

St. Joseph's Specialist Trust
Amlets Lane, Cranleigh
Surrey, GU6 7DH

Website: www.st-josephscranleigh.surrey.sch.uk

Safeguarding Policy



Christ in our Lives
'No limits ... just possibilities'

Reviewed: October 2026

Cycle: Annual

**STATUTORY &
WEBSITE POLICY**

Safeguarding Young people

St Joseph's Specialist Trust is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

We have comprehensive Child Protection and Safeguarding Policies and Procedures in place which we refer to in our prospectus. All Trustees, members of the Education Governing Committee and Staff (including supply staff and volunteers) must ensure that they are aware of these procedures. Families and young people are welcome to read the Policy which can be found on our website.

Sometimes we may need to share information and work in partnership with other agencies when there are concerns about a child/young adult welfare. We will ensure that our concerns about our young people are discussed (age appropriately with him/her) and his/her family first unless we have reason to believe that this action would be contrary to the young person's welfare or under the direction of the Local Safeguarding Children's Partnership or adult social care. Where possible we will gain consent prior to making a referral unless it is felt that this would put the young adult/child at risk.

Our Safeguarding Officers are:

	
Nick Durling Head of Safeguarding & Inclusion Designated Safeguarding Lead	Simon Jaggard Head Teacher & Director of Education Deputy Safeguarding Officer

			
Hayley Rabson Deputy Head of Inclusion Deputy Safeguarding Officer	Annie Sutton Executive Principal Deputy Safeguarding Officer	Karen May Director of Therapies Deputy Safeguarding Officer	Monika Ryzinska Deputy Head Teacher Deputy Safeguarding Officer

If you are concerned about a young person's welfare, please make a referral in Sleuth using the concerns module. If you have any questions or you are a visitor please email the safeguarding team on safeguarding@st-josephscranleigh.surrey.sch.uk and notify a safeguarding officer as soon as possible. Do NOT conduct your own investigation. You can also make a referral to Surrey Children's Single Point of Access (C-SPA) on cspa@surreycc.gov.uk or phone 0300 470 9100 for advice. If the young person is aged 18 or over, please contact adult social care on 0300 200 1005.

If your concerns relate to the actions or behaviour of a member of staff (which could suggest that she/he is a danger to children or young adult) then you should report this to safeguarding team on safeguarding@st-josephscranleigh.surrey.sch.uk. If the concern relates to the Executive Principal or a member of the safeguarding team this should be reported to the Chair of Trustees to Dominic Gorton on dgorton@st-josephscranleigh.surrey.sch.uk or the lead

trustee for safeguarding Martin Hill on mhill@st-josephscranleigh.surrey.sch.uk in confidence who will consider what action to take.

Annie Sutton, Executive Principal

Content	Page	Content	Page
Safeguarding Young People	2	Harmful Sexual Behaviour (HSB)	43
Safeguarding Statement	6	Anti-Bullying & Cyber Bullying	45
Key Personnel	6	Online Safety	45
Terminology	7	Cybercrime	46
Introduction Guidance Document	8	Racist Incidents	47
Equalities Statement	8	Radicalisation, Terrorism & Extremism	47
Regulations and Safeguarding Requirements Relating to School Premises	9	Domestic Abuse	48
Policy Principles & Values	10	Homelessness	49
Policy Aims	11	Child Sexual Exploitation (CSE)	49
DBS Update Service	11	Child Criminal Exploitation (CCE), Child Sexual Exploitation (CSE) and Gangs	50
New DBS Checks for Staff and Volunteers	11	Serious Violence	51
Homestay	12	Alternative Provision	52
Referral to DBS (Disclosure and Barring Service)	12	Sharing nudes and semi nudes Including where generated by AI	53
Supporting Children/ Young Adults	12	Modern Slavery	55
Prevention/Protection	13	Female Genital Mutilation (FGM)	54
Allergies & Anaphylaxis	14	Forced Marriage	55
Children In Need (CIN)	15	Honour based abuse	56
Child Protection Plan – Children Suffering or Likely to Suffer Significant Harm	15	One Chance Rule	56
Young Carers	15	Contextual Safeguarding	56
Roles and Responsibilities - All staff	15	Private Fostering Arrangements	57

