

Safeguarding and Child Protection Policy



RIVERSIDE BRIDGE SCHOOL
INSPIRE, EMPOWER, ACHIEVE



Partnership Learning

Approved by: Ms Leila Amri

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Key Safeguarding Personnel

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Introduction

Our policy is embedded into the general ethos of all the academies within the group forming Partnership Learning, which is to ensure that our children are treated with respect and dignity, taught to treat each other with respect, feel safe, have a voice, and are listened to.

The governors and staff of our academies fully recognise the contribution they make to safeguarding children. We recognise that all members of staff, including volunteers, have a full and active part to play in protecting our pupils from harm. All Trustees, Staff and Governors believe that our academies should provide caring, positive, safe and stimulating environments which promote the social, physical and moral development of the individual.

Partnership Learning is committed to safeguarding and promoting the welfare of children and expects all staff, governors, trustees and volunteers to share this commitment.

Safeguarding definition

Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care;
- acting to enable all children to have the best outcomes.

1. Rationale

This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2011, and in line with government publications: 'Working Together to Safeguard Children' 2023, Revised Safeguarding Statutory Guidance 2 'Framework for the Assessment of Children in Need and their Families' 2000, 'What to do if You are Worried a Child is Being Abused' 2015.

The guidance also reflects, both 'Keeping Children Safe in Education' September 2025, and Local Safeguarding Children Board Child Protection Procedures¹

The Trust takes seriously its responsibility under section 175 of the Education Act 2011 to safeguard and promote the welfare of children; and to ensure its academies work together with other agencies to ensure adequate arrangements are fully in place to identify, assess, and support those children who are suffering harm.

2. Policy Principles

The welfare of the child is paramount.

All children regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection, safeguarding and opportunities.

¹ The LSCB Child protection Procedures are available online at <https://www.londonscb.gov.uk/>

We recognise that all adults, including temporary staff², 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 believes that our school and partnership should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child. Pupils and staff involved in child protection issues will receive appropriate support.

3. Policy Aims

To demonstrate the Trust's commitment to safeguarding and child protection to pupils, parents/carers 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 staff members.

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, including the Police and Social Care.

To ensure that all staff working within our academies who have access to children have been checked as to their suitability, including verification of their identity, qualifications, and a satisfactory DBS check (according to guidance)³, and a Single Central Record (SCR) is kept and maintained for audit.

4. Values

4.1. 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 the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.

² Wherever the word "staff" is used, it covers ALL staff on site, including ancillary supply and self-employed staff, contractors, volunteers working with children etc, and governors

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.

Children are taught to understand and manage risk through our person, social, health and economic (PHSE) education and Relationship and Sex Education and through all aspects of school life. This includes online safety.

Our academies will support all children by:

- encouraging self-esteem and self-assertiveness, through the curriculum;
- promoting a caring, safe and positive environment within our setting;
- offering details of helplines, counselling or other avenues of external support;
- liaising and working together with all other support services;
- responding in a timely manner;
- making referrals and working with multi agency services where necessary.

By ensuring that all safeguarding files are kept under separate file from their school file and that they are forwarded to any new school that the child may move to either by hand delivery or by recorded mail.

4.2. Prevention / Protection

We recognise that school and staff play 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;
- include regular consultation with children e.g. participation in anti-bullying week, asking children to report where and when they see inappropriate behaviour;
- ensure that all children know there is an adult at school whom they can approach if they are worried or feel they are in difficulty or just need somebody to talk to;
- incorporate safeguarding as much as is reasonably possible in the curriculum, including PSHE, to include opportunities which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help;
- ensure all staff are aware of school guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks.

5. Safe School, Safe Staff

5.1. We will ensure that:

- all staff receive information about our schools' arrangements, safeguarding statement, staff behaviour policy (code of conduct), child protection policy, the role and names of the Designated Safeguarding Lead and the Deputies, and Keeping Children Safe in Education part 1, which all staff are expected to read;
- all staff receive safeguarding and child protection training at induction in line with current legislation and policy information. This is delivered by the schools

safeguarding team and uses legislation changes, updates and e-bulletin information;

- all members of staff are trained in and receive regular updates in online safety and reporting concerns;
- all staff and governors have regular child protection awareness training, updated by the DSL as appropriate, to maintain their understanding of the signs and indicators of abuse;
- the child protection policy is made available via the school's website or other means and that parents/carers are made aware of this policy and their entitlement to have a copy. All parents/carers are made aware of the responsibilities of staff members with regard to child protection. All parents and carers are made aware of procedures through the publication of the Child Protection Policy and reference to it in the school's handbook;
- The name of the designated members of staff for child protection, the Designated Safeguarding Lead and Deputies, are clearly displayed throughout the school building with a statement explaining the school's role in referring and monitoring cases of suspected abuse;
- All staff and Governors will be given a copy of Part 1 Keeping Children Safe in Education 2025 and will sign to say they have read and understood it. This document will be kept on file. Part 1 will also be available in hard copy in the staff room and an e-copy will be available on the school intranet.

