex B and that
 mechanisms are in place to assist staff in understanding and discharging their roles and
 responsibilities as set out in the guidance.
- The school operates a safer recruitment procedure that includes statutory checks on staff suitability to work with children and disqualification regulations and by ensuring that there is at least one person on every recruitment panel who has completed safer recruitment training.
- The school has procedures for dealing with allegations of abuse against staff (including the
 Headteacher), supply staff, volunteers and against other children and that a referral is made to the
 DBS if a person in regulated activity has been dismissed or removed due to safeguarding
 concerns, or would have had they not resigned.
- The school's School Improvement Officer will liaise with the LA on Child Protection issues and in the event of an allegation of abuse made against the Headteacher.

- A member of the senior leadership team has been appointed as the Designated Safeguarding Lead (DSL) who will take lead responsibility for safeguarding and child protection and that the role is explicit in the role holder's job description.
- On appointment, the DSL and deputy(ies) undertake appropriate Level 3 identified training offered by the LA, the Trust/ SSS Training, or other provider, and renew it every two years.
- All other staff have safeguarding training updated as appropriate; but at least annually.
- All staff undertake specific focused training relevant to the context of the school and its local area.
- The DSL will ensure that individual members of staff and the school staff group as a whole have a wide base of specific safeguarding/child protection training.
- At least one member of the Local Cast Board has completed safer recruitment training to be repeated every two years.
- Children are taught about safeguarding (including online safety) as part of a broad and balanced curriculum, including covering relevant issues through personal social health and economic education (PSHE) and/or relationship and sex education (RSE).
- Appropriate safeguarding procedures are in place for children who go missing from education, to help identify the risk of abuse and neglect including sexual abuse or exploitation and to help prevent the risks of their going missing in future. This must include immediate notification of the appropriate Local Authority department/officer.
- Appropriate online filtering and monitoring systems are in place. https://www.gov.uk/guidance/meeting-digital-and-technology-standards-in-schools-and-colleges/filtering-and-monitoring-standards-for-schools-and-colleges
- Enhanced DBS checks (without barred list checks, unless the governor is also a volunteer at the school) and S128 checks are in place for all Governors.
- Where there are concerns about the way in which safeguarding is carried out, staff should refer to the school's Whistleblowing Policy.
- Any identified weaknesses in Child Protection are remedied immediately.
- The Local Cast Board is responsible for ensuring that appropriate filters and monitoring systems are in place and regularly review their effectiveness and that staff have an awareness and understanding of the provisions in place.

The Headteacher will ensure that:

- the Child Protection and Safeguarding policy and procedures are implemented and followed by all staff;
- an appropriately experienced person has the lead responsibility for Filtering and Monitoring, ensuring all staff understand their role;
 - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/ /1161273/Keeping_children_safe_in_education_2023_-_statutory_guidance_for_schools_and_colleges.pdf
- there are at least 2 Deputy Designated Safeguarding Leads, and these are named within this policy, along with their contact details.
- there is a named governor for safeguarding who is named in the policy, along with appropriate contact details.
- sufficient time, training, support, resources, including cover arrangements where necessary,
 is allocated to the DSL and deputy(ies) DSL(s) to carry out their roles effectively, including the
 assessment of pupils and attendance at strategy discussions and other necessary meetings;
- where there is a safeguarding concern that the child's wishes and feelings are taken into account when determining what action to take and what services to provide;
- systems are in place for children to express their views and give feedback which operate with the best interest of the child at heart;
- all staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the whistle-blowing procedures;
- that pupils are provided with opportunities throughout the curriculum to learn about safeguarding, including keeping themselves safe online;
- they liaise with the school's School Improvement Officer (SIO) and the Local Authority Designated

- Officer (LADO), before taking any action and on an ongoing basis, where an allegation is made against a member of staff, supply staff or volunteer;
- anyone who has harmed or may pose a risk to a child is referred to the Disclosure and Barring Service; and
- ensure that there are staff on site who are appropriately qualified in First Aid and/or Paediatric
 First Aid.

The Designated Safeguarding Lead:

- holds ultimate responsibility for safeguarding and child protection (including online safety) in the school and is a member of the SLT;
- has lead responsibility for Filtering and Monitoring, and has received appropriate training and support to enable her/him to understand and fulfil this role
- acts as a source of support and expertise in carrying out safeguarding duties for the whole school community;
- will have the necessary knowledge and understanding to recognise possible children at risk of contextual and/or familial abuse or exploitation;
- will take a lead in assessing the risks and issues in the wider community when considering the well-being and safety of its pupils
- will ensure that all staff are familiar with the contextual safeguarding issues that pose a risk to all children in the school, and specifically to groups or individuals.
- encourages a culture of listening to children and taking account of their wishes and feelings;
- is appropriately trained with updates every two years and will refresh their knowledge and skills at regular intervals but at least annually;
- will refer a child if there are concerns about possible abuse, to the MARU, and act as a focal point for staff to discuss concerns. Enquiries must be followed up in writing, if referred by telephone;
- will keep detailed, accurate records on the school's CPOMs system/ written records as appropriate, of all concerns about a child even if there is no need to make an immediate referral:
- will ensure that all staff receive appropriate training to enable them to use and maintain the CPOMs system effectively.
- will provide oversight of the CPOMs system to ensure that it is used appropriately and effectively.
- will ensure that all such records are kept confidential, stored securely and are separate from pupil records, until the child's 25th birthday;
- will ensure that an indication of the existence of the additional file is marked on the pupil records;
- will ensure that when a pupil leaves the school, relevant child protection information is passed to the new school (separately from the main pupil file) as soon as possible, ensuring secure transit and that confirmation of receipt is obtained;
- in addition to the child protection file, the designated safeguarding lead should also consider if it would be appropriate to share any information with the DSL of the new school or college in advance of a child leaving; for example, information that would allow the new school or college to continue supporting victims of abuse and have that support in place for when the child arrives. All transfers should be made securely;
- will ensure that when a pupil joins the school, relevant children protection information is requested from the previous school (separately from the main pupil file) as soon as possible, and recording any requests for this information are logged;
- will liaise with the Local Authority, its safeguarding partners⁶ and work with other agencies and professionals in line with Working Together to Safeguard Children;
- has a working knowledge of local authority child protection and safeguarding procedures;
- will ensure that either they, or another staff member, attend case conferences, core groups, or other multi-agency planning meetings, contribute to assessments, and provide a report where required which has been shared with the parents;
- will ensure that any pupil currently with a child protection plan who is absent in the

- educational setting without explanation for a day is referred to their social worker straight away via email or phone call
- will ensure that all staff sign to say they have read, understood and agree to work within the School's child protection policy, behaviour policy, staff Code of conduct and Keeping Children Safe in Education Part 1 and Annex B and ensure that the policies are used appropriately;
- will organise child protection and safeguarding induction, regularly updated training and a minimum of annual updates (including online safety) for all school staff, keep a record of attendance and address any absences;
- will contribute to and provide, with the Headteacher and Chair of Governors, the "Audit of Statutory
 Duties and Associated Responsibilities" (S175/157 audit) to be submitted annually to the Education
 Safeguarding Team working on behalf of Cornwall LA; external audit takes place every two years
 with an internal peer audit every year.
- has an understanding of locally agreed processes for providing early help and intervention and will support members of staff where Early Help and/or Safer Me (concerns around exploitation) is appropriate;
- ensure that all Safeguarding forms (SG Forms) are completed and returned to the Trust as required
- endeavour to attend and contribute to Trust Safeguarding Network meetings
- engage with Trust safeguarding reviews, and contribute to Trust Peer safeguarding reviews as required.
- engage with Trust peer supervision for DSLs
- will ensure that the name of the designated members of staff for Child Protection, the Designated Safeguarding Lead and deputies, are clearly advertised in the school, with a statement explaining the school's role in referring and monitoring cases of suspected abuse, and
- be aware of pupils who have a social worker; communicate this information to appropriate members of staff who work with the pupils; maintain effective communication with the LA Virtual Headteacher

The Deputy Designated Safeguarding Lead(s):

 are trained to the same standard as the Designated Safeguarding Lead and, in the absence of the DSL, carry out those functions necessary to ensure the ongoing safety and protection of pupils. In the event of the long-term absence of the DSL the deputy will assume all of the functions above.

All School Staff:

- understand that it is everyone's responsibility to safeguard and promote the welfare of children and that they have a role to play in identifying concerns, sharing information and taking prompt action:
- understand their role in Filtering and Monitoring
- consider, at all times, what is in the best interests of the child;
- will be aware of the indicators of abuse and neglect both familial and contextual; and recognise that contextual harm can take a variety of different forms;
- know how to respond to a pupil who discloses abuse through delivery of 'Working together
 to Safeguard Children', and 'What to do if you're worried a child is being abused';
- Complete CPOMS entries and any other necessary recording as required by the school,
 Trust or local authority as soon as possible depending on the nature of the incident and
 always within 24 hours. The need to enter details on CPOMS should never delay informing
 the DSL or equivalent.
- will refer any safeguarding or child protection concerns to the DSL or if necessary where the child is at immediate risk to the police or MARU;
- will be aware of the Case Resolution protocol or the duty to report concerns if the DSL fails to do so without reasonable cause;
- are aware of the Early Help⁷ process and understand their role within it including identifying emerging problems for children who may benefit from an offer of Early Help, liaising with the DSL in the first instance and supporting other agencies and professionals in an early help assessment

through information sharing. In some cases, staff may act as the Lead Professional in Early Help cases;

- will provide a safe environment in which children can learn;
- will ensure that all mobile phones, wearable technology, cameras, and other electronic devices with imaging and sharing capabilities are used safely and appropriately only in designated areas as identified by the Headteacher
- will adhere to and follow expectations regarding professional boundaries and behaviour including social media, in line with the Code of Conduct; and
- The Statutory Framework for EYFS requires the school to inform you that you are expected to disclose any convictions, court orders, reprimands and warnings that may affect your suitability to work with children (whether received before or during your employment at the school). Plymouth CAST requires all employees in nursery, First or Primary schools to complete the disclosure form, and inform the headteacher of any changes immediately:
 - This is not exhaustive but would include:
 - If you were banned from working with the children by the DBS.
 - If you were cautioned or convicted of any violent or sexual offences against children.
 - If you were cautioned or convicted of any violent or sexual offences against adults.
 - If you were disqualified from caring for children.
 - If you have been issued a care order for a child in your care.
 - If you have had a registration that has been refused or cancelled in realtion to childcare of children's homes.
 - If you have been disqualified from private fostering.
 - To the best of your knowledge you are living or working in the same household as someone who has been disqualified from working with children under the Childcare Act 2006, ie. would answer yes to any of the above statements.
 - If any of these apply to you it is your responsibility to inform the headteacher immediately.

7. Confidentiality

- St Mary's Catholic Primary School recognises that in order to effectively meet a child's needs, safeguard their welfare and protect them from harm the school must contribute to inter-agency working in line with Working Together to Safeguard Children (2023) and share information between professionals and agencies where there are concerns.
- All staff must be aware that they have a professional responsibility to share information with
 other agencies in order to safeguard children and that the Data Protection Act 2018⁸ and UK
 General Data Protection Regulation (UK GDPR) s not a barrier to sharing information where the
 failure to do so would place a child at risk of harm. See Information Sharing: Advice for
 Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers
- All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing.
- However, we also recognise that all matters relating to child protection are personal to children and families. Therefore, in this respect they are confidential and the Headteacher or DSLs will only disclose information about a child to other members of staff on a need to know basis.
- We will always undertake to share our intention to refer a child to MARU with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will contact the MARU consultation line.

8. Child Protection Procedures

- Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in the family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). Abuse can take place wholly online, or technology may be used to facilitate off line abuse. They may be abused by an adult or adults or by another child or children.
- Abuse and Neglect may also take place outside of the home, contextual safeguarding, and this may include (but not limited to), sexual exploitation, criminal exploitation, serious youth violence, radicalisation.

