Fair Ways Schools
Child Protection Policy

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Fair Ways Vision, Mission and Values

Our vision
To build a community that changes lives, makes a difference to society and leaves a legacy greater than us and our contributions.

Our mission
To grow a compassionate, resilient, and trauma-informed community, that embraces learning, so that we improve the lives and outcomes of individuals.

Our values
Our values form the heart of the work we do, defined by Fair Ways people, for Fair Ways people. These are the values by which we operate, by which we are governed, and to which we are held accountable.

We therefore expect every individual within Fair Ways to *play their part*:

PROFESSIONAL	**ACCEPTING**	**REFLECTIVE**	**TRANSPARENT**
· We do what we say we will. · We approach challenges with optimism and enthusiasm. · We don't judge, we notice. · We put the needs of the service before our own personal gains.	· We don't give up on people. · We value all individuals and are willing to challenge them. · We embrace each other's differences as much as our similarities. · We accept responsibility for our actions.	· We give feedback, we invite feedback, we listen to feedback. · We look inward before we look outward. · We learn as much from our mistakes as from our successes. · We listen to each other, learn from each other and grow together.	· We are always willing to explain why. · We have the courage to be open and honest. · We earn trust through our transparency. · We live by our values even when no-one is watching.

1. Scope, Purpose and Aims

1.1 Fair Ways Education recognises its moral and statutory responsibility to safeguard and promote the welfare of every child. We provide a safe, welcoming and child-centred environment in which children and adults can speak openly, be listened to and receive appropriate help.

1.2 The school maintains an attitude of "it could happen here". Safeguarding is everyone's responsibility. Child protection is part of safeguarding and concerns must be acted upon promptly, proportionately and in accordance with current statutory and local procedures.

1.3 The purpose of this policy is to provide staff, volunteers, contractors, trustees/directors and other relevant adults with a clear framework for preventing harm, recognising concerns, responding to disclosures, sharing information lawfully, making referrals and supporting children.

1.4 The aim is to**:**

- protect children from maltreatment and prevent impairment of their health or development;
- identify concerns early and provide the right help at the right time;
- ensure every safeguarding concern is taken seriously and acted upon;
- promote a culture in which children are listened to and their wishes and feelings are considered;
- work effectively with parents/carers and partner agencies while prioritising the child's safety;
- ensure staff understand their individual safeguarding responsibilities and know how to escalate concerns.

1.5 Please refer to the following appendices for additional information:

Appendix A – Flowchart for Child Protection Procedures
Appendix B – Dealing with Disclosures
Appendix C – Allegations against members of staff
Appendix D – Briefing sheet for temporary and supply members of staff
Appendix E – What is child abuse?

2. Principles and values

2.1 Children's welfare and best interests are paramount. Safeguarding is everyone's responsibility; no concern should be dismissed because it appears minor.

2.2 Children are individuals and may experience safeguarding risks differently because of age, disability, communication needs, identity, family circumstances, culture or other vulnerabilities.

2.3 The school recognises that abuse may be perpetrated by adults or by other children and may occur online, offline, in the home, in school or in the wider community.

2.4 Children need the right help at the right time. The school will use early help, targeted support and statutory referral routes as appropriate.

2.5 Information will be shared on a lawful, necessary and proportionate basis to safeguard children. Data protection is not a barrier to appropriate safeguarding information sharing.

2.6 Parents/carers will normally be involved where appropriate, but the school may share information or make a referral without informing them when doing so could increase risk, prejudice an investigation or otherwise be contrary to the child's welfare.

2.7 The school will work with safeguarding partners and will challenge or escalate where the response to a concern is not sufficient.

3. Scope and definitions

3.1 This policy applies to all employees, agency and bank staff, volunteers, contractors, visitors, trustees/directors and other adults working on behalf of or in the school.

3.2 A child means anyone under 18. The policy may also apply to visiting children and young people where relevant.

3.3 Safeguarding and promoting the welfare of children includes protecting children from maltreatment; preventing impairment of health or development; ensuring children grow

up in circumstances consistent with safe and effective care; and taking action to enable children to have the best outcomes.

3.4 Child protection is the part of safeguarding concerned with protecting specific children who are suffering, or are likely to suffer, significant harm.

3.5 Abuse and neglect include physical abuse, emotional abuse, sexual abuse and neglect. Children may also experience exploitation, domestic abuse, child-on-child abuse, sexual harassment, sexual violence, online abuse, criminal exploitation, radicalisation and other forms of harm.

4. Leadership, governance and safeguarding roles

4.1 **Board of Directors / governance Responsibilities:**

- To ensure effective safeguarding and child protection arrangements are in place and reviewed;
- To ensure the child protection policy and staff behaviour/code of conduct are effective and current;
- To ensure safeguarding training and induction are provided and monitored;
- To ensure safer recruitment and appropriate pre-employment checks are undertaken;
- To ensure safeguarding deficiencies are remedied without delay;
- To appoint a suitable DSL and ensure sufficient deputy DSL capacity;
- To ensure a nominated person/route exists for concerns or allegations involving the Executive Head, Head of School or other senior leaders;
- To ensure safeguarding audits and local partnership requirements are completed;
- To ensure children's safeguarding needs are considered in strategic decision-making.

