

Appendix to Safeguarding Policy and Procedure: 2021 - 2022

	APPENDIX A: The role of the Designated Safeguarding Lead	Pg.
1	MANAGING REFERRALS / 2 RECORD KEEPING	2
3	INTER-AGENCY WORKING & INFORMATION SHARING / 4 TRAINING	2/3
5	AWARENESS RAISING / 6 QUALITY ASSURANCE	4
7	SUPERVISION AND REFLECTION	5
	APPENDIX B: Safeguarding Procedure	
1	DEFINITIONS & EARLY HELP	5
2	CATEGORIES OF ABUSE	7
3	MENTAL HEALTH	8
	APPENDIX C: Further Information	
1	Female Genital Mutilation	9
2	Fabricated Illness	10
3	Gang and Youth / Serious Violence	11
4	Faith Based Abuse	11
5	Risk to Trafficking	12
6	Risks Associated with Parent/Carer Mental Health	12
7	Drugs and Alcohol	13
8	Honour Based Violence and Forced Marriages	13
9	Managing Allegations Against Staff	13
10	Preventing Radicalisation (Prevent & Channel)	14
11	Child Missing Education	17
12	Child Sexual Exploitation & Child Exploitation (CE)	18
13	Sexual Harassment, Violence, Harmful Sexual Behaviours	20
14	Private Fostering	21
15	Online Safety & Remote Learning	21
16	Pre-Appointment Checks & Safer Recruitment / 17 Single Central Record	22 / 23
	Flow chart: Actions where there are concerns about a child	24
	Flow chart: Disclosure and Barring Service criminal record checks and barred list checks	25
	7 Minute Briefing: Sexual Violence & Harassment in Education / Peer Sexual Abuse	26 / 27
	7 Minute Briefing: Social Media and Mental Health	28
	7 Minute Briefing: Safeguarding Children / Children Missing	29 - 30
	7 Minute Briefing: Sexting	31
	7 Minute Briefing: Adverse Childhood Experiences (ACES)	32
	7 Minute Briefing: Anderson Children	33
	7 Minute Briefing: Contextual Safeguarding	34
	7 Minute Briefing: Supporting Families, Enhancing Futures (SFEF)	35
	7 Minute Briefing: County Lines / Professional disagreement and escalation	36 - 37
	7 Minute Briefing: Neglect / Child Sexual Exploitation (CSE) / Harmful Sexual Behaviour	38 – 40
	7 Minute Briefing: Private Fostering / Domestic Abuse / Early Help and Prevention Offer	41 – 43

APPENDIX A:

The role of the Designated Safeguarding Lead

1 MANAGING REFERRALS:

- 1.1 Refer all safeguarding cases, including Early Help, to the **Integrated Front Door (IFD)** and to the Police if a crime may have been committed. (IFD@wirral.gov.uk)
- 1.2 Identify any safeguarding issues relating to individual children, especially ongoing enquiries under section 47 of the Children Act 1989.
- 1.3 Act as a source of support, advice and expertise to staff members on matters of child protection and safeguarding.
- 1.4 Escalate inter-agency concerns and disagreements about a child's wellbeing. Further information can be found here: <https://www.wirralsafeguarding.co.uk/procedures/10-2-multi-agency-escalation-procedure/>
- 1.5 Have responsibility to ensure there is at least one Key Adult for Operation Encompass and the point of contact for Child Exploitation
- 1.6 To ensure that the Local Authority are notified if children are persistently absent or missing from education.

2 RECORD KEEPING:

- 2.1 Keep online records of Safeguarding and welfare concerns and ensure a stand-alone file is created as necessary for children with safeguarding concerns
- 2.2 Schools should have at least two emergency contacts for every child in the school in case of emergencies, and in case there are welfare concerns at the home (KCSIE 2021)
- 2.3 Maintain a chronology of significant incidents for each child with safeguarding concerns
- 2.4 Ensure such records are kept confidentially and securely and separate from the child's educational record.
- 2.5 When a child leaves our school, the Designated Safeguarding Lead will make contact with the Designated Safeguarding Lead at the new school and will ensure that the safeguarding file is forwarded to the receiving school within two weeks. We will retain evidence to demonstrate how the file has been transferred; this may be in the form of a written confirmation of receipt from the receiving school and/or evidence of recorded delivery. Where a parent elects to remove their child from the school roll to home educate, the school will make arrangements to pass any safeguarding records to the Education Social Welfare Service.

3 INTER-AGENCY WORKING AND INFORMATION SHARING:

- 3.1 Co-operate and comply with Children's Social Care for enquiries under section 47 of the Children Act 1989.
- 3.2 Advocate that the Data Protection Act 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe; and this includes allowing practitioners to share information without consent (Keeping Children Safe in Education 2021).

- 3.3 Complete reports and attend, or ensure other relevant staff members attend, child protection conferences, core group meetings and other multi-agency meetings, as required.
- 3.4 Liaise with other agencies working with the child, share information as appropriate and contribute to assessments.
- 3.5 The school's information sharing policy is located the school website and refers to confidentiality in line with 'Information sharing: advice for practitioners providing safeguarding services' (DfE, 2018).

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf

4 TRAINING:

- 4.1 Undertake appropriate annual training, (**updated every two years for DSLs**), in order to
- be able to recognise signs of abuse and how to respond to them, including special circumstances such as child sexual exploitation, female genital mutilation, fabricated or induced illness
 - understand the assessment process for providing early help and intervention, e.g. WSCP thresholds of need
 - have a working knowledge of how the local authority conducts initial and review child protection (CP) case conferences and contribute effectively to these; and
 - be alert to the specific needs of children in need (as specified in section 17 of the Children Act 1989), those with special educational needs, pregnant teenagers, young carers, and those who are privately fostered, vulnerable to exploitation, racialisation and subject to listening or hearing to domestic abuse..
- 4.2 Ensure each member of staff has read and understands the school's safeguarding policy and procedures, including providing induction on these matters to new staff members. Induction and training must include the school's behaviour policy and the school's procedures for managing children who are missing education, as well as the staff code of conduct, and the child protection policy, dealing with disclosures and managing allegations processes.
- 4.3 Organise face-to-face whole-school Safeguarding training for all staff members at least **every three years**. Ensure staff members who miss the training receive it by other means, e.g. by joining another school's training. The DSL must provide all staff members with safeguarding 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. Link to access safeguarding training via Wirral Safeguarding Children Partnership (WSCP) is:
- <https://www.wirralsafeguarding.co.uk/safeguarding-training-for-schools/>
- 4.4 All staff should be aware of systems within their school or college which support safeguarding, and these should be explained to them as part of staff induction. This should include the:
- child protection policy
 - behaviour policy
 - staff behaviour policy (sometimes called a code of conduct)
 - safeguarding response to children who go missing from education; and
 - role of the designated safeguarding lead (including the identity of the designated safeguarding lead and any deputies).

Copies of policies and a copy of Part one of this document should be provided to staff at induction (Keeping Children Safe in Education 2021).

Best practice would also see staff and leaders reading - '[What to do if you're worried a child is being abused](#)', as it contains examples of the different types of safeguarding issues.

- 4.5 Ensure the school allocates time and resources every year for relevant staff members to attend training and receive continuous professional development opportunities.
- 4.6 Encourage a culture of listening to children and taking account of their wishes and feelings in any action the school takes to protect them.
- 4.7 Maintain accurate records of staff recruitment, induction and ongoing training and continual professional development (CPD) relating to safeguarding.

WSCP School / College / Educational establishment training courses can be found here:

<https://www.wirralsafeguarding.co.uk/schools/>

5 AWARENESS RAISING:

- 5.1 Ensure the school's or college's child protection policies are known, understood and used appropriately;
- 5.2 Ensure the school's or college's safeguarding policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this;
- 5.3 Ensure the safeguarding 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 or college in this; and
- 5.4 Link with the safeguarding partner arrangements to make sure staff are aware of any training opportunities and the latest local policies on local safeguarding arrangements. (KCSIE 2021)
- 5.5 Teachers can also access support through the National Operation Encompass Teachers' Helpline and Merseyside's Operation Encompass.

From 1st September 2020 the National Operation Encompass Teachers' Helpline is once again available. Funded by the Home Office, the advice line is free and calls are answered by trained Educational and Clinical Psychologists.

You can call the helpline on 0204 513 9990 (Weekdays 8 - 11.00am) or find out more from their website: www.operationencompass.org.

6 QUALITY ASSURANCE:

- 6.1 Monitor the implementation of and compliance with policy and procedures, including periodic audits of Safeguarding and welfare concerns files (at a minimum once a year).
- 6.2 Complete an audit of the school's safeguarding arrangements at frequencies specified by the Wirral Safeguarding Children Partnership. Schools complete the 175 audit here: <https://www.wirralsafeguarding.co.uk/professionals/section-11-175-audit/>

6.3 Provide regular reports, to the governing body detailing changes and reviews to policy, training undertaken by staff members and the number of children with child protection plans and other relevant data.

6.4 Take lead responsibility for remedying any deficiencies and weaknesses identified in Safeguarding arrangements.

7 SUPERVISION AND REFLECTION:

7.1 Working to ensure children and young people are protected from harm requires sound professional judgements to be made. It is demanding work that can be distressing and stressful. It is therefore essential that staff involved in this work have access to advice and a robust process of reflection/supervision to help them reflect upon and review their work.

7.2 The school will have a framework for providing an opportunity to staff who are working directly with vulnerable young people, particularly those who are being managed on a child protection, child in need or team around the family plan, to have regular access to an appropriate manager to talk through and reflect on their involvement with the child's case. A guidance document published by the Wirral Safeguarding Children Partnership for undertaking safeguarding reflection is published on the WSCP website and can be accessed here:

<https://www.wirralsafeguarding.co.uk/procedures/>

APPENDIX B: Safeguarding Procedure

1 DEFINITIONS:

1.1 **Abuse:** a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

1.2 **Children** are any people who have not yet reached their 18th birthday; a 16-year-old, whether living independently, in further education, in the armed forces or in hospital, is a child and is entitled to the same protection and services as anyone younger. KCSIE now applies to providers of post 16 education as set out Education and Training (Welfare of Children) Act 2021

1.3 **Child protection** is part of safeguarding and promoting the welfare of children and refers to activity undertaken to protect specific children who are suffering, or likely to suffer, significant harm or significant harm is suggested.

1.4 **Early help** means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years to teenage years.

1.5 **Harm** is ill treatment or impairment of health and development, including impairment suffered from seeing or hearing the ill treatment of another.

1.6 **Safeguarding children** is the action we take to promote the welfare of children and protect them from harm. **Safeguarding and promoting the welfare of children** is defined as:

- protecting children from maltreatment;
- preventing the impairment of children's mental and physical health or development;

- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes.

School and college staff are particularly important, as they are in a position to identify concerns early, provide help for children, promote children's welfare and prevent concerns from escalating (KCSIE 2021).

All staff must have an awareness of safeguarding issues. Staff should be aware that behaviours linked to the likes of drug taking, alcohol abuse, truanting and sexting put children in danger.

