



Brockenhurst College

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SAFEGUARDING AND CHILD PROTECTION POLICY, PROCEDURES AND GUIDANCE

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BROCKENHURST COLLEGE CHILD PROTECTION POLICY

Policy Statement

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all children and vulnerable adults.

We make every effort to provide a safe and welcoming environment underpinned by a culture of openness where both children and adults feel secure, able to talk and believe that they are being listened to.

We maintain an attitude of "it could happen here" where safeguarding is concerned.

The purpose of this policy is to provide staff, volunteers and governors with the framework they need in order to keep children safe and secure in our college and its out centres and to inform parents and guardians how we will safeguard their children whilst they are in our care. Specific guidance is available to staff within the procedure documents.

Definitions

Within this document:

Child protection is an aspect of safeguarding, but is focused on how we respond to children who have been significantly harmed or are at risk of significant harm.

The term **staff** applies to all those working for or on behalf of the College, full time or part time, in either a paid or voluntary capacity. This also includes parents and governors.

Child refers to all young people who have not reached their 18 birthday. On the whole, this will apply to students of our college; however, the policy will extend to visiting children and students from other establishments.

Parent refers to birth parents and other adults in a parenting role for example adoptive parents, step parents, guardians and foster carers.

Abuse could mean neglect, physical, emotional or sexual abuse or any combination of these. Parents, carers and other people can harm children either by direct acts and/or failure to provide proper care. Explanations of these are given with the procedure document.

Aims

- To provide staff with the framework to promote and safeguard the wellbeing of children and vulnerable adults and in so doing ensure they meet their statutory responsibilities.
- To ensure consistent good practice across the College.
- To demonstrate our commitment to protecting children and vulnerable adults.

Principles and Values

- Children have a right to feel secure and cannot learn effectively unless they do so.
- All children have a right to be protected from harm.
- All staff have a key role in prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a child is at risk of harm, either in the College or in the community, taking into account *contextual safeguarding*, in accordance with the guidance.

- We acknowledge that working in partnership with other agencies protects children and vulnerable adults and reduces risk and so we will engage in partnership working throughout the child protection process to safeguard children.
- Whilst the College will work openly with parents as far as possible, it reserves the right to contact Children's Social Care or the police, without notifying parents if this is believed to be in the child's best interests.

Leadership and Management

We recognise that staff anxiety around child protection can compromise good practice and so have established clear lines of accountability, training and advice to support the process and individual staff within that process. In this College any individual can contact the Designated Safeguarding Lead (DSL) or the Deputy if they have concerns about a young person. **DSL is Dominic Chapman** and the **Deputy DSL is Maggie Hussey**. There is a nominated safeguarding governor, **Jane Milone**, who will take leadership responsibility for safeguarding. The Chair of Governors, **Graham Beards**, will receive reports of allegations against the Principal and act on the behalf of the governing body.

As an employer we comply with the "Disqualification under the childcare act 2006" guidance issued in February 2015.

Recruitment and Selection Procedures

Brockenhurst College creates a culture of safe recruitment and, as part of that, has adopted recruitment procedures that help deter, reject or identify people who may abuse children. The College has recruitment and selection procedures that ensure all recommended checks are undertaken when recruiting new staff and volunteers.

Training

All staff in our College are expected to be aware of the signs and symptoms of abuse and must be able to respond appropriately. Training is provided as required, at induction for new staff, and as an annual refresher session, for existing staff and online updates every 3 years. Separate training is provided to all new staff on appointment during a full induction process. The DSLs will attend training at least every other year to enable them to fulfil their role. Any update in national or local guidance will be shared with all staff and governors in briefings and then captured in the next whole college training. This policy will be updated during the year to reflect any changes brought about by new guidance.

Referral

Following any concerns raised, the DSL will assess the information and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm, or risk of significant harm has been reached, or if it is not clear if the threshold is met, then the DSL will contact Children's Social Care and if appropriate the police. If the DSL or deputies are not available or there are immediate concerns, the staff member will refer directly to Children's Social Care and the police if appropriate.

Generally, the DSL will inform the parents prior to making a referral. However, there are situations where this may not be possible or appropriate, particularly when informing parents/carers may place the child at further risk.

N.B. The exception to this process will be in those cases of known FGM where there is a mandatory requirement for the teacher to report directly to the police. The DSL should also be made aware.

Confidentiality

- We maintain that all matters relating to child protection are to be treated as confidential and only shared as per the 'Information Sharing Advice for Practitioners' (DfE 2018) guidance.
- There is a lawful basis for child protection concerns to be shared with agencies who have a statutory duty for child protection.
- Information will be shared with individuals within the school who 'need to know'.
- All staff are aware that they cannot promise a student to keep a disclosure confidential.

As a College we will educate and encourage students to keep safe through:

- The content of the curriculum and tutorial programme.
- A college ethos which helps students to feel safe and able to talk freely about their concerns, believing that they will be listened to and valued.

Dealing with allegations against staff

If a concern is raised about the practice or behaviour of a member of staff this information will be recorded and passed to the DSL, Dominic Chapman, Assistant Principal Learners and he will inform the Principal, Di Roberts. The Designated Officer (DO) will be contacted and the relevant guidance will be followed.

If the allegation is against the Principal, the person receiving the allegation will contact the DO or Chair of Governors directly.

Dealing with allegations against pupils

If a concern is raised that there is an allegation of a pupil abusing another pupil within the College, the 'Peer on Peer Abuse' guidance will be followed (Annex 6 in this document)

Legal context

Section 175 of the education act 2002; the Education (Independent School Standards) Regulations 2014; the Non-Maintained Special Schools (England) Regulations Children Act 2004 & 1989

Guidance

Hampshire Safeguarding Children Partnership [protocols and guidance](#) and their [procedures](#)
[Working Together to Safeguard Children \(2018\)](#)
[Keeping Children Safe in Education \(2018\)](#)
[Disqualification under the Childcare Act 2006 \(2018\)](#)
[FGM Act 2003 Mandatory Reporting Guidance \(2016\)](#)

This policy should be read in reference to other College Policies, such as Health and Safety Policy, Equality and Diversity Policy and Scheme, Social Media and Networking Policy, Lone Worker Policy, Staff Professional Code of Conduct, Learner Restraint Policy, Self-Harm Policy, Student Suicide Prevention Protocol, Whistleblowing Policy and Prevent Procedure.