4.2 **DSL and Deputy DSLs responsibility:**

4.2.1 The DSL has lead responsibility for safeguarding and child protection. Deputy DSLs are authorised to act in the DSL's absence and must be trained to the required standard. Current arrangements recorded in the source policy are:

School DSL: Victoria Adams – Executive Head

Deputy DSLs: members of the school senior leadership team trained for the role; the named list must be maintained on the school safeguarding contact sheet.

Fair Ways Safeguarding Designated Officer: Eileen Calnan, with organisational safeguarding oversight.

4.2.2 The DSL role includes safeguarding leadership, advice and consultation, referrals and escalation, multi-agency working, safeguarding records, child protection conferences and plans, early help, allegations management, low-level concerns, child-on-child abuse, online safety, Prevent, staff training, safeguarding audits and policy review.

4.3 **Staff Responsibility :**

- To know and follow this policy and associated safeguarding procedures;
- To read KCSIE 2026 Part One in full;
- To know the DSL, deputy DSLs and alternative reporting routes;
- To act immediately on concerns and report them to the DSL/deputy without delay;
- To record concerns accurately and factually;
- To maintain professional boundaries and follow the staff code of conduct;
- To challenge poor safeguarding practice and use whistleblowing arrangements where necessary.

5. Staff training, induction and KCSIE 2026

5.1 All staff must receive safeguarding and child protection training at the start of the academic year and at regular intervals, with updates and briefings as required. Training must reflect current national and local guidance and the risks relevant to the school population.

5.2 All staff must read KCSIE 2026 Part One in full. The school will maintain a record of completion. The Part One overview may be used as a complementary quick reference but does not replace the requirement to read Part One. All staff undertake a comprehensive knowledge checker to ensure Part one read fully.

5.3 New staff and volunteers receive safeguarding induction before, or as soon as practicable after, starting duties.

5.4 Training covers recognising abuse and neglect, exploitation, child-on-child abuse, online harms, attendance concerns, information sharing, allegations about adults, whistleblowing and local referral arrangements.

5.6 DSL training and continuing professional development are undertaken in accordance with KCSIE and local safeguarding arrangements.

5.7 Deputy DSLs receive training sufficient to act in the DSL's absence.

5.8 Staff receive updates whenever national or local safeguarding arrangements change.

5.9 The school maintains evidence of training, induction and policy communication.

6. Recognising safeguarding concerns

6.1 Staff do not need to decide whether a child is suffering significant harm before reporting a concern. Any concern about a child's welfare must be passed to the DSL or deputy and include:

- physical abuse and non-accidental injury;
- emotional abuse, including exposure to domestic abuse;
- sexual abuse, sexual exploitation and grooming;
- neglect;
- child-on-child abuse and harmful sexual behaviour;
- sexual harassment and sexual violence;
- criminal exploitation, county lines and trafficking;
- online abuse, grooming, image-based abuse and harmful content;
- radicalisation and extremist influence;
- FGM, forced marriage and honour-based abuse;
- self-harm, suicidal ideation or other mental-health concerns where safeguarding is implicated;
- attendance, persistent absence or children missing from education;
- concerns about the behaviour or suitability of adults working with children.

6.2 Indicators are not proof of abuse. Staff should consider the child's context and cumulative concerns and should share concerns rather than attempting to investigate.

7. Responding to concerns and disclosures

7.1 The child's safety and best interests are paramount. Staff should listen, remain calm, reassure without promising secrecy, avoid leading questions, avoid investigating, and report the concern promptly. As per the following:

- Listen carefully and allow the child to speak in their own words.
- Reassure the child that they have done the right thing by telling someone.
- Explain that information cannot be kept secret and may need to be shared to keep them or others safe.
- Do not promise a particular outcome or make promises you cannot keep.
- Ask only enough open, non-leading questions to clarify immediate safeguarding needs.
- Do not investigate, confront an alleged perpetrator or ask the child to repeat their account unnecessarily.
- Make a factual written/electronic record as soon as possible, including the child's words where practicable, date/time, observations, people present and actions taken.
- Report the concern to the DSL/deputy immediately or as soon as practicable that day.
- If the DSL/deputy is unavailable, or there is immediate danger, staff must use the emergency/social care/police routes directly.

8. Referral, early help and escalation

8.1 The DSL assesses concerns and determines the appropriate response. Staff must not delay reporting while attempting to decide whether a statutory threshold has been met.

8.2 Immediate danger: contact emergency services (999) and take reasonable steps to keep the child safe; notify the DSL as soon as possible.

8.3 Possible significant harm: refer to children's social care and/or police in accordance with current local safeguarding partnership procedures.

8.4 Early help or emerging needs: consider appropriate support with the child and family and relevant partner agencies.

8.5 Where the threshold is unclear, the DSL should seek advice from children's social care rather than allowing uncertainty to delay action.

