

Child Protection Policy

(Including allegations against staff)

Date to be reviewed	September 2025
Policy Status	Statutory
Responsible member	Mr S Carrington & Mrs M Newman
Governor	Mrs N Matthiae

This policy applies to all schools and stakeholders within Poppy Hill Academy Trust

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Introduction

Safeguarding is defined as protecting children from maltreatment, preventing impairment of children's health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and taking action to enable all children to have the best outcomes. (Working Together to Safeguard Children, DfE, 2018, pg.6)

This Child Protection Policy forms part of a suite of documents and policies which relate to the safeguarding responsibilities of the school.

In particular this policy should be read in conjunction with the Safer Recruitment Policy, Relationship Policy, Anti-Bullying Policy, and the Code of Conduct Policy.

	To inform staff, parents, volunteers and governors about the school's
Purpose of a Child	responsibilities for safeguarding children.
Protection Policy	To enable everyone to have a clear understanding of how these
	responsibilities should be carried out.
Central Bedfordshire	The process to report concerns about a child in Central Bedfordshire
	remains the same, and the operational activity within organisations does
Safeguarding	not change. The public and practitioners will be reminded it's everyone's
Children's	responsibility to keep children safe, and any concerns should be reported
Board (CBSCB).	to The Access and Referral Team on 0300 300 85 85 or via email
	at AccessReferral@centralbedfordshire.gov.uk
	All school and college staff have a responsibility to provide a safe
	environment in which children can learn.
	School staff and volunteers are particularly well placed to observe outward
	signs of abuse, changes in behaviour and failure to develop because they
	have daily contact with children.
School Staff &	All school staff will receive appropriate safeguarding children training
Volunteers	annually, so that they are knowledgeable and aware of their role in the
Volunteers	early recognition of the indicators of abuse or neglect and of the
	appropriate procedures to follow. In addition, all staff members should
	receive safeguarding and child protection updates (for example, via email,
	e-bulletins and staff meetings), as required, but at least annually, to
	provide them with relevant skills and knowledge to safeguard children
	effectively.

	Temporary staff and volunteers will be made aware of the safeguarding policies and procedures by the Designated Safeguarding Lead-including Child Protection Policy and Staff Behaviour policy (code of conduct).
Mission Statement	Establish and maintain an ethos and culture where children feel secure, are encouraged to talk, and are listened and responded to when they have a worry or concern. Establish and maintain an ethos and culture where school staff and volunteers feel safe, are encouraged to talk and are listened to and responded to when they have concerns about the safety and well-being of a child. Ensure children know that there are adults in the school whom they can approach if they are worried. Ensure that children, who have additional/unmet needs are supported appropriately. This could include referral to early help services or specialist services if they are a child in need or have been / are at risk of being abused and neglected. Consider how children may be taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum. Staff members working with children are advised to maintain an attitude of 'it could happen here' and 'it could be happening to this child', where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.
Implementation, Monitoring and Review of the Child Protection Policy	The policy will be reviewed at least annually by the Board of Governors. It will be implemented through the school's induction and training programme, and as part of day to day practice. Compliance with the policy will be monitored by the Designated Safeguarding Lead and through staff performance measures.

STATUTORY FRAMEWORK

In order to safeguard and promote the welfare of children, the school will act in accordance with the following legislation and guidance:

- The Children Act 1989
- The Children Act 2004
- Children and Social Work Act 2017
- Education Act 2002 (Section 175/157)

Outlines that Local Authorities and School Governing Bodies have a responsibility to "ensure that their functions relating to the conduct of school are exercised with a view to safeguarding and promoting the welfare of children who are its pupils".

- Central Bedfordshire Safeguarding Children website:
 https://www.centralbedfordshirelscb.org.uk/lscb-website/home-page
- Keeping Children Safe in Education (DfE, September 2024)
- Keeping Children Safe in Education: Part One information for all school and college staff (DfE,
 September 2024) APPENDIX 1
- Working Together to Safeguard Children (DfE 2018)
- The Education (Pupil Information) (England) Regulations 2005
- Sexual Offences Act (2003)
- Section 26, The Counter Terrorism and Security Act 2015 (PREVENT duty)
- Female Genital Mutilation Act 2003 (Section 74, Serious Crime Act 2015)
- Anti-social Behaviour, Crime and Policing Act 2014 makes it a criminal offence to force someone
 to marry. This includes taking someone overseas to force them to marry (whether or not the
 forced marriage takes place).

Keeping Children Safe in Education (DfE 2024) states that governing bodies and proprietors should ensure that the School contributes to multi-agency working in line with statutory guidance, working together to safeguard children.

Furthermore, it also states that governing bodies and proprietors of all schools and colleges should ensure that their safeguarding arrangements take into account the procedures and practice of the local authority as part of inter-agency safeguarding procedures set up by Central Bedfordshire Safeguarding Children's Board (CBSCB).

Schools are also expected to ensure that they have appropriate procedures in place for responding to situations in which:

a) a child may have been abused or neglected or is at risk of abuse or neglect.

b) a member of staff has behaved in a way that has, or may have harmed a child or that indicates

they would pose a risk of harm.

THE DESIGNATED SAFEGUARDING LEAD - DSL

The Governing Body and Headteacher should ensure that the School designates an appropriate senior

member of staff to take lead responsibility for child protection. This person should have the status

and authority within the School to carry out the duties of the post including committing resources

and, where appropriate, supporting and directing other staff.

The Designated Safeguarding Lead (DSL) in Henlow Academy is:

• Steve Carrington – Deputy Headteacher

The Deputy Safeguarding Leads in this school are:

Miss Julia Cave

Mr Gareth Baxter

Mrs Bridget Fordham

Mrs Sandie Shaw

Mrs Angela Curran

Miss Gemma Ibbotson

Mr Dominic Finn

Mrs Emily Rowlands

The Safeguarding Governor is: Mrs Naomi Matthaie

The Prevent SPOC is: Mr Steve Carrington

The Operation Encompass SPOC is: Mr Steve Carrington

The Designated Safeguarding Lead (DSL) in Meppershall Academy is:

Mrs Margaret Newman – Headteacher

The Deputy Safeguarding Lead in this school is:

Mrs Michelle Allen - Assistant Head

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The broad areas of responsibility for the Designated Safeguarding Lead are:

- Managing referrals and cases
- Refer all cases of suspected abuse or neglect to the Local Authority Children's Services (Safeguarding and Specialist Services) or Police (cases where a crime may have been committed) and to the Channel programme where there is a radicalisation concern.
- Liaise with the Headteacher to inform him/her of issues especially ongoing enquiries under Section 47 of the Children Act 1989 and police investigations.
- Act as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies.
- Support staff who make referrals.
- Share information with appropriate staff in relation to a child's looked after (CLA) legal status (whether they are looked after under voluntary arrangements with consent of parents or on an Interim Care Order or Care Order) and contact arrangements with birth parents or those with parental responsibility.
- Ensure they have details of the CLA's social worker and the name of the virtual school Head Teacher in the authority that looks after the child.