All staff must be aware safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but not limited to: bullying (including cyber bullying), gender based violence/sexual assaults and sexting. Staff should be clear as to the school policy and procedures with regards to peer on peer abuse; and on how the risk of peer-on-peer abuse is being minimised, how suspected abuse will be recorded and investigated; as well as how the victims and perpetrators will be supported. More support can be found:

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

It is important that schools record incidents across the whole spectrum of sexual violence, sexual harassment, and harmful sexualised behaviours so that they can understand the scale of the problem in their own schools and make appropriate plans to reduce it. For more guidance go to:

[Sexual violence and sexual harassment between children in schools and colleges \(publishing.service.gov.uk\)](https://publishing.service.gov.uk) – from September 2021

All such incidents should be immediately reported to the Designated Safeguarding Lead (DSL) or equivalent and managed in line with your setting's child protection policies. Victims of harm should be supported by the school's pastoral system.

A bespoke helpline for children and young people who've experienced abuse at school, and for worried adults and professionals that need support and guidance. If you are concerned about something, you can contact the NSPCC helpline Report Abuse in Education on 0800 136 663 or email help@nspcc.org.uk

- 1.7 **Significant harm** is the threshold that justifies compulsory intervention in the family in the best interests of the child. Section 47 of the Children Act 1989 states 'where the question of whether harm suffered by a child is significant turns on the child's health or development, his health or development shall be compared with that which could reasonably be expected of a similar child.'
- 1.8 Any child may benefit from [early help](#), but all school and college staff should be particularly alert to the potential need for early help for a child who:
 - is disabled and has specific additional needs;
 - has special educational needs (whether or not they have a statutory Education, Health and Care Plan);
 - is a young carer;
 - is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
 - is frequently missing/goes missing from care or from home;
 - is at risk of modern slavery, trafficking or exploitation;
 - is at risk of being radicalised or exploited;
 - is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse;

(<https://www.gov.uk/government/consultations/domestic-abuse-act-statutory-guidance>)

- is misusing drugs or alcohol themselves;
- has returned home to their family from care; and
- is a privately fostered child.

2 CATEGORIES OF ABUSE:

2.1 **Emotional abuse** is the persistent emotional maltreatment of a child such that it causes severe and persistent adverse effects on the child's emotional development and conveying 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
- interactions that are beyond a child's developmental capability
- overprotection and limitation of exploration and learning,
- preventing the child from participating in normal social interaction.
- seeing or hearing the ill-treatment of another
- serious bullying (including cyberbullying)
- causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

2.2 **Neglect** is the persistent failure to meet a child's basic physical 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 misuse. Once a child is born, it may involve a parent 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
- ensure access to appropriate medical care or treatment

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

2.3 **Physical abuse** may involve hitting, shaking, throwing, poisoning, burning, 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.

2.4 **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.

Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education (KCSIE 2020).

- 2.5 **Domestic abuse:** The definition of Domestic Abuse is any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to: psychological; physical; sexual; financial; and emotional.

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. 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. (KCSIE 2021).

3. MENTAL HEALTH

- 3.1 All staff should also be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation
- 3.2 Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Staff however, are well placed to 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
- 3.3 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. It is key that staff are aware of how these children's experiences, can impact on their mental health, behaviour and education
- 3.4 If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following their child protection policy and speaking to the designated safeguarding lead or a deputy.

<https://www.gov.uk/government/publications/promoting-children-and-young-peoples-emotional-health-and-wellbeing>

The department has published advice and guidance on [Preventing and Tackling Bullying](#), and [Mental Health and Behaviour in Schools](#) (which may also be useful for colleges). In addition, Public Health England has produced a range of resources to support secondary school teachers to promote positive health, wellbeing and resilience among young people including its guidance [Promoting children and young people's emotional health and wellbeing](#). Its resources include social media, forming positive relationships, smoking and alcohol. See [Rise Above](#) for links to all materials and lesson plans.

There are three thresholds for and types of referral that need to be considered:

Is this a child with additional needs; where their health, development or achievement may be adversely affected?

- Age appropriate progress is not being made and the causes are unclear or
- The support of more than one agency is needed to meet the child or young person's needs.

If this is a child with additional needs discuss the issues with the Early Help Assessment (EHAT) trained practitioner in your school, the child and parents. You will need to obtain parental consent for an EHAT to be completed.

Is this a child in need matter? Section 17 of the Children Act 1989 says:

- they are unlikely to achieve or maintain, or to have opportunity to achieve or maintain a reasonable standard of health or development, without the provision of services by a local authority.
- their health or development is likely to be impaired, or further impaired without the provision of such services.
- they are SEND (and as such can face additional safeguarding challenges).

If this is a child in need, discuss the issues with the Designated Safeguarding Lead and parents. Obtain their consent for referral.

Is this a child protection matter? Section 47 of the Children Act 1989 says:

- children at risk or who are suffering significant harm.
- children suffering the effects of significant harm
- serious health problems.

More on the thresholds can be found here:

<https://www.wirralsafeguarding.co.uk/multi-agency-thresholds/>

If this is a child protection matter, this should be discussed with the Designated Safeguarding Lead and will need to be referred to the Integrated Front Door by the school as soon as possible.

<https://www.wirralsafeguarding.co.uk/public/concerned-about-a-child/>

APPENDIX C: FURTHER INFORMATION

A full series of '7-minute briefings' have been designed to inform and engage staff in understanding a wide range of safeguarding concerns. A selection can be found at the end of this document. There are new briefing being added, so to access the full range of briefings click here: <https://www.wirralsafeguarding.co.uk/7-minute-briefings/>

1 Female Genital Mutilation - Female Genital Mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM.

1.1 Indicators - FGM typically takes place between birth and around 15 years old; however, it is believed that the majority of cases happen between the ages of 5 and 8.

Risk factors for FGM include:

- low level of integration into UK society
- mother or a sister who has undergone FGM
- girls who are withdrawn from PSHE
- visiting female elder from the country of origin
- being taken on a long holiday to the country of origin
- talk about a 'special' procedure to become a woman

1.2 Symptoms of FGM

FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out-of-school to visit an 'at-risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM. Staff should not assume that FGM only happens outside the UK.

Indications that FGM may have already taken place may include:

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

- 1.3 Actions** - If staff have a concern they should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care. Mandatory reporting commenced in October 2015. These procedures remain when dealing with concerns regarding the potential for FGM to take place. Where a teacher discovers that an act of FGM appears to have been carried out on a girl who is aged under 18, there will be a statutory duty upon that individual to report it to the police.

1.4 Mandatory Reporting Duty

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) will place a statutory duty upon **teachers, along with social workers and healthcare professionals, to report to the police** 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. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils, but the same definition of what is meant by "to discover that an act of FGM appears to have been carried out" is used for all professionals to whom this mandatory reporting duty applies.

The Mandatory reporting duty commenced in October 2015. Teachers must report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has a good reason not to, they should still consider and discuss any such case with the school's designated safeguarding lead and involve the Integrated Front Door as appropriate.

2 Fabricated Illness:

- 2.1** Staff must be aware of the risk of children being abused through fabricated illness. There are three main ways of the carer fabricating or inducing illness in a child. These are not mutually exclusive and include:
- fabrication of signs and symptoms. This may include fabrication of past medical history;
 - fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents;
 - induction of illness by a variety of means.

- 2.2 Where this is identified and considered a risk a referral will be made to **The Integrated Front Door (IFD)** for support and guidance. School may involve other agencies in making their assessments. That could include school nurse, community paediatrician, occupational therapists etc.

3 Gang and Youth / Serious Violence:

- 3.1 Children and Young People who become involved in Gangs are at risk of violent crime and as a result of this involvement are deemed vulnerable. Agencies and professionals have a responsibility to safeguard these children and young people and to prevent further harm both to the young person and their potential victims. Risks associated with Gang activity include access to weapons (including firearms), retaliatory violence and territorial violence with other gangs, knife crime, sexual violence and substance misuse

3.2 **Indicators may be (age in brackets):**

- Troublesome (7-9; 10-12) / High daring (10-12) / Positive attitude towards delinquency (10-12) / Previously committed offences (7-9) / Involved in anti-social behaviour (10-12)
- Substance use (7-9) / Aggression (7-9) / Running away and truancy (7-9; 10-12) / Marijuana use (10-12) / Marijuana availability (10-12) / Disrupted family (7- 9; 10-12) / Poor supervision (10-12)
- Low academic achievement in primary school (10- 12) / Learning disability (10-12) / Peers involved in crime and/or anti-social behaviour (7-9; 10-12)
- Children and young people in the neighbourhood involved in crime and/or anti-social behaviour (10-12)

<https://www.gov.uk/government/publications/serious-violence-strategy>

- 3.3 Children are also increasingly being targeted and recruited online using social media. Children can easily become trapped by this type of exploitation as county lines gangs can manufacture drug debts which need to be worked off or threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

A number of the indicators for CSE and CCE as detailed above may be applicable to where children are involved in county lines. Some additional specific indicators that may be present where a child is criminally exploited through involvement in county lines are children who:

- **go missing and are subsequently found in areas away from their home;**
- **have been the victim or perpetrator of serious violence (e.g. knife crime);**

4 Faith Based Abuse:

- 4.1 Our policy recognises the 'National Action Plan to Tackle Abuse linked to faith or belief' which describes this abuse as:

'not about challenging people's beliefs, but where beliefs lead to abuse that must not be tolerated. This includes belief in witchcraft, spirit possession, demons or the devil, the evil eye or djinns, dakini, kindoki, ritual or muti murders and use of fear of the supernatural to make children comply with being trafficked for domestic slavery or sexual exploitation. The beliefs which are not confined to one faith, nationality or ethnic community.'

- 4.2 When this type of abuse is suspected staff will make a referral will make a referral to Wirral MASH for support and guidance. School may request the advice and support of MEAS service in making their assessments.

<https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief>

5 Risk to Trafficking:

- 5.1 Article 3 of the Palermo Protocol to Prevent, Suppress And Punish Trafficking In Persons, Especially Women And Children, Supplementing the United Nations Convention Against Transnational Organised Crime to the UN Convention (2000) (ratified by the UK on 6 February 2006) defines trafficking as:
- (a) “Trafficking of persons” shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat of or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.
 - (b) The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used.
 - (c) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons” even if this does not involve any of the means set forth in sub-paragraph (a) of this article
 - (d) “Child” shall mean any person under eighteen years of age.
- 5.2 Children trafficked into the country may be registered at a school for a term or longer, before being moved to another part of the UK or abroad. This pattern of registration and de-registration may be an indicator that a child has been trafficked. It has been identified as a particular concern in schools which are situated near ports of entry, but practitioners should be alert to this possibility in all schools. However, practitioners should always bear in mind that not all children who go missing from education have been victims of trafficking. For example, there may be instances of children from communities that move around – Gypsy, Roma, traveller or migrant families – who collectively go missing from school.
- 5.3 If a member of the school staff suspects that a child may have been trafficked they should act immediately to inform the senior member of staff with designated responsibility for child protection and ensure that police or local authority children’s social care are contacted immediately.