- Further information about the four categories of abuse; physical, emotional, sexual and neglect, and indicators that a child may be being abused can be found in appendices 1 and 2.
- Any child in any family in any school could become a victim of abuse. Staff should always maintain an attitude of "It could happen here".
- There are also a number of specific safeguarding concerns that we recognise our pupils may experience;
 - child missing from education
 - child missing from home or care
 - child sexual exploitation (CSE)
 - child criminal exploitation (CCE)
 - bullying including cyberbullying
 - domestic abuse
 - drugs
 - fabricated or induced illness
 - faith abuse
 - female genital mutilation (FGM)
 - forced marriage
 - gangs and youth violence
 - gender-based violence/violence against women and girls (VAWG)
 - mental health
 - private fostering
 - radicalisation
 - youth produced sexual imagery (sexting)
 - teenage relationship abuse
 - trafficking
 - child on child abuse
 - upskirting
 - serious violence

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

We also recognise that abuse, neglect and safeguarding issues are complex and are rarely standalone events that can be covered by one definition or label. Staff are aware that in most cases multiple issues will overlap one another.

If staff are concerned about a child's welfare

- If staff notice any indicators of abuse/neglect or signs that a child may be experiencing a
 safeguarding issue they should record these concerns on the CPOMs system in the agreed way.
 They may also discuss their concerns in person with the DSL but the details of the concern must be
 recorded on the CPOMS system.
- inform the DSL that a concern has been raised
- Staff are requested to enter a record of any concern that they have- using categories to alert the Safeguarding team. The entry must be factual and concise, it must not include opinions.
- There will be occasions when staff may suspect that a pupil may be at risk, but have no 'real'
 evidence. The pupil's behaviour may have changed, their artwork could be bizarre, and they may
 write stories or poetry that reveal confusion or distress, or physical or inconclusive signs may
 have been noticed.
- **St Mary's Catholic Primary School** recognises that the signs may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is very ill or an accident has occurred. However, they may also indicate a child is being abused or is in need of safeguarding.
- In these circumstances staff will try to give the child the opportunity to talk. It is fine for staff to ask the pupil if they are OK or if they can help in any way.
- Following an initial conversation with the pupil, if the member of staff remains concerned they should discuss their concerns with the DSL and record on the school's CPOMs system..

• If the pupil does begin to reveal that they are being harmed, staff should follow the advice below regarding a pupil making a disclosure.

If a pupil discloses to a member of staff

- We recognise that it takes a lot of courage for a child to disclose they are being abused. They may
 feel ashamed, guilty or scared, their abuser may have threatened that something will happen if
 they tell, they may have lost all trust in adults or believe that what has happened is their fault.
 Sometimes they may not be aware that what is happening is abuse.
- A child who makes a disclosure may have to tell their story on a number of subsequent occasions to the police and/or social workers. Therefore, it is vital that their first experience of talking to a trusted adult is a positive one.

During their conversation with the pupil staff will;

- listen to what the child has to say and allow them to speak freely;
- remain calm and not overreact or act shocked or disgusted the pupil may stop talking if she/he feels that she/he are upsetting the listener;
- reassure the child that it is not their fault and that they have done the right thing in telling someone;
- not be afraid of silences staff must remember how difficult it is for the pupil and allow them time to talk;
- take what the child is disclosing seriously;
- ask open questions and avoid asking leading questions;
- avoid jumping to conclusions, speculation or make accusations;
- not automatically offer any physical touch as comfort. It may be anything but comforting to a child who is being abused;
- avoid admonishing the child for not disclosing sooner. Saying things such as 'I do wish you had told me about it when it started' may be the staff member's way of being supportive but may be interpreted by the child to mean they have done something wrong; and
- tell the child what will happen next.

If a pupil talks to any member of staff about any risks to their safety or wellbeing the staff member will let the child know that they will have to pass the information on – staff are not allowed to keep secrets.

The member of staff should write up their conversation as soon as possible on the school's CPOMs system. Staff should make this a matter of priority. The record should include the name of the member of staff; the date, and should also detail where the disclosure was made and who else was present. The record should be forwarded to the DSL.

Notifying Parents

The School will normally seek to discuss any concerns about a pupil with their parents. This must be handled sensitively and normally the DSL/DDSL will make contact with the parent in the event of a concern, suspicion or disclosure.

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

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

A disclosure from the child of a Trust employee attending a Plymouth CAST setting will be dealt with in line with all other pupils. This will mean that the parents will be informed in line with the policy and will not be given any further information that may be available within the school. Any

member of staff having a concern regarding the child of another employee should disclose this information to the relevant DSL/DDSL without discussing with the parent. Members of staff that have access to all levels of CPOMS should not access the records of their own children unless they followed the same process set out to all parents. The purpose of this is to ensure that all pupils have the same level of privacy and confidentiality within their school setting.

Making a referral

- Concerns about a child or a disclosure should be immediately raised with the DSL who will help
 decide whether a referral to children's MARU or other support is appropriate in accordance with
 Local Authority protocols. The safeguarding team discuss the next steps and act on the advice
 of the MARU.
- If a referral is needed, the DSL should make this rapidly and have the necessary systems in
 place to enable this to happen. However, anyone can make a referral and if for any reason a
 staff member thinks a referral is appropriate and one hasn't been made they can and should
 consider making a referral themselves.
- The child (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the child.
- If after a referral the child's situation does not appear to be improving, the designated safeguarding lead (or the person that made the referral) should press for re-consideration to ensure their concerns have been addressed, and most importantly the child's situation improves.
- Where necessary concerns should be escalated to the LA head of service by the DSL or headteacher.
- Where the DSL/Headteacher is concerned about the LA response, the DSL/Headteacher should contact the school's SIO for further advice.
- Where necessary the SIO/Trust DSL will liaise with the LA to help resolve the situation.
- If a child is in immediate danger or is at risk of harm a referral should be made to children's
 MARU and/or the police immediately. Anybody can make a referral.
- Where referrals are not made by the DSL, the DSL should be informed as soon as possible.

Supporting our Staff

- We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.
- We will support such staff by providing an opportunity to talk through their anxieties with the DSLs and to seek further support as appropriate.
- The Trust provides peer supervision for DSLs.

9. Children who are particularly vulnerable

St Mary's Catholic Primary School recognises that some children are more vulnerable to abuse and neglect and that additional barriers exist when recognising abuse for some children.

We understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures which fail to acknowledge children's diverse circumstances, rather than the individual child's personality, impairment or circumstances.

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

Some children may also find it harder to disclose abuse due to communication barriers, lack of access to a trusted adult or not being aware that what they are experiencing is abuse.

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

- is disabled and has specific additional needs;
- has special educational needs (whether or not they have a statutory education, health and care plan);
- has a social worker
- is a looked after child, or has been previously looked after
- is a young carer;
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups:
- is frequently missing/goes missing from care or from home;
- is misusing drugs or alcohol themselves;
- is at risk of modern slavery, trafficking or exploitation;
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse;
- has returned home to their family from care;
- is showing early signs of abuse and/or neglect;
- is at risk of being radicalised or exploited:
- is a privately fostered child;
- has an imprisoned parent;
- is experiencing mental health, wellbeing difficulties.

At **St Mary's Catholic Primary School** we recognise that children with special educational needs or disabilities (SEND) or certain health conditions can face additional safeguarding challenges. The DSL works with the SENCo and SLT to ensure that all staff are aware that 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 condition without further exploration;
- these children being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children:
- the potential for children with SEND or certain medical conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs; and
- communication barriers and difficulties in managing or reporting these challenges

At **St Mary's Catholic Primary School** we provide extra pastoral support and attention for these children, along with ensuring any appropriate support for communication is in place, for example, additional Trauma Informed Schools approach to working to enable the child to communicate their worries or concerns; use of visual aids to support the child to communicate their worries or through play- such as sand play/ role play to communicate their worries.

10. Anti-Bullying/Cyberbullying

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

The Headteacher and the DSL consider the individual circumstances of each case of bullying, and will implement child protection procedures if appropriate.

The subject of bullying is addressed at regular intervals in PHSE/R(S)E, throughout the school curriculum, and in liturgies and assemblies.

11. Racist Incidents

Our policy on racist incidents is set out separately, and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of racist incidents and report them in line with LA and Trust protocols.

12. Radicalisation and Extremism

As part of the Counter Terrorism and Security Act 2015, schools have a duty to 'prevent people being drawn into terrorism'. This has become known as the '**Prevent Duty'**.

Where staff are concerned that children and young people are developing extremist views or show signs of becoming radicalised, they should discuss this with the Designated Safeguarding Lead.

The Designated Safeguarding Lead has received training about the Prevent Duty and tackling extremism and is able to support staff with any concerns they may have.

We use the curriculum to ensure that children and young people understand how people with extreme views share these with others, especially using the internet.

Staff should be alert to changes in children's behaviour, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead (or deputy) making a Prevent referral.

We are committed to ensuring that our pupils are offered a broad and balanced curriculum that aims to prepare them for life in modern Britain. Teaching the school's core values alongside the fundamental British Values supports quality teaching and learning, whilst making a positive contribution to the development of a fair, just and civil society.

Recognising Extremism

Early indicators of radicalisation or extremism may include:

- showing sympathy for extremist causes
- glorifying violence, especially to other faiths or cultures
- making remarks or comments about being at extremist events or rallies outside school
- evidence of possessing illegal or extremist literature
- advocating messages similar to illegal organisations or other extremist groups
- out of character changes in dress, behaviour and peer relationships (but there are also very powerful narratives, programmes and networks that young people can come across online so involvement with particular groups may not be apparent.)
- secretive behaviour
- online searches or sharing extremist messages or social profiles
- intolerance of difference, including faith, culture, gender, race or sexuality
- graffiti, art work or writing that displays extremist themes
- attempts to impose extremist views or practices on others
- verbalising anti-Western or anti-British views
- advocating violence towards others

School staff receive training to help identify early signs of radicalisation and extremism. Indicators of vulnerability to radicalisation are in detailed in Appendix 6.

Opportunities are provided in the curriculum to enable pupils to discuss issues of religion, ethnicity and culture and the school follows the DfE advice Promoting Fundamental British Values as part of SMSC (spiritual, moral, social and cultural education) in Schools (2014)¹¹.

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

When any member of staff has concerns that a pupil may be at risk of radicalisation or involvement in terrorism, they should speak with the DSL. They should then follow normal safeguarding procedures. If the matter is urgent then **Devon and Cornwall Police** must be contacted by dialling 999. In non-urgent cases where police advice is sought then dial 101. The Department of Education has also set up a dedicated telephone helpline for staff and governors to raise concerns around **Prevent (020 7340 7264).**

13. Domestic Abuse

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

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

Slapping, punching, kicking, bruising, rape, ridicule, constant criticism, threats, manipulation, sleep deprivation, social isolation, and other controlling behaviours all count as abuse.

Living in a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, wellbeing and understanding of healthy, positive relationships. Children who witness domestic abuse are at risk of significant harm and staff are alert to the signs and symptoms of a child suffering or witnessing domestic abuse (See Appendix 5).

School receives ViSTs from the Police team and via Operation Encompass email alerts

14. Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE)

Both CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity. This power imbalance could be due to age, gender, sexual identity, cognitive ability, physical strength, status, and /or access to economic or other resources. The abuse could be linked to an exchange for something the victim perceives that they need or want and/or will be to the financial benefit or other advantage (such as increase status) of the perpetrator or facilitator. The abuse can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse. It may involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence. Victims can be exploited even when the activity appears consensual and it should be noted exploitation as well as being physical can be facilitated and/or take place online. More definitions and indicators are included in Appendix 3.

Any concerns that a child is being or is at risk of being sexually or criminally exploited should be passed without delay to the DSL. **St Mary's Catholic Primary School** is aware there is a clear link between regular school absence/truanting, CSE and CCE. Staff should consider a child to be at potential CSE/CCE risk in the case of regular school absence/truanting and make reasonable enquiries with the child and

parents to assess this risk.