8.6 Parents/carers should normally be informed where appropriate, but not where this could increase risk, prejudice an investigation or otherwise be contrary to the child's welfare.

8.7 Where a referral is made, the school records the referral, decision, rationale, actions, outcomes and any follow-up required.

8.8 If the school believes a referral has not received an appropriate response, it will use professional challenge and local escalation procedures.

8.9 Local referral numbers in this policy must be checked against the current local safeguarding partnership arrangements before publication.

9. Information sharing, confidentiality and records

9.1 Safeguarding information is confidential but must be shared where necessary to protect a child. Staff must never promise a child absolute confidentiality.

9.2 From 30 September 2026, the Information Sharing Duty under section 16LA of the Children Act 2004 applies where its statutory conditions are met. The school will follow the current DfE statutory information-sharing guidance and local arrangements.

9.3 Share information lawfully, fairly, securely, proportionately and on a need-to-know basis.

9.4 Consent is not always required for safeguarding information sharing; staff should not delay necessary safeguarding action while seeking consent where a lawful safeguarding basis exists.

9.5 Record significant information-sharing decisions, including what was shared, with whom, when, why and the relevant rationale.

9.6 Data protection legislation must be complied with, but it must not be treated as a reason to withhold information where lawful safeguarding sharing is required or justified.

9.7 Safeguarding records must be accurate, contemporaneous, securely stored and access-controlled.

9.8 Safeguarding files must be kept separately from the main pupil record and transferred securely when a child moves setting.

9.9 Where a child is subject to a child protection plan, is looked after or otherwise has significant safeguarding needs, the receiving setting must be informed promptly in accordance with current guidance.

10. Child-on-child abuse

10.1 Child-on-child abuse can occur in person or online and may include physical abuse, bullying, cyberbullying, sexual violence, sexual harassment, harmful sexual behaviour, coercion, intimidation, initiation/hazing, sharing of sexual images and other abusive behaviour.

10.2 All reports are taken seriously and considered through a safeguarding lens.

10.3 The school will consider the needs and wishes of the victim, the behaviour and safeguarding needs of the alleged perpetrator, and the safety of other children.

10.4 Incidents are not dismissed as 'banter', 'just behaviour' or an inevitable part of growing up.

10.5 Risk assessments and support plans will be used where necessary.

10.6 The school will consider whether children involved require referral to children's social care, police, health or other services.

10.7 Online and off-site incidents may require school action where they affect children's welfare or the school community.

11. Sexual violence and sexual harassment

11.1 Sexual violence and sexual harassment are safeguarding matters. The school will respond to unwanted sexual comments, sexualised bullying, unwanted touching, sharing or

requesting sexual images, coercive sexual behaviour, sexual assault and other harmful sexual behaviour.

11.2 Staff must report concerns immediately to the DSL.

11.3 The school will not make assumptions based on age, gender, relationship status, perceived consent or previous behaviour.

11.4 The victim's immediate safety and support are prioritised while ensuring fair treatment and safeguarding support for all children involved.

11.5 The school will consider online evidence and risks, including image-sharing and technology-facilitated abuse.

11.6 Where an offence may have occurred, the DSL will consider police referral in accordance with current guidance and local procedures.

11.7 Appropriate support, curriculum work and risk management will be put in place.

12. Online safety, filtering and monitoring

12.1 Online safety is an integral part of safeguarding. The school recognises risks associated with content, contact, conduct and commerce, including grooming, exploitation, cyberbullying, harmful content, pornography, extremist content, image-based abuse and unsafe use of social media, messaging, gaming and emerging technologies.

12.2 The school will maintain appropriate filtering and monitoring arrangements and review their effectiveness.

12.3 Safeguarding concerns identified through filtering or monitoring will be reported and acted upon.

12.4 Staff will understand how to report online-safety concerns.

12.5 Children will receive age-appropriate education about online safety and digital resilience.

12.6 The school will respond to online incidents occurring outside school where they affect a child's welfare or the school community.

12.7 Relevant online-safety arrangements will be set out in the school's online-safety/AUP policies and technical procedures.

13. Prevent, radicalisation and extremism

13.1 The school recognises its safeguarding responsibility to protect children from the risk of radicalisation and extremist influence. Staff will remain alert to changes in behaviour, vulnerability, online activity and other indicators that may suggest a child requires support.

13.2 Staff receive Prevent awareness training appropriate to their role.

13.3 Concerns are reported to the DSL and assessed in accordance with local Prevent/Channel arrangements.

13.4 The school will promote critical thinking, respect, tolerance and democratic values through its curriculum and wider culture.

13.5 Where appropriate, the school will work with Prevent, Channel, police, children's social care and other partners.

13.6 Staff must not attempt to investigate or assess ideological risk beyond their safeguarding role.

14. Domestic abuse

14.1 The school recognises that children may experience domestic abuse directly or through seeing, hearing or experiencing its effects. Domestic abuse can cause significant emotional, physical and developmental harm.

14.2 Concerns about domestic abuse are reported to the DSL.

14.3 The school will consider the child's immediate safety and the risk posed by sharing information with family members.