Training

The Designated Safeguarding Lead should undergo formal training every two years. The DSL should also undertake Prevent awareness training in addition to this training, their knowledge and skills should be refreshed (for example via e-bulletins, meeting other DSLs, or taking time to read and digest safeguarding developments) at least annually to:

- a) Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments.
- b) Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so.
- c) Ensure each member of staff has access to and understands the School's safeguarding and child protection policy and procedures, especially new and part time staff.
- d) Be alert to the specific needs of children in need, those with special educational needs and young carers.
- e) Understand and support the School with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation.
- f) Be able to keep detailed, accurate, secure written records of concerns and referrals.

- g) Obtain access to resources and attend any relevant or refresher training courses.
- h) Encourage a culture of listening and responding to children and taking account of their wishes and feelings, among all staff, in any measures the school may put in place to protect them.

Raising Awareness

- The designated safeguarding lead should ensure the School policies are known, understood and used appropriately.
- Ensure the School's safeguarding and child protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this.
- Ensure the safeguarding and child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the School in this.
- Link with the Central Bedfordshire Safeguarding Children's Board (CBSCB) to make sure staff are aware of training opportunities and the latest local policies on safeguarding.
- When children leave the School, ensure the file for safeguarding and any child protection information is sent to any new school/college as soon as possible but transferred separately from the main pupil file.
- Schools in the Poppy Hill Trust will obtain proof that the new school/education setting has received
 the safeguarding file for any child transferring and then destroy any information held on the child
 in line with data protection guidelines.

THE GOVERNING BODY

The Governing Body must ensure that they comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and training in their schools or colleges are effective and comply with the law at all times.

- The nominated Governor for child protection is: Mrs Naomi Matthiae
- The responsibilities placed on the Governing Body include:
- their contribution to inter-agency working, which includes providing a co-ordinated offer of early help when additional needs of children are identified.
- ensuring that an effective child protection policy is in place, together with a staff behaviour policy.

- ensuring staff are provided with Part One of Keeping Children Safe in Education (DfE 2022)
 Appendix 1 and are aware of specific safeguarding issues.
- ensuring that staff induction is in place with regards to child protection and safeguarding.
- appointing an appropriate senior member of staff to act as the Lead Designated Safeguarding Lead. It is a matter for individual schools as to whether they choose to have one or more Deputy Designated Safeguarding Lead.
- ensuring that all of the Designated Safeguarding Leads (including deputies) should undergo formal child protection training every two years (in line with Central Bedfordshire Safeguarding Children's Board (CBSCB) guidance) and receive regular (annual) safeguarding refreshers (for example via e-bulletins, meeting other DSPs, or taking time to read and digest safeguarding developments).
- prioritising the welfare of children and young people and creating a culture where staff are confident to challenge senior leaders over any safeguarding concerns.
- ensuring that children are taught about safeguarding, including online safety. Schools should consider this as part of providing a broad and balanced curriculum.
- ensuring appropriate filters and appropriate monitoring systems are in place to safeguard children from potentially harmful and inappropriate online material. Additional information to support Governors is provided in Annex C of **Keeping Children Safe in Education (DFE 2024).**
- Having a senior board level lead to take leadership responsibility for the organisation's safeguarding arrangements.

WHEN TO BE CONCERNED

If staff have any concerns about a child's welfare, they should act on them immediately. If staff have a concern, they should follow this policy and speak to the Designated Safeguarding Lead or deputy. The Designated Safeguarding Lead (and any deputies) are most likely to have a complete safeguarding picture and be the most appropriate person to advise on the response to safeguarding concerns.

Any staff member should be able to make a safeguarding referral to Children's Services if necessary by ringing 0300 300 8585 or via email AccessReferral@centralbedfordshire.gov.uk. If you urgently need help outside office hours you can contact Social Care Emergency Duty Team on 0300 300 8123

All staff should be aware of the process for making referrals to Children's Services and for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm - from abuse or neglect) that may follow a referral, along with the role they might be expected to play in such assessments.

Staff should not assume a colleague or another professional will take action and share information that might be critical in keeping children safe. They should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision.

Options will then include:

- managing any support for the child internally via the School's own pastoral support processes;
- an early help assessment; or
- a referral for statutory services, for example as the child might be in need, is in need or suffering or likely to suffer significant harm from abuse or neglect.

Contextual Safeguarding

Safeguarding incidents and/or behaviours can be associated with factors outside the School and/or can occur between children outside the School. 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.

A child centred and co-ordinated approach to safeguarding

Safeguarding and promoting the welfare of children is **everyone's responsibility**. In order to fulfil this responsibility effectively, each professional should make sure their approach is **child centred**. This means that they should consider, at all times, what is in the best interests of the child.

Schools and colleges and their staff form part of the wider safeguarding system for children. This system is based on the principle of providing help for families to stay together where it is safe for the children to do so, and looking at alternatives where it is not, whilst acting in the **best interests** of the child at all times.

Children who may require early help

The Early Help Assessment (EHA) is a standardised approach to assessing children and young people's needs and deciding how they should be met. The EHA is a key element of our strategy to deliver more effective early intervention and prevention and is a tool for the identification and initial assessment of children and young people considered to be in need of additional support.

The following documents are available to download in Word; they must be saved in a secure area.

Early Help Pre-assessment checklist

Early Help Assessment Form

Early Help Assessment Delivery Plan and Review

Early Help Consent Form

All staff should be aware of the **Early Help** process, and understand their role in identifying emerging problems, sharing information with other professionals to support early identification and assessment of a child's needs. It is important for children to receive the right help at the right time to address risks and prevent issues escalating. This also includes staff monitoring the situation and feeding back to the Designated Safeguarding Lead any ongoing/escalating concerns so that consideration can be given to a referral to Children's Services (Safeguarding and Specialist Services) if the child's situation doesn't appear to be improving.

If early help is appropriate, the designated safeguarding lead (or deputy) will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate.

Any child may benefit from early help, but all school 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);
- is a young carer;
- is showing signs of being drawn in to antisocial or criminal behaviour, including gang involvement and association with organised crime groups;
- is frequently missing/goes missing from care or from home;
- Has experienced multiple suspensions, is at risk of being permanently excluded from schools,
 colleges and in Alternative Provision or a Pupil Referral Unit
- 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.

School and college staff members should be aware of the main categories of maltreatment: **physical abuse, emotional abuse, sexual abuse and neglect**. They should also be aware of the indicators of maltreatment and **specific safeguarding issues** so that they are able to identify cases of children who may be in need of help or protection.

See **Appendix 3** for information on indicators of abuse and **Appendix 1** for specific safeguarding issues.