6 Risks Associated with Parent/Carer Mental Health:

- 6.1 The majority of Parents who suffer mental ill-health are able to care for and safeguard their children and/or unborn child. Some parents, however, will be unable to meet the needs and ensure the safety of their children. The school will follow the guidance outlined in ‘working with parents with mental health problems and their children (Think child, think parent, think family: a guide to parental mental health and child welfare).
- 6.2 Our approach is to recognise; seek support; instil preventive factors and monitor. The Integrated Front Door can provide links and support with Wirral Adult Social Care if required. Designated teacher should seek support through TAF with family support but escalate to the Integrated Front Door if they are concerned that the child involved is being placed at immediate risk of harm. The **CAMHS and Early Help Resource-and-Information-Pack** details the Early Help services available to children, young people and their families. The offer includes mental health support services: <https://www.wirralsafeguarding.co.uk/professionals/what-is-early-help/>

- 7 Drugs and Alcohol:** Children can be at risk of drugs and alcohol directly and indirectly. They may be at direct risk of having access to these substances (see guidance on gangs) or indirectly because they affect family life at home through use by parents/carers, siblings, child-minders etc. Risks associated with drugs and alcohol are built into the year 5-6 curriculum. We work with our partners and Wirral LA to provide curriculum advice and guidance in this area. To access the most up to date Wirral School Drugs Policy click - <https://www.wirralsafeguarding.co.uk/school-drug-policy/>

More details can be found at: <https://www.wirralsafeguarding.co.uk/substance-misuse/>

8 Honour Based Violence and Forced Marriages:

- 8.1 Honour Based Violence and Forced Marriage refers to a collection of practices used to control behaviour within families to protect perceived cultural or religious beliefs and honour. Violence can occur when offenders perceive that a relative has shamed the family or community by breaking their 'code of honour'. Honour Based Violence cuts across all cultures and communities: Turkish, Kurdish, Afghani, South Asian, African, Middle Eastern, South and Eastern European for example. This is not an exhaustive list. Where a culture is heavily male dominated, HBV may exist.
- 8.2 'A forced marriage is a marriage in which one or both spouses do not (or, in the case of some vulnerable adults, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure.' For more information see;

<http://www.fco.gov.uk/en/travel-and-living-abroad/when-things-go-wrong/forced-marriage/>

<http://www.fco.gov.uk/en/travel-and-living-abroad/when-things-go-wrong/forced-marriage/case-studies/safer-schools-partnership>

<http://www.karmanirvana.org.uk/>

9 Managing Allegations against staff:

- 9.1 The Local Authority Designated Officer for Allegations (**LADO**) **must be told of allegations against adults working with children and young people within 24 hours.** Chairs of Governors should refer to this guidance if there is an allegation against the headteacher. This includes all cases that meet the harms threshold where a person is alleged to have:

- behaved in a way that has harmed, or may have harmed a child
- possibly committed a criminal offence against, or related to, a child
- behaved towards a child or children in a way that indicates they may pose a risk of harm to children

The last bullet point above includes behaviour that may have happened outside of school or college, that might make an individual unsuitable to work with children, this is known as transferable risk. Where appropriate an assessment of transferable risk to children with whom the person works should be undertaken. If in doubt seek advice from the local authority designated officer (LADO).

- 9.2 There are two levels of allegation/concern:

1. Allegations that may meet the harms threshold (see definition above)
2. Allegation/concerns that do not meet the harms threshold – referred to in KCSIE 2021 guidance as 'low level concerns'

Governing bodies and proprietors should have policies and processes to deal with concerns (including allegations) which do not meet the harm threshold. Concerns may arise in several ways and from a

number of sources. For example: suspicion; complaint; or disclosure made by a child, parent or other adult within or outside of the organisation; or as a result of vetting checks undertaken.

It is important that schools and colleges have appropriate policies and processes in place to manage and record any such concerns and take appropriate action to safeguard children.

‘Low Level Concerns’ - Creating a culture in which all concerns about adults (including allegations that do not meet the harms threshold are shared responsibly and with the right person, recorded and dealt with appropriately, is critical.

A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a ‘nagging doubt’ - that an adult working in or on behalf of the school or college may have acted in a way that is inconsistent with the staff code of conduct, including inappropriate conduct outside of work; and does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the LADO. Examples of such behaviour could include, but are not limited to:

- being over friendly with children;
- having favourites;
- taking photographs of children on their mobile phone;
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or,
- using inappropriate sexualized, intimidating or offensive language.

Such concerns such always be recorded and reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified

9.3 The Local Authority Designated Officer for Allegations (LADO) in Wirral is:

Pamela Cope:

- call 07748 873 560
- email all referrals to: pamelacope@wirral.gov.uk

If judged appropriate during the initial contact with the LADO, an Allegations Referral Form must be completed by the senior manager in full and forwarded to the LADO via email within 24 hours. LADO referral form, flowcharts and information can be accessed here:

<https://www.wirralsafeguarding.co.uk/professionals/lado-allegations>

The LADO procedure does not replace safeguarding procedures and the Integrated Front Door (IFD@wirral.gov.uk) must be contacted if you have a safeguarding concern about a child. If you require advice about your agency’s response to an allegation, please contact your HR provider.

The LADO can only provide advice and guidance regarding allegations in relation to a person in a position of trust. Any general safeguarding enquiries or concerns should be reported to Wirral Children’s Services on 0151 606 2008 or 0151 677 6557 out of hours. The LADO cannot provide advice to professionals subject to allegations, support and *investigation updates should be sought directly from the investigating agency or employer.*

10 Preventing Radicalisation:

Protecting children from the risk of radicalisation should be seen as part of schools’ wider safeguarding duties and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation, it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The internet and the use of social media in particular has become a major factor in the radicalisation of young people. As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. School staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately which may include making a referral to the Channel programme.

10.1 Prevent - From 1 July 2015 all schools are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 ('The CTSA 2015') Schools must have regard to statutory PREVENT GUIDANCE issued under section 29 of the CTSA 2015. Paragraphs 57-76 of the Prevent guidance are concerned specifically with schools' responsibility to the need to prevent people from being drawn into terrorism."

This duty is known as the Prevent duty. It applies to a wide range of public-facing bodies.

The statutory Prevent guidance summarises the requirements on schools in terms of four general themes:

- risk assessment
- working in partnership
- staff training
- IT policies

Schools are expected to **assess the risk** of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. This means being able to demonstrate both a general understanding of the risks affecting children and young people in the area and a specific understanding of how to identify individual children who may be at risk of radicalisation and what to do to support them. Schools and colleges should have clear procedures in place for protecting children at risk of radicalisation. Our procedures can be found in the school's separate 'Preventing Extremism and Radicalisation Safeguarding Policy'. The Prevent duty builds on **existing local partnership arrangements**. For example, governing bodies and proprietors of all schools should ensure that their safeguarding arrangements take into account the policies and procedures of Local Safeguarding Children Partnerships (LSCPs).

Designated safeguarding leads and other senior leaders should familiarise themselves with the revised [Prevent duty guidance: for England and Wales](#).

The Prevent guidance refers to the importance of Prevent **awareness training** to equip staff to identify children at risk of being drawn into terrorism and to challenge extremist ideas. Individual schools are best placed to assess the training needs of staff in the light of their assessment of the risk to pupils at the school of being drawn into terrorism. *As a minimum, however, schools should ensure that the designated safeguarding lead undertakes Prevent awareness training and is able to provide advice and support to other members of staff on protecting children from the risk of radicalisation.*

Schools must ensure that children are safe from terrorist and extremist material when **accessing the internet** in schools. Schools should ensure that suitable filtering is in place. It is also important that schools teach pupils about online safety more generally. Further information and guidance is available on the WSCP website:

<https://www.wirralsafeguarding.co.uk/radicalisation-and-extremism/>

The Department for Education has also published advice for schools on the Prevent duty and is intended to complement the Prevent guidance and signposts other sources of advice and support.

<https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>

Whilst the school has a separate 'Preventing Extremism and Radicalisation Safeguarding Policy', it is also pertinent to include further information within this policy.

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

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

Recognising Extremism

Early indicators of radicalisation or extremism may include:

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

10.2 Channel

School staff should understand when it is appropriate to make a referral to the Channel team. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

Section 36 of the CTSA 2015 places a duty on local authorities to ensure Channel panels are in place. The panel must be chaired by the local authority and include the police for the relevant local authority area. Following a referral the panel will assess the extent to which identified individuals are vulnerable to being drawn into terrorism, and, where considered appropriate and necessary consent is obtained, arrange for support to be provided to those individuals. Section 38 of the CTSA 2015 requires partners of Channel panels to co-operate with the panel in the carrying out of its functions and with the police in providing information about a referred individual. Schools and colleges are

required to have regard to Keeping Children Safe in Education and, as partners, are required to cooperate with local Channel panels. Channel guidance can be found here:

<https://www.gov.uk/government/publications/channel-and-prevent-multi-agency-panel-pmap-guidance>

11 Child Missing Education: All children, regardless of their circumstances, are entitled to a full time education which is suitable to their age, ability, aptitude and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area.

11.1 A child going missing from education is a potential indicator of abuse or neglect. School and college staff should follow the school's or college's procedures for dealing with children that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of their going missing in future.

11.2 Schools should put in place appropriate safeguarding policies, procedures and responses for children who go missing from education, particularly on repeat occasions. It is essential that all staff are alert to signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns such as travelling to conflict zones, FGM and forced marriage.

The law requires all schools to have an admission register and, with the exception of schools where all pupils are boarders, an attendance register. All pupils must be placed on both registers. An appropriated response is needed when a child has poor attendance or is regularly missing education.

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

11.3 All schools must inform their local authority of any pupil who is going to be deleted from the admission register where they:

- have been taken out of school by their parents and are being educated outside the school system e.g. home education;
- have ceased to attend school and no longer live within reasonable distance of the school at which they are registered;
- have been certified by an appropriate medical practitioner as unlikely to be in a fit state of health to attend school before ceasing to be of compulsory school age, and neither he/she nor his/her parent has indicated the intention to continue to attend the school after ceasing to be of compulsory school age;
- are in custody for a period of more than four months due to a final court order and the proprietor does not reasonably believe they will be returning to the school at the end of that period; or,
- have been permanently excluded.

11.4 The local authority must be notified when a school is to delete a pupil from its register under the above circumstances. **Schools should contact the Admissions section: Tel: 0151 666 4600.** This should be done as soon as the grounds for deletion are met, but no later than deleting the pupil's name from the register. It is essential that schools comply with this duty, so that local authorities can, as part of their duty to identify children of compulsory school age who are missing education, follow up with any child who might be in danger of not receiving an education and who might be at risk of abuse or neglect.

