



# Child Protection & Safeguarding Policy

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# CULVERHILL SCHOOL CHILD PROTECTION AND SAFEGUARDING POLICY

## CONTENTS

<b>Part 1: Safeguarding Policy</b>	
Related Policies	Page 3
1. Introduction	Page 4
2. Overall aims	Page 5
3. Key Principles	Page 5
4. Key Processes	Page 6
5. Expectations	Page 6
6. The Designated Safeguarding Lead	Page 7
7. The Governing Body	Page 9
8. A Safer School Culture	Page 10
8.1 Safer recruitment and selection	Page 10
8.4 Staff support	Page 10
8.6 Disqualification by association under the Child Care Act 2006	Page 11
9. Our Role in the Prevention of Abuse	Page 11
9.2 The curriculum	Page 11
9.4 Other areas of work	Page 11
10. Safeguarding Pupils who are Vulnerable to Extremism	Page 11
10.6 Risk reduction	Page 12
10.8 Response	Page 13
11. Safeguarding Pupils who are vulnerable to Exploitation, Forced Marriage, Female Genital Mutilation, Breast Ironing, Honour Based Violence or Trafficking or Exploitation	Page 13
12. What We Do when we are Concerned	Page 14
<b>Part 2: The Key Procedures</b>	
Chart: Responding to concerns about a child	Page 15
13. Involving Parents / Carers	Page 16
14. Multi-Agency Work	Page 16
15. Our Role in Supporting Children	Page 17
16. Responding to an Allegation about a Member of Staff	Page 17
17. Children with Additional Needs	Page 17
18. Children in Specific Circumstances	Page 18
<b>Appendices</b>	Page 21
Appendix 1: Definitions and Indicators of Abuse	Page 22
1. Neglect	Page 22
2. Physical Abuse	Page 22



3. Sexual Abuse	Page 23
4. Sexual Exploitation	Page 24
5. Emotional Abuse	Page 24
6. Responses from Parents	Page 25
7. Disabled Children	Page 26
Appendix 2: Dealing with a disclosure of abuse	Page 27
Appendix 3: Allegations about a Member of Staff, Governor or Volunteer	Page 28
Appendix 4: Indicators of Vulnerability to Radicalisation	Page 30
Appendix 5: Preventing Violent Extremism – Roles and Responsibilities of the Single Point of Contact (SPOC) : Prevent referral process	Page 32 Page 33
Appendix 6: Dealing with Self-harm	Page 34
Appendix 7: Guidance – Peer on peer abuse	Page 39
Appendix 8: Information Sharing Guidance	Page 41

#### Related school policies:

- Allegations against staff
- Alternative Education
- Anti-Bullying
- Attendance
- Behaviour
- Code of Conduct
- Complaints
- Confidentiality
- Educational & Residential visits
- Equality
- Grievances
- Health and safety
- Independent Travel
- Managing allegations against other pupils (peer on peer abuse)
- Medical needs (including intimate care)
- Online Safety (along with parent/carer and staff/pupil acceptable use policies)
- Racist incidents
- Restraint
- Staff Professional Conduct
- Whistle Blowing
- Work Experience



## PART ONE: SAFEGUARDING POLICY

### 1. INTRODUCTION

1.1 Safeguarding is defined as –

- Protecting children from maltreatment;
- Preventing impairment of children's health or development;
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- Taking action to enable all children to have the best life chances.

1.2 Culverhill School is committed to safeguarding and promoting the welfare of all its pupils. We believe that:

- All children/young people have the right to be protected from harm;
- Children/young people need to be safe and to feel safe in school;
- Children/young people need support which matches their individual needs, including those who may have experienced abuse;
- All children/young people have the right to speak freely and voice their values and beliefs;
- All children/young people must be encouraged to respect each other's values and support each other;
- All children/young people have the right to be supported to meet their emotional, and social needs as well as their educational needs – a happy healthy sociable child/young person will achieve better educationally;
- Schools can and do contribute to the prevention of abuse, victimisation, bullying, exploitation, extreme behaviours, discriminatory views and risk taking behaviours; and
- All staff and visitors have an important role to play in safeguarding children and protecting them from abuse.
- All school staff should be prepared to identify children who may benefit from early help.

1.3 Culverhill School will fulfil their local and national responsibilities as laid out in the following documents:

- **Working together to Safeguard Children (DfE 2018)**
- **Working together to Safeguard Children (Part 1) (2018) (all staff) Annexe A + Section 5 for staff working directly with children**
- **Keeping Children Safe in Education: Statutory guidance for schools and colleges (DfE September 2016).**



- **Information sharing advice for practitioners providing safeguarding services to children, young people, parents and carers (2018)**
  - **What to do if you're worried a child is being abused (2015)**
  - **Child sexual exploitation (2017)**
  - **Revised Prevent Duty Guidance: for England and Wales**
  - **The Children Act 1989 and 2004**
  - **The Education Act 2002 s175 / s157**
  - **Mental Health and Behaviour in Schools: Departmental Advice (DfE 2018)**
- Culverhill School believes advice in this document should be considered in context and in relation to 2002 Education Act**

## **2. OVERALL AIMS**

2.1 This policy will contribute to safeguarding our pupils and promoting their welfare by:

- Clarifying standards of behaviour for staff and pupils;
- Contributing to the establishment of a safe, resilient and robust ethos in the school, built on mutual respect, and shared values
- Introducing appropriate work within the curriculum;
- Encouraging pupils and parents to participate;
- Alerting staff to the signs and indicators that all might not be well;
- Developing staff awareness of the causes of abuse;
- Developing staff's awareness of the risks and vulnerabilities their pupils face;
- Addressing concerns at the earliest possible stage; by following the schools 'Early help' processes
- Reducing the potential risks pupils face of being exposed to violence, extremism, exploitation, or victimisation

2.2 This policy will contribute to supporting our pupils by:

- Identifying and protecting the most vulnerable
- Identifying individual needs where possible; and
- Designing plans to meet those needs.

2.3 This policy will contribute to the protection of our pupils by:

- Ensuring that children are taught about safeguarding, including online, through teaching and learning opportunities as part of a broad and balanced curriculum.
- Implementing child protection policies and procedures; and
- Working in partnership with pupils, parents and agencies.



### 3. KEY PRINCIPLES

3.1 These are the key principles of safeguarding, as stated by South Gloucestershire Safeguarding Children Board:

- Safeguarding and promoting the welfare of children is **everyone's** responsibility.
- Always see the child first.
- Never do nothing.
- Do with, not to, others.
- Do the simple things better.
- Have conversations, build relationships.
- Outcomes not outputs.
- Always act in the best interest of the child.

3.2 In addition the following key safeguarding messages for schools are fundamental to our practice.

- Every child is entitled to a rich and rounded curriculum.
- Schools operate with public money: this should be spent wisely, targeting resources on the evidenced needs of children at school now. Assurance and audit are important aspects of this.
- Governance is corporate and decisions are collective, but individual governors can and should take the lead on specific aspects of school life such as safeguarding.
- When issues arise, head teachers should speak out, addressing them internally where possible and escalating them when this is unsuccessful.

### 4. KEY PROCESSES

4.1 All staff should be aware of the guidance issued by South Gloucestershire Safeguarding Board - <http://www.proceduresonline.com/swcpp/southglos/index.html> Details can be found in the staffroom and on the school network.

### 5. EXPECTATIONS

5.1 All staff and Governors will:

- Be familiar with this safeguarding policy;
- Be subject to Safer Recruitment processes and checks, whether they are new staff, supply staff, contractors, volunteers etc. Work Experience students



under the age of 18 will not be subject to the DBS checks and will be supervised at all times.

- Be involved in the implementation of individual education programmes, integrated support plans, child in need plans and interagency child protection plans;
- Be alert to signs and indicators of possible abuse (See Appendix One for current definitions and indicators); and NSPCC website.
- Record concerns and give the record to the Designated Safeguarding Lead *Sally Clark* or in her absence the Headteacher *Sue Hewitt*/ Deputy Headteacher *Chris Walker*. They will record discussions and decisions made.
- Deal with a disclosure of abuse from a child in line with the guidance in Appendix Two - you must inform the Designated Safeguarding Lead immediately, and provide a written account as soon as possible;
- Recognise the importance of information sharing between professionals.

5.2 All staff will receive appropriate safeguarding training on induction and then receive level one training every two years. All staff will receive regular updates on Child Protection issues and bulletins throughout the year. Key staff will undertake level two and level three training-every two years.