Our onsite Nursery has its own Safeguarding and Wellbeing Policy which is implemented and adhered to by the Nursery Manager, Vicky Bidwell, and her Deputies.

Contextualised Safeguarding and Local Circumstances

Brockenhurst College believes all students have the right to be able to access and enjoy a high quality and rich learning experience that both enhances and increases their life chances. The College serves the needs of students from a range of backgrounds including high proportions of:

- Students from socio-economically deprived areas
- High Needs SEND students
- LAC and Young Carers

Brockenhurst also faces on-going challenges with County Lines issues.

The College will ensure that all staff have an effective understanding of the local context and all safeguarding training will acknowledge and reference the local context to ensure that staff are adequately prepared to manage such issues that arise from this.

SEND students in College

Students with SEND are more likely to be abused and/or neglected. The College will monitor and support these students through the Foundation Studies team, curriculum managers, the SEND coordinator and the intensive support team to ensure these students are appropriately identified and supported.

Looked After Children (LAC)

The most common reason for children becoming looked after is as a result of abuse or neglect. The College ensures that staff have the necessary skills and understanding to keep looked after children safe. Appropriate staff have information about a child's looked after legal status and care arrangements. The Intensive Support Officer is the Designated Lead for Looked After Children and, supported by the DSL, has overarching responsibility for LAC.

Private Fostering

A private fostering arrangement occurs when someone other than a parent or close relative cares for a child for a period of 28 days or more, with the agreement of the child's parents. It applies to children under the age of 16, or aged under 18 if the child is disabled. Private fostering occurs in all cultures and children may be privately fostered at any age. Most privately fostered children remain safe and well, but safeguarding concerns have been raised in some cases so it is important that colleges are alert to the possible safeguarding issues, including the possibility that a child has been trafficked in to the country. By law, persons involved in making a private fostering arrangement must notify children's services.

Young people staying with host families/homestay

The College makes arrangements for students to stay with host families/homestays to which they are not related. The College follows the guidance in the Keeping Children Safe in Education (2018) to ensure that hosting arrangements are as safe as possible.

Social Media and online behaviours

Brockenhurst College recognises that the use of social media by young people has grown exponentially and that social media has become of focus for a number of issues including cyber-bullying, sexting, sharing of inappropriate images, the promotion of radical and extreme viewpoints, grooming and CSE. All staff will be trained to be aware of and sensitive to this area of activity and the College will ensure that suitable IT policies are in place to address access and monitoring of online activity. **It is expressly forbidden for staff to either share their personal contact details with existing students on any social media platform.** This includes the sharing of personal mobile telephone details, personal e-mail addresses and any personal contact information. Any member of staff found to be in breach of this will be liable to disciplinary action.

Young People with sexually harmful behaviour

Children and young people may be harmed by other children or young people. Staff will be aware of the harm caused by bullying and will use the College's anti-bullying procedures where necessary. However, there will be occasions when a student's behaviour warrants a response under child protection rather than anti-bullying procedures.

Youth produced sexual imagery (sexting)

The practice of children sharing images and videos via text message, email, social media or mobile messaging apps is common place. Such imagery involving anyone under 18 is illegal. All incidents of this nature should be treated as a safeguarding concern and reported to the DSL.

Other Safeguarding Concerns

The Prevent Duty

The College recognises that safeguarding children and adults and providing early intervention to protect and divert people away from being drawn into extremist activity is at the heart of the Prevent strategy.

The College recognises that it has a responsibility in the exercise of its functions, to refer on any concerns it may have relating to potential or actual radicalisation and extremism to the local authority partners who are leading on prevent: the police, the local Children's Safeguarding Board and the Local Channel Officer.

In undertaking its Prevent Duty the College will also ensure that it is embedding the fundamental British values of democracy, rule of law, individual liberty, mutual respect and tolerance into every aspect of its work.

The Prevent Coordinator is the Pastoral and Welfare Manager, Maggie Hussey.

Annual review

As a college, we review this policy at least annually in line with DfE, HSCB and HCC requirements and other relevant statutory guidance.

Date approved by governing body:

Date reviewed by governing body: 17/10/2019

ROLES AND RESPONSIBILITIES WITHIN BROCKENHURST COLLEGE

Staff responsibilities

All staff have a key role to play in identifying concerns early and in providing help for children. To achieve this they will:

- Establish and maintain an environment where students feel secure, are encouraged to talk and are listened to.
- Ensure students know that there are adults in the College who they can approach if they are worried or have concerns.
- Plan opportunities within the curriculum for students to develop the skills they need to assess and manage risk appropriately and keep themselves safe.
- Attend training in order to be aware of and alert to the signs of abuse.
- Maintain an attitude of “it could happen here” with regards to safeguarding.
- Record their concerns if they are worried that a student is being abused and report these to the DSL as soon as practical that day. If the DSL is not contactable immediately a Deputy DSL should be informed.
- Be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.
- Recognise that abuse, neglect, or other adverse childhood experiences, can impact the mental health, behaviour and education of children.
- Be prepared to refer directly to social care, and the police if appropriate, if there is a risk of significant harm and the DSL or their Deputy is not available.
- Follow the allegations procedures (Annex 5) if the disclosure is an allegation against a member of staff.
- Follow the procedures set out by the HSCB (and other Local Authority Boards) and take account of guidance issued by the DfE.
- Support students in line with their child protection plan.
- Treat information with confidentiality but never promising to “keep a secret”.
- Notify the DSL or their Deputy of any student on a child protection plan or child in need plan who has unexplained absence.
- Have an understanding of early help, and be prepared to identify and support students who may benefit from early help.
- Liaise with other agencies that support students and provide early help.
- Ensure they know who the DSL and Deputy DSL are and know how to contact them.
- Have an awareness of the Child Protection Policy, the Student Code of Conduct, the Professional Code of Conduct incorporating Social Media for Staff, procedures relating to the safeguarding response for students who go missing from education and the role of the DSL.