All schools must inform the local authority of any pupil who fails to attend school regularly, or has been absent without the school's permission for a continuous period of 10 school days or more, at such intervals as are agreed between the school and the local authority (or in default of such agreement, at intervals determined by the Secretary of State).

12 Child Sexual Exploitation & Child Exploitation (CE):

- 12.1 Child Sexual Exploitation (CSE) - CSE occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child 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. CSE does not always involve physical contact; it can also occur through the use of technology. CSE can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person's immediate knowledge (e.g. through others copying videos or images they have created and posted on social media).

Indicators of child sexual exploitation may include:

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

Potential vulnerabilities

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

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

More information can be found in this DfE guide: [Child sexual exploitation: guide for practitioners](#)

- 12.2 **Child Criminal Exploitation:** While there is still no legal definition of 'Child Criminal Exploitation' or CCE, it is increasingly being recognised as a major factor behind crime in communities across

Merseyside and the UK, while also simultaneously victimising vulnerable young people and leaving them at risk of harm.

CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence.

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

Some of the following can be indicators of CCE:

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

- 12.3 County lines is a term used to describe gangs, groups or drug networks that supply drugs from urban to suburban areas across the country, including market and coastal towns, using dedicated mobile phone lines or 'deal lines'. They exploit children and vulnerable adults to move the drugs and money to and from the urban area, and to store the drugs in local markets. They will often use intimidation, violence and weapons, including knives, corrosives and firearms. County lines is a major, cross-cutting issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery, and missing persons; and the response to tackle it involves the police, the National Crime Agency, a wide range of Government departments, local government agencies and voluntary and community sector organisations. County lines activity and the associated violence, drug dealing and exploitation has a devastating impact on young people, vulnerable adults and local communities. Further information and PAN Merseyside CE / CCE Documentation can be found here:
<https://www.wirralsafeguarding.co.uk/child-criminal-exploitation-and-county-lines/>

- 12.4 **Child Sexual Exploitation & Child Criminal Exploitation:** Both CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity. Whilst age may be the most obvious, 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. The abuse can be perpetrated by individuals or groups, males or females and children or adults.

The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse. It can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence. Victims can be exploited even when activity appears consensual and it should be noted exploitation as well as being physical can be facilitated and/or take place online.

Further information and documentation can be found here:

<https://www.wirralsafeguarding.co.uk/child-sexual-exploitation-cse/>

13 Sexual harassment, violence, harmful sexual behaviours (inc. peer on peer abuse and 'upskirting')

- 13.1 Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Sexual violence refers to sexual offences under the Sexual Offences Act 2003, including rape, assault by penetration and sexual assault (described in the guidance and in KCSIE 2021).
- 13.2 It is important that schools and colleges are aware of sexual violence and the fact children can, and sometimes do, abuse their peers in this way. When referring to sexual harassment we mean 'unwanted conduct of a sexual nature' that can occur online and offline and both inside and outside of school/college. When we reference sexual harassment, we do so in the context of child on child sexual harassment. Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.
- 13.3 Staff must challenge any form of derogatory and sexualised language or behaviour. Staff should be vigilant to sexualised/aggressive touching/grabbing. DfE guidance situates sexual violence, sexual harassment and harmful sexual behaviour in the context of developing a whole-school safeguarding culture, where sexual misconduct is seen as unacceptable, and not 'banter' or an inevitable part of growing up. Advice about tackling and reporting sexual harassment in schools and colleges from Sept 2021 is here:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/999239/SVSH_2021.pdf

It should be recognised that these issues are likely to occur, and so schools should have procedures in place to deal with them. Groups at particular risk include girls, students who identify as Lesbian, Gay, Bisexual, Transgender+ (LGBT+), or are perceived by peers to be LGBT+, and pupils with SEND. Pupils are protected from 'upskirting', bullying, homophobic, biphobic and transphobic behaviour, racism, sexism, and other forms of discrimination

- 13.4 Any discriminatory behaviours are challenged, and children are supported to understand how to treat others with respect. We also have a statutory duty to report and record any of the above incidents. Schools must record incidents across the whole spectrum of sexual violence, sexual harassment, and harmful sexualised behaviours so that they can understand the scale of the problem in their own schools and make appropriate plans to reduce it. For more guidance go to: [Sexual violence and sexual harassment between children in schools and colleges \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/999239/SVSH_2021.pdf) – from September 2021

All such incidents should be immediately reported to the Designated Safeguarding Lead (DSL) or equivalent and managed in line with your setting's child protection policies. Victims of harm should be supported by the school's pastoral system.

- 13.5 The appropriate safeguarding lead person should be familiar with the full guidance from the UK Council for Internet Safety (UKCIS), Sharing nudes and semi-nudes: advice for education settings working with children and young people <https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people>

Upskirting - 'Upskirting' is where someone takes a picture under a person's clothing (not necessarily a skirt) without their permission and or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress or alarm. It is a criminal offence. Anyone of any gender, can be a victim. The Voyeurism (Offences) Act, which is commonly known as the Upskirting Act, came into force on 12 April 2019.

What is consent? Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice. Further information about consent can be found here: [Rape Crisis England & Wales](#)

-

Sexual consent

- a child under the age of 13 can never consent to any sexual activity;
- the age of consent is 16;

14 Private Fostering

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

A close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins. Parents and private foster carers both have a legal duty to inform the relevant local authority at least six weeks before the arrangement is due to start; not to do so is a criminal offence.

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

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

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

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

15 Online Safety & Remote Learning:

The use of technology has become a significant component of many safeguarding issues. Child sexual exploitation; radicalisation; sexual predation- technology often provides the platform that facilitates harm. An effective approach to online safety empowers a school or college to protect and educate the whole school or college community in their use of technology and establishes mechanisms to identify, intervene and escalate any incident where appropriate.

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

- content: being exposed to illegal, inappropriate or harmful material
- contact: being subjected to harmful online interaction with other users

- conduct: personal online behaviour that increases the likelihood of, or causes, harm

For online safety, there is recognition in this guidance that most children are using data on their phones, on the 3G or the 4G network. In schools, this means that not only must staff think about filtering and monitoring within the school's infrastructure, they also need to have a policy about children accessing the internet whilst they're at school.

15.1 Filters and monitoring

Governing bodies and proprietors should be doing all that they reasonably can to limit children's exposure to the above risks from the school's or college's IT system. As part of this process, governing bodies and proprietors should ensure their school or college has appropriate filters and monitoring systems in place.

Whilst considering their responsibility to safeguard and promote the welfare of children, and provide them with a safe environment in which to learn, governing bodies and proprietors should consider the age range of their pupils, the number of pupils, how often they access the IT system and the proportionality of costs vs risks.

The appropriateness of any filters and monitoring systems are a matter for individual schools and colleges and will be informed in part, by the risk assessment required by the Prevent Duty.¹¹⁹ The UK Safer Internet Centre has published guidance as to what "appropriate" filtering and monitoring might look like: [UK Safer Internet Centre: appropriate filtering and monitoring](https://www.wirral safeguarding.co.uk/online-safety-guidance-parents/). There is guidance below designed to help parents and carers to keep their children as safe as possible when online: <https://www.wirral safeguarding.co.uk/online-safety-guidance-parents/>

16 Pre-Appointment Checks and Safer Recruitment

16.1 Any offer of appointment made to a successful candidate, including one who has lived or worked abroad, must be conditional on satisfactory completion of the necessary pre-employment checks.

16.2 When appointing new staff, schools and colleges must

- Verify a candidate's identity. Identification checking guidelines can be found on the GOV.UK website;
- obtain (via the applicant) an enhanced DBS certificate (including barred list information, for those who will be engaging in regulated activity);
- obtain a separate barred list check if an individual will start work in regulated activity before the DBS certificate is available;
- schools that work with children between 8 and 18 years old must recognise that the 'relationships and associations' that staff have in school and outside (including online), may have an implication for the safeguarding of children in the school. Where this is the case, the member of staff must speak to the school (Childcare Act 2006 – as amended).
- verify the candidate's mental and physical fitness to carry out their work responsibilities. A job applicant can be asked relevant questions about disability and health in order to establish whether they have the physical and mental capacity for the specific role;
- verify the person's right to work in the UK. If there is uncertainty about whether an individual needs permission to work in the UK, follow advice on the GOV.UK website;
- if the person has lived or worked outside the UK, make any further checks the school or college consider appropriate and
- verify professional qualifications, as appropriate.
- carry out prohibition check for all staff with QTS

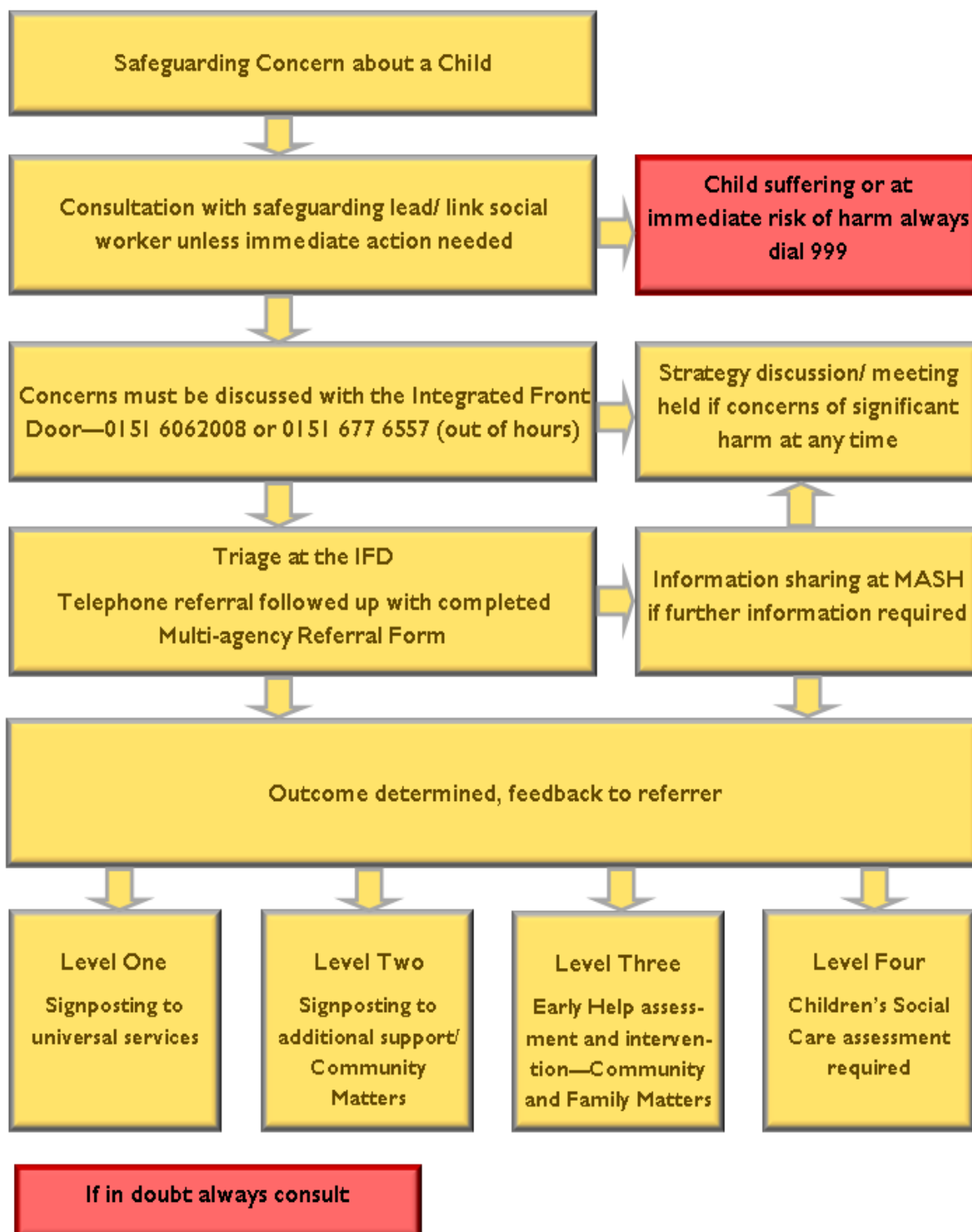
- complete a risk assessment for each volunteers to decide whether they need to do an enhanced DBS check or not. (Please note:, even if it is decided an enhanced DBS is to be requested, if the volunteer is not in regulated activity, then you're not legally allowed to do a barred list check).