5.2 Medication, Intimate Care and Safeguarding Oversight

Riverside Bridge School recognises that the administration of medication, provision of first aid, and completion of daily and intimate care tasks form a critical component of safeguarding for pupils with complex medical, physical, sensory, and communication needs.

Many pupils are unable to verbalise pain, discomfort, or concerns; therefore, accurate recording, oversight, and escalation of care and medical information is essential to protecting their welfare.

Medication is administered in accordance with the Administering Medication Policy and Supporting Pupils with Medical Needs Policy, and first aid is provided in line with the First Aid Policy.

Medication is administered only by trained and authorised staff. Any refusal, delay, omission, or error in medication administration is recorded and escalated in line with school procedures.

Daily care logs, medication records, first aid records, and intimate care records are not standalone documents. Staff are required to consider these collectively as part of the school's safeguarding duty.

Patterns such as repeated injuries, frequent use of PRN medication, distress during care, changes in presentation, or medical-related non-attendance must be escalated to the Designated Safeguarding Lead and recorded on the school's safeguarding system.

Oversight of medication, first aid and intimate care arrangements is maintained by senior leaders through regular audit and review, ensuring that care and safeguarding operate as a single, joined-up system.

5.3 Use of Restrictive Physical Intervention and Safeguarding

Riverside Bridge School recognises that the use of restrictive physical intervention, restraint or seclusion may constitute a safeguarding issue where practice is inappropriate, disproportionate, repeated, or results in injury or distress.

All significant incidents involving the use of force are recorded and reported in line with the Restrictive Physical Intervention Policy and statutory guidance. The Designated Safeguarding Lead will review patterns or concerns arising from restrictive intervention records and will take appropriate safeguarding action where required.

6. Safeguarding Legislation and Guidance

Education Act 2011

Section 175 of the Education Act 2011 requires local education authorities and the governors of maintained schools and further education (FE) colleges to make arrangements to ensure that their functions are carried out with a view to safeguarding and promoting the welfare of children.

Section 157 of the same act and the Education (Independent Schools Standards) (England) Regulations 2011 require proprietors of independent schools (including academies and city technology colleges) to have arrangements to safeguard and promote the welfare of children who are pupils at the school.

Counter Terrorism and Security Act 2015,

Section 26 Applies to schools and other providers;

To have due regard to the need to prevent people being drawn into terrorism.

Working Together to Safeguarding Children (2015 & 2017 & 2023 update on 'Child Sexual Exploitation') covers the legislative requirements and expectations on individual services (including schools and colleges) to safeguard and promote the welfare of Children. It also provides the framework for Local Safeguarding Children Boards (LSCB's) to monitor the effectiveness of local services, including safeguarding arrangements in schools.

<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

Keeping Children Safe in Education (2025) is issued under Section 175 of the Education Act 2011, the Education (Independent School Standards) (England) Regulations 2014 and the Education (non-maintained Special Schools) (England) Regulations 2011. Schools and colleges must have regard to this guidance when carrying out their duties to safeguard and promote the welfare of children. Unless otherwise stated, 'school' in this guidance means all schools, whether maintained, non-maintained or independent, including academies and free schools, alternative provision academies, pupil referral units and maintained nursery schools.

College means further education and sixth form colleges under the further and higher education act 1992 and relates to under 18's, but excludes 16-19 academies and free schools.

<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

***All staff should read Part One of this guidance and staff are provided with a copy of this on their safeguard training and is saved on the shared area.*

Prevent Duty Guidance – England and Wales

Covers the duty of schools and other providers in section 29 Counter Terrorism and Security Act 2015, to have due regard to the need to prevent people being drawn into terrorism.

<https://www.gov.uk/government/publications/prevent-duty-guidance>

https://www.lbbd.gov.uk/sites/default/files/2022-07/PreventTemplate_A4_32pp_D2.pdf

***ALL staff have undertaken the **PREVENT** training, this forms part of the staff induction programme.*

Teaching Standards

The Teacher Standards 2021 state that teachers, including head teachers should safeguard children's wellbeing and maintain public trust in the teaching profession as part of their professional duties.