The DSL will refer through the MARU on all occasions when there is a concern that a child is being or is at risk of being sexually or criminally exploited, or where indicators have been observed that are consistent with a child who is being or who is at risk of being sexually or criminally exploited. The MARU referral will indicate to the DSL if further action with Multi Agency Child Exploitation is needed.

In all cases if the assessment identified any level of concern, the DSL should contact their local MACE¹³ (Missing & Child Exploitation) and email the completed MARU referral form. If a child is in immediate danger the police should be called on 999. Concerns must also be recorded on the school's CPOMs system.

St Mary's Catholic Primary School is aware that a child often is not able to recognise the coercive nature of the abuse and does not see themselves as a victim. As a consequence, the child may resent what they perceive as interference by staff. However, staff must act on their concerns as they would for any other type of abuse.

St Mary's Catholic Primary School includes the risks of sexual and criminal exploitation in the PHSE/SRE and wider school curriculum. Pupils will be informed of the grooming process and how to protect themselves from people who may potentially be intent on causing harm. They will be supported in terms of recognising and assessing risk in relation to CSE/CCE, including online, and knowing how and where to get help. Throughout our curriculum children are taught about CONSENT RESPONSIBILITY RESPECT and DIGNITY

15. Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act (2003). It is a form of child abuse and violence against women. A mandatory reporting duty requires teachers to report 'known' cases of FGM in under 18s, which are identified in the course of their professional work, to the police¹⁴.

The duty applies to all persons in **St Mary's Catholic Primary School** who are employed or engaged to carry out 'teaching work' in the school, whether or not they have qualified teacher status. The duty applies to the individual who becomes aware of the case to make a report. It should not be transferred to the Designated Safeguarding Lead, however the DSL should be informed.

If a teacher is informed by a girl under 18 that an act of FGM has been carried out on her, or a teacher observes physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth, the teacher should personally make a report to the police force in which the girl resides by calling 101. The report should be made by the close of the next working day.

The duty does not apply in relation to at risk or suspected cases

School staff are trained to be aware of risk indicators of FGM which are set out in Appendix 4. Concerns about FGM outside of the mandatory reporting duty should be reported to the DSL as a matter of urgency. Staff should be particularly alert to suspicions or concerns expressed by female pupils about going on a long holiday during the summer vacation period. There should also be consideration of potential risk to other girls in the family and practising community.

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

There are no circumstances in which a teacher or other member of staff should examine a girl.

16. Forced Marriage

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

Forced marriage is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights. Since June 2014 forcing someone to marry has been a criminal offence in England and Wales under the Anti-Social Behaviour, Crime and Policing Act 2014.

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

The Forced Marriage Unit (FMU) has created: Multi-agency practice guidelines: handling cases of forced marriage (pages 32-36 of which focus on the role of schools and colleges) and, Multi-agency statutory guidance for dealing with forced marriage, which can both be found at The right to choose: government guidance on forced marriage - GOV.UK (www.gov.uk)

Where staff are concerned that a child might be at risk of a forced marriage, they must contact the DSL as a matter of urgency.

School staff should never attempt to intervene directly as a school or through a third party. Contact should be made with MASH.

17. Honour-based Abuse

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

Honour based abuse might be committed against people who;

- become involved with a boyfriend or girlfriend from a different culture or religion;
- want to get out of an arranged marriage;
- want to get out of a forced marriage;
- wear clothes or take part in activities that might not be considered traditional within a particular culture.

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

Where staff are concerned that a child might be at risk of honour-based abuse, they must contact the DSL as a matter of urgency.

18. One Chance Rule

All staff are aware of the 'One Chance' Rule' in relation to forced marriage, FGM and HBV. Staff recognise they may only have one chance' to speak to a pupil who is a potential victim and have just one chance to save a life.

St Mary's Catholic Primary School is aware that if the victim is not offered support following disclosure that the 'One Chance' opportunity may be lost. Therefore, all staff are aware of their responsibilities and obligations when they become aware of potential forced marriage, FGM and HBV cases.

19. Mental Health

Staff will be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Whilst **St Mary's Catholic Primary School** recognises that only appropriately trained professionals can diagnose mental health problems; staff are able to make day to day observations of children and identify such behaviour that may suggest they are experiencing a mental health problem or be at risk of developing one.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken by speaking to the designated safeguarding lead or a deputy and report in a concise way on CPOMS. The Mental Health Lead will discuss concerns with parents and signpost parents to support services. This can be through CAMHS and the Primary Mental Health Team. The mental health lead may also discuss the case with the Education Mental Health Practitioner who is an established offer in the school. This can lead to further intervention from the Education Mental Health Practitioner of CAMHS.

How traumatic Adverse Childhood Experiences (ACEs), including experiences of abuse and neglect can impact on a child's mental health, behaviour and education through to adolescence and adulthood will be covered in safeguarding awareness training and updates. If staff have a mental health concern about a child that is also a safeguarding concern they will share this with the DSL or deputy. (Adverse Childhood Experiences (ACEs) encompass various forms of physical and emotional abuse, neglect and household dysfunction experienced in childhood. ACEs have been linked to premature death as well as to various health conditions, including mental health issues).

20. Private Fostering Arrangements

A private fostering arrangement is one that is made privately (without the involvement of a local authority) for the care of a child under the age of 16 years (under 18, if disabled) by someone other than a parent or close relative, in their own home, with the intention that it should last for 28 days or more.

A close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins.

Parents and private foster carers both have a legal duty to inform the relevant local authority at least six weeks before the arrangement is due to start; not to do so is a criminal offence.

Whilst most privately fostered children are appropriately supported and looked after, they are a potentially vulnerable group who should be monitored by the local authority, particularly when the child has come from another country. In some cases privately fostered children are affected by abuse and neglect, or be involved in trafficking, child sexual exploitation or modern-day slavery.

Schools have a mandatory duty to report to the local authority where they are aware or suspect that a child is subject to a private fostering arrangement. Although schools have a duty to inform the local authority, there is no duty for anyone, including the private foster carer or social workers to inform the school. However, it should be clear to the school who has parental responsibility.

School staff must notify the designated safeguarding lead when they become aware of or suspect private fostering arrangements. The designated safeguarding lead will speak to the family of the child involved to check that they are aware of their duty to inform the LA. The school itself has a duty to inform the local authority of the private fostering arrangements.

On admission to the school, we will take steps to verify the relationship of the adults to the child who is being registered.

21. Looked after children and previously looked after children

The most common reason for children becoming looked after is as a result of abuse and neglect. **St Mary's Catholic Primary School** ensures there is an appointed designated teacher for looked after

children who has the appropriate training and that staff have the necessary skills and understanding to keep looked after/previously looked after children safe. Appropriate staff have information about a child's looked after legal status and care arrangements, including the level of authority delegated to the carer by the authority looking after the child and contact arrangements with birth parents or those with parental responsibility.

The designated teacher for looked after children and the DSL have details of the child's social worker and the name and contact details of the Cornwall County Council's virtual school head for children in care.

The designated teacher for looked after children works with the virtual school head to discuss how Pupil Premium Plus funding can be best used to support the progress of looked after children in the school and meet the needs in the child's personal education plan. The designated teacher will follow the statutory guidance 'Promoting the education of looked-after and previously looked- after children..

The term Looked After Child includes children who have been adopted having previously been in overseas state care (referred to as IAPLAC) i.e a child who has been adopted having previously been in overseas state care/ in state care outside of England and ceased to be in state care as a result of being adopted. A child is regarded as having been in 'state care outside of England' if he/she was in the care of or were accommodated by a public authority, a religious organisation, or any other provider of care whose sole or main purpose is to benefit society.

22. Children Missing Education

Knowing where children are during school hours is an extremely important aspect of Safeguarding. Missing school can be an indicator of abuse and neglect and may also raise concerns about others safeguarding issues, including the criminal exploitation of children.

We monitor attendance carefully and address poor or irregular attendance without delay.

We will always follow up with parents/carers when pupils are not at school. This means we need to have a least two up to date contact numbers for parents/carers. Parents should remember to update the school as soon as possible if the numbers change.

In response to the guidance in Keeping Children Safe in Education (2024) the school has:

- 1. Staff who understand what to do when children do not attend regularly
- 2. Appropriate policies, procedures and responses for pupils who go missing from education (especially on repeat occasions).
- 3. Staff who know the signs and triggers for travelling to conflict zones, FGM and forced marriage.
- 4. Procedures to inform the local authority when we plan to take pupils off-roll when they:
- a) leave school to be home educated
- b) move away from the school's location
- c) remain medically unfit beyond compulsory school age
- d) are in custody for four months or more (and will not return to school afterwards); or
- e) are permanently excluded

We will ensure that pupils who are expected to attend the school, but fail to take up the place will be referred to the local authority.

When a pupil leaves the school, we will record the name of the pupil's new school and their expected start date.

The DSL will monitor pupil attendance, and take appropriate action including notifying the local authority particularly where children go missing on repeat occasions and/or are missing for periods during the school day, or for prolonged periods of time. The DSL will always consider the statutory guidance:

Children Missing Education - Statutory Guidance for Local Authorities

A CME referral form is completed by the school (school messenger Cornwall) and sent to the EWO service and EHE team. The school will check their School admissions system to ensure that the child is

on their school admissions system.

Staff must be alert to signs of children at risk of travelling to conflict zones, female genital mutilation and forced marriage.

Where staff are concerned about the attendance of a pupil, they should contact the DSL in the normal way.

23. Children with a Social Worker

At **St Mary's Catholic Primary School**, we recognise that when a child has a social worker, it is an indicator that the child is more at risk than most pupils.

This may mean that they are more vulnerable to further harm, as well as facing educational barriers to attendance, learning, behaviour and poor mental health.

The school's DSL will ensure that all staff are aware of children that they work with who have a social worker, and will support them in meeting their needs.

We take these needs into account when making plans to support pupils who have a social worker. Examples of Social workers working with a child can include, Looked After Child or if a child is on a Child Protection

From June 2021, the LA Virtual Headteacher has responsibility to promote the education of children who have a social worker. At St Mary's, we access the Awena Virtual School.

24. Online Safety

Our pupils increasingly use electronic equipment on a daily basis to access the internet and share content and images via social media sites such as Facebook, twitter, Instagram, Snapchat and ooVoo.

Unfortunately, some adults and other children use these technologies to harm children. The harm might range from sending hurtful or abusive texts or emails, to grooming and enticing children to engage in sexual behaviour such as webcam photography or face-to-face meetings. Pupils may also be distressed or harmed by accessing inappropriate material such as pornographic websites or those which promote extremist behaviour, criminal activity, suicide or eating disorders.

At St Mary's Catholic Primary School we manage the risk by:

- when the pupils use the school's network to access the internet they are protected from inappropriate content by our filtering and monitoring systems. However, many pupils are able to access the internet using their own devices and data plans. To minimise inappropriate use, as a school we:
- use Netsweeper through NCI Technologies technical support

St Mary's Catholic Primary School has an online safety policy which explains how we try to keep pupils safe in school and how we respond to online safety incidents.

St Mary's Catholic Primary School will also provide advice to parents when pupils are being asked to learn online at home and consider how best to safeguard both pupils and staff.

Pupils are taught about online safety throughout the curriculum and all staff receive online safety training which is regularly updated. The school online safety co-ordinator is **Alison McDonald**

At **St Mary's Catholic Primary School** pupils are taught about safeguarding, including online, through various teaching and learning opportunities, as part of providing a broad and balanced curriculum. Children are taught to recognise when they are at risk and how to get help when they need it.

Remote Teaching/ Learning is a powerful tool for supporting children's learning away from the

classroom, but brings with it increased safeguarding risks.

When planning, delivering and monitoring remote education, school staff will have due regard to the school's online safety policy and remote learning protocols.