Senior Management Team responsibilities:

- Contribute to inter-agency working in line with Working Together to Safeguard Children 2018 guidance.
- Provide a co-ordinated offer of early help when additional needs of students are identified.
- Ensure staff are alert to the various factors that can increase the need for early help (*para 18 KCSiE 2020*)
- Working with Children’s Social Care, support their assessment and planning processes including the College’s attendance at conference and core group meetings.
- Carry out tasks delegated by the governing body such as training of staff, safer recruitment and maintaining a single central register.
- Provide support and advice on all matters pertaining to safeguarding and child protection to all staff regardless of their position within the College.
- Treat any information shared by staff or students with respect and follow agreed policies and procedures.

- Ensure that allegations or concerns against staff are dealt with in accordance with guidance from Department for Education (DfE), Hampshire Safeguarding Children Board (HSCB) and Hampshire County Council (HCC).

Governing body responsibilities:

- Ensure the College has effective safeguarding policies and procedures including a Safeguarding and Child Protection Policy, Professional Code of Conduct incorporating Social Media for Staff.
- Ensure HSCB is informed in line with local requirements about the discharge of duties via the annual safeguarding audit.
- Recruitment, selection and induction follows safer recruitment practice including all appropriate checks.
- Allegations against staff are dealt with by the Principal. Allegations against the Principal are dealt with by the Chair of Governors.
- A member of the Senior Leadership Team is appointed as Designated Safeguarding Lead (DSL) and has this recorded in their job description.
- Staff have been trained appropriately and this is updated in line with guidance.
- Any safeguarding deficiencies or weaknesses are remedied without delay.
- A nominated governor for safeguarding is identified.

DSL responsibilities *(to be read in conjunction with DSL role description in KCSiE)*

In this college the DSL is Dominic Chapman

The Deputy DSL is Maggie Hussey

In addition to the role of all staff and the senior management team the DSL will:

- Refer cases to social care, and the police where appropriate, in a timely manner avoiding any delay that could place the student at more risk.
- Assist the Governing Body in fulfilling their safeguarding responsibilities set out in legislation and statutory guidance.
- Attend appropriate training and demonstrate evidence of continuing professional development to carry out the role.
- Ensure every member of staff knows who the DSL and the Deputy are, have an awareness of the DSL role and know how to contact them.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns about a student to the DSL and concerns about an adult to the Principal.
- Ensure whole college training occurs regularly with at least annual updates so that staff and volunteers can fulfil their responsibilities knowledgeably.
- Ensure any members of staff joining the College outside of the agreed training schedule receive induction prior to commencement of their duties.
- Keep records of child protection concerns securely and separately from the main student file and use these records to assess the likelihood of risk.
- Ensure that safeguarding records are transferred accordingly (separate from student files) and in a timely fashion when a child transfers college.
- Ensure that where a student transfers college and is on a child protection plan or is a child looked after, their information is passed to the new college immediately and that the student's social worker is informed. Consideration is given to a transition meeting prior to moving if the case is complex or on-going.
- Be aware of the training opportunities and briefings provided by HSCB and other Local Authority Safeguarding Children's Boards to ensure staff are aware of the latest local guidance on safeguarding.
- Develop, implement and review procedures in the College that enable the identification and reporting of all cases, or suspected cases, of abuse.
- Meet any other expectations set out for DSLs in KCSiE 2020.

BROCKENHURST COLLEGE CHILD PROTECTION PROCEDURES

Overview

The following procedures apply to all staff working in the College and will be covered by training to enable staff to understand their role and responsibility. The aim of our procedures is to provide a robust framework which enables staff to take appropriate action when they are concerned that a child is being harmed or is at risk of harm.

The prime concern at all stages must be the interests and safety of the student. Where there is conflict of interest between the student and an adult, the interest of the student must be paramount.

All staff are aware that very young children or those with disabilities, special needs or with language delay may be more likely to communicate concerns with behaviours rather than words. Additionally, staff will question the cause of knocks and bumps in students who have limited mobility.

If a member of staff suspects abuse, spots signs or indicators of abuse, or they have a disclosure of abuse made to them they must:

- 1 Make an initial record of the information.
- 2 Report it to the DSL or deputy immediately.
- 3 The DSL will consider if there is a requirement for immediate medical intervention, however urgent medical attention should not be delayed if the DSL is not immediately available (see point 8 below).
- 4 Make an accurate record (which may be used in any subsequent court proceedings) as soon as possible and within 24 hours of the occurrence, of all that has happened, including details of:
 - Dates and times of their observations.
 - Dates and times of any discussions in which they were involved.
 - Any injuries.
 - Explanations given by the student/adult.
 - What action was taken.
 - Any actual words or phrases used by the student.

External/internal safeguarding logs are kept on file and recorded on a spreadsheet. Information is logged on the student's Emily record.

- 5 In the absence of the DSL or their Deputies, be prepared to refer directly to Children's Social Care (and the police if appropriate) if there is the potential for immediate significant harm.

Following a report of concerns the DSL must:

- 1 Decide whether or not there are sufficient grounds for suspecting significant harm in which case a referral must be made to Children's Social Care and the police if it is appropriate.
- 2 Normally the College should try to discuss any concerns about a child's welfare with the family and where possible to seek their agreement before making a referral to Children's Social Care.

However, in accordance with DfE guidance, this should only be done when it will not place the student at increased risk or could impact a police investigation. The student's views should also be taken into account.

3 If there are grounds to suspect a student is suffering, or is likely to suffer, significant harm the DSL (or Deputy) must contact Children's Social Care via the Children's Reception Team (CRT) on 01329 225379 for Hampshire, 01305 221450 for Dorset West, 01202 868224 for Dorset East and 03004 560108 for Wiltshire and make a clear statement of:

- The known facts.
- Any suspicions or allegations.
- Whether or not there has been any contact with the student's family.

In the case of 18 plus refer to adult social care on 03005 551386 for Hampshire, 01305 221016 for Dorset West, 01202 633902 for Dorset East, 03004 560111 for Wiltshire.

If the DSL feels unsure about whether a referral is necessary they can phone CRT to discuss concerns.

4 If there is not a risk of significant harm, the DSL will either actively monitor the situation or consider the Early Help process.