## **6. THE DESIGNATED SAFEGUARDING LEAD**

- 6.1 Our Designated Safeguarding Lead (DSL) on the school leadership team is *Sally Clark*. She has lead responsibility and management oversight and accountability for child protection along with the Head Teacher. They will be responsible for coordinating all child protection activity.  
In the absence of the DSL *Sue Hewitt* (Headteacher) and/or *Chris Walker* (Deputy Headteacher) will take on this role.  
*Sally Clark* and *Chris Walker* have lead responsibilities for all matters relating to online safety.
- 6.2 The DSL will lead regular case monitoring reviews of vulnerable children with the Safeguarding team and staff involved. The DSL will maintain records of all safeguarding and Child Protection concerns and follows up outstanding concerns both internally and externally.
- 6.3 When the school has concerns about a child, the Designated Safeguarding Lead will decide what steps should be taken and consult with the Head Teacher.
- 6.4 Child protection information will be dealt with in a confidential manner. Information is saved to the schools confidential drive and confidential files. Information held about a child will be shared only when necessary and in accordance with Information Sharing 2018 guidance (see Appendix 8). Staff will be informed of relevant details only when the Designated Safeguarding Lead feels their having



- knowledge of a situation will improve their ability to deal with an individual child and/or family.
- 6.5 Child protection records will be stored securely in a central place separate from academic records. Individual files will be kept for each child: the school will not keep family files. Files will be kept for at least the period during which the child is attending the school, and beyond that in line with current data legislation and guidance.
- 6.6 Access to these records by staff other than by the DSL, the DSL's admin assistant and the Deputy DSL's will be restricted. A written record will be kept of anyone other than this who has needed to have access to them including when and why.
- 6.7 Parents will be aware of information held on their children and kept up to date regarding any concerns or developments by the appropriate members of staff. General communications with parents will be in line with any home school policies and give due regard to which adults have parental responsibility.
- 6.8 **Do not disclose to a parent any information held on a child if this would put the child at risk of significant harm.**
- 6.9 The DSL liaises directly with the Lead Teacher responsible for the educational achievements of children who are looked 'after' (Sarah Holt). In her role as Designated Teacher for Children in Care, she must have the skills, knowledge and understanding necessary to keep looked after children safe. The Designated Teacher for Children in Care liaises directly with the Virtual School Head to discuss how funding will be spent to meet needs identified in their Personal Education Plan (PEP).
- 6.10 If a pupil moves from our school, child protection records will be forwarded on to the Designated Safeguarding Lead at the new school, with due regard to their confidential nature and in line with current government guidance on the transfer of such records. Direct contact between the two schools may be necessary. A log of these file transfers are kept by the DSL.
- 6.11 If sending by post pupil records will be sent by "Special/Recorded Delivery". For audit purposes a note of all pupil records transferred or received should be kept in either paper or electronic format. This will include the child's name, date of birth, where and to whom the records have been sent and the date sent and/or received.
- 6.12 If a pupil is permanently excluded and moves to a Pupil Referral Unit, child protection records will be forwarded on to the relevant organisation.





- 6.13 Where a vulnerable young person is moving to a Further Education establishment, consideration should be given to the pupil's wishes and feelings on their child protection information being passed on in order that the FE establishment can provide appropriate support.
- 6.14 When a Designated Safeguarding Lead resigns their post or no longer has child protection responsibility, there should be a full face to face handover/exchange of information with the new post holder.
- 6.15 In exceptional circumstances when a face to face handover is unfeasible, the Head Teacher will ensure that the new post holder is fully conversant with all procedures and case files.

## 7. THE GOVERNING BODY

- 7.1 The Governing Body are the accountable body for ensuring the safety of the school
- 7.2 The governing body will ensure that:
- The school has a safeguarding policy in accordance with the procedures of South Gloucestershire Safeguarding Children Board; this must enable appropriate actions to be taken in a timely manner to safeguard and promote children's welfare.
  - The school operates, "safer recruitment" procedures and ensures that appropriate checks are carried out on all new staff and relevant volunteers;
  - At least one senior member of the school's leadership team acts as a Designated Safeguarding Lead;
  - The Designated Safeguarding Lead along with the Headteacher/Deputy Headteacher/Safeguarding Admin Assistant attends appropriate refresher training every two years;
  - All other staff who work with children undertake training every 2 years. Temporary staff and volunteers are made aware of the school's arrangements for child protection and their responsibilities; [there is a proportional risk based approach to the level of information that is provided to temporary staff and volunteers.](#)
  - The school remedies any deficiencies or weaknesses brought to its attention without delay; and
  - The school has procedures for dealing with allegations of abuse against staff/volunteers.
- 7.3 The governing body reviews the Safeguarding and Child Protection Policy and the safeguarding Audit annually.



- 7.4 The Nominated Governor for child protection at the school is *Pam Francis*. The Nominated Governor is responsible for liaising with the Head Teacher and Designated Safeguarding Lead over all matters regarding child protection issues. The role is strategic rather than operational – they will not be involved in concerns about individual pupils.
- 7.5 The Nominated Governor will liaise with the Head Teacher and the Designated Safeguarding Lead to review the safeguarding audit annually.
- 7.6 A member of the governing body (usually the Chair), and the Designated Safeguarding Lead is nominated to be responsible for liaising with the local authority and other partner agencies in the event of allegations of abuse being made against the Head Teacher.

## 8. A SAFER SCHOOL CULTURE

### **Safer Recruitment and Selection**

- 8.1 The school pays full regard to 'Keeping Children Safe in Education' (DfES 2018, Keeping children safe in education (Part 1) Statutory guidance for schools and colleges Sep 2018). Safer recruitment practice includes scrutinising applicants, verifying identity and academic or vocational qualifications, obtaining professional and character references, checking previous employment history and ensuring that a candidate has the health and physical capacity for the job. It also includes undertaking interviews and undertaking appropriate checks through the Disclosure and Barring Service (DBS). A check for any prohibited teachers will be carried out using the Teacher Services system.
- 8.2 All recruitment materials will include reference to the school's commitment to safeguarding and promoting the wellbeing of pupils.
- 8.3 *Miss S Hewitt (Headteacher), Mr C Walker (Deputy Head), Miss S Clark (DSL), Mrs G Edgington (Chair of Governors), Mrs P Frances (Vice-Chair of Governors), Mrs W Weaver (Business Manager)* have undertaken CWDC/NCSL Safer Recruitment training. One of the above will be involved in **all** staff/volunteer recruitment processes and sit on the recruitment panel.

### **Staff support**

- 8.4 We recognise the stressful and traumatic nature of child protection work. We will support staff by providing an opportunity to talk through their anxieties with the Designated Safeguarding Lead and to seek further support as appropriate. The school subscribes to the "Employee Assistance Programme" which affords confidential access, 24 hours a day, 365 days a year to all staff members who may wish to talk to a counsellor or other supportive professionals.



### 8.5 **Visitors to the school**

Work Experience students under the age of 18 will not require a DBS check as they will be supervised at all times (S Glos LA Guidance).

College and University students and volunteers will need to produce their DBS on arrival at the school at the start of their placement/voluntary work.

### 8.6 **Disqualification by Association under the Childcare Act 2006**

Disqualification by association now only applies in domestic settings, anytime for Reception age children and for 5 – 8 year olds in out of school settings. Staff will be reminded however, that staff relationships and associations (including those online) may have an implication for safeguarding children at school. Any changes should be brought to the attention of the Headteacher.

## 9. **OUR ROLE IN THE PREVENTION OF ABUSE**

9.1 We will provide opportunities for pupils to develop skills, concepts, attitudes and knowledge that promote their safety and well-being.

### **The curriculum**

9.2 Relevant issues will be addressed through the PSHE curriculum, for example self-esteem, emotional literacy, assertiveness, power, sex and relationship education, online safety and bullying.

9.3 Relevant issues will be addressed through other areas of the curriculum, for example, circle time, English, History, Drama, Art.

### **Other areas of work**

9.4 All our policies which address issues of power and potential harm, for example bullying, equal opportunities, handling, positive behaviour, will be linked to ensure a whole school approach.

9.5 Our safeguarding policy cannot be separated from the general ethos of the school, which should ensure that pupils are treated with respect and dignity, taught to treat each other with respect, feel safe, have a voice, and are listened to.