14.4 The school will work with children's social care, police, health and other agencies as appropriate.

14.5 The school will follow current local arrangements, including any local police notification or Operation Encompass arrangements applicable to the school.

15. FGM, forced marriage and honour-based abuse

15.1 The school recognises female genital mutilation, forced marriage and honour-based abuse as safeguarding concerns.

15.2 Staff must report concerns immediately to the DSL.

15.3 The school will follow current statutory guidance and local safeguarding/police procedures.

15.4 Staff must consider whether contacting parents/carers could increase risk and must seek advice before doing so where appropriate.

15.5 Where the mandatory reporting duty for FGM applies to a regulated professional, the school will ensure it is complied with.

15.6 The child's safety and wishes will be considered alongside statutory safeguarding responsibilities.

16. Children requiring additional safeguarding support

16.1 Some children may face increased safeguarding risk because of disability, special educational needs, communication needs, looked-after or previously looked-after status, care experience, mental health difficulties, family circumstances, exploitation risk, poverty, discrimination or other factors.

16.2 The school will consider individual vulnerability and avoid assumptions based on labels.

16.3 Reasonable adjustments will be made so children can communicate concerns safely.

16.4 The DSL will ensure safeguarding plans consider additional needs and barriers to disclosure.

16.5 Children with additional vulnerabilities will receive appropriate support and multi-agency coordination.

17. Attendance and children missing from education

17.1 Attendance is a safeguarding matter. Unexplained absence, persistent absence, patterns of absence, children missing from education and unexpected changes in attendance may indicate safeguarding concerns.

17.2 Staff must report significant or unexplained attendance concerns in accordance with the attendance policy and safeguarding procedures.

17.3 The DSL will consider whether absence is linked to abuse, neglect, exploitation, domestic abuse, mental health, bullying, family circumstances or other risk.

17.4 Children subject to child protection plans, looked-after children and other vulnerable children will be monitored in accordance with their individual plans.

17.5 The school will follow local authority procedures when a child may be missing from education.

18. Allegations against adults and low-level concerns

18.1 Concerns meeting the harms threshold

18.1.1 The harms threshold applies where an allegation indicates that an adult working with children has:

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

- behaved or may have behaved in a way that indicates they may not be suitable to work with children, including conduct outside work where relevant.

18.1.2 Concerns must be reported immediately through the school's designated route. The LADO must be contacted without delay in accordance with local procedures. No internal investigation should take place beyond appropriate preliminary enquiries before consultation with the LADO, unless directed otherwise.

18.1.3 Where the concern involves the Head of School/Headteacher, it must be reported through the alternative route to the LADO or Executive Head. Where it concerns the Executive Head or another senior leader, the nominated Director/appropriate independent route must be used.

18.2 **Low-level concerns**

18.2.1 A low-level concern is any concern, however small, that an adult working in or on behalf of the school may have acted in a way that is inconsistent with the staff code of conduct and does not meet the harms threshold or otherwise require LADO referral.

18.2.2 Examples include over-familiarity, favouritism, inappropriate language, inappropriate communications, or one-to-one situations inconsistent with expected professional practice.

18.2.3 All low-level concerns must be shared responsibly and recorded.

18.2.4 The Headteacher/Head of School or designated senior person will review the concern, determine appropriate action and consider whether patterns indicate a wider safeguarding issue.

18.2.5 Low-level concerns must be retained and reviewed in accordance with the school's record retention arrangements.

18.2.6 A concern must be escalated to the LADO if new information means the harms threshold may be met.

18.3 **Whistleblowing**

18.3.1 Staff must be able to raise concerns about safeguarding practice without fear of reprisal. Concerns should normally be raised with the DSL or senior leader. Where this is inappropriate or does not resolve the concern, staff must use the school's whistleblowing procedure and may seek external safeguarding advice through appropriate channels.

19. Safer recruitment and suitability

19.1 The school will follow current safer recruitment requirements and KCSIE 2026 when recruiting staff and volunteers. This includes appropriate identity, right-to-work, DBS and other required checks, references and suitability considerations.

19.2 The Single Central Record will be maintained as required.

19.3 Agency and supply staff arrangements will include appropriate safeguarding assurances and checks.

19.4 Induction will include safeguarding, conduct, reporting routes and relevant policies.

19.5 Concerns arising after appointment will be managed under the allegations/low-level concerns procedures.

20. Curriculum, relationships education and safeguarding culture

20.1 The school will provide age- and developmentally-appropriate opportunities for children to learn how to recognise risk, seek help, develop healthy relationships, use technology safely and protect themselves and others.

20.2 Safeguarding is reinforced through the curriculum and wider school culture.

20.3 Children are given accessible routes to report concerns.

20.4 Staff promote respectful behaviour, inclusion and healthy boundaries.

20.5 The school will consider the views of children when developing safeguarding arrangements.

21. Governance, monitoring and assurance

21.1 The DSL will provide appropriate safeguarding information to governance.

21.2 Safeguarding audits and action plans will be completed as required by local arrangements.

21.3 Safeguarding incidents, referrals, attendance patterns, allegations and low-level concerns will be reviewed for themes and lessons.