5 The DSL must confirm any referrals in writing to Children's Social Care, within 24 hours, including the actions that have been taken. The written referral must be made using the Inter-Agency Referral Form (IARF) which will provide Children's Social Care with the supplementary information required about the child and family's circumstances. (IARF can be accessed at the following page <https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/contacts>)

6 If a student is in immediate danger and urgent protective action is required, the police must be called. The DSL must also notify Children's Social Care of the occurrence and what action has been taken.

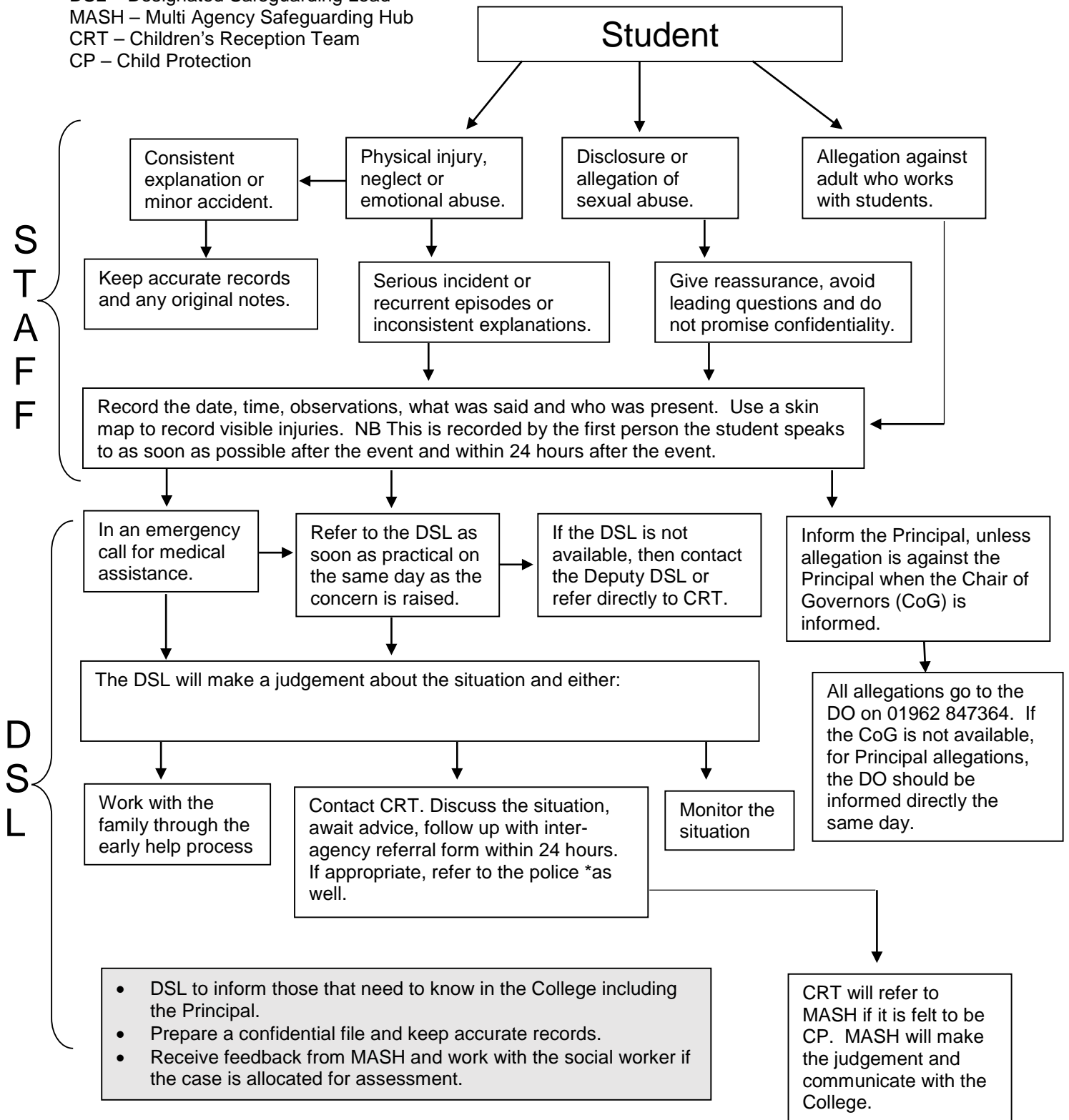
7 Where there are doubts or reservations about involving the student's family, the DSL should clarify with Children's Social Care or the police whether the parents should be told about the referral and, if so, when and by whom. This is important in cases where the police may need to conduct a criminal investigation.

8 When a student is in need of urgent medical attention and there is suspicion of abuse the DSL, their Deputy or designated member of staff should take the student to the accident and emergency unit at the nearest hospital, having first notified Children's Social Care. The DSL should seek advice about what action Children's Social Care will take and about informing the parents, remembering that parents should normally be informed that a student requires urgent hospital attention.

9 In the event of a safeguarding concern Highwood Nursery will follow its own policy and guidance and has specific confidential incident forms to complete which are monitored and stored in the Nursery.

FLOWCHART FOR CHILD PROTECTION PROCEDURES

DSL – Designated Safeguarding Lead
 MASH – Multi Agency Safeguarding Hub
 CRT – Children’s Reception Team
 CP – Child Protection