Children with special educational needs and disabilities:

Additional barriers can exist when recognising abuse and neglect in this group of children. This can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's impairment without further exploration;
- Assumptions that children with SEN and disabilities can be disproportionally impacted by things like bullying - without outwardly showing any signs;
- Communication barriers and difficulties;
- Reluctance to challenge carers, (professionals may over empathise with carers because of the perceived stress of caring for a disabled child);
- Disabled children often rely on a wide network of carers to meet their basic needs and therefore the potential risk of exposure to abusive behaviour can be increased;
- A disabled child's understanding of abuse;
- Lack of choice/participation;
- Isolation.

Child on Child abuse

Education settings are an important part of the inter-agency framework not only in terms of identifying, evaluating and referring concerns to Children's Services and the Police, but also in the assessment and

management of risk that the child or young person may pose to themselves and others in the education setting.

If one child or young person causes harm to another, this should not necessarily be dealt with as abuse. When considering whether behaviour is abusive, it is important to consider:

- whether there is a large difference in power (for example age, size, ability, development) between the young people concerned; or
- whether the perpetrator has repeatedly tried to harm one or more other children; or
- whether there are concerns about the intention of the alleged perpetrator.
- All staff should be aware that safeguarding issues can manifest themselves via child on child abuse. This is most likely to include, but may not be limited 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); and
- initiation/hazing type violence and rituals.

If a referral is made regarding sexual violence, sexual harassment or harmful sexual behaviour, staff at Schools in Poppy Hill Trust should follow the same process as with any other safeguarding concern. The concern should be recorded immediately after the disclosure in CPOMS, the DSL will take up the case and react in accordance with the guidance set out in KSCIE 2024.

All staff should be aware that abuse is abuse and peer on peer abuse will never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up". Furthermore, they should recognise the gendered nature of peer on peer abuse (i.e. that it is more likely that girls will be victims and boys' perpetrators), but that all peer on peer abuse is unacceptable and will be taken seriously.

Schools in the Poppy Hill Trust will use The Sexual Behaviours Traffic Light Tool by the Brook Advisory Service to help professionals; assess and respond appropriately to sexualised behaviour. The traffic light tool can be found at:

https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool

Guidance on responding to and managing sexting incidents can be found at:

http://www.thegrid.org.uk/info/welfare/child_protection/reference/index.shtml#sex

Gov.uk guidance for schools

Further guidance and support can be found in section 5 of KCSIE 2024 pages 111 - 143

Staff should recognise that children are capable of abusing their peers and should not be tolerated or passed off as "banter" or "part of growing up".

In order to minimise the risk of child on child abuse the school:

- Provides a developmentally appropriate PSHE curriculum which develops students' understanding of acceptable behaviour and keeping themselves safe.
- Have systems in place for any student to raise concerns with staff, knowing that they will be listened to, believed and valued.
- Ensure victims, perpetrators and any other child affected by peer on peer abuse will be supported.
- Develops robust risk assessments where appropriate (e.g. using the Risk Assessment Management Plan and Safety and Support Plan tools).
- Have relevant policies in place (e.g. Behaviour policy).

Where there is an allegation or concern that a child has abused others, staff should refer to Part 5 of Keeping Children Safe in Education (DfE 2024) – 'Child on child sexual violence and sexual harassment':

KCSIE 2024

DEALING WITH A DISCLOSURE

If a child discloses that he or she has been abused in some way, the member of staff/volunteer should:

- Listen to what is being said without displaying shock or disbelief.
- Accept what is being said.
- Allow the child to talk freely.
- Reassure the child, but not make promises which it might not be possible to keep.
- Never promise a child that they will not tell anyone as this may ultimately not be in the best interests of the child.
- Reassure him or her that what has happened is not his or her fault.
- Stress that it was the right thing to tell.

- Listen, only asking questions when necessary to clarify.
- Not criticise the alleged perpetrator.
- Explain what has to be done next and who has to be told.
- Make a written record (see Record Keeping).
- Pass the information to the Designated Safeguarding Lead without delay.

Support

Dealing with a disclosure from a child, and safeguarding issues can be stressful. The member of staff/volunteer should, therefore, consider seeking support for him/herself and discuss this with the Designated Safeguarding Lead.

If a School staff member receives a disclosure about potential harm caused by another staff member, they should see section 11 of this policy – *Allegations involving school staff/volunteers*.

RECORD KEEPING

All practitioners should be confident of the processing conditions under the Data Protection Act 2018 and the GDPR which allow them to store and share information for safeguarding purposes, including information which is sensitive and personal, and should be treated as 'special category personal data'.

All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing. If in doubt about recording requirements staff should discuss with the designated safeguarding lead.

When a child has made a disclosure, the member of staff/volunteer should:

- Make brief notes as soon as possible after the conversation, using CPOMS
- Not destroy the original notes in case they are needed by a court
- Record the date, time, place and any noticeable non-verbal behaviour and the words used by the child.
- Draw a diagram to indicate the position of any injuries.
- Record statements and observations rather than interpretations or assumptions.

All records must be made in CPOMS promptly. No copies should be retained by the member of staff or volunteer.

The Designated Safeguarding Lead will ensure that all safeguarding records are managed in accordance with the Education (Pupil Information) (England) Regulations 2005.

All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing. If in doubt about recording requirements staff should discuss with the designated safeguarding lead.

When children leave the School, the Designated Safeguarding Lead should ensure their child protection file is transferred to the new school or college as soon as possible, ensuring secure transit, and confirmation of receipt should be obtained. For schools, this should be transferred separately from the main pupil file. Receiving schools and colleges should ensure key staff such as Designated Safeguarding Leads and SENCOs or the named person with oversight for SEN in a college, are aware as required. If the child has an allocated social worker, they will also inform them of the change of school.

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 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.

CONFIDENTIALITY

Safeguarding children raises issues of confidentiality that must be clearly understood by all staff/volunteers in schools.

- All staff in schools, both teaching and non-teaching staff, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (Children's Services: Safeguarding and Specialist Services and the Police).
- If a child confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe. This will ultimately be in the best interests of the child.
- Staff/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

SCHOOL PROCEDURES

Please see Appendix 2: What to do if you are worried a child is being abused: flowchart.

If any member of staff is concerned about a child he or she must inform the Designated Safeguarding Lead.

The member of staff must record information regarding the concerns as soon as possible in CPOMS. The recording must be a clear, precise, factual account of the observations.

The Designated Safeguarding Lead will decide whether the concerns should be referred to Children's Services: Safeguarding and Specialist Services. If it is decided to make a referral to Children's Services: Safeguarding and Specialist Services this will be discussed with the parents, unless to do so would place the child at further risk of harm.

While it is the DSLs role to make referrals, any staff member can make a referral to Children's Services. If a child is in immediate danger or is at risk of harm (e.g. concern that a family might have plans to carry out FGM), a referral should be made to Children's Services and/or the Police immediately. Where referrals are not made by the DSL, the DSL should be informed as soon as possible.

If a **teacher** (persons employed or engaged to carry out teaching work at schools and other institutions in England), in the course of their work in the profession, discovers that an act of Female Genital Mutilation (FGM) appears to have been carried out on a girl under the age of 18 the **teacher** must report this to the police. **This is a mandatory reporting duty.** See **Appendix 1**- Keeping Children Safe in Education (DfE 2024): Annex A for further information.