During periods, episodes or individual activities of remote teaching all staff must remain fully cognisant of the school's Safeguarding/Child Protection policies and protocols; operate within them, and remain alert to signs of risk or potential harm to children.

At **St Mary's Catholic Primary School**, we keep pupils safe when they are accessing online learning whilst out of school by:

- sending out Wednesday updates to parents about how they can keep their child safe online
- Keeping abreast of recent crazes and themes
- NSPCC keep safe online, Internet Safety Day, Anti-Bullying week, Odd Sock Day for online safety, regular discussions for pupils about safe use of social media platforms; advice for gaming, advice about safer gaming and chat rooms etc.
- Police involvement on ways to 'keep safe online' -targeting year 5 and 6

25. Filtering and Monitoring Requirements

The importance of meeting the standard

Schools and colleges should provide a safe environment to learn and work, including when online. Filtering and monitoring are both important parts of safeguarding pupils and staff from potentially harmful and inappropriate online material.

Clear roles, responsibilities and strategies are vital for delivering and maintaining effective filtering and monitoring systems. It's important that the right people are working together and using their professional expertise to make informed decisions.

How to meet the standard

Local CAST Boards and proprietors have overall strategic responsibility for filtering and monitoring and need assurance that the standards are being met.

To do this, they should identify and assign:

 a member of the senior leadership team and a governor, to be responsible for ensuring these standards are met

Member of School SLT:Alison McDonaldLCB Member:Alison WagstaffMember of Trust SELT:Rose Colpus-FrickerBoard Director:Graham Briscoe

• the roles and responsibilities of staff and third parties, for example, external service providers

IT Service Provider: Magicka

We are aware that there may not be full-time staff for each of these roles and responsibility may lie as part of a wider role within the school, college, or trust. However, it must be clear who is responsible and it must be possible to make prompt changes to your provision.

Technical requirements to meet the standard

The school's senior leadership team are responsible for:

- procuring filtering and monitoring systems
- documenting decisions on what is blocked or allowed and why
- reviewing the effectiveness of your provision
- overseeing reports

They are also responsible for making sure that all staff:

- understand their role
- are appropriately trained
- follow policies, processes and procedures
- act on reports and concerns

Senior leaders should work closely with Governors, the Trust, the Designated Safeguarding Lead (DSL) and IT service providers in all aspects of filtering and monitoring.

Day to day management of filtering and monitoring systems requires the specialist knowledge of both safeguarding and IT staff to be effective. The DSL should work closely together with IT service providers to meet the needs of the school. School leaders may need to ask filtering or monitoring providers for system specific training and support.

The DSL should take lead responsibility for safeguarding and online safety, which could include overseeing and acting on:

- filtering and monitoring reports
- safeguarding concerns
- checks to filtering and monitoring systems

The IT service provider should have technical responsibility for:

- maintaining filtering and monitoring systems
- providing filtering and monitoring reports
- completing actions following concerns or checks to systems

The IT service provider should work with the senior leadership team and DSL to:

- procure systems
- identify risk
- carry out reviews
- carry out checks

You should review your filtering and monitoring provision at least annually

https://www.gov.uk/guidance/meeting-digital-and-technology-standards-in-schools-and-colleges/filtering-and-monitoring-standards-for-schools-and-colleges

26. Child on Child Abuse including Child on Child Sexual Violence and Sexual Harassment

The DSL, Local CAST Board and Head Teacher will take due regard to Part 5, KCSiE 2024.

In most instances, the conduct of pupils towards each other will be covered by our behaviour policy. However, some allegations may be of such a serious nature that they may raise safeguarding concerns. **St Mary's Catholic Primary School** recognises that children are capable of abusing their peers. It will not be passed off as 'banter' or 'part of growing up'. The forms of child on child abuse are outlined below.

• Domestic abuse – an incident or pattern of actual or threatened acts of physical, sexual, financial and/or emotional abuse, perpetrated by an adolescent against a current or former dating partner

- regardless of gender or sexuality.
- Child Sexual Exploitation children under the age of 18 may be sexually abused in the context of exploitative relationships, contexts and situations by peers who are also under 18.
- Harmful Sexual Behaviour Children and young people presenting with sexual behaviours that are
 outside of developmentally 'normative' parameters and harmful to themselves and others (For more
 information, please see Appendix 2).
- Upskirting which 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.
- Serious Youth Violence¹⁶ Any offence of most serious violence or weapon enabled crime, where the
 victim is aged 1-19' i.e. murder, manslaughter, rape, wounding with intent and causing grievous bodily
 harm. 'Youth violence' is defined in the same way, but also includes assault with injury offences. All
 staff will receive training so that they are aware of indicators which may signal that children are at risk
 from, or involved with serious violence and crime.

The term child on child abuse can refer to all of these definitions and a child may experience one or multiple facets of abuse at any one time. Therefore, our response will cut across these definitions and capture the complex web of their experiences.

There are also different gender issues that can be prevalent when dealing with child on child abuse (i.e. girls being sexually touched/assaulted or boys being subjected to initiation/hazing type violence).

St Mary's Catholic Primary School aims to reduce the likelihood of child on child abuse through;

- the established ethos of respect, friendship, courtesy and kindness;
- high expectations of behaviour;
- clear consequences for unacceptable behaviour;
- providing a developmentally appropriate PSHE/R(S)E and wider curriculum which develops pupils'
 understanding of healthy relationships, acceptable behaviour, consent, responsibility, respect and
 dignity, and keeping themselves safe;
- systems for any pupil to raise concerns with staff, knowing that they will be listened to, valued and believed;
- robust risk assessments and providing targeted work for pupils identified as being a potential risk to other pupils and those identified as being at risk.

At **St Mary's Catholic Primary School** we recognise that even if there are no reported cases of child on child abuse, such abuse may still be taking place and is simply not being reported. Staff must remain vigilant at all times to signs of child on child abuse.

At **St Mary's Catholic Primary School** we have a zero tolerance approach to abuse, and it must never be passed off as banter.

We recognise that it is more likely that girls will be victims and boys perpetrators, but that all child on child abuse is unacceptable and taken seriously.

Staff are trained to recognise the different forms that child on child abuse may take, such as:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying);
- abuse in intimate personal relationships between peers;
- physical abuse which can include hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence and sexual harassment.

Research indicates that young people rarely disclose child on child abuse and that if they do, it is likely to be to their friends. Therefore, **St Mary's Catholic Primary School** will also educate pupils in how to support their friends if they are concerned about them, that they should talk to a trusted adult in the school and what services they can contact for further advice.

Any concerns, disclosures or allegations of child on child abuse in any form should be referred to the DSL. Where a concern regarding child on child abuse has been disclosed to the DSL(s), advice and guidance may be sought from MARU and where it is clear a crime has been committed or there is a risk of crime being committed the police will be contacted.

Working with external agencies the school will respond to the unacceptable behaviour. If a pupil's behaviour negatively impacts on the safety and welfare of other pupils, then safeguards will be put in place to promote the well-being of the pupils affected and the victim and perpetrator will be provided with support.

- procedures to minimise the risk of child on child abuse; include having 0 tolerance for any banter or abusive behaviours towards their peers. This is non-acceptable behaviours.
- the systems in place (and they should be well promoted, easily understood and easily accessible) for children to confidently report abuse, knowing their concerns will be treated seriously; include having a trusted adult to talk to at all times, who can act upon this information.
- allegations of child on child abuse will be recorded using CPOMS, investigated and dealt with by the DSL/DDSL and any appropriate staff.
- support will be put in place to protect the victims, deal with the perpetrators and any other children affected by child on child abuse.

Child on child abuse is referenced in our school's Behaviour Policy

27. Children who are lesbian, gay, bi or trans (LGBT)

Children who are LGBT can be targeted by other children and in some cases, a child who is perceived by others to the LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT.

Risks can be compounded where children who are LGBT lack a trusted adult with whom they can be open. Therefore, **St Mary's Catholic Primary School** staff endeavour to provide a safe space for them to speak out or to share concerns with members of staff.

28. Sharing Nudes and Semi-Nudes (previously known as sexting)

In cases where nudes or semi nudes have been shared, we follow the guidance given to schools and colleges by the Council for Internet Safety (UKCIS): Sharing Nudes and Semi Nudes (December 2020)

https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people/sharing-nudes-and-semi-nudes-how-to-respond-to-an-incident-overview

https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/947546 /Sharing nudes and semi nudes how to respond to an incident Summary V2.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/100844 3/UKCIS sharing nudes and semi nudes advice for education settings. Web accessible .pdf

What is Sharing nudes and semi-nudes?

In the latest advice for schools and colleges (UKCIS, 2020), this is defined as the sending or posting of nude or semi-nude images, videos or live streams online by young people under the age of 18. This could be via social media, gaming platforms, chat apps or forums. It could also involve sharing between devices via services like Apple's AirDrop which works offline. Alternative terms used by children and young people may include 'dick pics' or 'pics'.

The motivations for taking and sharing nude and semi-nude images, videos and live streams are not always sexually or criminally motivated.

This advice does not apply to adults sharing nudes or semi-nudes of under 18-year olds. This is a form of child sexual abuse and must be referred to the police as a matter of urgency.

If an incident comes to the attention of a member of staff, he/she must inform the DSL immediately:

- Never view, copy, print, share, store or save the imagery yourself, or ask a child to share or download
 this is illegal
- If you have already viewed the imagery by accident (e.g. if a young person has showed it to you before you could ask them not to), report this to the DSL and seek support
- Do not delete the imagery or ask the young person to delete it.
- Do not ask the child/children or young person(s) who are involved in the incident to disclose information regarding the imagery. This is the responsibility of the DSL
- Do not share information about the incident with other members of staff, the young person(s) it involves or their, or other, parents and/or carers.
- Do not say or do anything to blame or shame any young people involved.
- Do explain to them that you need to report it and reassure them that they will receive support and help from the DSL (or equivalent).

The DSL should hold an initial review meeting with appropriate school staff and subsequent interviews with the children involved (if appropriate). Parents should be informed at an early stage and involved in the process unless there is reason to believe that involving parents would put the child at risk of harm. At any point in the process if there is concern a young person has been harmed or is at risk of harm a referral should be made to MARU or the Police as appropriate.

Immediate referral at the initial review stage should be made to MA/Police if;

- The incident involves an adult;
- There is good reason to believe that a young person has been coerced, blackmailed or groomed or if there are concerns about their capacity to consent (for example, owing to special education needs);
- What you know about the imagery suggests the content depicts sexual acts which are unusual or the child's development stage or are violent;
- The imagery involves sexual acts;
- The imagery involves anyone aged 12 or under;
- There is reason to believe a child is at immediate risk of harm owing to the sharing of the imagery, for example the child is presenting as suicidal or self-harming.

If none of the above apply then the DSL will use her/his professional judgement to assess the risk to pupils involved and may decide, with input from the Headteacher, to respond to the incident without escalation to MARU or the police. Such decisions will be recorded on the school's CPOMS system.

In applying judgement, the DSL will consider if;

- there is a significant age difference between the sender/receiver;
- there is any coercion or encouragement beyond the sender/receiver;

- the imagery was shared and received with the knowledge of the child in the imagery;
- the child is more vulnerable than usual i.e. at risk;
- there is a significant impact on the children involved;
- the image is of a severe or extreme nature;
- the child involved understands consent;
- the situation is isolated or if the image been more widely distributed;
- there other circumstances relating to either the sender or recipient that may add cause for concern i.e. difficult home circumstances;
- the children have been involved in incidents relating to youth produced imagery before.

If any of these circumstances are present the situation will be escalated according to our child protection procedures, including reporting to the police or MARU. Otherwise, the situation will be managed within the school.

The DSL will record all incidents of youth produced sexual imagery, including both the actions taken, actions not taken, reasons for doing so and the resolution in line with safeguarding recording procedures.

29. Allegations against staff

Allegations or concerns about an adult working in the school whether as a teacher, supply teacher, other staff, volunteers or contractors

At **St Mary's Catholic Primary School**, we recognise the possibility that adults working in the school may harm children, including governors, volunteers, supply teachers and agency staff.