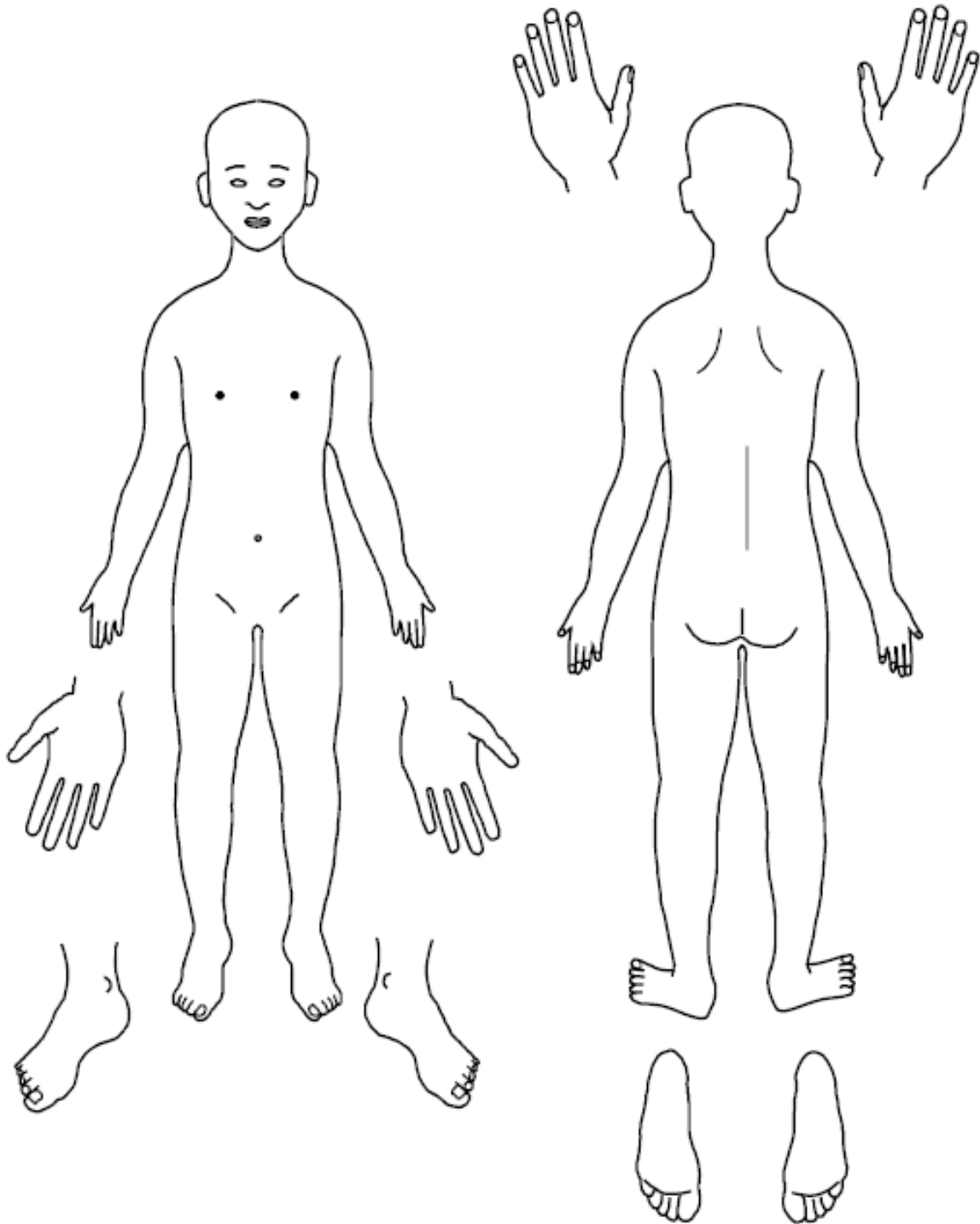
* In the cases of known FGM, the teacher who was made aware will also make contact with the police

CONFIDENTIAL
Child Protection and Vulnerable Adult Referral Log

Your name:	Print:	Sign:
Date of Referral:		
Name of child/vulnerable adult:		
Name of person referred to and job title:		
Children's Service referred to: OR Internal concern:		
Outline of incident/issue (no need for details as you will have notes)		
Others informed of referral eg the individual, parents/guardians, carers, care home		
Status/Future Action: Police matter	Ongoing (no required action):	Date:
	Required Action:	Date:
	Closed:	Date:
Blue Star (tick):		

Please email completed form to Dominic Chapman, Director of Learners and Designated Safeguarding Lead dchapman@brock.ac.uk

SKIN MAP



Name of Student: _____

Date of Birth: _____ Date of recording: _____

Name of completer: _____



Any additional information:

DEALING WITH DISCLOSURES

All staff should:

A member of staff who is approached by a student 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 student or other students safe. The degree of confidentiality should always be governed by the need to protect the student.

Additional consideration needs to be given to students 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 staff should know who the DSL is and who to approach if the DSL is unavailable. Ultimately, all 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, eg they are the only adult on the College premises at the time and have concerns about sending a student 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 eg 'I'll stay with you' or 'everything will be alright now' or 'I'll keep this confidential'.
- Do reassure eg 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 ie 'did he touch your private parts?' or 'did she hurt you?' Such questions may invalidate your evidence (and the student's) in any later prosecution in court.
- Do not ask the student why something has happened.
- 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 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 staff.

Report

- Share concerns with the DSL as soon as possible.
- If you are not able to contact your DSL or Deputy, and the student is at risk of immediate harm, contact the children's services department directly.
- If you are dissatisfied with the level of response you receive following your concerns, you should press for reconsideration.

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, persons present and noticeable nonverbal behaviour, and the words used by the student. If the student 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 student: 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 student?
- Did the procedure work?
- Were any deficiencies or weaknesses 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 College and/or may ultimately contact the Children's Services Department.

Receiving a disclosure can be upsetting for the member of staff and colleges 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 staff should be encouraged to recognise that disclosures can have an impact on their own emotions.

ALLEGATIONS AGAINST ADULTS WHO WORK WITH CHILDREN

Procedure

This procedure should be used in all cases in which it is alleged a member of staff or volunteer in a college, or another adult who works with children has:

- **behaved in a way that is inappropriate or has harmed a student, or may have harmed a student;**
- **possibly committed a criminal offence against or related to a student; or**
- **behaved towards a student or students in a way that indicates he or she would pose a risk of harm to students.**

In dealing with allegations or concerns against an adult, staff must:

- Report any concerns about the conduct of any member of staff or volunteer to the Principal via Dominic Chapman DSL as soon as possible.
- If an allegation is made against the Principal, the concerns need to be raised with the Chair of Governors as soon as possible. If the Chair of Governors is not available, then the DO should be contacted directly.
- There may be situations when the Principal or Chair of Governors will want to involve the police immediately if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.
- Once an allegation has been received by the Principal or Chair of Governors they will contact the DO on 01962 876374 or child.protection@hants.gov.uk 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 DO, the College will determine how to proceed and if necessary the DO will refer the matter to Children's Social Care and/or the police.