21.4 Policy effectiveness will be reviewed annually and sooner following significant changes, serious incidents or learning from safeguarding reviews.

21.5 Governance will ensure deficiencies are addressed without delay.

22. Transfer and retention of safeguarding records

22.1 Safeguarding files will be transferred securely and separately from the main pupil record when a child moves school. The originating setting remains responsible for ensuring that relevant safeguarding information is transferred promptly.

22.2 Use the most secure transfer method available.

22.3 Electronic transfers must use approved secure systems; files should be encrypted where appropriate.

22.4 Paper files must be securely packaged and sent using an appropriate tracked/secure method.

22.5 Evidence of transfer and receipt should be retained.

22.6 Where significant safeguarding information exists, the DSL should communicate directly with the receiving DSL where appropriate.

22.7 Records must be retained and securely destroyed in accordance with current statutory, local and organisational retention requirements.

22.8 Where the destination is unknown or a child is being removed from roll, the school will follow current local authority children-missing-from-education procedures.

23. Local safeguarding contacts

The following contacts were contained in the previous Fair Ways policy. They MUST be checked against current local safeguarding partnership information before this policy is approved or published.

Service Contact details:

Hampshire Children's Services: 0300 555 1377

Isle of Wight Safeguarding Children Partnership: 01983 814545

Southampton safeguarding contact: 02380 832995

Portsmouth Safeguarding Children Partnership: https://www.portsmouthscp.org.uk

Bournemouth & Poole safeguarding contact : 01202 458873

LADO: 01962 876364

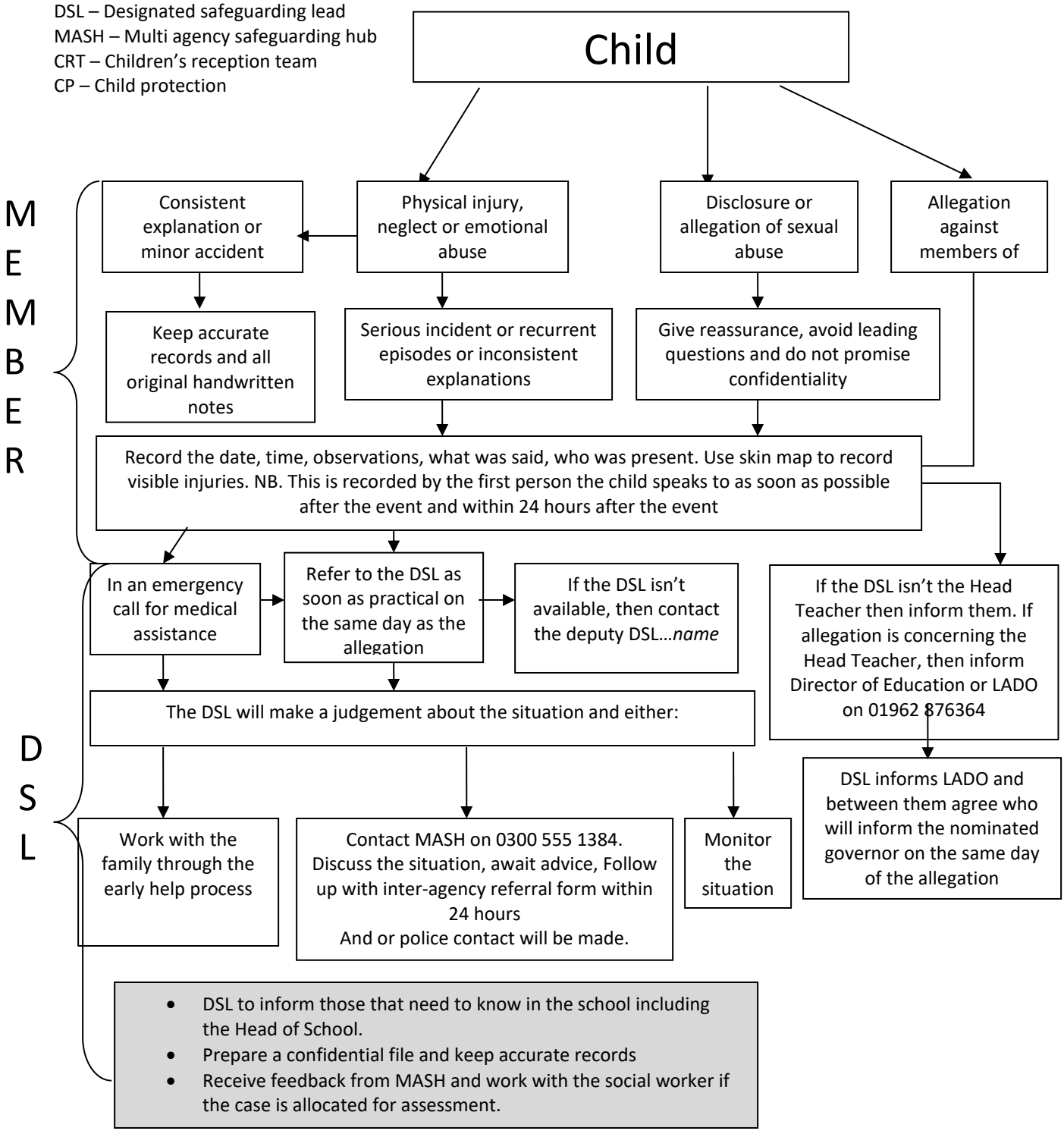
Police emergency: 999

Police non-emergency: 101

Appendix A – Flowchart for Child Protection Procedures

Flowchart for child protection procedures

DSL – Designated safeguarding lead
MASH – Multi agency safeguarding hub
CRT – Children's reception team
CP – Child protection