Allegation Against a Member of Staff

- Follow Managing Allegations Against Staff Policy
- Inform SIO and Trust HR Manager immediately
- SIO will inform Director of Education immediately
- Director of Education will inform Diocese Safeguarding Lead Robert.Brown@prcdtr.org.uk
- A decision will be made by the Trust HR Manager and Director of Education as to whether suspension is an appropriate action.
- HT to carry out risk assessment and instigate identified control measures
- If the local authority holds a *Strategy Meeting*, when asked whether the member of staff works or volunteers in any capacity with children or young people, the HT/SIO should disclose any information that they are aware of, but state clearly that there may be other roles that he/she is not aware of.

Allegations/social service investigation re a member of staff's own child/children who are pupils of the school

- Follow Managing Allegations Against Staff Policy including notification of LADO
- Inform SIO and Trust HR Manager immediately
- SIO will inform Director of Education immediately
- Director of Education will inform Diocese Safeguarding Lead Robert.Brown@prcdtr.org.uk
- A decision will be made by the Trust HR Manager and Director of Education as to whether suspension is an appropriate action.
- SIO and Director of Education to undertake risk assessment to support management of situation
- Remove member of staff's access to CPOMs records of their own children.
- Obtain member of staff's agreement not to access CPOMs records for their own children.
- Ensure that member of staff is not involved in the management of the safeguarding case
- Consider removing email access to restrict sight of communications from LA or police.
- Consider application of staff disciplinary policy if necessary
- Ensure member of staff's children have full protection and support as per other children

Any allegations or low level concerns will be managed in line with the <u>Plymouth CAST Allegations Against</u> Staff and Low Level Concerns Policy.

30. Whistleblowing

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

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

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

Whistleblowing re the Headteacher should be made to the School Improvement Officer/Chair of the Local Governing Board whose contact details are readily available to staff.

31. Physical Intervention

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

Physical intervention must only be used in accordance with the school's Physical Intervention Policy.

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

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

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

32. Use of School for Non-School Activities

Where the school is used for non-school activities, providers are expected to meet the guidance in <u>Keeping</u> Children Safe in Out of School Settings

All contracts/Hire agreements for out-of-hours lettings etc include a statement that the organisation working with children meets the expectations in Keeping Children Safe in Out-of-schools Settings. These are checked by the Site Manager, headteacher or person with designated responsibility for out of hours non-school activities/lettings.

If the school receives allegations related to an incident that happened when an individual or organisation was using the school premises for the purposes of running activities for children, the school will follow our own safeguarding policies and procedures, including informing the LADO.

33. Confidentiality, sharing information and GDPR

All staff will understand that child protection issues warrant a high level of confidentiality, not only out of

respect for the pupil and staff involved but also to ensure that information being released into the public domain does not compromise evidence.

School staff should be proactive in appropriately 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 local authority children's social care.

Staff should only discuss concerns with the DSL, Headteacher or School Improvement Officer as appropriate. The Headteacher, in consultation with DSL, SIO and LA as necessary, will then decide who else needs to have the information, and they will disseminate it on a 'need-to-know' basis.

However, following a number of cases where senior leaders in school have failed to act upon concerns raised by staff, Keeping Children Safe in Education (2024) emphasises that any member of staff can contact children's social care if they are concerned about a child. The contact details are contained within this document.

Child protection information will be stored and handled in line with the Data Protection Act 2018 ²² and HM Government Information Sharing and Advice for practitioners providing safeguarding services to children, young people, parents and carers, July 2018.

Information will be stored securely on the school's CPOMs system, and where written records/documents are necessary, in securely locked and protected cabinets etc.

Information sharing is guided by the following principles:

- necessary and proportionate
- relevant
- adequate
- accurate
- timely
- secure

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

Documents should be retained with reference to the Trust's Data Retention Schedule.

34. This policy also links to our policies on:

- Behaviour
- Staff Behaviour Policy / Code of Conduct
- Whistleblowing
- Anti-bullying
- Health & Safety
- Allegations Against Staff and Low Level Concerns Policy
- Parental concerns
- Attendance
- Curriculum
- PSHE
- Teaching and Learning
- Administration of medicines
- Drug Education
- Sex and Relationships Education
- E-Safety, including staff use of mobile phones
- Risk Assessment

- Alternative Provision Checklist
- Recruitment and Selection
- Child Sexual Exploitation
- Intimate Care Policy
- Radicalisation and Extremism
- Data Protection/GDPR Guidance
- Physical Intervention Policy

Appendix 1

Recognising signs of child abuse and neglect

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children

Categories of Abuse:

- Physical Abuse: a form of abuse which may involve hitting, shaking, throwing, poising, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or caregiver fabricates the symptoms of, or deliberately induces, illness in a child
- Emotional Abuse (including Domestic Abuse): the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.
- Sexual Abuse (including child sexual exploitation): involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue (also known as child on child abuse) in education and all staff are made aware of it and of our school's policy and procedures for dealing with it
- Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Signs of Abuse in Children:

The following non-specific signs may indicate something is wrong:

- Significant change in behaviour
- Extreme anger or sadness

- Aggressive and attention-needing behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression and/or anxiousness
- Age inappropriate sexual behaviour
- Child Sexual Exploitation
- Criminality
- Substance abuse
- Mental health problems
- Poor attendance

Risk Indicators

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

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

The absence of such indicators does not mean that abuse or neglect has not occurred. In an

abusive relationship the child may:

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

The parent or carer may:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits
- Be involved in domestic abuse

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

Recognising Physical Abuse

The following are often regarded as indicators of concern:

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

Reluctance to give information or mention previous injuries

Bruising

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

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

Bite Marks

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

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

Burns and Scalds

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

- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures

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

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

Scars

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

Recognising Emotional Abuse

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

The following may be indicators of emotional abuse:

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

Recognising Signs of Sexual Abuse

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

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

Some behavioural indicators associated with this form of abuse are:

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

Some physical indicators associated with this form of abuse are:

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

Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

• Failure by parents or carers to meet the basic essential needs e.g. adequate food,

clothes, warmth, hygiene and medical care

- A child seen to be listless, apathetic and irresponsive with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods

Appendix 2

Sexual Abuse & Sexual Harassment

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children. Staff should be vigilant to:

- bullying (including cyberbullying)
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm
- sexual violence and sexual harassment
- sexting (also known as youth produced sexual imagery)
- initiation/hazing type violence and rituals
- upskirting

Developmental Sexual Activity

Encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour

Can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is "acting out" which may derive from other sexual situations to which the child or young person has been exposed. If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base. In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

Equality – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies

Consent – agreement including all the following:

- Understanding that is proposed based on age, maturity, development level, functioning and experience
- Knowledge of society's standards for what is being proposed
- Awareness of potential consequences and alternatives
- Assumption that agreements or disagreements will be respected equally
- Voluntary decision
- Mental competence

Coercion – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide. Further information and advice is available in the *Devon multi-agency protocol "Working with Sexually Active Young People" available at*

https://www.proceduresonline.com/swcpp/devon/p_underage_sexual_act.html or go to South West Child Protection Procedures (www.proceduresonline.com) choose Child Protection Procedures, scroll down to Safeguarding Practice Guidance.

St Mary's Catholic Primary School will always seek advice from the Multi-Agency Referral Unit to ensure that actions are clear and in line with current policy.

Appendix 3

Exploitation (including Child Sexual Exploitation, Child Criminal Exploitation and County Lines)

Child Sexual Exploitation (CSE): Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- Acquisition of money, clothes, mobile phones, etc. without plausible explanation;
- Gang-association and/or isolation from peers/social networks;
- Exclusion or unexplained absences from school, college or work;
- Leaving home/care without explanation and persistently going missing or returning late;
- Excessive receipt of texts/phone calls;
- Returning home under the influence of drugs/alcohol;
- Inappropriate sexualised behaviour for age/sexually transmitted infections;
- Evidence of/suspicions of physical or sexual assault;
- Relationships with controlling or significantly older individuals or groups;
- Multiple callers (unknown adults or peers);
- Frequenting areas known for sex work;
- Concerning use of internet or other social media;
- Increasing secretiveness around behaviours; and
- Self-harm or significant changes in emotional well-being.

Potential vulnerabilities include: (although the following vulnerabilities increase the risk of child sexual exploitation, it must be remembered that not all children with these indicators will be exploited. Child sexual exploitation can occur without any of these issues.

- Having a prior experience of neglect, physical and/or sexual abuse;
- Lack of a safe/stable home environment, now or in the past (domestic abuse or parental substance misuse, mental health issues or criminality, for example);
- Recent bereavement or loss;
- Social isolation or social difficulties;
- Absence of a safe environment to explore sexuality;
- Economic vulnerability;
- Homelessness or insecure accommodation status;
- Connections with other children and young people who are being sexually exploited;
- Family members or other connections involved in adult sex work;

- Having a physical or learning disability;
- Being in care (particularly those in residential care and those with interrupted care histories);
 and
- Sexual identity.
- More information can be found in: Child sexual exploitation: Definition and a guide for practitioners (DfE 2017)

Child Criminal Exploitation (CCE): CCE occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity

- (a) in exchange for something the victim needs or wants, and/or
- (b) for the financial or other advantage of the perpetrator or facilitator and/or
- (c) through violence or the threat of violence.

The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.

Potential vulnerabilities include:

- children who appear with unexplained gifts or new possessions;
- children who associate with other young people involved in exploitation;
- children who suffer from changes in emotional well-being;
- children who misuse drugs and alcohol;
- children who go missing for periods of time or regularly come home late; and
- children who regularly miss school or education or do not take part in education.

County Lines: County lines is a term used to describe gangs and organised criminal networks involved in the exporting of illegal drugs (primarily crack cocaine and heroin) into one or more importing areas (within the UK), using dedicated mobile phone lines or other form of 'deal line.'

Exploitation is an integral part of the county lines offending model with children and vulnerable adults being exploited to move (and store) drugs and money. The same grooming models used to coerce, intimidate, and abuse individuals for sexual and criminal exploitation are also used for grooming vulnerable individuals for county lines.

Children can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network. See KCSIE (2024) page 143.

Appendix 4

Female Genital Mutilation (FGM)

FGM: Female genital mutilation refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK. FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out-of-school to visit an 'at-risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM. Staff should not assume that FGM only happens outside the UK.

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

Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act 2003 ("the 2003 Act"). It is a form of child abuse and violence against women. FGM comprises all procedures involving partial or total removal of the external female genitalia for non-medical reasons.

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

What is FGM?

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

Type 1 Clitoridectomy – partial/total removal of clitoris

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

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

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

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Circumstances and occurrences that may point to FGM happening are:

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad

- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- difficulty walking, sitting or standing and may even look uncomfortable.
- spending longer than normal in the bathroom or toilet due to difficulties urinating.
- spending long periods of time away from a classroom during the day with bladder or menstrual problems.
- frequent urinary, menstrual or stomach problems.
- prolonged or repeated absences from school or college, especially with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return
- reluctance to undergo normal medical examinations.
- confiding in a professional without being explicit about the problem due to embarrassment or fear.
- talking about pain or discomfort between her legs

The 'One Chance' rule

As with Forced Marriage there is the 'One Chance' rule. It is essential that settings /schools/colleges take action **without delay** and make a referral to the LA social care. However, teachers MUST report 'known' cases of FGM in under 18s which they identify in the course of their professional work, directly to the police.

Appendix 5

Domestic Abuse (incl Operation Encompass)

Domestic Abuse: The Domestic Abuse Act 2021 (Part 1) defines domestic abuse as any of the following behaviours, either as a pattern of behaviour, or as a single incident, between two people over the age of 16, who are 'personally connected' to each other:

- (a) physical or sexual abuse;
- (b) violent or threatening behaviour;
- (c) controlling or coercive behaviour;
- (d) economic abuse (adverse effect of the victim to acquire, use or maintain money or other property; or obtain goods or services); and
- (e) psychological, emotional or other abuse.