Disqualification under the Childcare Act 2006 For establishments with children under 8 years old All staff must complete a 'Disqualification by Association' form upon appointment. Further information as below.

<https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006/disqualification-under-the-childcare-act-2006>

7. Roles and Responsibilities

7.1 All members of The Governing Body understand and fulfil their responsibilities, namely, to ensure that:

- there is a Child Protection and Safeguarding policy together with a staff behaviour policy (code of conduct);
- child protection, safeguarding, recruitment and managing allegations policies and procedures, including the staff behaviour policy (code of conduct), are consistent with Barking & Dagenham Safeguarding and statutory requirements, are reviewed annually and that the Child Protection policy is publicly available on the school's website or by other means;
- all staff including temporary staff and volunteers are provided with the school's child protection policy and staff behaviour policy;
- all staff have read Keeping Children Safe in Education (2025) part 1 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 by association regulations and by ensuring that there is at least one person on every recruitment panel who has completed safer recruitment training. Additional information will be gathered on online pre-recruitment checks for shortlisted candidates;
- the school has procedures for dealing with allegations of abuse against staff (including the Headteacher), 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;

- a member of the Governing Body, usually the Chair or the CEO of the Trust will be nominated to 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) by the Governing Body 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 DSLs must undertake interagency (or equivalent) training and update/refresh it every two years (or when the training states);
- all other staff have safeguarding training updated annually;
- at least one member of the governing body has completed safer recruitment training to be repeated every three years;
- children are taught about safeguarding (including online safety) as part of a broad and balanced curriculum covering relevant issues through personal social health and economic education (PSHE) and through relationship sex education (RSE);
- appropriate safeguarding responses are in place for children who go missing from education, particularly on repeat occasions, 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;
- appropriate online filtering and monitoring systems are in place;
- enhanced DBS checks (without barred list checks, unless the governor is also a volunteer at the school are in place for all Governors;
- any weaknesses in Child Protection are remedied immediately.

7.2. The Headteacher will ensure that:

- the Child Protection and Safeguarding Policy and procedures are implemented and followed by all staff;
- 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 considered 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 DSL 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 or volunteer;
- anyone who has harmed or may pose a risk to a child/s referred to the Disclosure and Barring Service.

- at least one member of SLT has completed safer recruitment training to be repeated every three years;
- additional information will be gathered on online pre-recruitment checks for shortlisted candidates.

7.3. The Designated Safeguarding Lead:

- is a member of the Senior Leadership Team;
- holds ultimate responsibility for safeguarding and child protection in the school;
- acts as a source of support and expertise in carrying out safeguarding duties for the whole school community;
- encourages a culture of listening to children and taking account of their wishes and feelings;
- is trained within Designated Safeguarding Lead and will refresh their knowledge and skills at regular intervals in line with their certification;
- will refer a child if there are concerns about possible abuse using the procedures set out by the host authority. Referrals should be made in writing, following a telephone call using the Multi Agency Referral Form (MARF);
- will keep detailed, accurate records, either written or using appropriate online software, of all concerns about a child even if there is no need to make an immediate referral;
- 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 when a pupil leaves the school, their child protection file is passed to the new school (separately from the main pupil file and ensuring secure transit) and that confirmation of receipt is obtained;
- will ensure that a copy of the CP file is retained until such a time that the new school acknowledges receipt of the original file. The copy should then be shredded;
- will liaise with the Local Authority and work with other agencies and professionals in line with Working Together to Safeguard Children;
- has a working knowledge of the local authority 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 two days is referred to their key worker's Social Care Team;
- will ensure that all staff sign to say they have read, understood and agree to work within the school's child protection policy, staff behaviour policy (code of conduct) and Keeping Children Safe in Education Part 1 (2025) 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;
- understands locally agreed processes for providing early help and intervention and will support members of staff where Early Help is appropriate;
- use filtering and monitoring systems to protect children when they use the school's network to access the internet. These systems are regularly evaluated by the DSL.

7.4. The Deputy Designated Safeguarding Lead(s)

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

7.5. Riverside Bridge Staff Riverside Bridge permanent staff (that includes teachers, co-educators, therapists, and support staff employed directly by the school) will:

- 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;
- act in the best interests of the child at all times;
- know how to respond to a pupil who discloses abuse through delivery of 'Working together to Safeguard Children' (2023), and 'What to do if you suspect a Child is being Abused' (2015); 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 Children's Social Care;
- be aware of the Early Help³ 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;
- refer any safeguarding or child protection concerns to the DSL or if necessary, where the child is at immediate risk to the police or Children's Social Care; staff will utilise our online system, 'Sleuth' to ensure necessary reports have been logged promptly.
- ensure they attend training and complete online training as directed by the DSL and DDSLs;
- contribute to a safe environment in which pupils can learn and thrive.