If the matter is investigated internally, the DO will advise the College to seek guidance from their personnel/HR provider in following procedures set out in chapter 4 of 'Keeping Children Safe in Education' (2018) and the HSCB procedures http://4lscb.proceduresonline.com/hampshire/p_alleg_against_staff.html.

SEXUAL VIOLENCE AND SEXUAL HARASSMENT BETWEEN CHILDREN IN SCHOOLS AND COLLEGES

Peer on Peer Abuse – Policy

This policy sets out to address the Colleges commitment to safeguarding students and sets out to specifically address the College's response to peer on peer abuse, as outlined in Chapter 5 of Keeping Children Safe in Education 2018. The policy takes into consideration the following statutory and advisory guidance:

- Paragraph 90 of Keeping Children Safe in Education (DfE, 2018)
- Sexual Violence and Sexual Harassment between Children in Schools and Colleges (DfE, 2018)
- Hampshire Local Safeguarding Children Board Model Child Protection Policy (HSCB, 2018)

Context

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will in all likelihood, adversely affect their educational attainment as well as their emotional well-being. Sexual violence and sexual harassment exist on a continuum and may overlap; they can occur online and offline (both physically and verbally) and are never acceptable. It is important that all victims are taken seriously and offered appropriate support.

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

Policy

We believe that all children have a right to learn in a safe environment. Children should be free from harm by adults in the College and other children.

We recognise that children are capable of abusing their peers and this will be dealt with under our child protection policy and in line with KCSiE (2020)

We are clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up.

We will minimise the risk of peer on peer abuse by:

Prevention

- Taking a whole college approach to safeguarding and child protection.
- Providing training to staff.
- Provide a clear set of values and standards, underpinned by the College's behaviour policy and pastoral support system, and by a planned programme of evidence based content delivered through the curriculum.
- Engaging with specialist support and interventions.

Responding to reports of sexual violence and sexual harassment:

- Students making a report of sexual violence or sexual harassment will be taken seriously, kept safe and be well supported.
- If the report includes an online element staff will be mindful of the Searching, Screening and Confiscation: advice for schools (DfE 2018) guidance.
- Staff taking the report will inform the DSL or their Deputy as soon as practicably possible but at least within 24 hours.
- Staff taking a report will never promise confidentiality.
- Parents or carers will normally be informed (unless this would put the student at greater risk).
- If a student is at risk of harm, is in immediate danger, or has been harmed, a referral will be made to Children's Social Care (01329 225379).

Risk Assessment:

Following a report the DSL will make an immediate risk and needs assessment on a case-by-case basis. The risk assessment will consider:

- The victim, especially their protection and support.
- The alleged perpetrator, their support needs and any discipline action.
- All other students at the College.
- The victim and the alleged perpetrator sharing classes and space at College.

The risk assessment will be recorded and kept under review. Where there has been other professional intervention and/or other specialist risks assessments, these professional assessments will be used to inform the College's approach to supporting and protecting students.

Action the DSL will consider:

- The wishes of the victim.
- The nature of the incident including whether a crime has been committed and the harm caused.
- Ages of the students involved.
- Developmental stages of the students.
- Any power imbalance between the students.
- Any previous incidents.
- Ongoing risks.
- Other related issues or wider context.

Options: The DSL will manage the report with the following options:

- Manage internally.
- Early Help.
- Refer to Children's Social Care.
- Report to the police (generally in parallel with a referral to Social Care).

Ongoing Response:

- The DSL will manage each report on a case by case basis and will keep the risk assessment under review.
- Where there is a criminal investigation into a rape, assault by penetration or sexual assault, the alleged perpetrator should be removed from any classes they share with the victim.
- The DSL will consider how best to keep the victim and perpetrator a reasonable distance apart on college premises and on transport where appropriate.
- Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, the College will take suitable action. In all but the most exceptional of circumstances, the rape or assault is likely to constitute a serious breach of discipline and lead to the view that allowing the perpetrator to remain in the same college would seriously harm the education or welfare of the victim (and potentially other students).
- Where a criminal investigation into sexual assault leads to a conviction or caution, the College will, if it has not already, consider any suitable sanctions in light of their behaviour policy,

including consideration of permanent exclusion. Where the perpetrator is going to remain at the College, the principle would be to continue keeping the victim and perpetrator in separate classes and continue to consider the most appropriate way to manage potential contact on college premises and transport. The nature of the conviction or caution and wishes of the victim will be especially important in determining how to proceed in such cases.

- The victim, alleged perpetrator and other witnesses (students and adults) will receive appropriate support and safeguarding on a case-by-case basis.
- The College will take any disciplinary action against the alleged perpetrator in line with behaviour and discipline in colleges.
- The College recognises that taking disciplinary action and providing appropriate support are not mutually exclusive actions and will occur at the same time if necessary.

Physical Abuse

While a clear focus of peer on peer abuse is around sexual abuse and harassment, physical assaults and initiation violence and rituals from students to students can also be abusive. These are equally not tolerated and if it is believed that a crime has been committed, will be reported to the police. The principles from the anti-bullying policy will be applied in these cases, with recognition that any police investigation will need to take priority.

Teenage Relationship Abuse

Relationship abuse can take place at any age, and describes unacceptable behaviour between two people who are in a relationship. It can take place in relationships of any sexual orientation and the victim and abuser can be any sexual orientation.

Research has shown that teenagers do not always understand what may constitute abusive and controlling behaviours e.g. checking someone's phone, telling them what to wear, who they can/can't see or speak to or coercing them to engage in activities they are not comfortable with. The government campaign "disrespect nobody" provides other examples of abusive behaviour within a relationship.

This lack of understanding can lead to these abusive behaviours feeling 'normal' and therefore left unchallenged, as they are not recognised as being abusive.

In response to these research findings, the College will provide education to help prevent teenagers from becoming victims and perpetrators of abusive relationships, by encouraging them to rethink their views of violence, abuse and controlling behaviours, and understand what consent means within their relationships. This will form part of the school's curriculum content in respect of Relationship Education.

If the College has concerns about a child in respect of relationship abuse, it will report those concerns in line with procedures to the appropriate authorities as a safeguarding concern, a crime or both.

References:

KCSiE (DfE 2020)

Sexual Violence and Sexual Harassment between Children in Schools and Colleges (DfE 2018).