People are 'personally connected' when they are, or have been married to each other or civil partners; or have agreed to marry or become civil partners. If the two people have been in an intimate relationship with each other, have shared parental responsibility for the same child, or they are relatives.

The definition of Domestic Abuse applies to children if they see or hear, or experience the effects of, the abuse; and they are related to the abusive person. (The definition can be found https://www.legislation.gov.uk/ukpga/2021/17/part/1/enacted)

Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and child/adolescent to parent violence and abuse. Anyone can be a victim of domestic abuse, regardless of sexual identity, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home.

How does it affect children?

Children can be traumatised by seeing and hearing violence and abuse. They may also be directly targeted by the abuser or take on a protective role and get caught in the middle. In the long term this can lead to serious long lasting emotional and psychological impact on children. In some cases children may blame themselves for the abuse or may have had to leave the family home as a result.

What are the signs to look out for?

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

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

Safer Futures on 0300 777 4777

If you are concerned about a child or young person in Cornwall please contact the Multi-Agency Referral Unit (MARU) on 0300 123 1116 or email multiagencyreferralunit@cornwall.gov.uk

If you are concerned about an adult (aged 16+) in Cornwall please complete the Risk Identification Checklist (Safelives DASH) to identify the level of risk which support service to refer them too, and follow the advice on the https://saferfutures.org.uk/ for all levels of risk. Also refer through https://saferfutures.org.uk/

If you are concerned about a vulnerable adult please contact Cornwall LA Safer Futures or MARU on 0300 123 1116. In an emergency, please contact the Emergency Duty Service MARU or email multiagencyreferralunit@cornwall.gov.uk.

<u>SAFE (Stop Abuse For Everyone)</u> is a charity based in Exeter providing help and support to children and families who have experienced domestic abuse and violence. Telephone 030 30 30 0112 or email hello@safe-services.org.uk (Monday to Friday, 9am – 5pm)

National Domestic Abuse Helpline Refuge runs the National Domestic Abuse Helpline, available 24hour a day 0808 2000 247 and its website offers guidance and support for potential victims.

Refuge: https://www.refuge.org.uk/

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

Appendix 6

Indicators of vulnerability to radicalisation

- 1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
- 2. Extremism is defined by the Government in the Prevent Strategy as:

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

- 3. Extremism is defined by the Crown Prosecution Service as:
 The demonstration of unacceptable behaviour by using any means or medium to express views which:
 - Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
 - Seek to provoke others to terrorist acts;
 - Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
 - Foster hatred which might lead to inter-community violence in the UK.

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

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

Indicators of vulnerability include:

- Identity Crisis the student / pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
- Personal Crisis the student / pupil may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;

- Personal Circumstances migration; local community tensions; and events affecting the student / pupil's country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
- Unmet Aspirations the student / pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;
- Experiences of Criminality which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
- Special Educational Need students / pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

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

More critical risk factors could include:

- Being in contact with extremist recruiters;
- Accessing violent extremist websites, especially those with a social networking element;
- Possessing or accessing violent extremist literature;
- Using extremist narratives and a global ideology to explain personal disadvantage;
- Justifying the use of violence to solve societal issues;
- Joining or seeking to join extremist organisations; and
- Significant changes to appearance and / or behaviour;
- Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.

The Prevent duty ensures schools and colleges have 'due regard' to the need to prevent people from being draw into terrorism.

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

The Prevent Duty can be accessed via this link.

Summary of The Prevent Duty for Schools and Childcare Providers (June 2015)

The Prevent Duty, for Further Education Institutions

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

Further information can be obtained from the Home Office website.

Appendix 7 - Resources

Further advice on child protection is available from:

NSPCC: http://www.nspcc.org.uk/

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

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

Beat Bullying: http://www.beatbullying.org/

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

Thinkuknow (includes resources for professionals and parents) https://www.thinkuknow.co.uk/

Safer Internet Centre http://www.saferinternet.org.uk/

Transgender http://www.mermaidsuk.org.uk/

Schools transgender toolkit

Intercom trust transgender guidance

For Early Help, Consultation and Enquiries please contact:

Telephone: 0300 123 1116

Email:

multiagencyreferralunit@cornwall.gov.

uk

Enquiry Form available at:

https://ciossafeguarding.org.uk/scp/p/our-policies-and-procedures/referral-forms

Post: Multi Agency Referral Unit, Together for Families 3 North, New County Hall Treyew Road Truro TR1 3AY

Emergency Duty Team out of hours 01208 251300 **Police** non-emergency 101

For all LADO enquiries Cornwall

(01872 326536) <u>LADO@Cornwall.gov.uk</u>

Early Help Team Cornwall

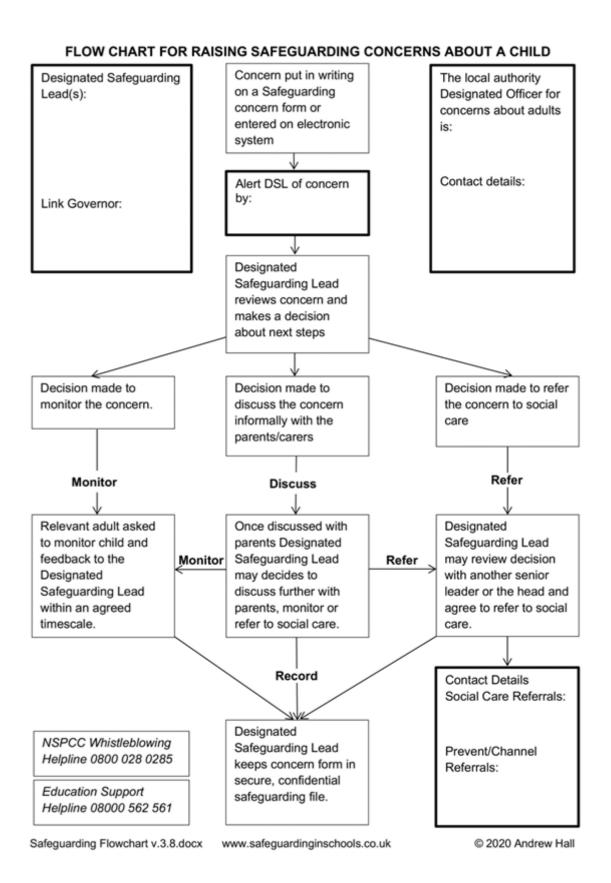
https://www.cornwall.gov.uk/health-and-social-care/childrensservices/early-help/#who

01872 326536

earlyhelphub@cornwall.gov.uk

Locality Early Help Mailbox

Appendix 9



Appendix 10 – Section 3 Statutory Framework for the Early Years Foundation Stage

Section 3 – The safeguarding and welfare requirements Introduction

- 3.1 Children learn best when they are healthy, safe, secure, when their individual needs are met, and when they have positive relationships with the adults caring for them.
- 3.2 This section of the framework sets out the safeguarding and welfare requirements providers must meet. They are designed to help providers create a high-quality, welcoming, and safe setting where children can enjoy learning and grow in confidence.
- 3.3 Providers must take all necessary steps to keep children safe and well. The requirements in this section explain what early years providers must do to:
- · Safeguard children.
- Ensure the adults who have contact with children are suitable.
- Promote good health.
- · Support and understand behaviour.
- Maintain records, policies, and procedures.

Safeguarding policies and procedures

- 3.4 In every setting, a practitioner must be designated to take lead responsibility for safeguarding children. The lead practitioner is responsible for liaison with local statutory children's services agencies, and with the LSP (Local Safeguarding Partners). All practitioners must be alert to any issues of concern in the child's life at home or elsewhere.
- 3.5 Providers must have and implement policies and procedures to keep children safe and meet EYFS requirements. Schools are not required to have separate policies to cover EYFS requirements provided the requirements are already met through an existing policy. Where providers are required to have policies and procedures as specified below, these policies and procedures should be recorded in writing. Policies and procedures should be in line with the guidance and procedures of the relevant LSP.
- 3.6 Safeguarding policies must include:
- The action to be taken when there are safeguarding concerns about a child.
- The action to be taken in the event of an allegation being made against the member of staff.
- How mobile phones, cameras and other electronic devices with imaging and sharing capabilities are used in the setting.

Providers may find it helpful to read 'Safeguarding children and protecting professionals in early years settings: online safety considerations'.

Concerns about children's safety and welfare

3.7 If providers have concerns about children's safety or welfare, they must immediately notify their local authority children's social care team, in line with local reporting procedures, and, in emergencies, the police. Providers must also take into account the government's statutory guidance 'Working Together to Safeguard Children' and 'Prevent duty guidance for England and Wales'. All schools are required to have regard9 to the government's statutory guidance 'Keeping Children Safe

in Education', and other childcare providers may also find it helpful to read this guidance.

3.8 Registered providers must inform Ofsted, or the agency with which a provider of CoDP is registered, of any allegations of serious harm or abuse by anyone living, working, or looking after children at the premises. This must happen whether the allegations of harm or abuse are alleged to have been committed on the premises or elsewhere, for example, on a visit. Registered providers must also notify Ofsted/ their agency of the action they have taken in response to the allegations. Ofsted/the agency must be notified as soon as is reasonably practicable, but in any event within 14 days of the allegations being made. A registered provider who, without a reasonable excuse, fails to do this commits an offence.

Suitable people

- 3.9 Providers must ensure that people looking after children are suitable; they must have the relevant qualifications, training and have passed any required checks to fulfil their roles. Providers must take appropriate steps to verify qualifications, including in cases where physical evidence cannot be produced. Providers must also ensure that any person who may have regular contact with children (for example, someone living or working on the same premises the early years provision is provided), is suitable.
- 3.10 Ofsted, or the agency with which a provider of CoDP is registered, is responsible for checking the suitability of:
- The provider.
- Every other person looking after children on domestic premises for whom the care is being provided.
- Every other person living or working on any domestic premises from which the childcare is being provided, including requiring enhanced criminal records checks and barred list checks.
- 3.11 Registered group and school based providers, except CoDP providers, must obtain an enhanced criminal records check for every person aged 16 and over (including for unsupervised volunteers, and supervised volunteers who provide personal care) who:
- Works directly with children.
- Lives on the premises on which the childcare is provided (unless there is no access to the part of the premises when and where children are cared for) and/or
- Works on the premises on which the childcare is provided (unless they do not work on the part of the premises where the childcare takes place, or do not work there at times when children are present).
- 3.12 An additional criminal records check (or checks if more than one country) should also be made for anyone who has lived or worked abroad.
- 3.13 Providers must tell staff that they are expected to disclose any convictions, cautions, court orders, reprimands and warnings that may affect their suitability to work with children (whether received before or during their employment at the setting). Providers must not allow anyone whose suitability has not been checked, including through a criminal records check, to have unsupervised contact with children being cared for.
- 3.14 Providers must record information about staff qualifications and the identity checks and vetting processes that have been completed (including the criminal records check reference number, the date a check was obtained and details of who obtained it).
- 3.15 Providers are required to make a referral to the Disclosure and Barring Service if a member of

staff is dismissed (or would have been, had they not left the setting first) because they have harmed a child or put a child at risk of harm.

Disqualification

- 3.16 A provider or a practitioner may be disqualified from registration. Providers may find guidance about disqualification under the Childcare Act 2006 helpful. If a provider is disqualified, they must not continue as an early years provider or be directly involved in the management of any early years provision. When a person is disqualified, providers must not employ that person in connection with early years provision.
- 3.17 A registered provider must notify Ofsted, or the agency with which a provider of CoDP is registered, of any significant event which is likely to affect the suitability of any person who is in regular contact with children on the premises where childcare is provided. The disqualification of an employee could be an example of a significant event.
- 3.18 The registered provider must give Ofsted, or the agency with which a provider of CoDP is registered, the following information about themselves or about any person who lives or is employed in the same household as the registered provider:
- Details of any order, determination, conviction, or other ground for disqualification from registration under regulations made under section 75 of the Childcare Act 2006.
- The date of the order, determination or conviction, or the date when the other ground for disqualification arose.
- The body or court which made the order, determination or conviction, and the sentence (if any) imposed.
- A certified copy of the relevant order (in relation to an order or conviction).
- 3.19 A setting's registered person must provide this information to Ofsted/the agency as soon as reasonably practicable, but, in any event within 14 days of the date the provider became aware of the information or should have reasonably become aware of it if they had made reasonable enquiries.
- 3.20 If a provider becomes aware of relevant information that may lead to an employee being disqualified, the provider must take appropriate action to ensure the safety of children.