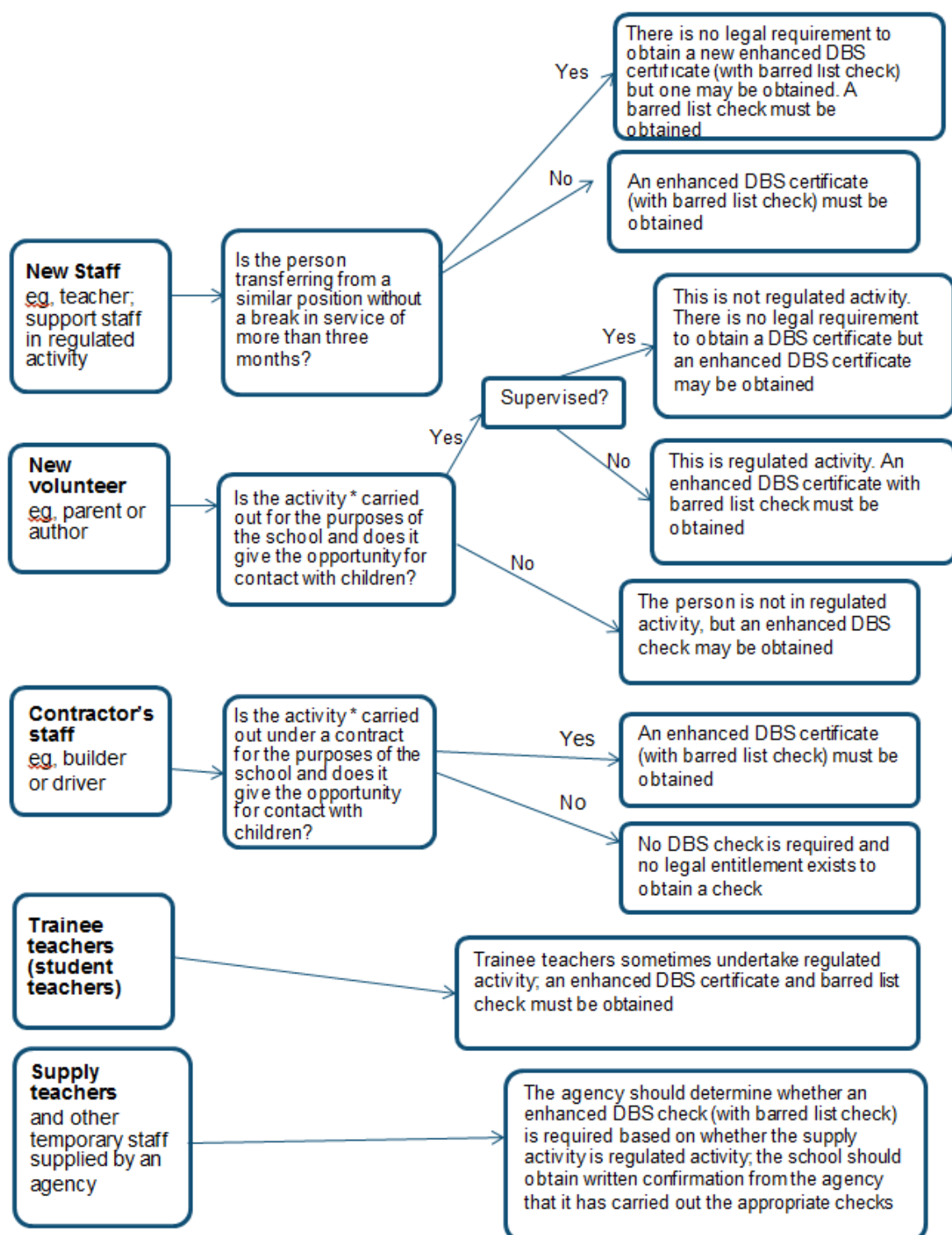
Further guidance can be found in Keeping Children Safe in Education (2021)

17 Single Central Record:

- 17.1 Schools and colleges must keep a single central record. The single central record must cover the following:
- all staff (including supply staff, and teacher trainees on salaried routes) who work at the school: in colleges, this means those providing education to children; and
 - the information that must be recorded in respect of staff members (including teacher trainees on salaried route) is whether the following checks have been carried out or certificates obtained, and the date on which each check was completed/certificate obtained:
 - an identity check / a barred list check / an enhanced DBS check/certificate / a prohibition from teaching check;
 - further checks on people who have lived or worked outside the UK; this would include recording checks for those EEA teacher sanctions and restrictions
 - a check of professional qualifications; and a check to establish the person's right to work in the United Kingdom.
 - a section 128 check for management positions as set out in paragraph 144-147 of KCSIE2020.
- 17.2 For supply staff, schools should also include whether written confirmation that the employment business supplying the member of supply staff has carried out the relevant checks and obtained the appropriate certificates, whether any enhanced DBS check certificate has been provided in respect of the member of supply staff, and the date that confirmation was received.
- 17.3 Maintained school governors - Governors in maintained schools are required to have an enhanced criminal records certificate from the DBS. It is the responsibility of the governing body to apply for the certificate for any of their governors who does not already have one. Governance is not a regulated activity and so they do not need a barred list check unless, in addition to their governance duties, they also engage in regulated activity.
- 17.4 The SCR shall be updated in the light of any further legislation.

Actions to take when there are safeguarding concerns about a child





* Activities listed under the guidance's definition of regulated activity and which are carried out 'frequently'

1. What is it?

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Sexual violence refers to sexual offences under the Sexual Offences Act 2003, including rape, assault by penetration and sexual assault (Fully described in the DfE guidance and in KCSIE). This briefing will focus on peer sexual harassment.

Sexual harassment means 'unwanted conduct of a sexual nature' that can occur online and offline and is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated / create a hostile, offensive or sexualised environment. It is important that schools are aware and that children can, & sometimes do, abuse their peers in this way.

2. What is sexual harassment?

Sexual harassment can include: sexual comments, such as telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names / sexual "jokes" or taunting / physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes and displaying pictures, photos or drawings of a sexual nature / online sexual harassment / non-consensual sharing of sexual images and videos

This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include: sexualised online bullying / unwanted sexual comments and messages, including, on social media / sexual exploitation; coercion and threats; and 'Upskirting'.

3. Why is it important?

The Department for Education (DfE) first published guidance on Sexual Violence and Sexual Harassment between children in schools and colleges, in 2017 (updated May 2018) which means that schools and colleges in England must have regard to it when carrying out their duties to safeguard and promote the welfare of children.

The advice covers children of all ages, from the primary through secondary stage and into colleges. Whilst the focus of the advice is on protecting and supporting children, schools and colleges should of course protect any adult students and engage with adult social care, support services and the police as required.

7. Recommended Reading:

[Sexual violence and sexual harassment between children in schools and colleges](#)

[Exclusion from maintained schools, academies and pupil referral units in England \(September 2017\)](#)

[Hackett, S. \(2014\) Children and young people with harmful sexual behaviours.](#)

NSPCC helpline Report Abuse in Education on 0800 136 663 or email help@nspcc.org.uk.

6. What should we do?

Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physical and verbal) and are never acceptable. It is important that all victims are taken seriously and offered appropriate support. Staff should be aware that some groups are potentially more at risk. Girls, children with SEND and LGBT children are at greater risk.

Reports of sexual violence and sexual harassment are extremely complex to manage. Victims need to be protected, offered appropriate support and every effort made to ensure their education is not disrupted. It is also important that other children, adult students and school and college staff are supported and protected as appropriate.



For school safeguarding support and training go to:

<https://www.wirralsafeguarding.co.uk/schools-2>

4. Key Statistics

Evidence and crime statistics suggest that anywhere from 1/5 to 2/3's of sexual abuse is committed by other children and young people. The NSPCC uses the figure of 1/3 as a mid-way point between the lower end and the higher end of the estimates.

37% of female students and 6% of male students at mixed-sex schools have personally experienced some form of sexual harassment at school. Girls are significantly more likely to be victimised with unwanted sexual messages and images from their peers online, with 31% of female respondents aged 13-17 years saying they had experienced this in 2019 compared to 11% of male respondents.

5. What is the impact?

Sexual harassment can create an atmosphere that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence. All staff should be aware of indicators and importance of making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated / not dismissing sexual violence or sexual harassment as "banter" / challenging behaviours (such as grabbing bottoms, breasts and genitalia, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them. The school safeguarding procedures should be transparent, clear and easy to understand for staff, pupils, students, parents and carers.

1. What is Peer Sexual Abuse?

It's normal for children to display a range of sexual behaviours as they grow up, but sometimes their behaviour can be harmful to themselves and others. Around a third of child sexual abuse is committed by other children and young people (Hackett, 2014). We call this peer sexual abuse.

Peer Sexual abuse includes, but is not limited to:

- physical and sexual abuse / sexual harassment and violence / emotional harm / on and offline bullying / teenage relationship abuse

2. What is the context?

Peer sexual abuse can happen in a range of settings, including: at school / at home / in public spaces / at parties / at a friend's house / online. It can take place in spaces which are supervised or unsupervised. Within a school context, for example, peer-on-peer sexual abuse might take place in spaces such as toilets, the playground and outdoor areas, corridors and when children are travelling to and from school (Contextual Safeguarding Network, 2020).

It should be recognised that the behaviour in question is harmful to both the perpetrator (who is a child) and the victim. Behaviour may be intimate or non-intimate.

3. Why is it important?

Young people can be confused about whether or not they have experienced peer sexual abuse. Reasons for this include:

Confusion about what constitutes 'normal' sexual activity / they don't know whether they gave consent (N.B no-one can consent to being abused) / they were using substances when the abuse took place / the abuse was carried out by a friend or partner / the abuse took place online; and/or they blame themselves for what happened.