Particular attention will be paid to the attendance and development of any child about whom the school has concerns, or who has been identified as being the subject of a child protection plan and a written record will be kept.

If a pupil who is/or has been the subject of a child protection plan changes school, the Designated Safeguarding Lead will inform the social worker responsible for the case and transfer the appropriate records to the Designated Safeguarding Lead at the receiving school, in a secure manner, and separate from the child's academic file.

The Designated Safeguarding Lead is responsible for making the senior leadership team aware of trends in behaviour that may affect pupil welfare. If necessary, training will be arranged.

COMMUNICATION WITH PARENTS

Schools in the Poppy Hill Trust will ensure the Child Protection Policy is available publicly via the School website.

Parents should be informed prior to referral, unless it is considered that to do so might place the child at increased risk of significant harm by:

- The behavioural response it prompts e.g. a child being subjected to abuse, maltreatment or threats/forced to remain silent if alleged abuser informed;
- Leading to an unreasonable delay;
- Leading to the risk of loss of evidential material.

(The school may also consider not informing parent(s) where this would place a member of staff at risk).

Ensure that parents have an understanding of the responsibilities placed on the school and staff for safeguarding children.

Schools in the Poppy Hill Trust will seek to hold more than one emergency contact number for their pupils and students.

Operation Encompass

At School/Service, we are working in partnership with Central Bedfordshire Council and Bedfordshire Police to identify and provide appropriate support to pupils who have experienced domestic abuse in their household; nationally this scheme is called Operation Encompass.

The system ensures that when the police are called to an incident of domestic abuse, where there are children in the household who have experienced the domestic incident, the police will inform the key adult (usually the designated safeguarding lead (or deputy) in school before the child or children arrive at school the following day.

This ensures that the school has up to date relevant information about the child's circumstances and can enable immediate support to be put in place, according to the child's needs.

Operation Encompass does not replace statutory safeguarding procedures. Where appropriate, the police and/or schools should make a referral to local authority children's social care if they are concerned about a child's welfare.

School/Service has an information sharing agreement in place with Bedfordshire Police for Operation

Encompass.

ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS

An allegation is any information which indicates that a member of staff/volunteer may have:

Behaved in a way that has, or may have harmed a child;

Possibly committed a criminal offence against/related to a child;

Behaved towards a child or children in a way which indicates s/he would pose a risk of harm if

they work regularly or closely with children.

This applies to any child the member of staff/volunteer has contact within their personal, professional

or community life.

What school staff should do if they have concerns about safeguarding practices within the school.

All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential

failures in the school or education setting's safeguarding arrangements.

Appropriate whistleblowing procedures, which are suitably reflected in staff training and staff behaviour

policies, should be in place for such concerns to be raised with the School's senior leadership team.

If staff members have concerns about another staff member then this should be referred to the Head

Teacher. The Head Teacher will determine whether the case meets the threshold for LADO involvement

or whether the case is deemed to be 'low level'.

Where there are concerns about the Head Teacher, this should be referred to the Chair of Governors.

Staff may consider discussing any concerns with the school's Designated Safeguarding Lead and make

any referral via them.

The Chair of Governors in this School is:

NAME: Jordan Robbens

CONTACT NUMBER: 01462 813 733

Email address: jrobbens@poppyhill.org.uk

In the event of allegations of abuse being made against the Head Teacher or where a staff member

feels unable to raise an issue with their employer or feels that their genuine concerns are not being

addressed, allegations should be reported directly to the Local Authority Designated Officer (LADO)

0300 300 8142. Staff may consider discussing any concerns with the Designated Safeguarding Lead,

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and if appropriate make any referral via them. (See Keeping Children Safe in Education: Part Four, (DfE 2024), for further information).

The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification; it is important not to make assumptions. Confidentiality should not be promised and the person should be advised that the concern will be shared on a 'need to know' basis only.

Actions to be taken include making an immediate written record of the allegation using the informant's words – including time, date and place where the alleged incident took place, brief details of what happened, what was said and who was present. This record should be signed, dated and immediately passed on to the Head Teacher.

The recipient of an allegation must **not** unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.

The Head Teacher/Chair of Governors will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Local Authority Designated Officer (LADO):

Children's Services - 0300 300 8585

Social Care Emergency Duty Team on 0300 300 8123 (outside office hours)

The LADO (Stephen Lagan) on 0300 300 8142 LADO@centralbedfordshire.gov.uk

If the allegation meets any of the three criteria set out at the start of this section, contact should always be made with the LADO without delay.

If it is decided that the allegation requires a child protection strategy meeting or joint evaluation meeting, this will take place in accordance with and Safeguarding Children Procedures.

If it is decided it does not require a child protection strategy meeting or joint evaluation meeting, the LADO will provide the employer with advice and support on how the allegations should be managed.

The Head Teacher should, as soon as possible, **following briefing** from the LADO, inform the subject of the allegation.

Where a staff member feels unable to raise an issue with their employer/through the whistleblowing procedure or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them:

- Children's Services 0300 123 4043.
- 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

Safer working practice

To reduce the risk of allegations, all staff should be aware of safer working practice and should be familiar with the guidance contained in the staff handbook/school code of conduct/staff behaviour policy and Safer Recruitment Consortium Document **Guidance for safer working practice for those working with children and young people in education settings (September 2015) available at http://www.thegrid.org.uk/info/welfare/child_protection/allegations/safe.shtml**

The document seeks to ensure that the responsibilities of school leaders towards children and staff are discharged by raising awareness of illegal, unsafe, unprofessional and unwise behaviour. This includes guidelines for staff on positive behaviour management in line with the ban on corporal punishment (School Standards and Framework Act 1998). Please see the Behaviour & Relationship Policy for more information.

Filtering and Monitoring

Poppy Hill Trust uses Classroom Cloud to filter the web for harmful material and searches made by students. Reports are generated and sent to the DSL who monitors instances and disseminates them to Teachers, HoY and Form Tutors. The school will seek to educate regarding the content and apply the responses outlined in the behaviour policy where there is inappropriate use of the internet or ICT systems in school.

Appendix 1: Keeping Children Safe in Education 2024

On publication of this Child Protection Policy (September 2024), the hyperlink has been inserted in this policy rather than Keeping Children Safe in Education in its entirety, due to the potential for updates to the content.

<u>All</u> staff should have access to and have read Part 1 and Annex A (which provides further information, specific forms of abuse and safeguarding issues) of this statutory guidance. They should also have the opportunity to seek clarity from designated staff for any content.