Staff taking medication/other substances

3.21 Staff members must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If a practitioner is taking medication which may affect their ability to care for children, they should seek medical advice. Practitioners must only work directly with children if the medical advice received confirms that the medication is unlikely to impair that person's ability to look after children properly. All medication on the premises must be stored securely, and out of reach of children, at all times.

Smoking and vaping

3.22 Providers must not allow smoking in or on the premises when children are present or about to be present. Practitioners should not vape or use e-cigarettes when children are present and providers should consider Public Health England advice on their use in public places and workplaces.

Qualifications, training, support and skills

3.23 Providers must follow their legal responsibilities under the Equality Act 2010 including the fair and equal treatment of practitioners regardless of age, disability, gender reassignment, marriage and

civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

Safeguarding training

3.24 Providers must train all staff to understand their safeguarding policy and procedures and ensure that all staff have up to date knowledge of safeguarding issues. Training made available by the provider must enable staff to identify signs of possible abuse and neglect at the earliest opportunity, and to respond in a timely and appropriate way. These may include:

- Significant changes in children's behaviour.
- A decline in children's general well-being.
- Unexplained bruising, marks or signs of possible abuse or neglect.
- Concerning comments from children.
- Inappropriate behaviour from practitioners, or any other person working with the children. This could include inappropriate sexual comments; excessive one to one attention beyond what is required through their role; or inappropriate sharing of images.
- Any reasons to suspect neglect or abuse outside the setting, for example in the child's home or that a girl may have been subjected to (or is at risk of) female genital mutilation.

 Providers may find it helpful to read 'What to do if you're worried a child is being abused: Advice for practitioners'.
- 3.25 The lead practitioner must provide support, advice and guidance to any other staff on an ongoing basis, and on any specific safeguarding issue as required. The lead practitioner must attend a child protection training course18 that enables them to identify, understand and respond appropriately to signs of possible abuse and neglect (as described at paragraph 3.8).

Training and skills

3.26 What practitioners know, plan for, and do matters for children's learning, development, safety, and happiness in settings. Providers must ensure that all staff receive induction training to help them understand their roles and responsibilities. Induction training must include information about emergency evacuation procedures, safeguarding, child protection, and health and safety issues. Providers must support staff to undertake appropriate training and professional development opportunities to ensure they offer quality learning and development experiences for children that continually improves.

Supervision of staff

3.27 Providers must put appropriate arrangements in place for the supervision of staff who have contact with children and families. Effective supervision provides support, coaching, and training for the practitioner and promotes the interests of children. Supervision should foster a culture of mutual support, teamwork, and continuous improvement, which encourages the confidential discussion of sensitive issues.

3.28 Supervision should provide opportunities for staff to:

- Discuss any issues particularly concerning children's development or wellbeing, including child protection concerns.
- Identify solutions to address issues as they arise.
- Receive coaching to improve their personal effectiveness.

Paediatric First Aid

3.29 At least one person who has a current paediatric first aid (PFA) certificate must be on the premises and available at all times when children are present and must accompany children on

outings. The certificate must be for a full course consistent with the criteria set out in Annex A. PFA training19 must be renewed every three years and be relevant for people caring for young children and babies.

- 3.30 Providers should take into account the number of children, staff, and layout of premises to ensure that a paediatric first aider is able to respond to emergencies quickly.
- 3.31 All staff who obtained a level 2 and/or level 3 qualification since 30 June 2016 must obtain a PFA qualification within three months of starting work in order to be included in the required staff:child ratios at level 2 or level 3 in an early years setting. To continue to be included in the ratio requirement the certificate must be renewed every 3 years.
- 3.32 Providers should display (or make available to parents) staff PFA certificates or a list of staff who have a current PFA certificate.

English language skills

- 3.33 Providers must ensure that staff have sufficient understanding and use of English to ensure the well-being of children in their care. For example, settings must be able to:
- · Keep records in English.
- · Liaise with other agencies in English.
- Summon emergency help.
- Understand instructions. For example, about the safety of medicines or food hygiene.

Key person

3.34 Each child must be assigned a key person. Their role is to help ensure that every child's care is tailored to meet their individual needs, to help the child become familiar with the setting, offer a settled relationship for the child and build a relationship with their parents and/or carers. They should also help families engage with more specialist support if appropriate.

Staff:child ratios

- 3.35 Staffing arrangements must meet the needs of all children and ensure their safety. Providers must ensure that children are adequately supervised, including whilst eating, and decide how to use staff to ensure children's needs are met. Providers must inform parents and/or carers about how staff are organised, and, when relevant and practical, aim to involve them in these decisions.
- 3.36 Children must usually be within sight and hearing of staff and always within sight or hearing. Whilst eating, children must be within sight and hearing of a member of staff.
- 3.37 In settings on the early years register, the manager of the setting must hold an approved qualification of level 3 or above and at least half of all other staff must hold at least an approved level 2 qualification. Managers appointed on or after 1 January 2024 must have already achieved a suitable level 2 qualification in maths or must do so within two years of starting in the position. Managers are responsible for ensuring staff have the right level of maths knowledge to effectively deliver the EYFS curriculum. Managers should have at least two years' experience of working in an early years setting, or have at least two years' other suitable experience. The provider must ensure there is a named deputy who, in their judgement, is capable and qualified to take charge in the manager's absence.
- 3.38 To count within the ratios at level 3, staff holding an Early Years Educator qualification must also

have achieved a suitable level 2 qualification in English. An approved qualification is defined by the Department for Education as meeting the criteria set out in the Early Years Qualification Requirements and Standards document. Approved qualifications will be published on the Early Years Qualifications List published on GOV.UK.

3.39 The ratio requirements below apply to the total number of staff available to work directly with children. Exceptionally, and where the quality of care and safety and security of children is maintained, changes to the ratios may be made. For settings providing overnight care, the relevant ratios continue to apply and at least one member of staff must be awake at all times.

3.40 For children aged under two:

- There must be at least one member of staff for every three children.
- At least one member of staff must hold an approved level 3 qualification, and be suitably experienced in working with children under two.
- At least half of all other staff must hold an approved level 2 qualification.
- At least half of all staff must have received training that specifically addresses the care of babies.
- Where there is a room for under two-year-olds, the member of staff in charge of that room must, in the judgement of the provider, have suitable experience of working with under twos.

3.41 For children aged two:

- There must be at least one member of staff for every five children.
- At least one member of staff must hold an approved level 3 qualification.
- At least half of all other staff must hold an approved level 2 qualification.
- 3.42 For children aged three and over in registered early years provision at any time where a person with Qualified Teacher Status, Early Years Professional Status, Early Years Teacher Status, or another approved level 6 qualification is working directly with children:
- There must be at least one member of staff for every 13 children.
- At least one other member of staff must hold an approved level 3 qualification.
- 3.43 For children aged three and over in registered early years provision where a person with Qualified Teacher Status, Early Years Professional Status, Early Years Teacher Status, or another approved level 6 qualification is not working directly with children:
- There must be at least one member of staff for every eight children.
- At least one other member of staff must hold an approved level 3 qualification.
- At least half of all other staff must hold an approved level 2 qualification.
- 3.44 For children aged three and over in independent schools (including in nursery classes in free schools and academies) where a person with Qualified Teacher Status, Early Years Professional Status, Early Years Teacher Status or another approved level 6 qualification, an instructor, or another suitably qualified overseas trained teacher, is working directly with children:
- For classes where the majority of children will reach the age of five or older within the school year, there must be at least one member of staff for every 30 children.
- For all other classes there must be at least one other member of staff for every 13 children.
- At least one other member of staff must hold an approved level 3 qualification.
- 3.45 For children aged three and over in independent schools (including in nursery classes in free schools and academies) where there is no person with Qualified Teacher Status, Early Years Professional Status, Early Years Teacher Status or another approved level 6 qualification, no

instructor, and no suitably qualified overseas trained teacher, working directly with children:

- There must be at least one member of staff for every eight children.
- At least one member of staff must hold an approved level 3 qualification.
- At least half of all other staff must hold an approved level 2 qualification.
- 3.46 For children aged three and over in maintained nursery schools and nursery classes in maintained schools:
- There must be at least one member of staff for every 13 children.
- At least one member of staff must be a school teacher as defined by section 122 of the Education Act 2002.
- At least one other member of staff must hold an approved level 3 qualification.
- 3.47 Reception classes in maintained schools and academies are subject to infant class size legislation, which is limited to 30 pupils per school teacher (subject to permitted exceptions) while an ordinary teaching session is conducted. 'School teachers' do not include teaching assistants, higher level teaching assistants, or other support staff. Consequently, in an ordinary teaching session, a school must employ sufficient school teachers to enable it to teach its infant classes in groups of no more than 30 per school teacher.
- 3.48 Some schools may choose to mix their reception classes with groups of younger children (for example, nursery pupils, non-pupils, or younger children from a registered provider). In such cases they must determine ratios within mixed groups, guided by all relevant ratio requirements and by the needs of individual children within the group. In exercising this discretion, the school must comply with the statutory requirements relating to the education of children of compulsory school age and infant class sizes. Schools' partner providers must meet the relevant ratio requirements for their provision.
- 3.49 Suitable students on long term placements and volunteers (aged 17 or over) and staff working as apprentices in early education (aged 16 or over) may be included in the ratios at the level below their level of study, if the provider is satisfied that they are competent and responsible.

Before/after school care and holiday provision

3.50 Where the provision is solely before/after school care or holiday provision for children who normally attend reception class (or older) during the school day, there must be sufficient staff as for a class of 30 children. It is for providers to determine how many staff are needed to ensure the safety and welfare of children, bearing in mind the type(s) of activity and the age and needs of the children. It is also for providers to determine what qualifications, if any, the manager and/or staff should have. See details on page 6 for the learning and development requirements for providers offering care exclusively before/after school or during the school holidays.

Health

Medicines

- 3.51 Providers must promote the good health, including the oral health, of the children they look after.
- 3.52 They must have a procedure, which must be discussed with parents and/or carers, for taking appropriate action if children are ill or infectious. This procedure must also cover the necessary steps to prevent the spread of infection40.
- 3.53 Providers must have and implement a policy, and procedures, for administering medicines to children. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up to date. Staff must have training if the administration of

medicine requires medical or technical knowledge. Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse, or pharmacist (medicines containing aspirin should only be given if prescribed by a doctor).

3.54 Medicine (both prescription and non-prescription41) must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent and/or carer. Providers must keep a written record each time a medicine is administered to a child, and inform the child's parents and/or carers on the same day the medicine has been taken, or as soon as reasonably practicable.

Food and drink

3.55 Where children are provided with meals, snacks, and drinks, these must be healthy, balanced and nutritious. Before a child is admitted to the setting the provider must obtain information about any special dietary requirements, preferences, and food allergies that the child has, and any special health requirements. Fresh drinking water must always be available and accessible to children. Providers must record and act on information from parents and carers about a child's dietary needs.

Food and drink facilities

3.56 There must be an area adequately equipped to provide healthy meals, snacks and drinks for children as necessary. There must be suitable facilities for the hygienic preparation of food for children, if necessary, including suitable sterilisation equipment for babies' food. Providers must be confident that those responsible for preparing and handling food are competent to do so. All staff involved in preparing and handling food must receive training in food hygiene. Section 4 of 'Example menus for early years settings in England' includes guidance on menu planning, food safety, managing food allergies and reading food labels, which staff preparing food will find helpful in ensuring that children are kept safe.