7.6 Agency and Temporary Staff:

³ Detailed information on early help can be found in Chapter 1 of [Working together to safeguard children](#)

- understand that safeguarding is everyone's responsibility and act immediately on any concern, disclosure, injury, or unsafe practice;
- follow the school's Safeguarding and Child Protection Policy, Code of Conduct, Behaviour Policy, and Restrictive Physical Intervention procedures at all times;
- work under the direction of permanent staff and within the limits of authority set by the school, particularly when working on a daily or short-term basis;
- access and acknowledge pupil-specific safeguarding and risk information before working with pupils, including reading and following Class Information Pack;
- escalate all concerns immediately to a permanent member of staff or the Designated Safeguarding Lead and ensure concerns are recorded on the school's safeguarding system the same day;
- not work independently with pupils, initiate physical intervention, remove pupils from learning spaces, or apply sanctions unless explicitly directed by a permanent member of staff;
- cooperate fully with safeguarding supervision, monitoring, and feedback processes and understand that failure to follow safeguarding arrangements may result in immediate removal from placement.

All adults working within Riverside Bridge School, whether permanent, agency, or temporary, hold equal responsibility for safeguarding and promoting the welfare of children.

8. Confidentiality

The 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 Keeping Children Safe in Education (2025) 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 2018 is not a barrier to sharing information where the failure to do so would place a child at risk of harm.

Records relating to the use of restrictive physical intervention, restraint or seclusion are considered alongside other safeguarding records to identify emerging patterns, increased risk, or unmet need, and are reviewed by the safeguarding team where appropriate through Sleuth.

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

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 Social Care 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, the DSL will seek advice from the Duty Team or the LADO within the local authority.

9. 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). They may be abused by an adult or adults or by another child or children.

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 Appendix 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; Information for the following can be found in Appendix 3.

- *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*
- *Gender/honour-based violence*
- *Violence against women and girls (VAWG)*
- *Honour based violence*
- *Mental health*
- *Private fostering*
- *Radicalisation*
- *Youth produced sexual imagery (sexting)*
- *ASISM*
- *Teenage relationship abuse*
- *Trafficking*

Staff are aware that behaviours linked to drug taking, alcohol abuse, truancy and sexting put children in danger and that safeguarding issues can manifest themselves via child-on-child abuse. Appendix 4.

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.

9.1 If staff are concerned about a child's welfare⁴

If staff notice any indicators of abuse/neglect or signs that a child may be experiencing a safeguarding issue they should record these concerns using the online platform. They may also discuss their concerns in person with the DSL but the details of the concern **must** always be recorded.

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

The 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.

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

If the pupil discloses that they have been harmed the member of staff must report this immediately to the DSL.

9.2 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.

Staff have been provided with training on how to handle disclosures including, how to respond, report and react.

During their conversation with the pupil staff will:

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

⁴ It is important to highlight that the needs of our learners may inhibit their ability to communicate verbally and they are often unable to disclose any forms of abuse. The school therefore relies on the high vigilance of staff to monitor and highlight any changes.

- not automatically offer any physical touch as comfort. It may be anything but comforting to a child who is being abused;
- avoid admonishing the child for not disclosing sooner. Saying things such as 'I do wish you had told me about it when it started' may be the staff member's way of being supportive but may be interpreted by the child to mean they have done something wrong;
- tell the child what will happen next;
- 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. Staff should make this a priority. The record should be signed and dated, the member of staff's name should be clearly printed and it should also detail where the disclosure was made and who else was present. The concern should be acknowledged by the DSL/DDSL.

9.3 Notifying Parents

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

However, if the school believes that notifying parents/carers could increase the risk to the child or exacerbate the problem, advice will first be sought from children's social care (MASH team).

Where there are concerns about forced marriage or honour-based violence parents/carers should not be informed a referral is being made as to do so may place the child at a significantly increased risk.

10. Making a referral

An online referral via Sleuth (the equivalent of a Child Protection Record of Concern) should be completed when there is concern raised or suspected about the child outside of school. Staff must also ensure the DSL team have been made aware of the concern. Concerns about a child or a disclosure should be discussed with the DSL who will help decide whether a referral to children's social care, early help or other support is appropriate in accordance with the Local Boroughs Level of Need document.

Safeguarding concerns relating to pupils must be recorded on the Sleuth system while concerns or allegations relating to the conduct of a member of staff or adult working in the school are recorded using the school's Pink Form and escalated in line with the Allegations Against Staff procedures.