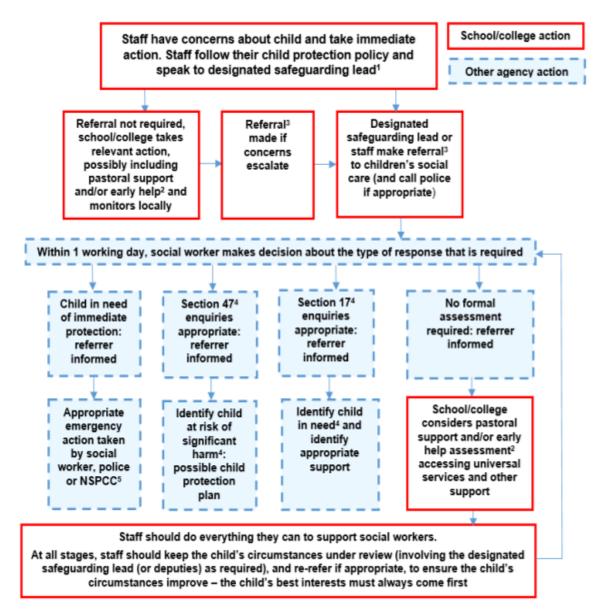
This is to assist staff to understand and discharge their role and responsibilities as set out in this guidance.

Staff must return the signed document to indicate that they have read Keeping Children Safe in Education (DFE 2024) Part one.

Link to Keeping Children Safe in Education (DfE, 2024):

KCSIE 2024

Appendix 2: What to do if you have concerns about a student



Appendix 3: Indicators of abuse and neglect

The framework for understanding children's needs:



Physical Abuse

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Chi	ild
Bruises – shape, grouping, site, repeat or	Withdrawal from physical contact
multiple	
Bite-marks – site and size	Aggression towards others, emotional and
Burns and Scalds – shape, definition, size,	behaviour problems
depth, scars	
Improbable, conflicting explanations for	Frequently absent from school
injuries or unexplained injuries	
Untreated injuries	Admission of punishment which appears
	excessive
Injuries on parts of body where accidental	Fractures
injury is unlikely	
Repeated or multiple injuries	Fabricated or induced illness -
Parent	Family/environment
Parent with injuries	History of mental health, alcohol or drug
	misuse or domestic violence.
Evasive or aggressive towards child or others	Past history in the family of childhood
	abuse, self- harm, somatising disorder or
	false allegations of physical or sexual
	assault
Explanation inconsistent with injury	Marginalised or isolated by the community.
Fear of medical help/parents not seeking	Physical or sexual assault or a culture of
medical help	physical chastisement.

Emotional Abuse

The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as over protection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

	Child
Self-harm	Over-reaction to mistakes/inappropriate emotional
	responses
Chronic running away	Abnormal or indiscriminate attachment
Drug/solvent abuse	Low self-esteem
Compulsive stealing	Extremes of passivity or aggression
Makes a disclosure	Social isolation – withdrawn, a 'loner.'
	Frozen watchfulness particularly pre-school
Developmental delay	Depression
Neurotic behaviour (e.g. rocking,	Desperate attention-seeking behaviour
hair twisting, thumb sucking)	
Parents	Family/environment
Observed to be aggressive towards child	Marginalised or isolated by the community
or others	
Intensely involved with their children,	History of mental health, alcohol or drug misuse or
	,
never allowing anyone else to undertake	domestic violence
never allowing anyone else to undertake their child's care	
,	
their child's care	domestic violence
their child's care	domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
their child's care Previous domestic violence	domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood abuse, self-harm
their child's care Previous domestic violence History of abuse or mental health	domestic violence History of unexplained death, illness or multiple
their child's care Previous domestic violence History of abuse or mental health	domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood abuse, self-harm somatising disorder or false allegations of physical or
their child's care Previous domestic violence History of abuse or mental health problems	domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood abuse, self-harm somatising disorder or false allegations of physical or sexual assault

Overly critical of the child	Lack of support from family or social network.
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Neglect

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Chi	ld
Failure to thrive - underweight, small stature	Low self-esteem
Dirty and unkempt condition	Inadequate social skills and poor
	socialisation
Inadequately clothed	Frequent lateness or non-attendance at
	school
Dry sparse hair	Abnormal voracious appetite at school or
	nursery
Untreated medical problems	Self-harming behaviour
Red/purple mottled skin, particularly on the	Constant tiredness
hands and feet, seen in the winter due to	
cold	
Swollen limbs with sores that are slow to	Disturbed peer relationships
heal, usually associated with cold injury	
Parent	Family/environment
Failure to meet the child's basic essential	Marginalised or isolated by the community
needs including health needs	
Leaving a child alone	History of mental health, alcohol or drug
	misuse or domestic violence
Failure to provide adequate caretakers	History of unexplained death, illness or
	multiple surgery in parents and/or siblings
	of the family

Keeping an unhygienic dangerous or	Past history in the family of childhood
hazardous home environment	abuse, self- harm, somatising disorder
	or false allegations of physical or sexual
	assault
Unkempt presentation	Lack of opportunities for child to play and
	learn
Unable to meet child's emotional needs	Dangerous or hazardous home
	environment including failure to use home
	safety equipment; risk from animals
Mental health, alcohol or drug difficulties	

Sexual abuse

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Sexual Violence

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

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

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

Chi	ld
Self-harm - eating disorders, self-mutilation	Poor self-image, self-harm, self-hatred
and suicide attempts	
Running away from home	Inappropriate sexualised conduct
Reluctant to undress for PE	Withdrawal, isolation or excessive worrying
Pregnancy	Sexual knowledge or behaviour inappropriate
	to age/stage of development, or that is
	unusually explicit
Inexplicable changes in behaviour, such as	Poor attention/concentration (world of their
becoming aggressive or withdrawn	own)
Pain, bleeding, bruising or itching in genital	Sudden changes in school work habits,
and/or anal area	become truant
Sexually exploited or indiscriminate choice	
of sexual partners	
Parent	Family/environment
Parent History of sexual abuse	Family/environment Marginalised or isolated by the community
	•
History of sexual abuse	Marginalised or isolated by the community
History of sexual abuse	Marginalised or isolated by the community History of mental health, alcohol or drug
History of sexual abuse Excessively interested in the child	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour towards the child or other children	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour towards the child or other children	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour towards the child or other children	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood abuse, self- harm, somatising disorder or
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour towards the child or other children	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood abuse, self- harm, somatising disorder or false allegations of physical or sexual
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour towards the child or other children Conviction for sexual offences	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood abuse, self- harm, somatising disorder or false allegations of physical or sexual assault
History of sexual abuse Excessively interested in the child Parent displays inappropriate behaviour towards the child or other children Conviction for sexual offences Comments made by the parent/carer	Marginalised or isolated by the community History of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family Past history in the care of childhood abuse, self- harm, somatising disorder or false allegations of physical or sexual assault

Appendix 4: Using CPOMS to report a concern

If you have a safeguarding concern about a child, you should log on to CPOMS immediately to report your concern to the safeguarding team.