Food poisoning

3.57 Registered providers must notify Ofsted, or the agency with which a provider of CoDP is registered, of any food poisoning affecting two or more children cared for on the premises. This must be done as soon as is reasonably practical, but, in any event, within 14 days of the incident. A registered provider who, without reasonable excuse, doesn't meet this requirement commits an offence.

Supporting and understanding children's behaviour

3.58 Providers are responsible for supporting, understanding, and managing children's behaviour in an appropriate way.

3.59 Providers must not give or threaten corporal punishment or any punishment which could negatively affect a child's well-being. Providers must take reasonable steps to ensure that corporal punishment is not given by anyone who is caring for or is in regular contact with a child, or by anyone living or working in the premises where care is provided. Any early years provider who does not meet these requirements commits an offence. A person will not be considered to have used corporal punishment (and therefore will not have committed an offence), if physical intervention was taken to avert immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if absolutely necessary.

3.60 Providers must keep a record of any occasion where physical intervention is used, and parents and/or carers must be informed on the same day, or as soon as reasonably practicable.

Special educational needs

3.61 Providers must have arrangements in place to support children with Special Education Needs and Disabilities (SEND). Maintained schools, maintained nursery schools and all providers who are funded by the local authority to deliver early education places must take into account the Special Educational Needs Code of Practice. Maintained schools and maintained nursery schools must identify a member of staff to act as Special Educational Needs Co-ordinator (SENCO) and other providers (in group provision) are expected to identify a SENCO. Providers may find it helpful to familiarise themselves with the early years section of the SEND Code of Practice.

Safety and suitability of premises, environment and equipment

Accident or injury

3.62 Providers must ensure a first aid box with appropriate items for use on children is always accessible. Providers must keep a written record of accidents or injuries and first aid treatment. Providers must inform parents and/or carers of any accident or injury sustained by the child on the same day as, or as soon as reasonably practicable after, and of any first aid treatment given.

3.63 Registered providers must notify Ofsted, or the agency with which a provider of CoDP is registered, of any serious accident, illness, or injury to, or death of, any child while in their care, and of the action taken. This must be done as soon as is reasonably practicable, but in any event, within 14 days of the incident occurring. A registered provider who, without reasonable excuse, does not meet this requirement commits an offence. Providers must notify local child protection agencies of any serious accident or injury to, or the death of, any child while in their care, and must act on any advice from those agencies.

Safety of premises

3.64 Providers must ensure that their premises, including overall floor space and outdoor spaces, are fit for purpose and suitable for the age of children cared for and the activities provided on the premises. Providers must comply with requirements of health and safety legislation, including fire safety and hygiene requirements.

3.65 Providers must take reasonable steps to ensure the safety of children, staff, and others on the premises in the case of fire or any other emergency. Providers must have:

- An emergency evacuation procedure.
- Appropriate fire detection and control equipment (for example, fire alarms, smoke detectors, fire blankets and/or fire extinguishers) which is in working order.

Fire exits must be clearly identifiable, and fire doors free of obstruction and easily opened from the inside.

Indoor space requirements

3.66 The premises and equipment must be organised in a way that meets the needs of children. Providers must meet the following indoor space requirements where indoor activity in a building(s) forms the main part of (or is integral) to the provision:

- Children under two years: 3.5m2 per child.
- Two-year-olds: 2.5m2 per child.
- Children aged three to five years: 2.3m2 per child.

3.67 Where the space standards are applied, providers cannot increase the number of children on roll because they additionally use an outside area. Forest and other exclusively (or almost exclusively) outdoor provision is not required to meet the space standards above as long as children's

needs can be met. For this kind of provision, indoor space requirements can be used as a guide for the minimum area needed.

Outdoor access

3.68 Providers must provide access to an outdoor play area. If that is not possible, they must ensure that outdoor activities are planned and taken on a daily basis (unless circumstances make this inappropriate, for example unsafe weather conditions). Providers must follow their legal responsibilities under the Equality Act 2010 (for example, the provisions on reasonable adjustments). Sleeping arrangements

3.69 Sleeping children must be frequently checked to ensure that they are safe. Being safe includes ensuring that cots and bedding are in good condition and suited to the age of the child, and that babies are placed down to sleep safely in line with the latest government safety guidance: Sudden infant death syndrome (SIDS) – NHS (www.nhs.uk). Practitioners may also find it helpful to read NHS advice on safety of sleeping children: Reduce the risk of sudden infant death syndrome (SIDS) - NHS (www.nhs.uk).

Baby room

3.70 There should be a separate baby room for children under the age of two. However, providers must ensure that children in a baby room have contact with older children and are moved into the older age group when appropriate.

Toilets and intimate hygiene

- 3.71 Providers must ensure:
- There is an adequate number of toilets and hand basins available there should usually be separate toilet facilities for adults.
- There are suitable hygienic changing facilities for changing any children who are in nappies.
- There is an adequate supply of clean bedding, towels, spare clothes, and any other necessary items.

Organising premises for confidentiality and safeguarding

3.72 Providers must ensure:

- There is an area where staff may talk to parents and/or carers confidentially.
- There is an area for staff to take breaks away from areas being used by children.
- Children are only released into the care of individuals of whom the parent has explicitly notified the provider.
- Children do not leave the premises unsupervised.
- They take all reasonable steps to prevent unauthorised persons entering the premises and have an agreed procedure for checking the identity of visitors.
- They consider what additional measures are necessary when children stay overnight.

Insurance

3.73 Providers must carry the appropriate insurance (e.g. public liability insurance) to cover all premises from which they provide childcare.

Safety on outings

3.74 Children must be kept safe while on outings. Providers must assess potential risks or hazards for the children, and must identify the steps to be taken to remove, minimise, and manage those risks and hazards. The assessment must include consideration of adult to child ratios. The risk assessment

does not necessarily need to be in writing; this is up to providers.

3.75 Vehicles transporting children, and the driver of those vehicles, must be adequately insured.

Risk assessment

3.76 Providers must ensure that they take all reasonable steps to ensure staff and children in their care are not exposed to risks and must be able to demonstrate how they are managing risks. Providers must determine where it is helpful to make some written risk assessments in relation to specific issues, to inform staff practice, and to demonstrate how they are managing risks if asked by parents and/or carers or inspectors. Risk assessments should identify aspects of the environment that need to be checked on a regular basis, when and by whom those aspects will be checked, and how the risk will be removed or minimised.

Information and record keeping

3.77 Providers must maintain records, obtain and share relevant information (with parents and carers, other professionals working with the child, the police, social services and Ofsted or their CMA, as appropriate). This is to ensure their setting is safe and efficiently managed, and the needs of all children are met. Providers must enable a regular two-way flow of information with parents and/or carers (and between other providers, if a child is attending more than one setting). If requested, providers should incorporate parents' and/or carers' comments into children's records.

3.78 Records must be easily accessible and available (these may be kept securely off the premises). Confidential information and records about staff and children must be held securely and only accessible and available to those who have a right or professional need to see them. Providers must be aware of their responsibilities under the Data Protection Legislation and, where relevant, the Freedom of Information Act 2000.

3.79 Providers must ensure that all staff understand the need to protect the privacy of the children in their care, as well the legal requirements that exist to ensure that information relating to the child is handled in a way that ensures confidentiality. Parents and/or carers must be given access to all records about their child, provided that no relevant exemptions apply to their disclosure under the Data Protection Act.

3.80 Records relating to individual children must be retained for a reasonable period of time after they have left the provision.

Information about the child

3.81 Providers must record the following information for each child in their care:

- Full name.
- Date of birth.
- Name and address of every parent and/or carer who is known to the provider.
- Information about any other person who has parental responsibility for the child.
- Which parent(s) and/or carer(s) the child normally lives with.
- Emergency contact details for parents and/or carers.

Information for parents and carers

3.82 Providers must share the following information with parents and/or carers:

• How the EYFS is being delivered in the setting, and how parents and/or carers can access more

information.

- The range and type of activities and experiences provided for children, the daily routines of the setting, and how parents and carers can share learning at home.
- How the setting supports children with special educational needs and disabilities.
- Food and drinks provided for children.
- Details of the provider's policies and procedures making copies available on request. This includes the procedure to be followed in the event of a parent and/or carer failing to collect a child at the appointed time, or in the event of a child going missing at, or away from, the setting.
- How staffing in the setting is organised.
- The name of their child's key person and their role.
- A telephone number for parents and/or carers to contact the provider in an emergency.

Complaints

- 3.83 Providers must put in place a written procedure for dealing with concerns and complaints from parents and/or carers, and must keep a written record of any complaints, and their outcome. All providers must:
- Investigate written complaints relating to how they are fulfilling the EYFS requirements.
- Notify the person who made the complaint of the outcome of the investigation within 28 days of having received the complaint.
- Make a record of complaints available to Ofsted, or the agency with which a provider of CoDP is registered, on request.
- 3.84 Providers must make available to parents and/or carers the details about how to contact Ofsted, or the agency with which a provider of CoDP is registered, if they believe the provider is not meeting the EYFS requirements.

Inspections and quality assurance visits

3.85 If providers become aware that they are to be inspected by Ofsted or have a quality assurance visit by the CMA, they must notify parents and/or carers. After an inspection by Ofsted or a quality assurance visit by their CMA, providers must supply a copy of the report to parents and/or carers of children attending on a regular basis.

Information about the provider

- 3.86 Providers must hold the following documentation:
- Name, home address and telephone number of the provider and any other person living or employed on the premises.
- Name, home address and telephone number of anyone else who will regularly be in unsupervised contact with the children attending the early years provision.
- A daily record of the names of the children being cared for on the premises, their hours of attendance and the names of each child's key person.
- Their certificate of registration (which must be displayed at the setting and shown to parents and/or carers on request).

Changes that must be notified to Ofsted

- 3.87 All registered early years providers must notify Ofsted of any change:
- In the address of the premises (and seek approval to operate from those premises where appropriate).
- To the premises which may affect the space available to children and the quality of childcare available to them.

- In the name or address of the provider, or the provider's other contact information.
- To the person who is managing the early years provision.
- Any proposal to change the hours during which childcare is to be provided which will entail the provision of overnight care.
- Any significant event which is likely to affect the suitability of the early years provider to look after children.
- Any significant event which is likely to affect the suitability of any person who cares for/is in regular contact with children on the premises.
- Where the early years provision is provided by a company, any change in the name or registered number of the company.
- Where the early years provision is provided by a charity, any change in the name or registration number of the charity.
- Where the childcare is provided by a partnership, body corporate or unincorporated association, any change to the "nominated individual".
- Where the childcare is provided by a partnership, body corporate or unincorporated association whose sole or main purpose is the provision of childcare, any change to the individuals who are partners in, or a director, secretary or other officer or members of its governing body.

3.88 Where providers are required to notify Ofsted about a change of person except for managers, as specified in paragraph 3.87 above, providers must give Ofsted the new person's name, any former names or aliases, date of birth, and home address. If there is a change of manager, providers must notify Ofsted that a new manager has been appointed. Where it is reasonably practical to do so, this must be done in advance of the change happening. In other cases, this must be made as soon as is reasonably practical but, in any event, within 14 days. A registered provider who, without reasonable excuse, fails to comply with these requirements commits an offence.

3.89 Please note that where providers of CoDP are registered with a CMA the above notifications should be given to their CMA, not Ofsted.

Other Legal Duties

3.90 The EYFS requirements sit alongside other legal obligations and do not supersede or replace any other legislation which providers must still meet. For example, where provision is taking place in maintained schools there is other legislation in place with which headteachers, teachers and other practitioners must comply with. Other duties on providers include:

- Employment laws.
- Anti-discriminatory legislation.
- · Health and safety legislation.
- Data collection regulations.
- Duty of care.