If a referral is needed, then the DSL or in their absence the DDSL should make it. 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/carers 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 reconsideration to ensure their concerns have been addressed, and most importantly the child's situation improves.

If a child is in immediate danger or is at risk of harm a referral should be made to children's social care 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.

10.1 MASH referrals

Where a sleuth report has been made and there is further concern, the safeguarding team will call the MASH team for advice. The MASH team will advise whether school have actions to follow or if a MARF referral should be submitted.

MARF referrals could result in families being given support on a plan. This will be decided using the boroughs continuum of need. Types of input could be:

- Team around the family
- Early Help
- Child in Need
- Child Protection
- Looked after Child

Any injuries to the face of a child will be reported to the MASH team immediately. The safeguarding team will follow the advice of the MASH team from there.

Each borough has their own MASH team. The safeguarding team will call the borough that the child or family live in.

10.2 Supporting Staff after a referral

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.

11. Types of plans

11.1 Team Around the Family (TAF)

TAF refers to a multi-agency approach to supporting families who need help from two or more services. This support brings together practitioners from various agencies (like schools, health services, social services) with the family to identify their strengths and needs.

The goal is to coordinate support and services to help families achieve their goals and address any difficulties. For example, school, parents, SENARP and CYPD Hub working together could organise a TAF. These can be a one-off meeting or a series of meetings until there has been improvement in support.

11.2 Early Help

Early help is the support we give to children, young people and their families where they have additional support needs that aren't being met by the usual services. When a family needs additional support, we make sure they have access to the extra support at the earliest possible stage so that support is successful.

When we believe Early Help would be beneficial to a family, or when a family has requested early help, class teams are encouraged to complete an in school Early Help form. This means that our referral is strengthened and more likely to be picked up by services.

Early help can support families with mental health support, money and debt support, domestic abuse, healthy eating, smoking, alcohol and drugs, etc.

11.3 Child in Need

A child in need is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled.

There will be Child in Need Review meetings that will be chaired offline at least every 6 months with an updated assessment. If there are significant changes in the family circumstances, an early review should take place.

Child in need plans require frequent welfare checks/meetings, therefore class teams will be asked for their input. Where possible children's voice should be captured.

11.4 Child Protection

A Child Protection Plan is made when a child is deemed to be at risk of significant harm, significant harm being a level of harm that affects the health, welfare and development of a child. The Plan will say what the specific risks are to the child and the actions that will be needed to keep the child safe.

The core group is the Interagency Forum for achieving the outcomes of a child protection plan. It is comprised of the professionals responsible for delivering particular aspects of the plan, and is attended by parents and children, where appropriate. Should take place every 4 weeks.

11.5 Looked after Child

The most common reason for children becoming looked after is as a result of abuse and neglect. Academies ensure that staff have the necessary skills and understanding to keep 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.

Staff are aware that there are many reasons why a child may be looked after or previously looked after.

Confidentiality and respect must be used throughout these times. All staff know that our priority remains to support the child and their family/carers.

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 their LA's Virtual School Head for children in care.

The designated teacher for looked after child 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.

11.6 Children who are particularly vulnerable

The school recognises that some children are more vulnerable to abuse, child-on-child 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.

To ensure that all of our pupils receive equal protection we will give special consideration to children who are:

- Disabled or have special educational needs
- Young carers
- Affected by parental substance misuse, domestic abuse or parental mental health needs
- Asylum seekers
- Living away from home
- Vulnerable to being bullied or engaged in bullying
- Already viewed as a 'problem'
- Living in temporary accommodation
- Live transient lifestyles
- Living in chaotic and unsupportive home situations
- Vulnerable to discrimination on the grounds of race, ethnicity, religion, disability or sexuality
- At risk of sexual exploitation
- Do not have English as a first language
- At risk of female genital mutilation
- At risk of forced marriage
- At risk of being drawn into extremism.

11.7 Children with SEN and Disabilities

Children with special educational needs (SEN) and disabilities can face additional safeguarding challenges.

These can include:

- assumptions that indicators of possible abuse such as changes in behaviour, mood, temperament and/or injury relate to the child's disability without further exploration;

- the fact that children with SEN and disabilities can be disproportionately impacted by issues such as bullying without outwardly showing any signs
- communication barriers and difficulties in overcoming such barriers

12. 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.

Academies are aware that if the victim is not offered support following a 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.

13. Children Missing in Education

Attendance, absence and exclusions are closely monitored. A child going missing from education is a potential indicator of abuse and neglect, including sexual abuse and sexual exploitation.

The DSL will monitor unauthorised absences 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 in conjunction with 'Children Missing Education: Statutory Guidance for Local Authorities'⁵.