- 1. Access the Start Menu and select CPOMS from the list.
- 2. Log into CPOMS using your individual login (consisting of your email address and the password you will have created).
- 3. Click the 'Add Incident' button
- 4. Enter the student's name into the 'Student' box
- 5. Enter your concern into the 'Incident' box. Make sure you give full details; add any additional information you feel is relevant as well as your response. Be careful to be accurate and specific as once you submit the incident, you cannot delete it.
- 6. Select a category which you feel best describes your concern. If there is an overlap you can select more than one. If none of the available categories are relevant, select 'Other'.
- 7. Ignore the 'Linked Student(s)' box. This is for DSL use only.
- 8. Amend the 'Date/time' box to record when it actually happened if you are reporting a specific incident or disclosure.
- 9. In the 'Alert Staff Members' box click on the 'Designated Safeguarding Lead' button. Do not add any other staff members' names.
- 10. Ignore the 'File(s)' and 'Agency Involved' boxes. (for DSL use only).
- 11. Finally, click the 'Add Incident' button at the bottom of the page once you have read through and are happy with what you have written.

If you are unable to access CPOMS, you should record your concern in writing on a 'Record of **Concern**' sheet, and pass it straight to one of the Designated Safeguarding Leads. Record of Concern sheets can be obtained from the staff room or the admin office.

Appendix 5

Safeguarding in specific circumstances: Children who are vulnerable to extremism

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

In accordance with the Prevent Duty placed upon the school by the Counter Terrorism and Security Act 2015 we understand the specific need to safeguard children, young people and families from violent extremism. Poppy Hill Trust is clear that this exploitation and radicalisation should be viewed as a safeguarding concern.

Poppy Hill Trust values freedom of speech and the expression of beliefs / ideology as fundamental rights underpinning our society's values. Both children and teachers have the right to speak freely and voice their opinions. However, free speech that is designed to manipulate the vulnerable or that leads to violence and harm of others goes against the moral principles in which freedom of speech is valued. Free speech is not an unqualified privilege; it is subject to laws and policies governing equality, human rights, community safety and community cohesion. Essential to this school are the fundamental British Values of Democracy, Rule of Law, Equality of Opportunity, Freedom of Speech and the rights of all women and men to live free from persecution of any kind and it would be expected that views and opinions expressed would be commensurate with these.

Definitions of radicalisation and extremism, and indicators of vulnerability to radicalisation are in Appendix Six.

Risk reduction

The school governors, the Head Teacher/Principal and the Designated Safeguarding Lead will assess the level of risk within the school and put actions in place to reduce that risk. Risk assessment may include consideration of the school's RE curriculum, SEND policy, assembly policy, the use of school premises by external agencies, integration of children by gender and SEN, anti-bullying policy and other issues specific to the school's profile, community and philosophy.

In addition, the school Prevent Action Plan template may be used to demonstrate how the organisation is fulfilling the prevent duty. Please see Appendix Thirteen. This risk assessment may be reviewed as part of the annual s175 return that is monitored by the local authority and the CBSCP.

In accordance with the Prevent Duty, Steve Carrington is the Single Point of Contact (SPoC) who will be the lead within the organisation for safeguarding in relation to protecting individuals from radicalisation and involvement in terrorism.

When any member of staff has concerns that a child may be at risk of radicalisation or involvement in terrorism, they should speak with the SPoC and to the Designated Safeguarding Lead if this is not the same person. Concerns must be recorded on the school's safeguarding referral form.

If a child or young person is thought to be at risk of radicalisation, a referral will be made using the National Prevent Referral Form which shall be sent directly to the Police. The referral form can be found here.

Initial advice may be sought from the Bedfordshire Police Channel Team.

In all cases, in accordance with advice provided from the Channel Team, the school will ensure appropriate interventions are secured which are in line with local procedures in order to safeguard children assessed as being vulnerable to radicalisation.

If the school are concerned that a child may be at risk of significant harm in relation to radicalisation or involvement in violent extremism, a child protection referral will be made to Children's Social Care.

Safeguarding Children in Specific Circumstances: Female Genital Mutilation / Forced Marriage / Modern Day Slavery

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It can be known as female circumcision or female genital cutting and is often carried out for cultural, religious and social reasons within families and communities.

FGM is illegal in the UK and it's also illegal to take a British national or permanent resident abroad for FGM or help someone trying to do this.

Female Genital Mutilation Act 2003 (section 74 of the Serious Crime Act 2015) places a statutory duty upon <u>teachers</u> (along with social workers and healthcare professionals) <u>to report to the police</u> where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. This is in addition to following the school's safeguarding reporting

procedures. A teacher means any person within the Education Act 2002 (section 141A(1)) employed or engaged to carry out teaching work at schools or other institutions.

Those failing to report such cases will face disciplinary sanctions.

If the school are concerned that a child/young person has experienced or is at risk of FGM, a Child Protection referral will be made to the Multi Agency Safeguarding Hub in accordance with interagency procedures produced by the LSCB. In addition, all teachers will follow mandatory reporting duties. Please refer to Pan Bedfordshire Practice Guidance for practitioners on Female Genital Mutilation (FGM)

(Further information regarding FGM can be found in Appendix Seven)

A forced marriage is where one or both people do not (or in cases of people with learning disabilities, cannot) consent to the marriage and pressure or abuse is used. It is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights.

The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they are bringing shame on their family). Financial abuse (taking your wages or not giving you any money) can also be a factor.

The Anti-social Behaviour, Crime and Policing Act 2014 makes it a criminal offence to force someone to marry - this includes:

- o taking someone overseas to force them to marry (whether or not the forced marriage takes place)
- o marrying someone who lacks the mental capacity to consent to the marriage (whether they're pressured to or not)
- breaching a Forced Marriage Protection Order.

Further multi-agency statutory guidance for dealing with forced marriage can be found here <u>The right</u> to choose: government guidance on forced marriage.

Modern slavery is the term used within the UK and is defined within the Modern Slavery Act 2015. The Act categorises offences of Slavery, Servitude and Forced or Compulsory Labour and Human Trafficking (the definition of which comes from the Palermo Protocol). Modern slavery crimes include holding a person in a position of slavery, servitude forced or compulsory labour, or facilitating their travel with the intention of exploiting them soon after.

Although human trafficking often involves an international cross-border element, it is also possible to be a victim of modern slavery within your own country.

Types of human trafficking

There are several broad categories of exploitation linked to human trafficking, including:

- sexual exploitation
- forced labour
- domestic servitude
- organ harvesting
- child related crimes such as child sexual exploitation, forced begging, illegal drug cultivation, organised theft, related benefit frauds etc.
- forced marriage and illegal adoption (if other constituent elements are present).

Safeguarding Children in Specific Circumstances: Child on Child abuse

All staff should be aware that safeguarding incidents and/or behaviours can be associated with factors outside the school or college and/or can occur between children outside of these environments.

All staff, but especially the Designated Safeguarding Lead (and deputies) should consider whether children are at risk of exploitation or abuse outside of their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including, but not limited to, sexual abuse, including harassment and exploitation, domestic abuse in their own intimate relationships (teenage relationship abuse), criminal exploitation, serious youth violence, county lines and radicalisation.