Appendix B – Dealing with Disclosures

Dealing with disclosures

All members of staff should:

A member of staff who is approached by a child should listen positively and try to reassure them. They cannot promise complete confidentiality and should explain that they may need to pass information to other professionals to help keep the child or other children safe. The degree of confidentiality should always be governed by the need to protect the child.

Additional consideration needs to be given to children with communication difficulties and for those whose preferred language is not English. It is important to communicate with them in a way that is appropriate to their age, understanding and preference.

All members of staff should know who the DSL is and who to approach if the DSL is unavailable. Ultimately, all members of staff have the right to make a referral to the police or social care directly and should do this if, for whatever reason, there are difficulties following the agreed protocol, e.g. they are the only adult on the school premises at the time and have concerns about sending a child home.

Guiding principles, the seven R's:

Receive

- Listen to what is being said, without displaying shock or disbelief.
- Accept what is said and take it seriously.
- Make a note of what has been said as soon as practicable.

Reassure

- Reassure the student, but only so far as is honest and reliable.
- Don't make promises you may not be able to keep e.g. 'I'll stay with you' or 'everything will be alright now' or 'I'll keep this confidential."
- Do reassure e.g. you could say: 'I believe you', 'I am glad you came to me', 'I am sorry this has happened', 'We are going to do something together to get help.'

Respond

- Respond to the student only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details.
- Do not ask 'leading' questions i.e. 'did he touch your private parts?' or 'did she hurt you?' Such questions may invalidate your evidence (and the child's) in any later prosecution in court.
- Do not criticise the alleged perpetrator; the student may care about him/her, and reconciliation may be possible.

- Do not ask the student to repeat it all for another member of members of staff . Explain what you have to do next and whom you have to talk to. Reassure the student that it will be a senior member of members of staff .

Report

- Share concerns with the designated safeguarding lead as soon as possible.
- If you are not able to contact your designated safeguarding lead, and the child is at risk of immediate harm, contact the children's services department directly.
- If you are dissatisfied with the level of response that you receive following your concerns, you should press for re-consideration.

Record

- If possible, make some very brief notes at the time, and write them up as soon as possible.
- Keep your original notes on file.
- Record the date, time, place, people present and noticeable nonverbal behaviour and the words used by the child. If the child uses sexual 'pet' words, record the actual words used, rather than translating them into 'proper' words.
- Complete a body map to indicate the position of any noticeable bruising.
- Record facts and observable things, rather than your 'interpretations' or 'assumptions'.

Remember

- Support the child: listen, reassure, and be available.
- Complete confidentiality is essential. Share your knowledge only with appropriate professional colleagues.
- Try to get some support for yourself if you need it.

Review (led by DSL)

- Has the action taken provided good outcomes for the child?
- Did the procedure work?
- Were any deficiencies or weaknesses are identified in the procedure? Have these been remedied?
- Is further training required?

What happens next?

It is important that concerns are followed up and it is everyone's responsibility to ensure that they are. The member of staff should be informed by the DSL what has happened following the report being made. If they do not receive this information, they should be proactive in seeking it out.

If they have concerns that the disclosure has not been acted upon appropriately, they might inform the safeguarding governor of the school and / or may ultimately contact the children's services department.

Receiving a disclosure can be upsetting for the member of staff and schools should have a procedure for supporting them after the disclosure. This might include reassurance that they have followed procedure correctly and that their swift actions will enable the allegations to be handled appropriately.

In some cases, additional counselling might be needed, and they should be encouraged to recognise that disclosures can have an impact on their own emotions.

Appendix C – Allegations against members of staff

Allegations against members of staff

Allegations that may meet the harms threshold

This procedure should be used in all cases in which it is alleged a member of members of staff (ALL members of staff including contracted, bank, agency, contractors) or volunteer in a school has:

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

In dealing with allegations or concerns against an adult in the school, members of staff must:

- Report any concerns about the conduct of any member of members of staff or volunteer to the Head of School or the DSL as soon as possible.
- If an allegation is made against the head teacher/head of school the concerns need to be raised with the LADO or Executive Head as soon as possible.
- Once an allegation has been received by the Head or Executive head they will contact the Local Authority Designated Officer on 01962 876364 as soon as possible and before carrying out any investigation into the allegation other than preliminary enquiries.
- Inform the parents of the allegation unless there is a good reason not to.

In liaison with the LADO, the school will determine how to proceed and if necessary, the LADO will refer the matter to children's social care and / or the police.