9.6 Peer on peer abuse is taken very seriously and dealt with according to the needs of the students involved with the full knowledge of their families. This policy acknowledges that this could include girls being sexually assaulted by boys or girls, boys being sexually assaulted by boys or girls or boys or girls being subjected to initiation or gang type violence.

## 10. **SAFEGUARDING PUPIL WHO ARE VULNERABLE TO EXTREMISM OR RADICALISATION**



- 10.1 Since 2010, when the Government published the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism. There have been several occasions both locally and nationally in which extremist groups have attempted to radicalise vulnerable children and young people to hold extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation.
- 10.2 Culverhill School values freedom of speech and the expression of beliefs / ideology as fundamental rights underpinning our society's values. Both pupils and teachers have the right to speak freely and voice their opinions. However, freedom comes with responsibility and free speech that is designed to manipulate the vulnerable or that leads to violence and harm of others goes against the moral principles in which freedom of speech is valued. Free speech is not an unqualified privilege; it is subject to laws and policies governing equality, human rights, community safety and community cohesion.
- 10.3 The current threat from terrorism in the United Kingdom may include the exploitation of vulnerable people, to involve them in terrorism or in activity in support of terrorism. The normalisation of extreme views may also make children and young people vulnerable to future manipulation and exploitation. Culverhill School is clear that this exploitation and radicalisation should be viewed as a safeguarding concern.
- 10.4 Definitions of radicalisation and extremism, and indicators of vulnerability to radicalisation are in Appendix Four. We believe that the pupils at Culverhill School are vulnerable to radicalisation due to the nature of their learning difficulties, and take our role safeguarding them very seriously.
- 10.5 Culverhill School seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.
- Risk reduction**
- 10.6 The school governors, the Head Teacher and the Designated Safeguarding Lead will assess the level of risk within the school and put actions in place to reduce that risk. Risk assessment may include consideration of the school's RE curriculum, SEND policy, assembly policy, the use of school premises by external agencies, integration of pupils by gender and SEN, anti-bullying policy and other issues specific to the school's profile, community and philosophy.



10.7 This risk assessment will be reviewed as part of the annual South Gloucestershire Safeguarding Audit and that is monitored by the Local Authority and the Local Safeguarding Children Board.

**Response**

10.8 Our school, like all others, is required to identify a Prevent Single Point of Contact (SPOC) who will be the lead within the organisation for safeguarding in relation to protecting individuals from radicalisation and involvement in terrorism: this will normally be the Designated Safeguarding Lead. The SPOC for Culverhill School is *Sally Clark*. The responsibilities of the SPOC are described in Appendix Five.

10.9 When any member of staff has concerns that a pupil may be at risk of radicalisation or involvement in terrorism, they should speak with the SPOC and to the Designated Safeguarding Lead if this is not the same person.

10.10 Numerous factors can contribute to and influence the range of behaviours that are defined as violent extremism, but most young people do not become involved in extremist action. For this reason the appropriate interventions in any particular case may not have any specific connection to the threat of radicalisation, for example they may address mental health, relationship or drug/alcohol issues.

**11. SAFEGUARDING PUPILS WHO ARE VULNERABLE TO FORCED MARRIAGE, FEMALE GENITAL MUTILATION OR BREAST IRONING, HONOUR BASED VIOLENCE (HBV), TRAFFICKING OR EXPLOITATION.**

11.1 Our safeguarding policy above through the school's values, ethos and behaviour policies provides the basic platform to ensure children and young people are given the support to respect themselves and others, stand up for themselves and protect each other.

11.2 Our school keeps itself up to date on the latest advice and guidance provided to assist in addressing specific vulnerabilities and forms of exploitation, for example sharing the recommendations made by Serious Case Reviews, and national news reports.

11.3 Our staff are supported to recognise warning signs and symptoms in relation to specific issues, include such issues in an age appropriate way in their curriculum. All forms of so-called HBV are abuse (regardless of the motivation) and should be handled and escalated as such.

11.4 Our school will engage with our families to talk about these issues when necessary.

11.5 Our staff are supported to talk to families about sensitive concerns in relation to their children and to find ways to address them together wherever possible.



- 11.6 Our Designated Safeguarding Lead knows where to seek and get advice as necessary.
- 11.7 Our school brings in experts and uses specialist material to support the work we do.
- 11.8 All staff understand that they have a duty to report all potential acts of FGM to the police.

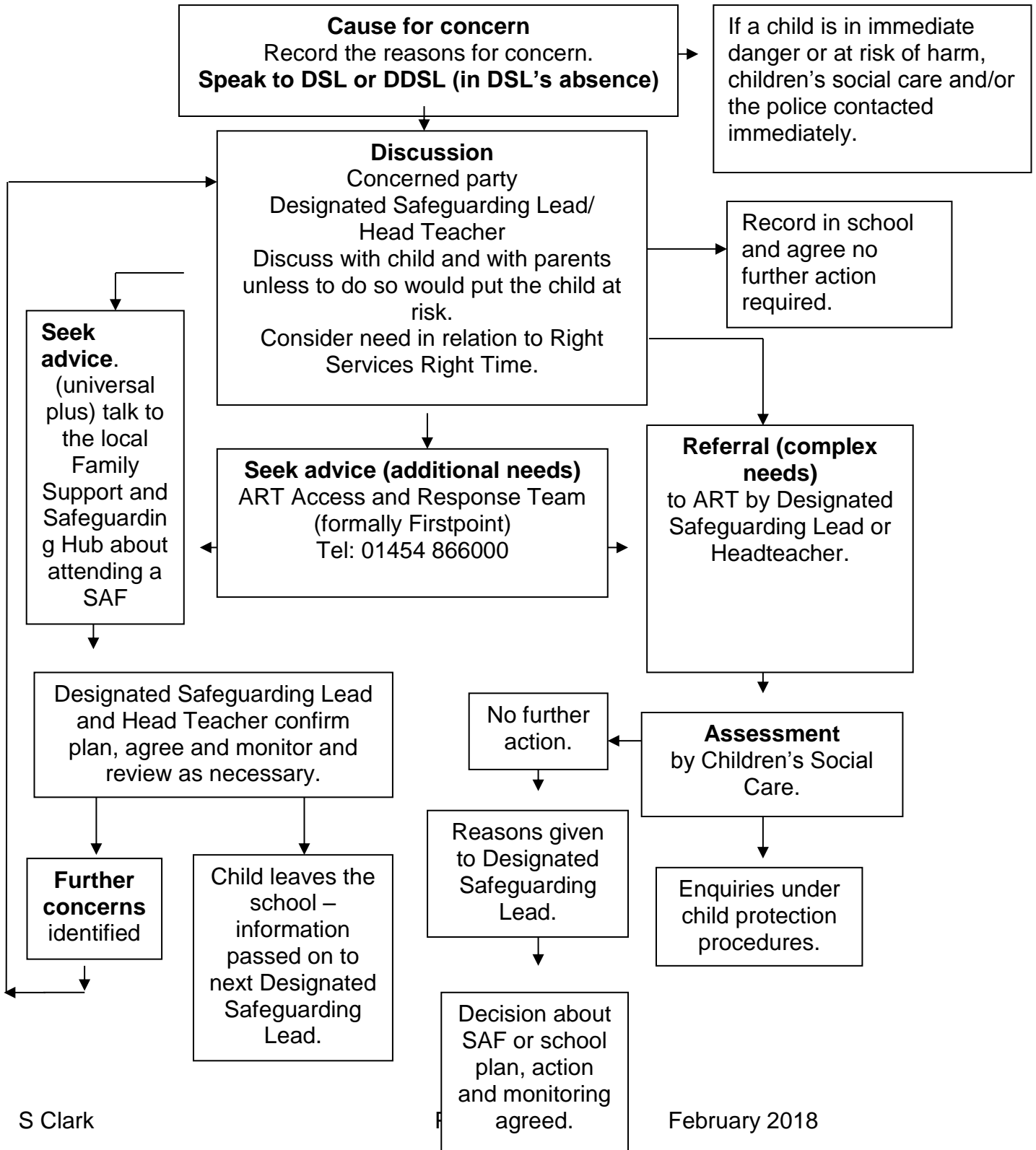
## **12. WHAT WE DO WHEN WE ARE CONCERNED**

- 12.1 Where risk factors are present but there is no evidence of a particular risk then our DSL /SPOC advises us on preventative work that can be done within school to engage the pupil into mainstream activities and social groups. The DSL may well be the person who talks to and has conversations with the pupil's family, sharing the school's concern about the young person's vulnerability and how the family and school can work together to reduce the risk.
- 12.2 In this situation, depending on how worried we are and what we agree with the parent and the young person (as far as possible) –
- The DSL/SPOC can decide to notify the Access and Response Team (ART) of the decision so that a strategic overview can be maintained and any themes or common factors can be recognised; and
  - The school will review the situation after taking appropriate action to address the concerns.
- 12.3 The DSL/SPOC will also offer and seek advice about undertaking early help procedures and/or making a referral to children's social care or ART who can assist.
- 12.4 If the concerns about the pupil are significant and meet the additional needs/complex need criteria, they will be referred to ART. This includes concerns about a child/young person who is affected by the behaviour of a parent or other adult in their household.
- 12.5 Staff must personally report to the police cases where they discover that an act of FGM appears to have been carried out, whilst still discussing with the Designated Safeguarding Lead and Children's Social Care.