Poppy Hill Trust recognises that children can abuse other children and such behaviours are never viewed simply as 'banter' or as part of growing up. We recognise that child on child abuse can take many different forms such as:

- cyber-bullying
- sending or posting sexually suggestive images including nude or semi-nude photographs via mobiles or over the internet by persons aged under 18 (referred to as youth Produced Sexual Imagery)
- sexual assault
- o sexual violence or harassment
- upskirting

- o sexually harmful or problematic behaviour
- o gang initiation or hazing type violence
- harassing messages and misogynistic messages
- o the non-consensual sharing of indecent images
- o the sharing of abusive images and pornography, to those who do not want to receive such content

Upskirting is an illegal offence 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.

Poppy Hill Trust understands serious violence and what may signal that children are at risk from or are involved in serious violent crime. Indicators may include increased absences, a change in friendships/relationships with older individuals or groups, a significant decline in performance, self-harm, significant change in wellbeing or signs of assaulted/unexplained injuries. Unexplained gifts or new possessions could indicate that children have been appropriated, or are involved with, individuals associated with criminal networks or gangs.

Contextual safeguarding/extra familial risk as referenced in KCSIE (2024) highlights that '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. Children's social care assessments should consider such factors, so it is important that schools and colleges provide as much information as possible as part of the referral process'. Contextual safeguarding can also be known as 'risk outside the home' (Working Together, 2018)

Poppy Hill Trust has a thorough understanding of contextual safeguarding and will make a referral in the first instance if apparent.

Poppy Hill Trust manage the use of mobile and smart technology on the premises and reflect this in the behaviour / child protection policy.

We carry out an annual review of our approach to online safety, filtering and monitoring supported by an annual risk assessment that considers the risks to children.

'Report Abuse in Education' (NSPCC helpline) is still available. Young people and adults can contact the NSPCC helpline, Report Abuse in Education on 0800 136 663 or email help@nspcc.org.uk

Safeguarding Children in Specific Circumstances: Sexualised behaviours

Where children display sexualised behaviours, the behaviours will be considered in accordance with the children's developmental understanding, age and impact on the alleged victim. Tools such as Brook Traffic Light Tool may be used to assist in determining whether the behaviour is developmental or a cause for concern. This will assist in ensuring the child/ren receive the right support at the right time either via an Early Help response or referral to Children's Social Care.

Poppy Hill Trust follow Keeping Children Safe in Education Guidance (DfE, 2024) when responding to such issues alongside local interagency procedures and the Harmful Sexual Behaviours strategy. This includes responding to any reports in a child-centred manner and undertaking an immediate risk and needs assessment in relation to the victim, the alleged perpetrator and other children.

We will seek specialist advice, guidance and assessment and will work with partner agencies in relation to management of information and what should be shared with staff, parents and carers.

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

In all cases of child on child abuse the school will consider the vulnerability of all children including those alleged to have caused the harm and those alleged to be victims and provide a safeguarding response consistent with the Central Bedfordshire Council's Threshold Framework. Consideration will be given to violence in young people's relationships.

Where necessary, the school's Behaviour and Child on Child Abuse policy will be invoked, and any sanctions applied will be consistent with these procedures.

Where issues indicate that a criminal offence may have been committed, a report will be made to Bedfordshire Police.

Safeguarding Children in Specific Circumstances: Gang related violence (Contextual/Extra Familial Risk)

Poppy Hill Trust recognises the risks posed to children in relation to involvement in gang related activity, which may be street gangs, peer group or organised crime. Young people who are involved in gangs are more likely to suffer harm themselves, through retaliatory violence, displaced retaliation,

and territorial violence with other gangs or other harm suffered whilst committing a crime. In addition, children may experience violence as part of an initiation or hazing practice.

The school understands that Early Help can be crucial in the early identification of children who may need additional support due to gang related activity and as such will provide an Early Help response, including referral when concerns are raised about indicators of gang activity.

If, however, information suggests a child may be at risk of significant harm due to gang related activity, a referral will be made to Children's Social Care.

Where there are concerns that a child or young person may be, or is at risk of, becoming involved in gang related activity, a referral will be made to the Multi-agency Gang panel (MAGPan) in accordance with local procedures as part of the safeguarding response.

Poppy Hill Trust understands the process of completing a multi-agency information sharing form which highlights broader concerns contextually occurring outside of the child's home.

See Appendix Nine for further information on risk indicators for gang involvement.

Safeguarding Children in Specific Circumstances: Youth Generated Sexualised Imagery

Poppy Hill Trust recognises the impact of online social communication and the issue of sending or posting sexually suggestive images including nude or semi-nude photographs via mobiles or over the internet. We pay due regard to the guidance issued by the UK Council for Child Internet Safety in relation to how we respond to incidents.

In all cases where an incident of youth produced sexual imagery is reported, the following actions will be undertaken:

- o the incident should be reported to the Designated Safeguarding Lead as soon as possible
- the Designated Safeguarding Lead should hold an initial review discussion or meeting with appropriate school staff
- o there should be subsequent interviews with the young people involved (if appropriate)
- o parents should be informed at an early stage and involved in the process unless there is good reason to believe that involving parents would put the young person at risk of harm
- o at any point in the process if there is a concern a young person has been harmed or is at risk of harm a referral should be made to Children's Social Care and/or Bedfordshire Police immediately.

An immediate referral will be made to Bedfordshire Police and Social Care in the following circumstances:

- o the incident involves an adult
- o there is 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 educational needs)
- o the imagery suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent
- o the imagery involves sexual acts and any pupil in the imagery is under 13
- o there is reason to believe a young person is at immediate risk of harm owing to the sharing of the imagery, for example, the young person is presenting as suicidal or self-harming.

If none of the above applies, the school may choose to deal with the incident without involving Bedfordshire Police or Children's Social Care. This will usually be the case where the Designated Safeguarding Lead is confident that they have enough information to assess the risks to the pupils involved and the risks can be managed within the school pastoral support and disciplinary framework. All decisions and rationale for decision making will be recorded. All decisions will be based on the best interests of the child/ren.

The school will pay due regard to the Department for Education guidance: Searching, Screening and Confiscation advice.

Adults in the school will not view youth produced sexual imagery unless there is a good and clear reason to do so. Wherever possible the Designated Safeguarding Lead will respond to an incident based on what they have been told about the imagery.

All incidents will be recorded.

Safeguarding Children in specific circumstances: 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 imbalance in power or coerce, manipulate or deceive a child into sexual or criminal activity. Whilst age may be most obvious factor, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status and access to economic or

other resources. In some cases, the abuse will be in exchange for something the victim needs or wants and/or will be to the financial benefit or other advantage (such as increased status) of the perpetrator or facilitator. This 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 can involve force and/or enticement-based methods of compliance and maybe accompanied by violence or threats of violence. Victims can be exploited even when activity appears consensual, and it should be noted exploitation as well as being physical can be facilitated and/or take place online.

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 (DfE, 2024).