Parents & professionals don't always know the most appropriate way to respond to children who display harmful sexual behaviour and/or who have experienced peer sexual abuse.

7. Further Reading

[Peer on peer abuse | Safeguarding Network - confidence in safeguarding](#)

[Protecting children from peer-on-peer sexual abuse | NSPCC Learning](#)

Department for Education advice: [Sexual violence and sexual harassment between children in schools and colleges](#) - GOV.UK (www.gov.uk)

[What is peer-on-peer abuse? - schools, early years, further education and skills](#)

6. What should you do?

It's important that adults who work or volunteer with children can identify if sexualised behaviour becomes harmful or abusive, and respond proportionally to keep all the children involved safe. This also includes knowing how to proactively:

- Respond to disclosure or a concern raised
- Initiate a discussion with your safeguarding lead
- Take immediate action
- Make a referral when appropriate (for the victim and also perpetrator who may be a child in need).

4. What is the impact?

Experiencing peer sexual abuse can have a long-lasting negative impact on a child's wellbeing that can reach into adulthood. Effects can include:

- mental health issues – such as post-traumatic stress disorder (PTSD), anxiety, low self-esteem, depression, self-harming
- challenging behaviour – such as substance misuse, sexualised behaviour, offending
- relationship problems – for example intimacy issues, having unstable relationships, unable to form or sustain friendships

5. Spotting the signs and symptoms

- absence from school or disengagement from school activities
- physical injuries / mental or emotional health issues
- becoming withdrawn – lack of self esteem / lack of sleep / alcohol or substance misuse
- changes in behaviour / inappropriate behaviour for age / abusive towards others

As with all safeguarding issues, peer on peer abuse can impact on children and young people without these characteristics.



For more local partnership information:

[Harmful Sexual Behaviour - Wirral Safeguarding Children Partnership](#)

[Child Abuse Campaign - Wirral Safeguarding Children Partnership](#)

1 Background

Social media has revolutionised the way we connect with each other. Platforms such as Facebook, Twitter and Instagram are now used by one in four people worldwide. Many young people have never known a world without instant access to social networking platforms, and this has transformed the way in which this generation interact and communicate with each other.

2 Why does it matter?

Adolescence and early adulthood is a critical time for social and emotional development, and so understanding the effects of social media on health at this stage is of particular importance. Whilst social media can be a hugely positive influence, it also has the potential for being a negative and destructive influence on mental well-being, particularly for children and young people.

3 Why does it matter?

Research suggests a typical teenager will check their phone on average 150 times per day and will take an average of 12 selfies before sharing 1, with just under 50% of young people also adding a filter to 'improve' their appearance. Posts on Social Media will therefore often present an 'idealised' view which creates unrealistic expectations.

7 Further Information

Please see the links below for more information about mental health and internet safety
<https://www.wirralsafeguarding.co.uk/mental-health/>
<https://www.wirralsafeguarding.co.uk/internet-safety/>
<https://www.wirralsafeguarding.co.uk/new-out-of-hours-mental-health-advice-line-1/>

6 How to respond

Professionals need to be aware of both the positive and negative influences of social media. Do not be distracted by the technology, mental health concerns are a safeguarding issue.

Questions for professionals:

Do you routinely ask about social media use when assessing a child/family?

Do you talk to children about safe social media use and their broader online behaviour?



Social media and mental health

<https://www.wirralsafeguarding.co.uk/>

4 Key statistics

91% of 16-24 year olds use the internet for social networking: Rates of anxiety and depression in young people have risen 70% in the past 25 years: Social media use is linked with increased rates of anxiety, depression and poor sleep: Cyber bullying is a growing problem with 7 in 10 young people saying they have experienced it.

5 Positive experiences

Social networking offers young people an opportunity to understand, the health experiences of others. Sharing problems or issues with friends, peers and broader social networks can be met with positive reaction. Nearly seven in 10 teens report receiving support on social media during tough or challenging times. Social media can act as an effective platform for accurate and positive self-expression, letting young people put forward their best self.

1 What is it?

..“the action we take to promote the welfare of children and protect them from harm - is everyone’s responsibility. Everyone who comes into contact with children and families has a role to play.”

Working Together 2018

2 What is it?

Effective safeguarding is about vigilance. Organisations and individuals whose work brings them into contact with children and young people must have an awareness of safeguarding, abuse, neglect and maltreatment.

3 Why is it important?

There have been a number of cases over the years, where children have been seriously harmed or died. When these cases have been reviewed it has been shown that with better safeguarding processes the child may well have been protected.

7 Further Information

For more information about safeguarding:

<https://www.wirralsafeguarding.co.uk/concerned-about-a-child/>

<https://www.wirralsafeguarding.co.uk/professionals/serious-case-reviews/>

<https://www.wirralsafeguarding.co.uk/multi-agency-thresholds/>

6 How to respond

Receive - Listen actively

Reassure - ‘You’ve done the right thing by coming to me’,

Respond - Tell what you are going to do

Report - As soon as possible, to your Safeguarding Lead or the Integrated Front Door (0151 606 2008)

Record — facts not opinions



Safeguarding Children

<https://www.wirralsafeguarding.co.uk>

4 Types of abuse

Abuse falls into 4 categories:

Physical—hitting, biting, slapping

Emotional—belittling, name calling, ignoring

Neglect—lack of food, clothing, emotional or developmental support

Sexual—direct sexual contact, forming a sexual ‘relationship’ with a child.

5 Recognising signs

Some of the following signs might be indicators of abuse or neglect: behaviour changes, aggressive withdrawn or clingy; ill-fitting clothes, poor hygiene; problems at school, regularly missing from school; parents who are dismissive and non-responsive; children who are concerned for/ responsible for younger siblings.

1. 72 hours missing

Strategy meeting should be convened. Serious Notification Form sent to Local Authority. Multi-agency meetings should continue weekly if child continues to be missing. Press release discussed.

2. 3 missing episodes in 30 days

Case to be reviewed by IFD if no support in place.

If case is in Early Help the Lead Professional should convene a Family Meeting to determine if existing plan is working.

If case is in Childrens Social Care there should be consideration for a Strategy Meeting or review of current plan

3. 9 missing episodes in 90 days

Case should be reviewed by IFD to see if it an open case.

If case is in Early Help the Lead Professional should convene a Family Meeting to determine if existing plan is working. Needs and risks should be identified and referred back to the IFD.

If case is in Childrens Social Care there should be consideration for a Strategy Meeting or review of current plan

Police MFH co-ordinator to be invited to all meetings

7. Return Home Interviews

Catch22 will endeavour to complete a return interview within 72hrs of the child being found and seen safe and well by Police. The return interview is sent to Police Missing from Home Coordinator, allocated social care and or IFD. These return interviews should inform the child's plan (EH, CiN, CP, CLA)

6. Catch22

For Wirral Looked after Children who are placed outside of the borough, it is the responsibility of the allocated social worker to inform Catch22 of this missing episode in order that they can carry out the return interview. Catch22 aim to reduce missing episodes with young people by offering direct work where appropriate.

4. Absent/Away from Placement

When a child or young person is identified as not being at a location they are expected to be, the reporting individual must take proactive steps to trace the child's whereabouts prior to contacting the police.

5. Absent/Away from Placement

Consider possible risks of CSE, substance misuse, family members where they have previously been removed from. A Care Planning meeting should be held if the child is persistently absent to ensure the child is safeguarded.



1 Background

Sexting means sending sexually explicit messages or images/videos. These can be sent by any messaging service and are often sent via social media. Sexting is sometimes known as 'trading nudes', 'dirties', and 'pic-for-pic'. Sexting is being increasingly used by young people as a 'pre-relationship' activity.

2 Why does it matter?

Sharing explicit images of a child is illegal, even if the person doing it is a child. The young person is breaking the law if they: take an explicit photo or video of themselves or a friend; share an image of a child; store a video of a child, even if that child gave permission.

However as of January 2016 the police can choose to record a crime was committed but not take formal action if its not in the public interest.

3 Why does it matter?

Studies suggest that up to a third of 15 year olds have shared a nude or semi-nude image of themselves. Studies have also shown that 90% of those that have received a sext have subsequently shared it. Young people often perceive sexting as 'no big deal' but the consequences of sharing explicit images can be far-reaching.

4 Why does it matter?

When an image is shared online all control is lost and that image is in the public domain. This means that photos or videos which a young person may have shared privately could still be end up being shared between adults they don't know. These images have also been known to resurface later on in life and been used as blackmail or 'sextortion'.

5 Why does it happen?

There may be many reasons why a young person shares this kind of image. They may feel under pressure, or may feel it helps them fit in. They may trust the person they are sending it to, or love them. It may be an extension of adolescent 'risk-taking' behaviour, or been seen as 'just banter'.

7 Further Information

Please see the links below for more information about mental health and internet safety

<https://www.wirralsafeguarding.co.uk/sexting/>
<https://www.nspcc.org.uk/keeping-children-safe/online-safety/sexting-sending-nudes/>
<https://learning.nspcc.org.uk/research-resources/briefings/sexting-advice-professionals>
<https://www.internetmatters.org/issues/sexting/>

6 How to respond

Professionals should:

Talk to children about safe social media use , listen without judgement.

Ensure your focus remains child-focused.

Report to the Police and Social Care any concerns particularly where the child is under 13 or particularly vulnerable, or where there is adult involvement.

Try to get the image removed by contacting the website or Internet Watch Foundation (IWF).



<https://www.wirralsafeguarding.co.uk/>

1 What is it?

Adverse childhood experiences (ACEs) refer to stressful or traumatic events that children and young people can be exposed to as they are growing up. ACEs range from experiences that directly harm a child, such as physical, verbal or sexual abuse, and physical or emotional neglect, to those that affect the environments in which children grow up, such as parental separation, domestic violence, mental illness, alcohol abuse, drug use or imprisonment.

2 What is it?

There is a distinction between 'normal' stressful life events, such as parental divorce or illness of a loved one, and adverse childhood experiences, very traumatic life events, such as being or seeing someone else physically or sexually abused. These are experiences that will often be associated with post-traumatic stress disorder.

3 Why it matters

The first UK study in Blackburn with Darwin (BwD; Bellis et al, 2014a) found that increasing ACEs were strongly associated with adverse behavioural, health and social outcomes across the life course. Further studies found that almost half of the general population reported at least one ACE and over 8% reported four or more.

7 What should we do?

- Think about how those experiences will have an impact on the child's healthy development and on their behaviours.
- Recognise the signs, and see beyond a child just 'acting out'.
- Try to help them become more grounded, give them choices and allow them to feel more in control.
- Understand that it is likely this will have an impact on any attachment for that child and there will be mistrust. We need to try and build a relationship with the child that is different to ones they have experienced previously.
- Finally, it is important to remember that ACEs tend to be passed from generation to generation.