## Part 2 THE KEY PROCEDURES

### RESPONDING TO CONCERNS ABOUT A CHILD





### 13. INVOLVING PARENTS / CARERS

- 13.1 In general, we will discuss any child protection concerns with parents / carers before approaching other agencies, and will seek their consent to making a referral to another agency. Appropriate staff will approach parents / carers after consultation with the Designated Safeguarding Lead. However there may be occasions when the school will contact another agency **before** informing parents/carers because it considers that contacting them may increase the risk of significant harm to the child.
- 13.2 Parents / carers will be informed about our safeguarding policy through: The school Website.

### 14. MULTI-AGENCY WORK

- 14.1 We work in partnership with other agencies in the best interests of the children. The school will, where necessary, liaise with the school nurse and make referrals to children's social care. Referrals should be made by the Designated Safeguarding Lead to the Access and Response Team (01454 866000). Where the child already has a safeguarding social worker, the request for service should go immediately to the social worker involved, or in their absence to their team manager.
- 14.2 We will co-operate with any child protection enquiries conducted by children's social care: the school will ensure representation at appropriate inter-agency meetings such as integrated support plan meetings initial and review child protection conferences, and core group meetings.
- 14.3 We will provide reports as required for these meetings. If the school is unable to attend, a written report will be sent. The report will, wherever possible, be shared with parents / carers at least 24 hours prior to the meeting.
- 14.4 Professionals that are working with or visiting pupils at the school, will be asked to show photographic ID. This must be passport, driving licence or professional identity card. Electronic versions of ID, bus passes, or library cards will not be accepted. For professionals and visitors working regularly at the school DBS will need to be shown.
- 14.5 **Education off site**  
Safeguarding procedures extend to all pupils and staff when off site. Educational visits, residential visits, independent travel, work experience, college taster days and alternative educational provision. See related school policies. The contact details of the Designated Safeguarding Lead must be available to staff that are off site.





## 15. OUR ROLE IN SUPPORTING CHILDREN

- 15.1 We will offer appropriate support to individual children who have experienced abuse or who have abused others.
- 15.2 An individual support plan will be devised, implemented and reviewed regularly for these children. This plan will detail areas of support, who will be involved, and the child's wishes and feelings. A written outline of the individual support plan will be kept in the child's child protection record.
- 15.3 Children and young people who abuse others will be responded to in a way that meets their needs as well as protecting others within the school community through a multi-agency risk assessment. We will ensure that the needs of children and young people who abuse others will be considered separately from the needs of their victims.
- 15.4 We will ensure the school works in partnership with parents / carers and other agencies as appropriate.

## 16. RESPONDING TO AN ALLEGATION ABOUT A MEMBER OF STAFF

See also *South Gloucestershire Safeguarding Children Board [Procedures on Allegations against Staff and Volunteers](#)*.

- 16.1 South West Child Protection Procedures should be used in any case in which it is alleged that a member of staff, governor, visiting professional or volunteer 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; or
  - Behaved in a way that indicates s/he is unsuitable to work with children.
- 16.2 Although it is an uncomfortable thought, it needs to be acknowledged that there is the potential for staff in school to abuse children.
- 16.3 All staff working within our organisation must report any potential safeguarding concerns about an individual's behaviour towards children and young people immediately. Allegations or concerns about colleagues and visitors must be reported direct to the Head Teacher unless the concern relates to Head Teacher. If the concern relates to the Head Teacher, it must be reported immediately to the Designated Safeguarding Lead *Sally Clark* who will report to the Local Authority Designated Officer in children's social care, who will liaise with the Chair of Governors and they will decide on any action required.

## 17. CHILDREN WITH ADDITIONAL NEEDS



- 17.1 Culverhill School recognises that while all children have a right to be safe, some children may be more vulnerable to abuse, for example those with a disability or special educational need, those living with domestic violence or drug / alcohol abusing parents, etc.
- 17.2 If the school needs to exclude either fixed term or permanently, a vulnerable pupil and / or a pupil who is the subject of a child protection plan or where there is an existing child protection file, the Lead Social Worker will be informed.

## 18. CHILDREN IN SPECIFIC CIRCUMSTANCES

- 18.1 Guidance on children in specific circumstances is in South Gloucestershire Safeguarding Children Board's procedures as listed below and can be located on the website: <http://www.proceduresonline.com/swcpp/southglos/index.html>

South Gloucestershire Safeguarding Practice Guidance Index

Bruising and Injuries to Non-Mobile Children  
Bullying  
Child Sexual Abuse in the Family Environment      New  
Child Sexual Exploitation  
Children and Families that go Missing (Including Unborn Children)  
Children Affected by Gang Activity and Youth Violence      Updated  
Children from Abroad  
Children Living and Staying Away from Home including Private Fostering  
Children Missing from Education  
Children Missing from Care, Home and Education  
Children Moving Across Local Authority Boundaries  
Children of Parents with Learning Difficulties  
Children of Parents with Mental Health Problems  
Children of Parents who Misuse Substances  
Concealed Pregnancies  
Dangerous Dogs and Safeguarding Children  
Disabled Children  
Domestic Violence and Abuse  
E-Safety: Children Exposed to Abuse through the Digital Media  
Fabricated or Induced Illness  
Female Genital Mutilation  
Forced Marriage  
Harmful Sexual Behaviour  
Historical Abuse  
Honour Based Violence  
Modern Slavery (including the Exploitation of Children)  
Neglect  
Pre-Birth (Safeguarding Unborn Babies)  
Racism  
Radicalisation and Violent Extremism - Safeguarding Children and Young People



Self-Harm and Suicidal Behaviour  
Spiritual, Cultural and Religious Beliefs  
Trafficked Children  
Underage Sexual Activity  
Visits to Prisons by Children  
Visits to Psychiatric Wards and Facilities by Children  
Working with Interpreters and others with Special Communication Skills

## 18.2 all other South Gloucestershire policies and guidance.

South Gloucestershire policies, guidance and procedures can be found at:

<http://sites.southglos.gov.uk/safeguarding/children/i-am-a-professional/safeguarding-guidance-policies-and-plans/>

## Index

Achieving Best Evidence Protocol  
Arrangements for managing allegations of abuse against people who work with children or those who are in positions of trust (currently being updated)  
Assessment Protocol  
Child Sexual Exploitation Strategy (CSE) 2016  
Child Sexual Exploitation (CSE) Guidance and SERAF  
Child Sexual Exploitation (CSE) Blank SERAF  
Child Sexual Exploitation (CSE) Example SERAF  
Child Sexual Exploitation – SGSCB CSE sub-group action plan 2016-17  
Disabled Children – Safeguarding Disabled Children Plan (currently being reviewed)  
Dissenting to the Decision of a Child Protection Case Conference  
Domestic abuse – Sharing Information Joint Procedures  
Early Help Vision and Strategy  
Elective Home Education policy  
Escalation Policy – Resolution of Professional Differences  
Expected Baby Protocol  
Harmful Sexual Behaviour – South Gloucestershire Social Care Practice Guide  
Honour Based Violence, Female Genital Mutilation & Forced Marriage. Multi-agency Guidance.  
Journey of need – a child’s journey of need including threshold matrix  
Missing Children – Multi-agency Protocol South Gloucestershire  
Missing Children – Missing Management Meeting Record Form  
Missing Children SGSCB Sub- group TOR  
Integrated Supervision Policy  
Learning and Improvement Framework  
Neglect Strategy  
Neglect Toolkit 2016  
Non-mobile babies – Multi-agency guidance for injuries in non-mobile babies  
Non-mobile babies – Multi-agency guidance for injuries in non-mobile babies Early Years addendum  
Non-mobile babies – injuries/body maps  
Non-mobile babies – injuries/parent leaflet