If the matter is investigated internally, the LADO will advise the school to seek guidance from their personnel / HR provider in following procedures set out in 'Keeping Children Safe in Education' (2021) and the HSCP procedures.

Concerns that do not meet the harm threshold (Low Level Concerns)

The term 'low-level' concern does not mean that it is insignificant, it means that the behaviour towards a child does not meet the threshold.

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 members of 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;
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or,
- using offensive language in front of a child

It is vital that any Low Level Concern is shared responsibly and with the headteacher/head of school. The concern must be recorded on the tracking document held by the Head teacher/head of school.

Appendix D – Briefing sheet for temporary and supply members of staff

Briefing sheet for temporary and supply members of staff

For supply members of staff and those on short contracts in *FAIR WAYS School.*

While working in ***FAIR WAYS School*****,** you have a duty of care towards the students here. This means that at all times you should act in a way that is consistent with their safety and welfare.

In addition, if at any time you have a concern about a student, particularly if you think they may be at risk of abuse or neglect, it is your responsibility to share that concern with the school designated safeguarding leads (DSL) who are:

School DSL's

Victoria Adams – Executive Head of Education/Deputy Director

Deputy DSL's

All SLT teams in each school are fully trained at DSL level.

Eileen Calnan, Fair Ways Safeguarding Designated Officer, has oversight of Safeguarding across Fair Ways school.

This is not an exhaustive list, but you may have become concerned as a result of:

- Observing a physical injury, which you think may have been non-accidental.
- Observing something in the appearance of a student which suggests they are not being sufficiently well cared for.
- Observing behavior that leads you to be concerned about a student.
- A student telling you that they have been subjected to some form of abuse.

In any of the circumstances listed here, you must write down what you saw or heard, date and sign your account, and give it to the DSL. This may be the beginning of a legal process – it is important to understand that legal action against a perpetrator can be seriously damaged by any suggestion that the child has been led in any way.

If a child talks to you about abuse, you should follow these guidelines:

- Rather than directly questioning the student, just listen and be supportive.

- Never stop a student who is freely recalling significant events, but don't push the student to tell you more than they wish.
- Make it clear that you may need to pass on information to members of staff in other agencies who may be able to help – do not promise confidentiality. You are obliged to share any information relating to abuse or neglect.
- Write an account of the conversation immediately, as close to verbatim as possible. Put the date and timings on it, and mention anyone else who was present, then sign it and give your record to the designated person / child protection officer, who should contact children's social care if appropriate.

Remember, if you have a concern, discuss it with the DSL.

Appendix E – What is child abuse?

What is child abuse?

The following definitions are taken from *working together to safeguard children* HM Government (2023). In addition to these definitions, it should be understood that children can also be abused by honour based violence, forced marriage or female genital mutilation.

What is abuse and neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults, or another child or children.

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

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

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

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

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

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

Indicators of abuse

Neglect

The nature of neglect
Neglect is a lack of parental care, but poverty and lack of information or adequate services can be contributory factors.

Far more children are registered to the category of neglect on child protection plans than to the other categories. As with abuse, the number of children experiencing neglect is likely to be much higher than the numbers on the plans.

Neglect can include parents or carers failing to:

- provide adequate food, clothing and shelter
- protect a child from physical and emotional harm or danger
- ensure adequate supervision or stimulation
- ensure access to appropriate medical care or treatment

NSPCC research has highlighted the following examples of the neglect of children under 12:

- frequently going hungry
- frequently having to go to school in dirty clothes
- regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse
- being abandoned or deserted
- living at home in dangerous physical conditions
- not being taken to the doctor when ill
- not receiving dental care

Neglect is a difficult form of abuse to recognise and is often seen as less serious than other categories. It is, however, very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group.

Neglect is often noticed at a stage when it does not pose a risk to the child. The duty to safeguard and promote the welfare of children (*What to do if you're worried a child is being abused* 2015) would suggest that an appropriate intervention or conversation at this early stage can address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm or in significant need.

Neglect is often linked to other forms of abuse, so any concerns school members of staff have should at least be discussed with the designated person / child protection co-ordinator.

Indicators of neglect

The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm. It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don't keep it to yourself.

Physical indicators of neglect:

- constant hunger and stealing food
- poor personal hygiene - unkempt, dirty or smelly
- underweight
- dress unsuitable for weather
- poor state of clothing
- illness or injury untreated

Behavioural indicators of neglect:

- constant tiredness
- frequent absence from school or lateness
- missing medical appointments
- isolated among peers
- frequently unsupervised
- stealing or scavenging, especially food
- destructive tendencies

<u>Emotional abuse</u>

The nature of emotional abuse

Most harm is produced in *low warmth, high criticism* homes, not from single incidents.
Emotional abuse is difficult to define, identify / recognise and / or prove. Emotional abuse is chronic and cumulative and has a long-term impact. All kinds of abuse and neglect have emotional effects although emotional abuse can occur by itself. Children can be harmed by witnessing someone harming another person – as in domestic violence.