All staff will be aware that being absent, as well as missing, from education can be warning sign of a range of safeguarding concerns, including sexual abuse, sexual exploitation or child criminal exploitation. The school has procedures in place in managing poor school attendance and this is regularly reviewed.

Child sexual exploitation can occur through use of technology without the child's immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones with no immediate payment or gain. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

The school recognises that both boys and girls can be vulnerable to Child Sexual Exploitation and as such ensure staff are alert to signs and indicators

The school recognises that there are various 'models' of CSE which include but not limited to:

- gangs and groups
- boyfriend/girlfriend model

- child on child
- familial
- online
- abuse of authority

Where concerns are identified in relation to Child Sexual Exploitation the Central Bedfordshire Threshold Framework will be consulted in order to ensure the child receives support at the earliest possible opportunity.

An Early Help multi agency response may be initiated from the school as the lead professional by completing an Early Help Assessment.

If a child is thought to be at risk of significant harm through child sexual exploitation a referral will be made to Children's Social Care.

Advice will be sought to establish if a National Referral Mechanism is appropriate.

In all cases, intelligence will be shared with Bedfordshire Police using the multi-agency information sharing form.

Mental Health

All staff are 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.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. However, staff will observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one.

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. Staff are aware of how these experiences, can impact on children's mental health, behaviour and education.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action will be taken following the child protection policy including discussion with the Designated Safeguarding Lead or Deputy. The Designated Safeguarding Lead will liaise with the Senior Mental Health Lead, or Mental Health Support Team, where the safeguarding concern is linked to mental health.

The school will access a range of advice to help them identify children in need of extra mental health support. This includes working with external agencies as described in Promoting and Supporting mental health and wellbeing in schools and colleges

Homelessness

Poppy Hill Trust recognises that being homeless or being at risk of becoming homeless presents a real risk to a child's welfare.

The designated safeguarding lead (and any deputies) are aware of contact details and referral routes in to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity.

Poppy Hill Trust recognises that whilst in most cases school and college staff will be considering homelessness in the context of children who live with their families, it should also be recognised in some cases 16 and 17 year olds could be living independently from their parents or guardians, for example through their exclusion from the family home, and will require a different level of intervention and support. Children's services will be the lead agency for these young people and the designated safeguarding lead (or a deputy) should ensure appropriate referrals are made based on the child's circumstances.

Staff are aware of the indicators that a family may be at risk of homelessness, to include: household debt, rent arrears, domestic abuse and anti-social behaviour, as well as the family being asked to leave a property.

Referrals and/or discussion with the Local Housing Authority will be progressed as appropriate but will not replace a referral into children's social care where a child has been harmed or is at risk of harm.

The Local Authority has a legal duty to address concerns under the Homelessness Reduction Act 2017. The focus is early intervention and to encourage those at risk to seek support as soon as possible, before they are facing a homelessness crisis.

Domestic Abuse

All staff are aware of The Domestic Abuse Act 2021 which introduced the first statutory definition of domestic abuse and recognises that children can be victims of domestic abuse; they may see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate

relationships (as below). All of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

Staff will continue to develop their understanding of domestic abuse, and how all children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members.

Staff are aware exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Poppy Hill Trust recognises that domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. Domestic abuse is not limited to physical acts of violence or threatening behaviour, and can include emotional, psychological, controlling or coercive behaviour, sexual and/or economic abuse.

Staff understand that anyone can be a victim of domestic abuse, regardless of gender, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home.

Types of domestic abuse include intimate partner violence, abuse by ex-partners, family members, teenage relationship abuse and adolescent to parent violence.

Young people can also experience domestic abuse within their own intimate relationships. This form of child-on-child abuse is sometimes referred to as 'teenage relationship abuse'. Depending on the age of the young people, this may not be recognised in law under the statutory definition of 'domestic abuse' (if one or both parties are under 16). However, as with any child under 18, where there are concerns about safety or welfare, child safeguarding procedures should be followed and both young victims and young perpetrators should be offered support.

Cybercrime

Cybercrime is criminal activity committed using computers and/or the internet. It is broadly categorised as either 'cyber-enabled' (crimes that can happen off-line but are enabled at scale and at speed online) or 'cyber dependent' (crimes that can be committed only by using a computer).

Cyber-dependent crimes include;

unauthorised access to computers (illegal 'hacking'), for example accessing a school's computer network to look for test paper answers or change grades awarded; Denial of Service (Dos or DDoS) attacks or 'booting'- attempts to make a computer, network or website unavailable by overwhelming it with internet traffic from multiple sources; making, supplying or obtaining malware such as viruses, with the intent to commit further offences.

Children with a particular skill and interest in computing and technology may inadvertently or deliberately stray into cyber-dependent crime.

If there are concerns about a child in this area, the Designated Safeguarding Lead (or Deputy), should consider referring into the **Cyber Choices** programme.

Cyber Choices is a nationwide police programme supported by the Home Office and led by the National Crime Agency which aims to intervene where young people are at risk of committing, or being drawn into, low level cyber-dependent offences.

Additional advice can be found at: Cyber Choices

Children with additional needs

Poppy Hill Trust recognises that while all children have a right to be safe, some children may be more vulnerable to abuse, for example a young carer, a child frequently missing from home/care, children with disabilities or special educational needs, a child living with domestic abuse, parental mental ill health or substance abuse, or a child who has returned home to their family from care.

We recognise that additional barriers can exist when recognising abuse and neglect in children with special educational needs or disabilities, medical or physical health conditions.

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;

communication barriers and difficulties in managing or reporting these challenges

cognitive understanding – being unable to understand the difference between fact and fiction in online content and then repeating the content/behaviours in schools or colleges or the consequences of doing so

Any reports of abuse involving children with SEND will therefore require close liaison with the designated safeguarding lead (or deputy) and the SENCO or the named person with oversight for SEND.

Poppy Hill Trust will consider extra pastoral support and attention for these children, along with ensuring any appropriate support for communication is in place.

If Poppy Hill Trust is considering excluding, either fixed term or permanently, a vulnerable child and/or a child who is the subject of a child protection plan or where there is an existing child protection file, we will call a multi-agency risk-assessment meeting prior to making the decision to exclude.

Where a parent/carer has expressed their intention to remove a child from school with a view to educating at home, we work together with Local Authority and other key professionals to coordinate a meeting with parents/carers where possible. We will do this before a final decision has been made, to ensure the parents/carers have considered what is in the best interests of each child. This is particularly important where a child has SEND, is vulnerable, and/or has a social worker.

In the event of a one-off serious incident resulting in an immediate decision to exclude, the risk assessment *must* be completed prior to convening a meeting of the Governing Body.

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

Poppy Hill Trust recognises that whilst the fact that a child or a young person may be LGBT is not in itself an inherent risk factor for harm, children who are LGBT can be targeted by other children.

A child who is perceived by other children to be LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT

Poppy Hill Trust will endeavour to reduce barriers faced by children who are LGBT and will provide a LGBT champion for them to speak out or share their concerns with. This member of staff is Nic Sharp.