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

⁶ <https://www.gov.uk/government/publications/children-missing-education>

14. Allegations against staff

All school staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents/carers to be conducted in view of other adults.

Allegations or concerns arising from the use of restrictive physical intervention, including restraint or seclusion, will be managed under these procedures where there is concern that practice may be unsafe, excessive, or inconsistent with statutory guidance.

Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers will be given at induction⁶.

We understand that a pupil may make an allegation against a member of staff or staff may have concerns about another staff member.

⁶ Refer to "KCSIE 2025" available on the DfE website.

¹² or Chair of Governors/Trust CEO in the event of an allegation against the Headteacher

If such an allegation is made, or information is received which suggests that a person may be unsuitable to work with children, the member of staff receiving the allegation or aware of the information, will immediately inform the safeguarding team and complete a Pink Form¹².

The Headteacher or DSL on all such occasions will discuss the content of the allegation with the Local Authority Designated Officer (LADO)¹³ at the earliest opportunity and before taking any further action.

If the allegation made to a member of staff concerns the Headteacher, the person receiving the allegation will immediately inform the Chair of Governors/CEO of the Trust who will consult the LADO as in 23.6 above, without notifying the Headteacher first.

The school will follow the Trust's procedures for managing allegations against staff as set out in their policy, procedures set out in Keeping Children Safe in Education (2025) and the Trust's Managing Allegations policy and procedures.

Suspension of the member of staff, excluding the Headteacher, against whom an allegation has been made, needs careful consideration, and the Headteacher will seek the advice of the LADO and an HR Consultant in making this decision.

In the event of an allegation against the Headteacher, the decision to suspend will be made by the Chair of Governors/Trust CEO.

We have a procedure for managing the suspension of a contract for a community user in the event of an allegation arising in that context.

Staff, parents and governors are reminded that publication of material that may lead to the identification of a teacher who is the subject of an allegation is prohibited by law.

Publication includes verbal conversations or writing including content placed on social media sites.

15. 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.⁷

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

Whistle-blowing regarding the Headteacher should be made to the Chair of the Governing Body or the Trust CEO whose contact details are readily available from the school/Trust website.

⁷ General guidance on whistleblowing can be found in the [Whistleblowing for Employees](#) guidance.

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 (as detailed in the Restrictive Physical Intervention Policy).

ALL such events should be recorded and signed by a witness.

Staff who are likely to need to use physical intervention will be appropriately trained in 'TeamTeach' technique.

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

We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.⁸

16. Links to Other Policies

This policy also links to our policies on:

- *Behaviour*
- *Whistleblowing*
- *Health & Safety*
- *Attendance and Punctuality*
- *E-Safety*
- *Restrictive Physical Intervention*
- *Administering Medication*
- *First Aid*
- *Intimate Care*

Appendix 1

Recognising signs of child abuse

Categories of Abuse:

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

⁸ Guidance on Safer Working Practices is available on the DfE website

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-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour
- Harmful sexualised behaviour
- 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

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.

Any burns or scalds will be reported to the MASH team when seen and reported by staff.

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
- Used as a scape-goat 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 by Young People

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.

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 o 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.

The safeguarding team are all trained in using The Brooks Traffic light tool when looking at the appropriateness of behaviour. In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

Appendix 3

Child missing from education

Definition of Children Missing from Education:

- known to have resided in Barking and Dagenham, or attended a school here, who have moved away from their last known address, and their whereabouts are unconfirmed, or unknown (including those children reported to have moved abroad either to live, or study) or,
- known to be residing in Barking and Dagenham's boundary and are believed not to be in receipt of education or,
- whose parents claim to be providing elective home education but, as a result of the local authority's informal enquiries, are believed not to be in receipt of suitable and efficient education.

Children missing from education may not have normal access to services, safeguarding procedures and health care. They are more likely than others to suffer harm, or neglect because they may lack the routines and disciplines of school and home life and because they do not receive supervision and monitoring from professionals. They are likely to have diminished life opportunities because of missing positive educational and social experiences.

Link: <https://www.lbdd.gov.uk/sites/default/files/202302/Children%20Missing%20Education%20policy%20-%20November%202019.pdf>

Child missing from home or care

Safeguarding and promoting the welfare of children is a key duty on local authorities and requires effective joint working between agencies and professionals. When a child goes missing or runs away, they are at risk. Safeguarding children therefore includes protecting them from this

risk. Local authorities are responsible for protecting children whether they go missing from their family home or from local authority care.