6 What is the impact?

ACEs research shows that there is a strong dose-response relationship between ACEs and poor physical and mental health, chronic disease (such as type II diabetes, chronic obstructive pulmonary disease; heart disease; cancer), increased levels of violence, and lower academic success both in childhood and adulthood.



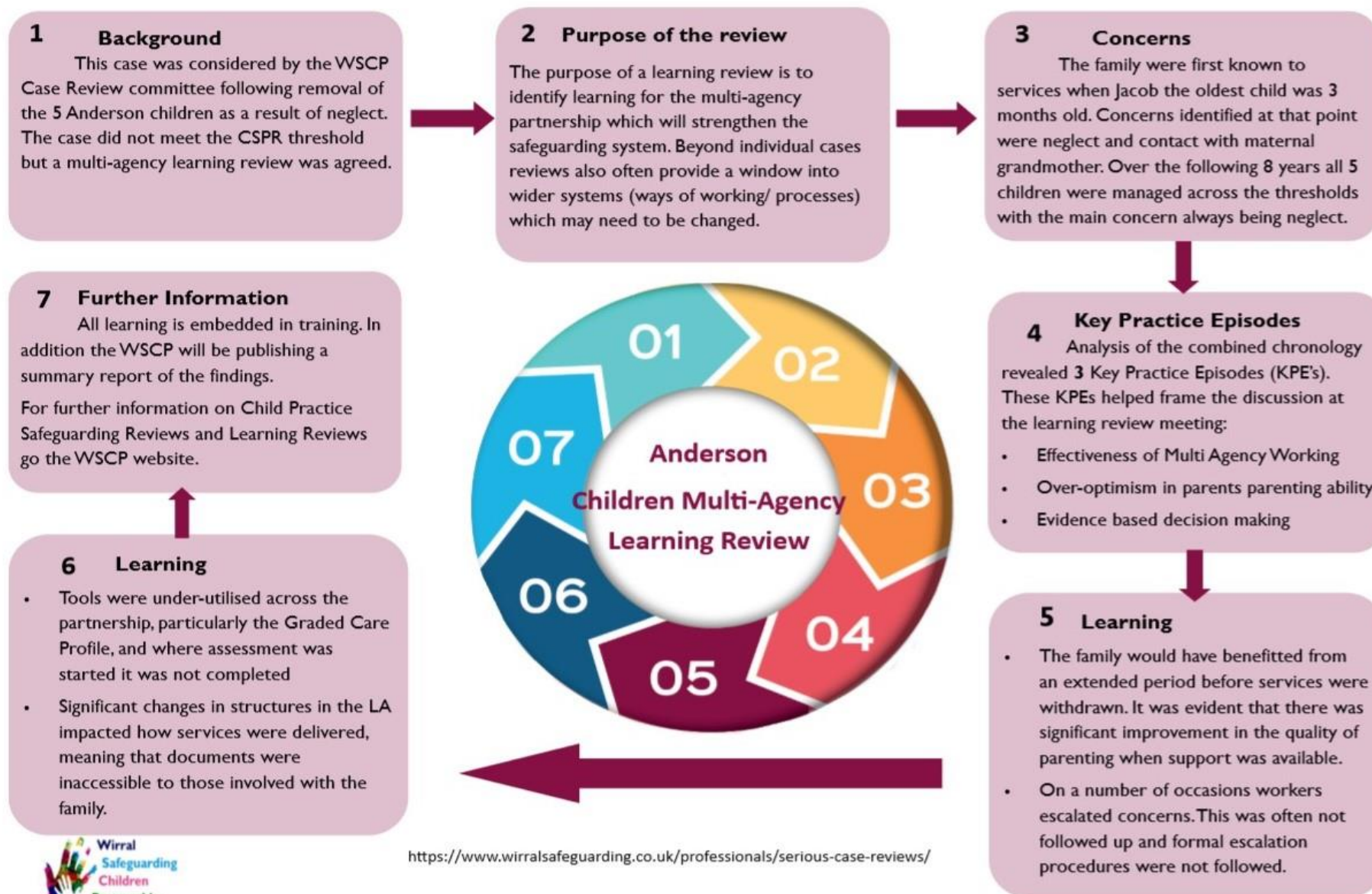
4 Why it matters

When exposed to stressful situations, the "fight, flight or freeze" response floods our brain with corticotrophin-releasing hormones (CRH), which usually forms part of a normal and protective response that subsides once the stressful situation passes. However, when repeatedly exposed to ACEs, CRH is continually produced by the brain, which results in the child remaining permanently in this heightened state of alert and unable to return to their natural relaxed and recovered state.

5 What is the impact?

Children and young people who are exposed to ACEs have increased – and sustained – levels of stress. In this heightened neurological state a young person is unable to think rationally and it is physiologically impossible for them to learn or develop in the same way a child not having these experiences will.

<https://www.wirral safeguarding.co.uk/adverse-childhood-experiences-aces/>



1 What is it?

Contextual safeguarding seeks to identify and respond to harm and abuse posed to young people outside their home, either from adults or other young people.

2 Why is it matters

Traditional approaches to protecting children/young people from harm have focussed on the risk of violence and abuse from inside the home, and don't always address the time that children/young people spend outside the home.

3 Why it matters

As children move from early childhood and into adolescence they spend increasing amounts of time socialising independently of their families. The nature of young people's relationships, that they form in these settings, inform the extent to which they encounter protection or abuse.

7 What should we do?

Identify the ways in which young people can change the social conditions where abuse has occurred, and encourage self-responsibility for making these changes. Engage with individuals and sectors who have a bearing on social contexts, ie shopkeepers, local policing, community leaders, to make environments safer.

6 What should we do?

A Contextual Safeguarding approach aims to disrupt harmful extra-familial contexts rather than move young people away from them. The approach seeks to identify the ways in which professionals, adults and young people can change the social conditions of environments in which abuse has occurred.



4 Peer relationships

Research tells us that peer relationships are increasingly influential during adolescence. If a young person forms friendships in contexts characterised by violence and/or harmful attitudes these relationships will be anti-social and unsafe.

5 What are the risks?

There are a wide range of potential risks where the prime cause of harm is outside of the family. This list isn't exhaustive but includes: peer on peer abuse; exploitation and online abuse; missing episodes; gang involvement; radicalisation; trafficking and modern slavery.

1 What is SFEF?

Supporting Families Enhancing Futures (SFEF) is a new model for working with children, young people and their families across levels 3 and 4 (Team Around the Family, Child in Need and Child Protection) of the Wirral Continuum of Need.

2 The principles of SFEF

1. Understand the world of the child(ren).
2. Understand the world of the adults
3. Recognise family strengths as well as concerns.
4. Engage families in the change process.
5. Measure change through actions and interventions that lead to child-focused outcomes.

3 The lived experience

The focus of the model is on understanding how issues within the family affect the child's daily lived experience. After a referral is made the child is spoken to about their 'day' from the moment they wake up to the moment they go to sleep. In this process their thoughts and feelings will be explored.

7 The plan

The plan will identify: Recognised strengths of the family; What professionals are concerned about (what needs to change); Who is going to complete actions (and by when).

The plan will be reviewed regularly to measure positive changes to the lived experience of the child(ren).

6 Traffic lights

Traffic lights will be used as an easy visual representation of levels of concern.

RED - developmental needs are not being met likely to cause significant harm to the child
AMBER - developmental needs are not being met may impact on the health and development of the child
GREEN - developmental needs are being met

4 Single assessment

All practitioners in contact with the family will then be asked to feed into a single assessment. In the case of Child in Need and Child Protection this will be done via Liquid Logic. This assessment is co-ordinated and analysed by the Social Worker. All practitioners and the family will see the final assessment before the first multi-agency meeting.

5 Multi-agency meetings

The meeting room should be set up in a horseshoe shape with the focus being on the issues identified in the assessment, which are displayed at the front of the room. The focus of the discussion is then on how any issues will be addressed. The family are involved in this discussion with their views on concerns and strengths being explored.



1 What is it?

County Lines is the term commonly used to describe the approach taken by gangs and criminal networks to supply class A drugs from urban to suburban areas across the country, including market and coastal towns, using dedicated mobile phone lines known as 'deal lines' or 'graft lines'.

2 How it works

Typically, the 'graft phone' is kept away from the area where the drugs are sold and a relay system is used to contact those acting as dealers. A local property which is often occupied by a vulnerable person is used as a base for the groups activities. The acquiring of the property is often by force or coercion and is known as 'cuckooing'.

3 Why it matters

Groups and Organised Crime Groups exploit children and teenagers to deal on their behalf. Children are seen as easily controlled and inexpensive to resource. These children will often fall into some form of debt to the group and this can lead to violence and assaults against them.

7 What should we do?

Be cautious with the language we use. Some language minimises the risks and reality of the child's situation, so professionals should avoid using such terms in their recording and conversations.

Use the County Lines and Exploitation Toolkit for guidance.

If a child or young person is at risk of harm or abuse please report it to the Integrated Front Door on **0151 606 2008**. In an emergency always dial **999**.

6 What are the signs?

Recognising a child who is being exploited means seeing changes in behaviour including; going missing from home or absent from school without explanation; mixing with new friends their parents don't know; experimental drug use, often cannabis; having more than one mobile phone; appearing nervous/scared/evasive/secretive; suffering injuries they can't explain; having tickets for train or coach travel.

4 Why it matters

The children involved often do not perceive themselves to be victims of exploitation, as they consider they have acted voluntarily. This is further complicated as the exploited children often receive cash or gifts/drugs from their abusers as a means to groom them.

5 Recognising vulnerability

There are several factors that will make a child more vulnerable to being exploited including: Living in a chaotic or dysfunctional household; Drug or alcohol misuse; History of abuse; Recent bereavement or loss; Gang association either through relatives, peers or intimate relationships; Friends with children who are exploited; Lacking friends from the same age group; Living in residential care; Low self-esteem or self-confidence.



<https://www.wirralsafeguarding.co.uk/child-exploitation/>



1 What is an escalation?

If you feel that a practitioner or an agency is not acting in the best interests of the child, young person or family, you have a responsibility to respectfully challenge the practitioner or agency, and escalate your concerns.

2 When would you escalate?

When working with practitioners from other agencies there will at times be differences of opinion or concerns about professional practice in relation to a child, young person or family. The new WSCB procedure outlines the escalation process including time scales and principles for resolution. There are 4 key stages to resolving multi-agency escalations.

3 Stage 1

- Initial attempts should be made **between workers** to resolve the issue
- If resolution cannot be achieved professionals must escalate to their **safeguarding lead and/or team manager**
- Take Action Within 24 Hours of Concern
- Record the escalation
- Notify the WSCB

4 Stage 2

- The Line Manager/Safeguarding Lead should discuss the concerns/response with their opposite manager in the other agency.
- If resolution cannot be achieved professionals must notify their Senior Managers (or in the case of schools the Chair of Governors alongside the Head)
- WSCB to be notified if resolved

5 Stage 3

- The Senior Manager will escalate to the WSCB Board Representative who will arrange a meeting to seek resolution.
- If agreement cannot be achieved, the matter should be brought to the attention of the WSCB Business Manager who will refer the matter to the WSCB Chair.