Online Safety Strategy  
Peer on peer abuse – managing allegations against other pupils  
Prevent Referrals and Channel Process  
Radicalisation – LA advice on travel to conflict zones Nov 15  
SGSCB Training and Development Plan 2016-17  
Social Care Single Assessments – Information for parents and carers  
Substance Misuse Protocol  
Threshold of need – tiers  
Whistle Blowing Policy – South Gloucestershire  
Whistle Blowing guidance- South Gloucestershire

#### National guidance & resources for schools

- [Bullying – School strategies for preventing and tackling bullying](#)
- [Counselling in schools](#)
- [CSE – What to do if you suspect a child is being sexually exploited](#)
- [Information Sharing – advice for Safeguarding Practitioners](#)
- [Keeping children safe in education](#)
- [Mental health and behaviour in schools](#)
- [Ofsted Safeguarding policy](#)
- [Radicalisation – Protecting Children from Radicalisation: The Prevent Duty](#)
- [Sexting in Schools: Responding to incidents and safeguarding young people](#)
- [Supervision of activity with children](#)
- [Safeguarding practitioners: information sharing advice](#)
- [Statutory policies for schools](#)
- [Self-harm – Information and suggestions for school staff](#)



# APPENDICES



## APPENDIX ONE

### DEFINITIONS AND INDICATORS OF ABUSE

#### 1. 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 maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

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

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

The following may be indicators of neglect (this is not designed to be used as a checklist):

- Constant hunger;
- Stealing, scavenging and/or hoarding food;
- Frequent tiredness or listlessness;
- Frequently dirty or unkempt;
- Often poorly or inappropriately clad for the weather;
- Poor school attendance or often late for school;
- Poor concentration;
- Affection or attention seeking behaviour;
- Illnesses or injuries that are left untreated;
- Failure to achieve developmental milestones, for example growth, weight;
- Failure to develop intellectually or socially;
- Responsibility for activity that is not age appropriate such as cooking, ironing, caring for siblings;
- The child is regularly not collected or received from school; or
- The child is left at home alone or with inappropriate carers

#### 2. 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.



The following may be indicators of physical abuse (this is not designed to be used as a checklist):

- Multiple bruises in clusters, or of uniform shape;
- Bruises that carry an imprint, such as a hand or a belt;
- Bite marks;
- Round burn marks;
- Multiple burn marks and burns on unusual areas of the body such as the back, shoulders or buttocks;
- An injury that is not consistent with the account given;
- Changing or different accounts of how an injury occurred;
- Bald patches;
- Symptoms of drug or alcohol intoxication or poisoning;
- Unaccountable covering of limbs, even in hot weather;
- Fear of going home or parents being contacted;
- Fear of medical help;
- Fear of changing for PE;
- Inexplicable fear of adults or over-compliance;
- Violence or aggression towards others including bullying; or
- Isolation from peers.

### **3. SEXUAL ABUSE**

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

The following may be indicators of sexual abuse (this is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge;
- Anal or vaginal discharge, soreness or scratching;
- Reluctance to go home;
- Inability to concentrate, tiredness;
- Refusal to communicate;
- Thrush, persistent complaints of stomach disorders or pains;



- Eating disorders, for example anorexia nervosa and bulimia;
- Attention seeking behaviour, self-mutilation, substance abuse;
- Aggressive behaviour including sexual harassment or molestation;
- Unusual compliance;
- Regressive behaviour, enuresis, soiling;
- Frequent or open masturbation, touching others inappropriately;
- Depression, withdrawal, isolation from peer group;
- Reluctance to undress for PE or swimming; or
- Bruises or scratches in the genital area.

#### **4. SEXUAL EXPLOITATION**

Child sexual exploitation occurs when a child or young person, or another person, receives “something” (for example food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of the child/young person performing sexual activities, or another person performing sexual activities on the child/young person.

The presence of any significant indicator for sexual exploitation should trigger a referral to children’s social care. The significant indicators are:

- Having a relationship of concern with a controlling adult or young person (this may involve physical and/or emotional abuse and/or gang activity);
- Entering and/or leaving vehicles driven by unknown adults;
- Possessing unexplained amounts of money, expensive clothes or other items;
- Frequenting areas known for risky activities;
- Being groomed or abused via the Internet and mobile technology; and
- Having unexplained contact with hotels, taxi companies or fast food outlets.

#### **5. EMOTIONAL ABUSE**

Emotional abuse is 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 children 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 the 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 also involve seeing or hearing the ill-treatment of another person. 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





The following may be indicators of emotional abuse (this is not designed to be used as a checklist):

- The child consistently describes him/herself in very negative ways – as stupid, naughty, hopeless, ugly;
- Over-reaction to mistakes;
- Delayed physical, mental or emotional development;
- Sudden speech or sensory disorders;
- Inappropriate emotional responses, fantasies;
- Neurotic behaviour: rocking, banging head, regression, tics and twitches;
- Self-harming, drug or solvent abuse;
- Fear of parents being contacted;
- Running away;
- Compulsive stealing;
- Appetite disorders - anorexia nervosa, bulimia; or
- Soiling, smearing faeces, enuresis.

N.B.: Some situations where children stop communication suddenly (known as “traumatic mutism”) can indicate maltreatment.

## **6. PEER ON PEER ABUSE**

All staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to, bullying (including cyberbullying), gender-based violence/ sexual assaults and sexting.

There are procedures to minimise the risk of peer on peer abuse and the policy sets out how allegations of peer on peer abuse will be investigated and dealt with. See Appendix 7.

## **7. RESPONSES FROM PARENTS**

Research and experience indicates that the following responses from parents may suggest a cause for concern across all four categories:

- Delay in seeking treatment that is obviously needed;
- Unawareness or denial of any injury, pain or loss of function (for example, a fractured limb);
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development;
- Reluctance to give information or failure to mention other known relevant injuries;
- Frequent presentation of minor injuries;



- A persistently negative attitude towards the child;
- Unrealistic expectations or constant complaints about the child;
- Alcohol misuse or other drug/substance misuse;
- Parents request removal of the child from home; or
- Violence between adults in the household.

## 8. DISABLED CHILDREN

When working with children with disabilities, practitioners need to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as the shin, might be of concern on a non-mobile child;
- Not getting enough help with feeding leading to malnourishment;
- Poor toileting arrangements;
- Lack of stimulation;
- Unjustified and/or excessive use of restraint;
- Rough handling, extreme behaviour modification such as deprivation of medication, food or clothing, disabling wheelchair batteries;
- Unwillingness to try to learn a child's means of communication;
- Ill-fitting equipment. for example callipers, sleep boards, inappropriate splinting;
- Misappropriation of a child's finances; or
- Inappropriate invasive procedures.

## 9. ONLINE SAFETY

**(see Online Safety policy and Staff and Pupil Acceptable Use Agreements)**

It is essential that children are safeguarded from potentially harmful and inappropriate online material. As such Governing Bodies should ensure appropriate filters and appropriate monitoring systems are in place.

They should also be careful. However, that "over blocking" does not lead to unreasonable restrictions as to what children can be taught with regards to online teaching and safeguarding.



## DEALING WITH A DISCLOSURE OF ABUSE

### When a child tells me about abuse s/he has suffered, what must I remember?

- Stay calm.
- Do not communicate shock, anger or embarrassment.
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you.
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed.
- Tell the child that it is not her/his fault.
- Encourage the child to talk but do not ask "leading questions" or press for information.
- Listen and remember.
- Check that you have understood correctly what the child is trying to tell you.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Do not tell the child that what s/he experienced is dirty, naughty or bad.
- It is inappropriate to make any comments about the alleged offender.
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

NB It is not education staff's role to seek disclosures. Their role is to observe that something may be wrong, ask about it, listen, be available and try to make time to talk.

### Immediately afterwards

**You must not deal with this yourself.** Clear indications or disclosure of abuse must be reported to children's social care without delay, Designated Safeguarding Lead or Headteacher.