Brook sexual behaviours traffic light tool

Behaviours: age 0 to 5

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability. They are reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours

- holding or playing with own genitals
- attempting to touch or curiosity about other children's genitals
- attempting to touch or curiosity about breasts, bottoms or genitals of adults
- games e.g. mummies and daddies, doctors and nurses
- enjoying nakedness
- interest in body parts and what they do
- curiosity about the differences between boys and girls

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours

- preoccupation with adult sexual behaviour
- pulling other children's pants down/skirts up/trousers down against their will
- talking about sex using adult slang
- preoccupation with touching the genitals of other people
- following others into toilets or changing rooms to look at them or touch them
- talking about sexual activities seen on TV/online

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur.

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours

- persistently touching the genitals of other children
- persistent attempts to touch the genitals of adults
- simulation of sexual activity in play
- sexual behaviour between young children involving penetration with objects
- forcing other children to engage in sexual play

This is intended to be used as a guide only. Please refer to the guidance tool at <https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool> for further information

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Brook sexual behaviours traffic light tool adapted from Family Planning Queensland. (2012). Traffic Lights guide to sexual behaviours. Brisbane: Family Planning Queensland, Australia.

Behaviours: age 5 to 9 and 9 to 13

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours 5-9

- feeling and touching own genitals
- curiosity about other children's genitals
- curiosity about sex and relationships, e.g. differences between boys and girls, how sex happens, where babies come from, same-sex relationships
- sense of privacy about bodies
- telling stories or asking questions using swear and slang words for parts of the body

Green behaviours 9-13

- solitary masturbation
- use of sexual language including swear and slang words
- having girl/boyfriends who are of the same, opposite or any gender
- interest in popular culture, e.g. fashion, music, media, online games, chatting online
- need for privacy
- consensual kissing, hugging, holding hands with peers

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours 5-9

- questions about sexual activity which persist or are repeated frequently, despite an answer having been given
- sexual bullying face to face or through texts or online messaging
- engaging in mutual masturbation
- persistent sexual images and ideas in talk, play and art
- use of adult slang language to discuss sex

Amber behaviours 9-13

- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- verbal, physical or cyber/virtual sexual bullying involving sexual aggression
- LGBT (lesbian, gay, bisexual, transgender) targeted bullying
- exhibitionism, e.g. flashing or mooning
- giving out contact details online
- viewing pornographic material
- worrying about being pregnant or having STIs

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours 5-9

- frequent masturbation in front of others
- sexual behaviour engaging significantly younger or less able children
- forcing other children to take part in sexual activities
- simulation of oral or penetrative sex
- sourcing pornographic material online

Red behaviours 9-13

- exposing genitals or masturbating in public
- distributing naked or sexually provocative images of self or others
- sexually explicit talk with younger children
- sexual harassment
- arranging to meet with an online acquaintance in secret
- genital injury to self or others
- forcing other children of same age, younger or less able to take part in sexual activities
- sexual activity e.g. oral sex or intercourse
- presence of sexually transmitted infection (STI)
- evidence of pregnancy

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Behaviours: age 13 to 17

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours

- solitary masturbation
- sexually explicit conversations with peers
- obscenities and jokes within the current cultural norm
- interest in erotica/pornography
- use of internet/e-media to chat online
- having sexual or non-sexual relationships
- sexual activity including hugging, kissing, holding hands
- consenting oral and/or penetrative sex with others of the same or opposite gender who are of similar age and developmental ability
- choosing not to be sexually active

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours

- accessing exploitative or violent pornography
- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress
- withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- concern about body image
- taking and sending naked or sexually provocative images of self or others
- single occurrence of peeping, exposing, mooning or obscene gestures
- giving out contact details online
- joining adult-only social networking sites and giving false personal information
- arranging a face to face meeting with an online contact alone

developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur.

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours

- exposing genitals or masturbating in public
- preoccupation with sex, which interferes with daily function
- sexual degradation/humiliation of self or others
- attempting/forcing others to expose genitals
- sexually aggressive/exploitative behaviour
- sexually explicit talk with younger children
- sexual harassment
- non-consensual sexual activity
- use of/acceptance of power and control in sexual relationships
- genital injury to self or others
- sexual contact with others where there is a big difference in age or ability
- sexual activity with someone in authority and in a position of trust
- sexual activity with family members
- involvement in sexual exploitation and/or trafficking
- sexual contact with animals
- receipt of gifts or money in exchange for sex

What is a red behaviour?

This is intended to be used as a guide only. Please refer to the guidance tool at <https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool> for further information

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Brook sexual behaviours traffic light tool adapted from Family Planning Queensland. (2012). Traffic Lights guide to sexual behaviours. Brisbane: Family Planning Queensland, Australia.

What is an amber behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age,

Sexual Violence and Sexual Harassment between Children Risk and Needs Assessment Template

EXAMPLE assessment

Brook Traffic Light Assessment	What are the risks? Who might be harmed & how?	Action	Action by Who?	Action by when?	Action status or Date Completed & Outcome including further actions
<p>Red Behaviour: Forcing other children to engage in sexual activity. Subject is a male child. A female child has been taken into the boys' toilets. Subject has exposed himself, grabbed the girl by the wrist and forced her to touch his genitals.</p> <p>Subject is under the age of criminal responsibility. Subject has no known CP history There have been no previous concerns about the Subject.</p>	All pupils in the class may be forced or coerced into sexual activity. Early indication is that female pupils may be more at risk.	Key members of staff with supervisory responsibility have been briefed by the DSL and will increase monitoring at break times. Subject will be escorted to the toilet.	DSL Staff AB, CD & EF ELSA	From Immediate effect	✓01/02/2019. Increased monitoring & toilet supervision in place
	Other children within the community	Subject's parents Informed re: Incident & behaviour and the risk plan put in place. Made aware of referral to CSD. Agreement for <ul style="list-style-type: none"> Referral to CAMHS Increased monitoring & toilet supervisor Keep safe work. 	DSL	01/02/19	✓01/02/19 Contract of agreement has been signed by the parents to include increased. monitoring, toilet supervision and keep safe work.
		Referral to Children's social care	DSL	01/02/19	✓01/02/19 Children & Family Assessment to be completed by CAST
		Victims parents informed, and child's views gained. Child offered keep safe work.	DSL	01/02/19	✓Parents are satisfied with the school's actions & safeguarding measures so far. Child & family want child to remain in the same class. Keep safe work accepted.
		Referral to CAMHS	DSL	02/02/19	Referral made. ACTION – follow up with CAMHS as to the status of referral after 10 working days if not heard before
		Safeguarding measures to be reviewed.	DSL & Key Staff members	09/02/19	No additional concerns raised. ACTION - Review plan again in one weeks time
		Keep safe work to be completed. Combination of whole class and targeted work to be carried out	ELSA	23/02/2019	OUTSTANDING Work planned and due to be delivered w/c 16/02