7 Record keeping

- Agencies should record their use of the Escalation Procedure (Stages 1-3) and be able to report outcomes of escalations to the WSCB.
- The child's record should be updated
- The WSCB will keep a record of all escalations and outcomes at Stage 4, and may request information about the outcomes of escalations at Stages 2 and 3.

6 Stage 4

- The WSCB Chair will seek written representation, and may request a meeting with those involved.
- The WSCB Chair will make a recommendation on the most appropriate way to proceed and communicate this within 5 days of notification.



7 Minute Briefing

Neglect

1. Background

Neglect is the most common reason for referral to Childrens Services. The definition of neglect is not as objective as other forms of abuse, and so relies on professional assessment.

2. What is it?

Professionals will often intervene with physical environment cases of neglect. However the the child will often see neglect in terms of emotional issues.

4. How to recognise it

Failure to provide: adequate food, shelter and clothing; adequate supervision; access to medical care; failure to protect from physical harm; unresponsive to child's emotional needs.

3. What is it?

Neglect is not a one off event but rather an accumulation of issues over time. It can happen to children of all ages including teenagers

5. Causes

In many cases the cause is recorded as either poor parental health (54%), domestic abuse (49%), substance misuse (49%), alcohol misuse (38%). This is unlikely to be a 'quick fix'.

6. Why it matters

Neglect can be fateful and affects the global development of children. Neglect can also affect longer term development with negative consequences for physical and mental health over the lifetime

7. Action

Look out for low level concerns and intervene early to assist families before crisis. Ensure you listen to the child's story. Complete an assessment to decide on assistance needed. Refer to targeted/social care.

7 Minute Briefing

Child Sexual Exploitation

1. Background

Child Sexual exploitation (CSE) is a form of abuse that can happen to any child irrespective of social background.

This is an issue of abuse not a lifestyle choice. Children who are sexually exploited are the victims

Male victims are very under-reported.

2. What is it?

CSE often involves a child receiving 'something' e.g. gifts, money, alcohol, drugs, cigarettes etc. for performing sexual activities. Many young people will not see themselves as victims as they are led to believe they are making their own choices, but they aren't.

3. Why it matters?

Children who become exploited in this type of abuse face huge risks to their physical, psychological and emotional health.

Victims require long term intensive support.

The perpetrators are criminals and must be pursued through the courts

4. Categories of CSE

CSE can take various forms including: Online grooming; Gang exploitation; Boyfriend/girlfriend model; Party model; Street model; Peer Model

CSE offences always include an element of grooming – manipulating a child in order to exploit them.

5. Vulnerability

Factors that will make a child more vulnerable include; Missing from home; disengaged from education; feeling alienated from family; lack of friends/peers; mental health issues; criminality.

Victims will often become secretive and estranged from family and friends.

6. Local issues

Cases referred locally go to the MASCE for review.

Most recent statistics show; 81% of referrals are for girls; the majority of cases include an aspect of internet use.

Children who go missing are particularly vulnerable.

7. Action

Recognise the warning signs of CSE. Use the screening tool and consult if you have concerns.

Make a referral to the MASH team on 0151 606 2008. Complete a CSE 1 form. Document all activity.

Further info:
www.listentomystory.co.uk

<https://www.wirralsafeguarding.co.uk/professionals/child-sexual-exploitation/>

7 Minute Briefing

Harmful Sexual Behaviour

1. What is Harmful Sexual Behaviour (HSB)

- HSB can be defined as :
'One or more children engaging in sexual discussions or acts that are inappropriate for their age or stage of development. These can range from using sexually explicit words and phrases to full penetrative sex with other children or adults'.

2. HSB Behaviours

- HSB includes both contact and non- contact behaviours (e.g. grooming, sexting, taking pictures) and the young person has displayed a harmful behavioural threat (verbal, physical or emotional) to coerce, threaten or intimidate a victim.

3. Consent

- To give consent to sex or a sexual act a person must be 16 years old or over, understand, and be able to make a choice or change their mind. If a young person is under the age of 13 years, under the Sexual Offences Act 2003 they cannot legally consent to any form of sexual activity.

4. Identifying HSB

- To help professionals to identify behaviour which might be harmful Brook have published a traffic light tool (available on the WSCB website)
- The tool provides a continuum of sexual behaviours from normal and healthy to harmful and provides a resource to identify, assess and respond appropriately to sexual behaviours

5. Response to children displaying HSB

- Using guidance document and traffic light tool professionals assess whether behaviour is healthy, inappropriate or harmful
- Any inappropriate or harmful behaviour triggers completion of a request for services form and strategy meeting

6. Key Information

- Around 90% of children who engage in HSB are adolescent boys
- Common features amongst children who present with HSB are a history of multiple abuse and disadvantage, and having a learning disability
- Both perpetrators and victims must be viewed under safeguarding and child protection procedures

7. Useful Links

WSCB Multi-agency guidance:

<https://www.wirralsafeguarding.co.uk/procedures/6-3-children-young-people-display-sexually-inappropriate-harmful-behaviour/>

Brook Traffic Light Tool:

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

7 Minute Briefing

Private Fostering

1. Background

Since the Childrens Act 2004 it has been a legal responsibility for Local Authorities to recognise, monitor and support any child in their area that is being 'privately fostered'.

2. What is Private Fostering?

This is an informal arrangement where a child up to the age of 16 (or 18 if registered with a disability) is living with someone not classed as family under the Childrens Act 1989, for a period of 28 days or more.

3. Why it matters?

It is believed a lot of children are living in these circumstances unrecognised which could lead to abuse.

Victoria Climbié was brought into the country by a distant relative who went on to abuse and murder her.

4. Considerations

The period of the arrangement could be broken by a brief visit home may still be classed as Private Fostering. So does not need to be 28 days consistently.

The parents will still hold Parental Responsibility and will need to be consulted when decisions about care are made.

5. Responsibility of the Private Fosterer

To notify the Local Authority before entering into any arrangements.

To agree to checks and assessment being made.

To agree the terms of the care with the parents or whoever holds parental responsibility.

6. Responsibility of Local Authority

Complete a Child in Need Assessment of suitability.

Complete checks on the adults in the household, DBS, Criminal Records.

Assign an IRO to undertake regular reviews of the circumstances.

7. Action

Recognise when a child you are working with may be in this situation, or about to be.

Make a safeguarding referral to the MASH Team on 0151 606 2008.

Give as much information about the child and the circumstances as possible.

7 Minute Briefing

Domestic Abuse

1. Background

Domestic abuse can affect anyone from any background. Whilst the majority of cases are male on female violence there has been an increase of female on male violence and violence in same sex relationships.

2. What is it?

'Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members, regardless of gender or sexuality'.

3. Types of abuse

Domestic abuse can take the following forms: Physical/sexual abuse and violence; psychological abuse and name-calling; financial abuse and control of money in the house; emotional abuse and emotional blackmail.

4. Why it matters?

In 90% of cases children are in the same or the next room when the incident occurs. They may be emotionally distressed witnessing abuse, or physically harmed themselves.

5. Local issues

The highest risk age for women is between 25-45. The highest risk of witnessing domestic abuse is in children aged under 5. The most referrals come from the Birkenhead area.

6. How to respond

Make sure that any immediate harm is managed. Inform the police if risk of harm is imminent. Discuss safety planning with the victim. Ensure safety of children is paramount.

7. Action

Recognise warning signs. Complete the DASH form with the adult victim (over 16) and the RIM form with the children. Make a referral to the MASH team. Refer to MARAC in those cases where risk is high.

Early Help - On a Page

<https://www.wirralsafeguarding.co.uk/professionals/what-is-early-help/>

Early Help & Prevention Offer	All People	Some People	Specific People	
	Global Prevention	Focused Prevention	Targeted Early Support	Reactive Intervention
What are we aiming to do?	Provide education and encouragement to empower children, young people and families	Prevent anticipated need arising by supporting children, young people and families	Meet needs and reduce the likelihood of referral to Children's Services	Deliver focused activity to reduce the need for Children's Social Care intervention
Who?	All children and young people	Children and young people belonging to a vulnerable group	Children and young people at level 2 on the continuum of need	Children and young people at level 3 on the continuum of need
How will we know about them?	Universal coverage with opportunity for self-identification/selection	Identification through universal access, data analysis and insight	Professional identification and referral to Community Matters	Professional identification and referral to Family Matters and/or Children's Services
What will we do	Partnership approach to providing a wide range of activities, information, advice and guidance	Partnership approach to providing a wide range of preventative activity, signposting and guidance	Partnership Early Help Episode: Lead Worker, EHAT, Family Plan	LA Early Help Episode: Lead Worker, EHAT, Family Plan
Who will do this?	Partnership offer: published on WSCB website, the Hive Youth Zone, Healthy Child Programme, 3 and 4 year old funding for early education LA Services: Children's Centre Universal Offer, Play Services Youth Hubs and Hubs, Health Services in Schools	Partnership offer: published on WSCB website, 2 year old funding for early education LA Services: Early Years Family Workers, Children's Centre Groups, Health Services in Schools 1:1s and Parent Education, Creative Youth Development, Alcohol and Substance Education	Community Matters services: WEB, WIRED, Safer Wirral Hub, Caritas, Fender Community Hub, The Open Door Centre LA Services: Early Years Portage Team, Detached Youth Work, Youth Projects- GIRLS, LADS, Life Skills	Family Matters services: Targeted Family Support, Pre-Birth & Infant Team, Adolescent Response Team, Family Group Conferencing LA Services: Alcohol & Substance Misuse Work, Counselling,
How? Methods/ model?	Range of activities provided through the Children's Centre What's On guides, guided play sessions; open access to youth hubs and clubs with a range of activities, advice and guidance, drop in sessions for all secondary school pupils	Range of parenting programmes, 1:1 support, peer support, parent education sessions, theatre and arts activity, briefings, multi-agency workshops, partnership with schools	Partnership Early Help Episode: Lead Worker, EHAT, Family Plan underpinned by SFEF Community Matters services: parenting, mental health support, advocacy, family support, debt advice, health & wellbeing, whole-family approach	Early Help Episode: Lead Worker, EHAT, Family Plan underpinned by SFEF Family Matters services: parenting, reducing conflict, family mediation, 1:1 support; 1:1 nurture programme, 1:1 gateway programme, housing advice, whole-family support plan, co-ordination of multi-agency approach
How will we know the impact?	Data on engagement: registrations, reach, contact, sustained contact, evaluations from children, young people and families	Increase in early help activity, reduction in contacts to Children's Social Care, evaluations from children, young people and families	Reduction in contacts to Children's Social Care, cases closing with needs met, family evaluations	Reduction in referrals to Children's Social Care, progress of step downs, cases closing with needs met, family evaluations

Children, young people and families are at the heart of our services - We will ensure that we engage with children, young people and families to improve and co-produce future service provision.