Children making a disclosure may do so with difficulty, having chosen carefully to whom they will speak. Listening to and supporting a child/young person who has been abused can be traumatic for the adults involved. Support for you will be available from Designated Safeguarding Lead or Head Teacher.

**APPENDIX THREE**

### ALLEGATIONS ABOUT A MEMBER OF STAFF, GOVERNOR OR VOLUNTEER



1. Inappropriate behaviour by staff/volunteers could take the following forms:
  - **Physical**  
For example the intentional use of force as a punishment, slapping, use of objects to hit with, throwing objects or rough physical handling.
  - **Emotional**  
For example intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, and attitudes that discriminate on the grounds of race, gender, disability or sexuality.
  - **Sexual**  
For example sexualised behaviour towards pupils, sexual harassment, sexual assault and rape.
  - **Neglect**  
For example failing to act to protect a child or children, failing to seek medical attention or failure to carry out an appropriate risk assessment.
2. If a child makes an allegation about a member of staff, governor, visitor or volunteer the Head Teacher should be informed immediately. The Head Teacher should carry out an urgent initial consideration in order to establish whether there is substance to the allegation. The Head Teacher should not carry out the investigation him/herself or interview pupils.
3. The Head Teacher must exercise, and be accountable for, their professional judgement on the action to be taken, as follows –
  - If the actions of the member of staff, and the consequences of the actions, raise credible child protection concerns the Head Teacher / will notify the Local Authority Designated Officer (LADO) Team (Tel: 01454 868508). The LADO Team will liaise with the Chair of Governors and advise about action to be taken, and may initiate internal referrals within children's social care to address the needs of children likely to have been affected.
  - If the actions of the member of staff, and the consequences of the actions, do not raise credible child protection concerns, but do raise other issues in relation to the conduct of the member of staff or the pupil(s), these should be addressed through the school's own internal procedures.
  - If the Head Teacher decides that the allegation is without foundation and no further formal action is necessary, all those involved should be informed of this conclusion, and the reasons for the decision should be recorded on the child protection file.
4. Where an allegation has been made against the Head Teacher, the Designated Safeguarding Lead Sally Clark and the Chair of the Governing Body takes on the role of liaising with the LADO team in determining the appropriate way forward. For details of this specific procedure see the Section on [Allegations against Staff](#)



[and Volunteers](#) in the procedures of South Gloucestershire Safeguarding Children Board.

#### **APPENDIX FOUR**

### **INDICATORS OF VULNERABILITY TO RADICALISATION**



1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
2. Extremism is defined by the Government in the Prevent Strategy as:  
Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
3. Extremism is defined by the Crown Prosecution Service as:  
The demonstration of unacceptable behaviour by using any means or medium to express views which:
  - Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
  - Seek to provoke others to terrorist acts;
  - Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
  - Foster hatred which might lead to inter-community violence in the UK.
4. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.
5. Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.
6. Indicators of vulnerability include:
  - Identity Crisis – the pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
  - Personal Crisis – the pupil may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;



- Personal Circumstances – migration; local community tensions; and events affecting the pupil’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
  - Unmet Aspirations – the pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;
  - Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
  - Special Educational Need – pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.
7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.
8. More critical risk factors could include:
- Being in contact with extremist recruiters;
  - Accessing violent extremist websites, especially those with a social networking element;
  - Possessing or accessing violent extremist literature;
  - Using extremist narratives and a global ideology to explain personal disadvantage;
  - Justifying the use of violence to solve societal issues;
  - Joining or seeking to join extremist organisations; and
  - Significant changes to appearance and / or behaviour;
  - Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.



## APPENDIX FIVE

### PREVENTING VIOLENT EXTREMISM - ROLES AND RESPONSIBILITIES OF THE SINGLE POINT OF CONTACT (SPOC)

The SPOC for Culverhill School is Sally Clark, who is responsible for:

- Ensuring that staff of the school are aware that you are the SPOC in relation to protecting pupils from radicalisation and involvement in terrorism;
- Maintaining and applying a good understanding of the relevant guidance in relation to preventing pupils from becoming involved in terrorism, and protecting them from radicalisation by those who support terrorism or forms of extremism which lead to terrorism;
- Raising awareness about the role and responsibilities of Culverhill School in relation to protecting pupils from radicalisation and involvement in terrorism;
- Monitoring the effect in practice of the school's RE curriculum and assembly policy to ensure that they are used to promote community cohesion and tolerance of different faiths and beliefs;
- Raising awareness within the school about the safeguarding processes relating to protecting pupils from radicalisation and involvement in terrorism; and monitor how we build resilience within our pupils – see curriculum policies for SMSC, PSHE.
- Acting as the first point of contact within the school for case discussions relating to pupils who may be at risk of radicalisation or involved in terrorism;
- Collating relevant information from in relation to referrals of vulnerable pupils into the Channel\* process;
- attending Channel\* meetings as necessary and carrying out any actions as agreed;
- Reporting progress on actions to the Channel\* Co-ordinator; and
- Sharing any relevant additional information in a timely manner.

\* Channel is a multi-agency approach to provide support to individuals who are at risk of being drawn into terrorist related activity. It is led by the Avon and Somerset Police Counter-Terrorism Unit ([channelsw@avonandsomerset.pnn.police.uk](mailto:channelsw@avonandsomerset.pnn.police.uk)), and it aims to

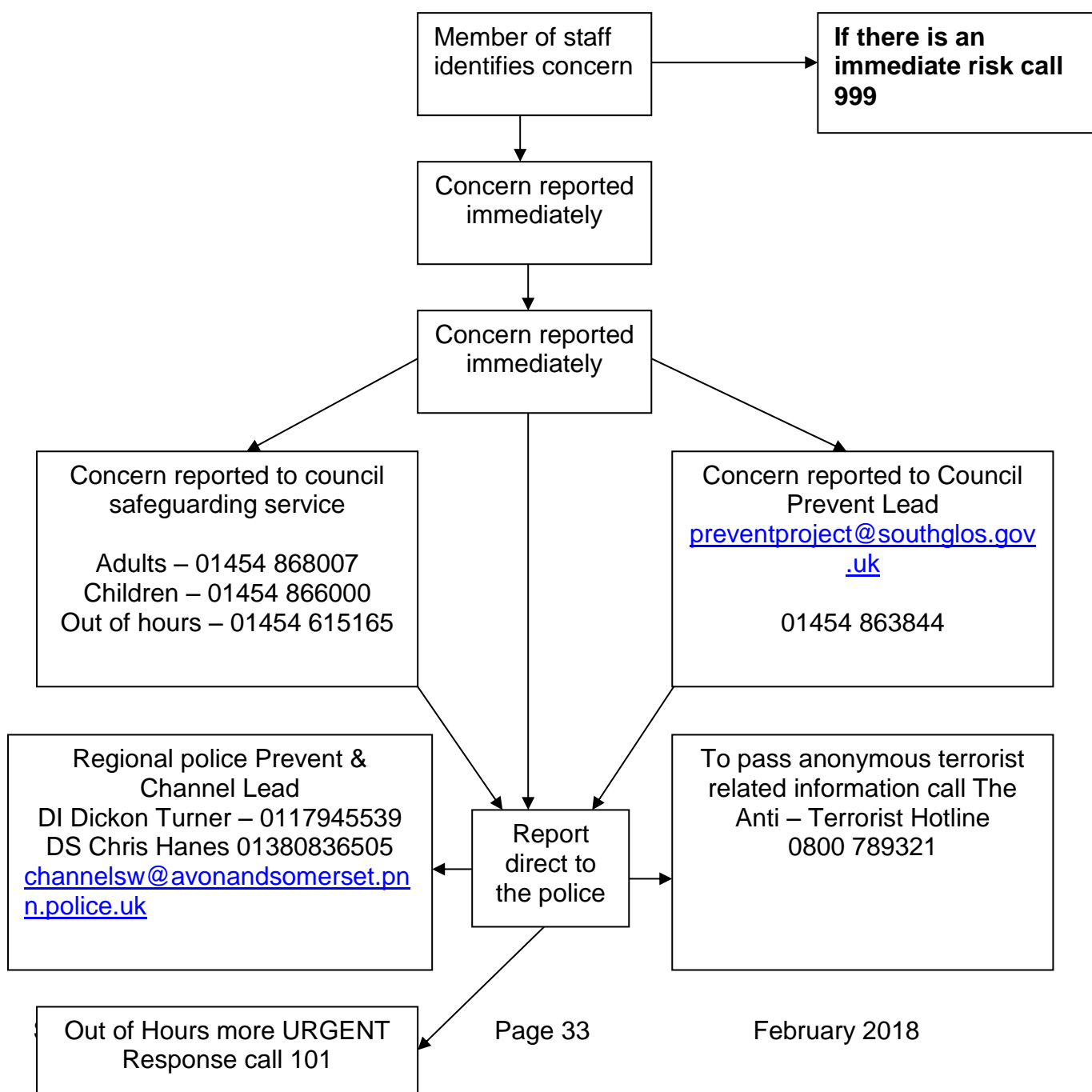
- Establish an effective multi-agency referral and intervention process to identify vulnerable individuals;





- Safeguard individuals who might be vulnerable to being radicalised, so that they are not at risk of being drawn into terrorist-related activity; and
- Provide early intervention to protect and divert people away from the risks they face and reduce vulnerability.