It is sometimes possible to spot emotionally abusive behaviour from parents and carers to their children, by the way that the adults are speaking to, or behaving towards children. An appropriate challenge or intervention could affect positive change and prevent more intensive work being carried out later on.

Indicators of emotional abuse

Developmental issues:

- delays in physical, mental and emotional development
- poor school performance
- speech disorders, particularly sudden disorders or changes

Behaviour:

- acceptance of punishment which appears excessive
- over-reaction to mistakes
- continual self-deprecation (I'm stupid, ugly, worthless etc.)
- neurotic behaviour (such as rocking, hair-twisting, thumb-sucking)
- self-mutilation
- suicide attempts
- drug / solvent abuse
- running away
- compulsive stealing, scavenging
- acting out
- poor trust in significant adults
- regressive behaviour – e.g. wetting
- eating disorders
- destructive tendencies
- neurotic behaviour
- arriving early at school, leaving late

Social issues:

- withdrawal from physical contact

- withdrawal from social interaction
- over-compliant behaviour
- insecure, clinging behaviour
- poor social relationships

Emotional responses:

- extreme fear of new situations
- inappropriate emotional responses to painful situations ("I deserve this")
- fear of parents being contacted
- self-disgust
- low self-esteem
- unusually fearful with adults
- lack of concentration, restlessness, aimlessness
- extremes of passivity or aggression

Physical abuse

The nature of physical abuse

Most children collect cuts and bruises quite routinely as part of the rough and tumble of daily life. Clearly, it is not necessary to be concerned about most of these minor injuries. Accidental injuries normally occur on the *bony prominences* – e.g., shins. Injuries on the *soft* areas of the body are more likely to be inflicted intentionally and should therefore make us more alert to other concerning factors that may be present.

A body map **(Clear Care)** can assist in the clear recording and reporting of physical abuse. The body map should only be used to record observed injuries, and no child should be asked to remove clothing by a member of members of staff of the school.

Indicators of physical abuse / factors that should increase concern:

- Multiple bruising or bruises and scratches (especially on the head and face).
- Clusters of bruises – e.g., fingertip bruising (caused by being grasped).
- Bruises around the neck and behind the ears – the most common abusive injuries are to the head.
- Bruises on the back, chest, buttocks, or on the inside of the thighs.
- Marks indicating injury by an instrument – e.g., linear bruising (stick), parallel bruising (belt), marks of a buckle.
- Bite marks.
- Deliberate burning may also be indicated by the pattern of an instrument or object – e.g., electric fire, cooker, cigarette.

- Scalds with upward splash marks or *tide marks.*
- Untreated injuries.
- Recurrent injuries or burns.
- Bald patches.

In the social context of the school, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:

- The explanation given does not match the injury.
- The explanation uses words or phrases that do not match the vocabulary of the child / adult's words.
- No explanation is forthcoming.
- The child (or the parent / carer) is secretive or evasive.
- The injury is accompanied by allegations of abuse or assault.

You should be concerned if the child or student:

- Is reluctant to have parents / carers contacted.
- Runs away or shows fear of going home.
- Is aggressive towards themselves or others.
- Flinches when approached or touched.
- Is reluctant to undress to change clothing for sport.
- Wears long sleeves during hot weather.
- Is unnaturally compliant in the presence of parents / carers.
- Has a fear of medical help or attention.
- Admits to a punishment that appears excessive.

Sexual abuse

The nature of sexual abuse:
Sexual abuse is often perpetrated by people who are known and trusted by the child – e.g., relatives, family friends, neighbours, babysitters, people working with the child in school, faith settings, clubs or activities. Children can also be subject to child sexual exploitation.

Characteristics of child sexual abuse:

- It is often planned and systematic – people do not sexually abuse children by accident, though sexual abuse can be opportunistic.
- Grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent.

- Grooming the child's environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Most people who sexually abuse children are men, but some women sexually abuse too.

Indicators of sexual abuse

Physical observations:

- damage to genitalia, anus or mouth
- sexually transmitted diseases
- unexpected pregnancy, especially in very young girls
- soreness in genital area, anus or mouth and other medical problems such as chronic itching
- unexplained recurrent urinary tract infections and discharges or abdominal pain

Behavioural observations:

- sexual knowledge inappropriate for age
- sexualised behaviour or affection inappropriate for age
- sexually provocative behaviour / promiscuity
- hinting at sexual activity Inexplicable decline in school performance
- depression or other sudden apparent changes in personality as becoming insecure or clinging
- lack of concentration, restlessness, aimlessness
- socially isolated or withdrawn
- overly-compliant behaviour
- acting out aggressive behaviour
- poor trust or fear concerning significant adults
- regressive behaviour, onset of wetting, by day or night; nightmares
- onset of insecure, clinging behaviour
- arriving early at school, leaving late, running away from home
- suicide attempts, self-mutilation, self-disgust
- suddenly drawing sexually explicit pictures
- eating disorders or sudden loss of appetite or compulsive eating
- regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- become worried about clothing being removed
- trying to be 'ultra-good' or perfect; overreacting to criticism