Brook Traffic Light Assessment	What are the risks? Who might be harmed & how?	Action	Action by Who?	Action by when?	Action status or Date Completed & Outcome including further actions
Red Behaviour:	Community Impact Assessment LOW The parents of the Subject and the victim are satisfied that the school is taking all necessary safeguarding measures to manage the risk. There are no indications at this stage for community unrest. This will be kept under review.	DSL and SLT to be aware of any community noises about the incidents.	DSL and SLT	05/04/2019	
	Media Media and communication team to be informed if community impact assessment risk increases	SLT to contact HCC communication team if required. Monitor during term	SLT	05/04/2019	
	Information Sharing. All information sharing has been completed in line with the school's CP and GDPR policies.	Relevant information to be recorded on each child's CP file as required.			
	Social Media There are no currents risks from community use of social media. This will be kept under review.	Monitoring of social media during the term	Key staff	05/04/2019	
Red Behaviour:					
Red Behaviour:					
Amber Behaviour:					

Whistleblowing in a safeguarding context

While the College has a separate whistleblowing policy, this is a summary sheet that outlines the process when there is a concern that safeguarding issues have not been reported or followed correctly.

This does not replace the whistle blowing policy and should be read in conjunction with the College policy.

Whistleblowing is a term that is used when staff want to report a concern within their organisation that involves their manager or a person senior to them in the organisation which may prevent them from following the normal reporting systems.

There are a limited number of areas that can be called Whistleblowing, and the policy protects staff from being punished for raising concerns.

Within **Brockenhurst College**, the Principal **Di Roberts** is the senior manager and responsible for all staff. If you are concerned that any member of staff within the College is not following safeguarding processes or behaving in a way that is placing children at risk, you should in the first place make the head teacher aware.

If your concern is about the Principal then you would raise this with the Chair of Governors by emailing the College enquiries@brock.ac.uk for the attention of Graham Beards.

If you would prefer to raise your concerns outside of the College then you are able to contact the NSPCC whistleblowing line on 0800 028 0285 or email help@nspcc.org.uk for national organisations or make contact with Hampshire County Council.

If you believe that a member of the College staff is harming a student (an allegation) and this has been reported to the Principal and no action has been taken, or the member of staff you have concerns about is the Principal, then you are able to contact the Local Authority Designated Officers (LADOs) on 01962 876364 or child.protection@hants.gov.uk

If you believe that a student is being abused by individuals outside of the College, then you are able to make a referral to Childrens Social Care by calling 0300 555 1384 (office hours) or 0300 555 1373 (outside of office hours)

BRIEFING SHEET FOR TEMPORARY, AGENCY AND VOLUNTARY STAFF

While working at Brockenhurst College, 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 College designated safeguarding lead (DSL), who is Dominic Chapman and can be found in the Assistant Principal Learners' office on 01590 625577 or dchapman@brock.ac.uk.

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 child or young person or vulnerable adult which suggests they are not being sufficiently well cared for.
- Observing behaviour that leads you to be concerned about a child or young person.
- A child or young person 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 as soon as possible and no longer than 24 hours later. 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 child, just listen and be supportive.
- Never stop a child who is freely recalling significant events, but don't push the child to tell you more than they wish.
- Make it clear that you may need to pass on information to 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.

The College has a policy on safeguarding children and young people which you can find, together with the local procedures to be followed by all staff, on eBrock.

Remember, if you have a concern, report it to the DSL.

WHAT IS CHILD ABUSE?

The following definitions are taken from *Working Together to Safeguard Children* HM Government (2018). In addition to these definitions, it should be understood that children can also be abused by being sexually exploited, honour based violence, forced marriage or female genital mutilation. All staff have access to the Hampshire safeguarding children board (HSCB) threshold chart. <http://www3.hants.gov.uk/thresholds.htm>

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

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.

The [HSCB neglect strategy](https://www.hampshiresafeguardingchildrenboard.org.uk/wp-content/uploads/2016/11/HSCB-Neglect-Strategy-2016-2018.pdf) is used to provide a more detailed summary of neglect and the local thresholds for referrals <https://www.hampshiresafeguardingchildrenboard.org.uk/wp-content/uploads/2016/11/HSCB-Neglect-Strategy-2016-2018.pdf>

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* DfE 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 staff have should at least be discussed with the DSL.

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

Emotional abuse

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 behavior 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. But 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 (annex 3) 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 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 (adults 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 young person:

- 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.

Sexual exploitation is seen as a separate category of sexual abuse. Indicators of CSE can be found on the NSPCC website.

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.

USEFUL CONTACTS

Key Personnel	Name (s)	Telephone No.
DSL	Dominic Chapman	01590 625577
Deputy DSL(s)	Maggie Hussey	01590 625555 ext 470
College's named "Prevent" lead	Maggie Hussey	01590 625555 ext 470
Nominated Safeguarding Governor	Jane Milone	01590 625505
Chair of Governors	Graham Beards	01590 625505
Children's Reception Team Hampshire Dorset West Dorset East Wiltshire		01329 225379 01202 868224 03004 560108 01225 718555
Out of hours social care		0300 555 1373
Police		101 or in emergencies 999
Safeguarding advisors/ Designated Officers (DOs) DO MASH	Barbara Piddington Fiona Armfield Mark Blackwell Patrick Crawford (Dorset) Jen Salter (Wiltshire)	HCC Safeguarding Unit 01962 876364 01305 221122 0300 456 0108
College nurse	Nicola Atkins	01590 625300