Link: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/307867/Statutory_Guidance - Missing from care 3 .pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/307867/Statutory_Guidance_-_Missing_from_care_3_.pdf)

Child sexual exploitation (CSE)

Child sexual exploitation (CSE) is a type of sexual abuse. It happens when a child or young person is coerced, manipulated or deceived into sexual activity in exchange for things that they may need or want like gifts, drugs, money, status and affection. Children and young people are often tricked into believing they're in a loving and consensual relationship so the sexual activity may appear consensual.

Link: <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-exploitation/>

Child Criminal Exploitation (CCE)

Criminal exploitation is child abuse where children and young people are manipulated and coerced into committing crimes. Children and young people involved with gangs and criminal exploitation need help and support. They might be victims of violence or pressured into doing things like stealing or carrying drugs or weapons. They might be abused, exploited and put into dangerous situations.

Link: <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/gangs-criminal-exploitation/>

Child Sexual Exploitation (CSE)

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:

- going missing from home or school
- regular school absence/truanting
- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- online safety concerns such as youth produced sexual imagery or being coerced into sharing explicit images.
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern

- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

Link: <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-exploitation/>

Bullying including cyberbullying

Bullying: Bullying is intentional behaviour that hurts someone else. It includes name calling, hitting, pushing, spreading rumours, threatening or undermining someone.

It can happen anywhere – at school, at home or online. It's usually repeated over a long period of time and can hurt a child both physically and emotionally.

Cyberbullying: Cyberbullying is bullying that takes place online. Unlike bullying offline, online bullying can follow the child wherever they go, via social networks, gaming and mobile phone. A person can be bullied online and offline at the same time.

Link: <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/bullying-and-cyberbullying/>

Domestic abuse

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people who are or have been in a relationship. It can also happen between adults related to one another. It can seriously harm children and young people, and experiencing domestic abuse is child abuse.

It's important to remember that domestic abuse:

- can happen inside and outside the home
- can happen over the phone, on the internet and on social networking sites
- can happen in any relationship and can continue even after the relationship has ended
- both men and women can be abused or abusers.

Link: <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/domestic-abuse/>

Drugs and Alcohol

A drug is any chemical you put in your body – like pills, liquids or powders – that change the way you think, feel and act. This includes alcohol.

Drugs can be legal, like your regular painkillers. But when we say ‘drugs’, we usually mean illegal drugs or drugs people take for fun and not for any medical reason. You might hear them be called “recreational drugs”.

Link: <https://www.youngminds.org.uk/young-person/coping-with-life/drugs-and-alcohol/>

Fabricated or induced illness

There is often uncertainty about perplexing presentations (PP) and fabricated or induced illness (FII) and when safeguarding concerns should be raised. In the UK, there has been a shift towards earlier recognition of possible fabricated or induced illness.

Fabricated or induced illness can cause significant harm to the child either because of being made to be ill or from the treatment that they are given for an illness that they do not have. Harm to the child may take several forms and differ in terms of severity, with children often very confused and anxious about their health and well-being.

Link: <https://safeguarding.network/content/safeguarding-resources/fabricated-induced-illness/>

Faith/Belief abuse

Abuse linked to faith or belief is where concerns for a child’s welfare have been identified, and could be caused by, a belief in witchcraft, spirit or demonic possession, ritual or satanic abuse features; or when practices linked to faith or belief are harmful to a child.

Link: <https://www.met.police.uk/advice/advice-and-information/caa/child-abuse/faith-based-abuse/>

Female genital mutilation (FGM)

FGM is when a female's genitals are deliberately altered or removed for non-medical reasons. It's also known as 'female circumcision' or 'cutting', but has many other names.

FGM is a form of child abuse. It's dangerous and a criminal offence in the UK. We know:

- there are no medical reasons to carry out FGM
- it's often performed by someone with no medical training, using instruments such as knives, scalpels, scissors, glass or razor blades
- children are rarely given anaesthetic or antiseptic treatment and are often forcibly restrained
- it's used to control female sexuality and can cause long-lasting damage to physical and emotional health.

Link: <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/female-genital-mutilation-fgm/>

Forced marriage

A forced marriage is where one or both people do not or cannot consent to the marriage and pressure or abuse is used to force them into the marriage. It is also when anything is done to make someone marry before they turn 18, even if there is no pressure or abuse.

Forced marriage is illegal in the UK. It is a form of domestic abuse and a serious abuse of human rights.

The pressure put on people to marry against their will may be:

- physical: for example, threats, physical violence or sexual violence
- emotional and psychological: for example, making someone feel like they are bringing 'shame' on their family
- Financial abuse, for example taking someone's wages, may also be a factor.