### Prevent Referral Process for Vulnerable Individuals





## APPENDIX SIX

### **SELF-HARM – Information and guidance for school staff**

The information and suggestions in this appendix are intended to give school staff ideas to support young people who harm themselves.

#### **What is self-harm and how common is it?**

- Self-harm is any behaviour such as self-cutting, swallowing objects, taking an overdose or running in front of cars etc., where the intent is to deliberately cause self-harm.
- A small proportion of young people who self-harm have a strong desire to kill themselves. However, there are other factors that motivate people to self-harm (see below). Even if the intent is not to die, self-harming behaviour may indicate serious difficulties and needs to be taken seriously.
- Self-harm can be a transient behaviour in young people that is triggered by particular stresses and resolves fairly quickly, or it may be part of a longer term pattern of behaviour that is associated with more serious emotional/mental health difficulty. Where there are a number of underlying risk factors present the risks of further self-harm is greater.

Risk factors for self-harm behaviour

Any of the following risk factors may make a young person vulnerable to self-harm:

#### **Individual Factors**

- low mood/anxiety
- an existing psychological or developmental difficulty e.g. Asperger's syndrome, or learning difficulty
- difficulty communicating
- low self esteem
- poor problem solving skills
- hopelessness
- impulsivity
- drug or alcohol abuse
- confusion about sexuality or feeling different/unaccepted (e.g. if gay, lesbian or bisexual)

#### **Family factors**

- unreasonable expectations
- religious/ethnicity/cultural identity dilemmas or conflict
- young carers' role within the family
- domestic violence



- neglect or abuse (physical, sexual or emotional)
- poor parental relationships and arguments
- depression, deliberate self-harm or suicide in the family

### **Social factors**

- difficulty in making relationships/loneliness
- persistent bullying or peer rejection
- racism
- homophobic attitudes or bullying of children who think they may be gay, lesbian or bisexual
- easy availability of drugs, medication or other methods of self-harm

### **Triggers for self-harm behaviour**

A number of factors may trigger the self-harm incident:

- family relationship difficulties (the most common trigger for younger adolescents)
- difficulties with peer relationships e.g. break up of relationship (the most common trigger for older adolescents)
- bullying
- significant trauma e.g. bereavement, abuse
- self-harm behaviour in other students or in the media (contagion effect)
- difficult times of the year (e.g. anniversaries)
- trouble in school or with the police
- feeling under pressure from families, school and peers to conform/achieve
- exam pressure
- times of change (e.g. parental separation/divorce)

### **Warning signs**

There may be a change in behaviour of the young person which is associated with self-harm or other serious emotional difficulties:

- changes in eating/sleeping habits
- increased isolation from friends/family
- changes in activity and mood e.g. more, or less irritable or aggressive than usual
- lowering of academic grades
- talking about self-harming or suicide
- abusing drugs or alcohol
- becoming socially withdrawn
- expressing feelings of failure, uselessness or loss of hope
- giving away possessions

Examples of self-harming behaviour:



- cutting
- taking an overdose of tablets
- swallowing hazardous materials or substances
- burning- either physically or chemically
- over/under medicating e.g. misuse of paracetamol, insulin or thyroxine
- punching/hitting/bruising
- hair pulling/skin picking/head banging
- high risk behaviour, such as running in front of cars
- episodes of alcohol/drug abuse or over/under eating can at times be acts of deliberate self-harm

For primary aged children:

- Small shallow cuts
- Hair pulling
- Head banging against hard objects
- Deliberate self-grazing or scratching

Young people report they self-harm to:

- Relieve tension
- Feel alive inside
- Gain control
- Numb themselves
- Comfort themselves
- Vent anger
- Relieve emotional distress or overwhelming feelings
- Stop bad thoughts
- Feel the warm blood
- See 'red'
- Punish themselves
- To replace emotional pain with physical pain

What keeps self-harm going?

Once self-harm (particularly cutting) is established it may be difficult to stop. Self-harm can form a number of functions for the student and can become a way of coping.

Examples of functions include

- Reduction in tension (safety valve)
- Distraction from problems
- Form of escape
- Outlet for anger and rage
- Way of punishing self



- Perceived way of taking control
- Care-eliciting behaviour
- A means of getting identity with a peer group
- Non-verbal communication
- It can also have suicidal intent.

### **How to help a young person who has self-harmed**

Be careful to avoid:

- Reacting with horror or discomfort to the disclosure, do not focus on the self-harm or try to get the child to talk
- Asking abrupt and rapid questions
- Threatening or getting angry
- Engaging in power struggles and demanding they 'just stop'
- Accusing them of attention seeking
- Getting frustrated if behaviour continues after support has been provided
- Ignoring other warning signs
- Promising to keep the events secret

Try to:

- Boost the child's self esteem and sense of belonging in the class by focussing on things they are good at.
- Remember school can be a safe haven for children to get away from their problems. Maintain routines, boundaries and positive behaviour management strategies whilst being aware that the child is having a difficult time.
- Establish and promote peer relationships e.g. using Circle of Friends.
- Provide positive encouragement if they show safer ways of expressing feelings.
- Consider any stresses in the school environment that can be changed, for example, more support around learning difficulties/bullying.



### **Culverhill School procedure for dealing with self-harming**

- Member of staff informed/discovers young person who is self-harming
- Stay calm. Give re-assurance. Listen. Do not try to remove implement that is being used. Follow first aid guidelines as necessary. If the child has a keyworker or trusted adult allow them to support the child.
  - Ensure young person understands limits of confidentiality.
- In an emergency or case of overdose (however small) school staff consult GP or A&E...dial 999.
- Inform Designated Safeguarding Lead, Headteacher/ Deputy Headteacher
  - Discussion with the young person whether to inform parents/carers (Consider age, severity, risk, home circumstance)
- Complete relevant incident report and paperwork – complete Child Protection Concern form (in staff room)

#### Follow up:

- Consultation with Primary Mental Health Specialist (PMHS) at your local Child and Adolescent Mental Health Service (CAMHS).
- Consider initiating a Single Assessment for early help. (SAFeh)
- Arrange meeting with parents and young person if appropriate. Seek consent for other relevant professionals' involvement.
- At meeting continue assessing needs. Plan & co-ordinate support services identified. Implement plan.
- Record & set review date.

Continue to monitor & review regularly with young person and others as agreed. Seek consultation if required.

[Full information can be found here](#)



## APPENDIX SEVEN

### PEER ON PEER ABUSE – GUIDANCE

Allegations against other pupils (safeguarding issues)

Allegations of abuse or that are a safeguarding concern maybe made against other pupils within our setting. These may include allegations of physical abuse, emotional abuse, sexual abuse and sexual exploitation.

Safeguarding concerns or reports of abuse in any form may be made against pupils in our setting

It may also be considered a safeguarding issue if the allegation:

- Is being made against an older pupil and refers to their behaviour towards a younger or more vulnerable pupil
- Is of a possible criminal nature
- Puts other pupils in the school at risk, or raises the risk factor for others
- Indicates that other pupils may have been harmed or be at risk or harm
- Includes bullying (under the definition of emotional abuse) or intimidation

Specific safeguarding issues against another pupil may include:

Physical abuse:

- Pre-planned violence
- Physical altercations
- Forcing others to carry out violence
- Forcing others to use drugs, alcohol or other substances

Emotional abuse:

- Bullying
- Threats and intimidation
- Blackmail/extortion

Sexual abuse:

- Sexual assault
- Indecent exposure
- Indecent touching
- Showing pornography to others
- Forcing others to create/share/download indecent images
- Sexting (see 'Sexting in Schools and Colleges', 2016)
- Sexual exploitation
- Encouraging/enticing other pupils to engage in inappropriate sexual behaviour
- Photographing or videoing other children performing indecent acts



- Sharing images through social media

### **Procedure**

- When an allegation is made by a pupil against another pupil, which is of a safeguarding nature it should be reported to the designated safeguarding lead (DSL) as soon as possible.
  - A factual record must be kept (as normal safeguarding child protection procedures) and updated with all actions and outcomes
  - The incident should not be investigated at this time
  - The DSL will contact the Access and Response Team (ART) to discuss the case, and make a formal referral where appropriate
  - If the allegation indicates that a potential crime has taken place, ART will refer the case to the police
  - Parents of both the alleged victim and the pupil being complained about should be informed; this should be discussed during consultation with ART.
  - A risk assessment will be considered at this time to protect all parties involved.
  - It may be appropriate, for a fixed period of time, to exclude the pupil against whom the report has been made in line with our schools behaviour policy and procedures.
  - Police and social care will lead any investigation, however where neither police nor social care thresholds are met, our school will then undertake a thorough investigation following our schools policies and procedures.
  - A risk assessment should be considered along with an appropriate supervision plan
- 
- Support should be given to all pupils involved, and they should be in attendance at all relevant meetings and sign and agree to the plan that is set
  - The plan should be monitored and review dates set





## APPENDIX EIGHT

### Information sharing guidance for practitioners

#### The principles

The principles set out below are intended to help practitioners working with children, young people, parents and carers share information between organisations. Practitioners should use their judgement when making decisions about what information to share, and should follow organisation procedures or consult with their manager if in doubt.

The most important consideration is whether sharing information is likely to support the safeguarding and protection of a child.

#### Necessary and proportionate

When taking decisions about what information to share, you should consider how much information you need to release. Not sharing more data than is necessary to be of use is a key element of the GDPR and Data Protection Act 2018, and you should consider the impact of disclosing information on the information subject and any third parties. Information must be proportionate to the need and level of risk.

#### Relevant

Only information that is relevant to the purposes should be shared with those who need it. This allows others to do their job effectively and make informed decisions.

#### Adequate

Information should be adequate for its purpose. Information should be of the right quality to ensure that it can be understood and relied upon.

#### Accurate

Information should be accurate and up to date and should clearly distinguish between fact and opinion. If the information is historical then this should be explained.

#### Timely

Information should be shared in a timely fashion to reduce the risk of missed opportunities to offer support and protection to a child. Timeliness is key in emergency situations and it may not be appropriate to seek consent for information sharing if it could cause delays and therefore place a child or young person at increased risk of harm. Practitioners should ensure that sufficient information is shared, as well as consider the urgency with which to share it.



### **Secure**

Wherever possible, information should be shared in an appropriate, secure way. Practitioners must always follow their organisation's policy on security for handling personal information.

### **Record**

Information sharing decisions should be recorded, whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom, in line with organisational procedures. If the decision is not to share, it is good practice to record the reasons for this decision and discuss them with the requester. In line with each organisation's own retention policy, the information should not be kept any longer than is necessary. In some rare circumstances, this may be indefinitely, but if this is the case, there should be a review process scheduled at regular intervals to ensure data is not retained where it is unnecessary to do so.

## **When and how to share information**

When asked to share information, you should consider the following questions to help you decide if, and when, to share. If the decision is taken to share, you should consider how best to effectively share the information. A flowchart follows the text.

### **When**

Is there a clear and legitimate purpose for sharing information?

- Yes – see next question
- No – do not share

Do you have consent to share?

- Yes – you can share but should consider how
- No – see next question

Does the information enable an individual to be identified?

- Yes – see next question
- No – you can share but should consider how

Have you identified a lawful reason to share information without consent?

- Yes – you can share but should consider how
- No – do not share



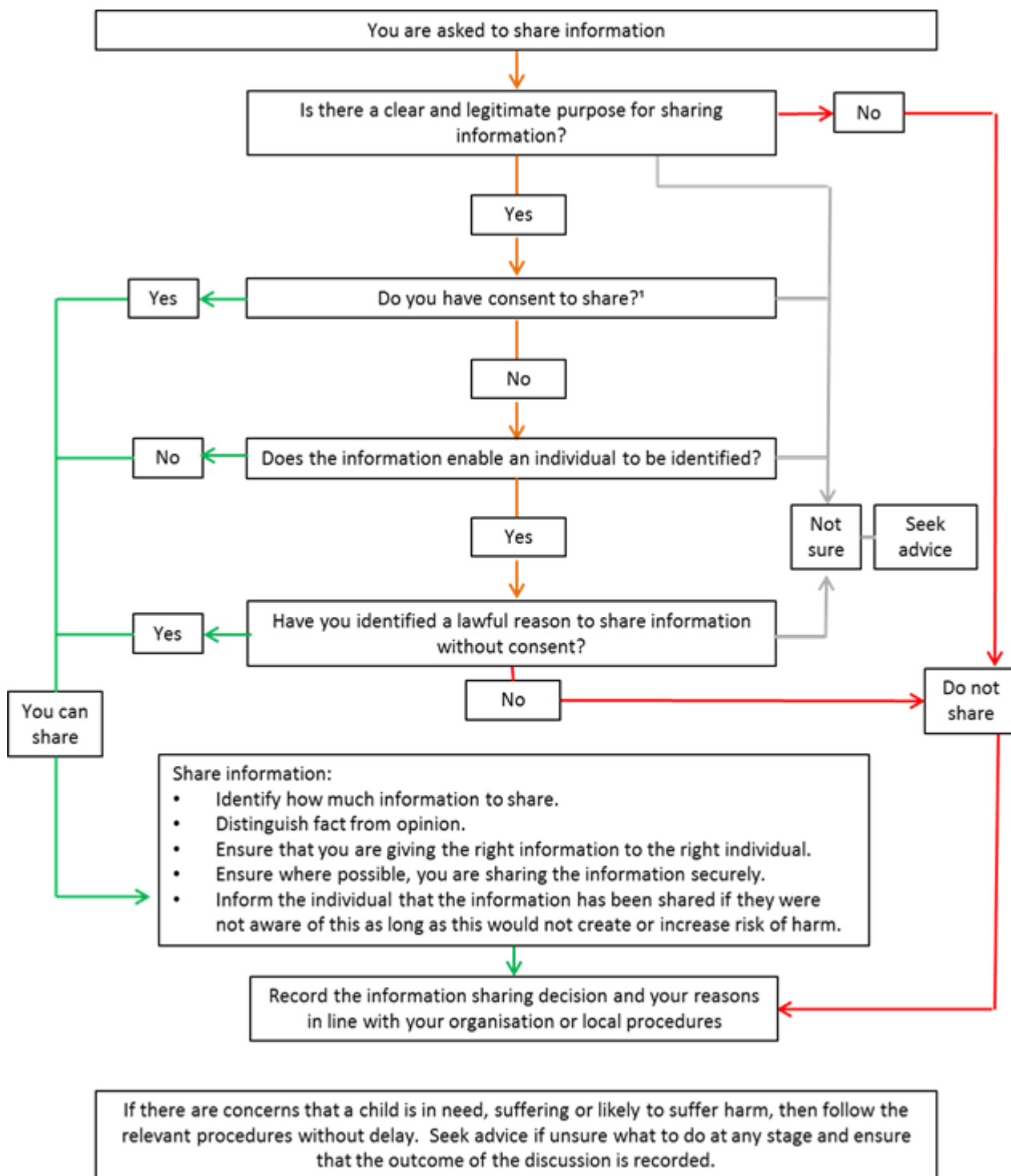
## How

- Identify how much information to share
- Distinguish fact from opinion
- Ensure that you are giving the right information to the right individual
- Ensure where possible that you are sharing the information securely
- Where possible, be transparent with the individual, informing them that the information has been shared, as long as doing so does not create or increase the risk of harm to the individual.

All information sharing decisions and reasons must be recorded in line with your organisation or local procedures. If at any stage you are unsure about how or when to share information, you should seek advice on this. You should also ensure that the outcome of the discussion is recorded.



**Flowchart of when and how to share information**



1. Consent must be unambiguous, freely given and may be withdrawn at any time