Link: <https://www.gov.uk/guidance/forced-marriage>

Gender/honour based violence

Rooted in gender inequality, gender-based violence is mostly inflicted by men on women and girls. We offer support to women who've experienced a wide range of gender-based violence.

Types of gender-based violence:

- Sexual violence
- Tech abuse
- So called 'Honour-based' abuse
- Female genital mutilation (FGM)
- Forced marriage
- Economic abuse

Link: <https://refuge.org.uk/i-need-help-now/how-we-can-help-you/gender-based-violence-services/>

Mental health

As parents and carers, there are ways we can support our children to give them the best chance to stay mentally healthy. Encouraging and guiding a child to think about their own mental health and wellbeing are vital skills you can teach them from a young age.

Find out how you can help a child to have good mental health, including knowing how to talk to a child about their mental health, and when to spot signs they might be struggling.

Link: <https://www.nhs.uk/every-mind-matters/supporting-others/childrens-mental-health/>
<https://www.nspcc.org.uk/keeping-children-safe/childrens-mental-health/>

Private fostering

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

Link: https://assets.publishing.service.gov.uk/media/5a74c9b7ed915d502d6cb02d/Children_Act_1989_private_fostering.pdf

Radicalisation

Radicalisation is the process through which a person comes to support or be involved in extremist ideologies. It is in itself a form of harm.

Extremism was defined by the Home Office in 2011 as a 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 (HM Government, 2011).

Link: <https://learning.nspcc.org.uk/safeguarding-child-protection/radicalisation>

Youth produced sexual imagery (sexting)

The taking and sharing sexual imagery of children by children is always a risky behaviour and also illegal. Once an image has been shared, control of it has been lost and is unlikely to ever be fully regained. This activity can be more clearly described as 'Youth Produced Sexual Imagery'

Link: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/578979/GD8 - Sexting Guidance.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/578979/GD8_-_Sexting_Guidance.pdf)

AI/SM

Developments in artificial intelligence (AI) come with a range of benefits, including supporting learning, creativity and innovation. There is however growing concern for how AI can also be misused to create and share child sexual abuse material (CSAM), referred to as AI-CSAM. Under UK law, AI-CSAM is illegal. In their 2024 report, IWF observed a rapid increase in the number of AI CSAM reports, both on the clear web and dark web forums.

Link: <https://www.iwf.org.uk/media/ceel0u4z/ai-guidance-england-final.pdf>

Teenage relationship abuse

Abuse in teenage relationships is when you begin to feel scared or controlled by the person you're with. You may be confused because it feels like a loving relationship but often only when you behave in a certain way. This can happen at any age, regardless of gender.

Link: <https://www.childrenssociety.org.uk/information/young-people/advice/teenage-relationship-abuse>

Trafficking

Trafficking is where children and young people tricked, forced or persuaded to leave their homes and are moved or transported and then exploited, forced to work or sold. Children are trafficked for:

- sexual exploitation
- benefit fraud
- forced marriage
- domestic slavery like cleaning, cooking and childcare
- forced labour in factories or agriculture
- committing crimes, like begging, theft, working on cannabis farms or moving drugs.
- Trafficked children experience many types of abuse and neglect.

Traffickers use physical, sexual and emotional abuse as a form of control. Children and young people are also likely to be physically and emotionally neglected and may be sexually exploited.

Link: <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-trafficking/>

This flowchart has been updated in line with Keeping Children Safe in Education (KCSIE) Sept 2025. All staff are advised to read the Safeguarding/Child Protection and all associated policies and be familiar with their contents particularly sections giving information about indicators of harm, abuse and neglect.

Discuss concerns about child's welfare with Designated Lead or Deputy (DSL)

Lead: Demi Walters. Deputies: Katie Kojnozi, Ellisa Ayaz, Heather Clark, Leila Amri, Ray Flowers, Elliot Stubbles and Leonel Carvalho

Still have concerns:

DSL/DDSL to consider which of the following actions is most appropriate:

- Talk to the pupil
- Talk to parents
- Seek advice from LADO
- Monitor situation
- Log the concern on sleuth

Make a referral to children's social care:
0208 227 3811 – Online MARF

Keep parents informed unless it puts the child at increased risk or significant harm

If concerns are relating to a colleague, contact the DSL/Headteacher.

Contact LADO for further advice

Still have concerns:

No longer have concerns:

No further action: Monitor, give appropriate advice and support.

Remember:

1. Record ALL actions
2. Do NOT react
3. Do not probe
4. Record all observations and discussions
5. Keep evidence SECURE
6. Report as soon as possible

Appendix 5

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/>

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

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