Mental Health	17	Children Looked After	57
Roles and Responsibilities - Executive Principal	17	Children Missing Education	58
Roles and Responsibilities – DSL	18	Pupils Missing Out on Education (PMOOE)	59
Roles and Responsibilities – Deputy DSLs	20	School Attendance & Behaviour	59
Roles and Responsibilities – Trustee Board	21	Physical Intervention	60
Regulated Activity	22	Whistle-blowing	60
Confidentiality & Sharing Information	23	Further Advice and Information	62
Safeguarding Procedure	23	Additional Resources	63
Taking Photographs/videos of medical conditions on young people	24	Review Schedule	66
Child Protection Procedures Flowchart	26		
Dealing with Disclosure	27		
Guiding Principles, The Seven Rs	27		
Safeguarding Concerns and Allegations Against Adults Who Work with Children	29		
What is Child Abuse	30		
Indicators of Abuse - Neglect	33		
Indicators of Abuse - Emotional Abuse	34		
Indicators of Abuse - Physical Abuse	35		
Indicators of Abuse - Sexual Abuse	36		
Sexual Violence & Sexual Harassment between children in school: Peer on Peer / child on child Abuse (Including Harassment & Violence)	38		

Committee Responsible:	Standards and Care Committee
Lead Trustee for Safeguarding:	Martin Hill
Nominated Lead Members of Staff:	Nick Durling (DSL)
Status & Review Cycle:	Statutory Annual
Next Review Date:	Sept 2026

Safeguarding Statement

St Joseph's Specialist Trust recognise our moral and statutory responsibility to safeguard and promote the welfare of all young people. We make every effort to provide an environment in which children and adults feel safe, secure, valued and respected, and feel confident to talk if they are worried, believing they will be effectively listened to.

We are alert to the signs of abuse and neglect and follow our procedures to ensure that children and young adults receive effective support, protection and justice. Child protection forms part of the trust's safeguarding responsibilities.

The purpose of this policy is to provide staff, volunteers and board members the framework they need in order to keep young people safe and secure in our setting. The policy also informs parents and carers how we will safeguard their children whilst they are in our care.

Key Personnel

The Designated Safeguarding Lead is Nick Durling

The Head of Safeguarding and Inclusion is: Nick Durling

Contact details: email: safeguarding@st-josephscranleigh.surrey.sch.uk Telephone: 01483 272449

The deputy DSL(s) are: Annie Sutton, Karen May, Simon Jaggard, Monika Ryzinska and Hayley Rabson email:

safeguarding@st-josephscranleigh.surrey.sch.uk

The nominated lead Trustee for Safeguarding is: Martin Hill, contactable [via Clerk to the Trustees: \[clerk@st-josephscranleigh.surrey.sch.uk\]\(mailto:clerk@st-josephscranleigh.surrey.sch.uk\)](#)

The Executive Principal – Annie Sutton is the Responsible Individual for the children's home and the nominated person for adult services

Contact details: email: asutton@st-josephscranleigh.surrey.sch.uk Telephone: 01483 272449

The Chair of the Standards and Care Committee is: Martin Hill

Contactable via Clerk to the Trustees: clerk@st-josephscranleigh.surrey.sch.uk

The Chair of Education Governing Committee is: Leoni Collingwood-Johnson (Acting)

Contactable via Clerk to the Trustees: clerk@st-josephscranleigh.surrey.sch.uk

The Chair of Trustees is: Dominic Gorton, Contactable via the Clerk to Trustees

Contactable via Clerk to the Trustees: clerk@st-josephscranleigh.surrey.sch.uk

Terminology

Safeguarding and promoting the welfare of children is defined as:

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

Child Protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Early Help refers to the provision of support as soon as any needs emerge or are identified at any point in a child's life. It falls into two categories which are universal services and community-based early help and the targeted early help level of Family Help.

The Targeted Early Help Level of Family Help is a co-ordinated, multi-disciplinary tier of support designed for children and families with multiple or over lapping needs that require a joint agency response before reaching the threshold for statutory child protection.

Universal Services and Community-Based Early Help refers to when there is no concerns that there is an emerging risk but families are in need of being sign posted to local universal support such parent groups. Referrals for Early Help can be made by visiting cspa@surreycc.gov.uk or contacted by phoning 0800 470 9100. The aim is to support family of all ages to improve resilience, promote healthy development and identify low level needs before they escalate.

Staff refers to all those working for or on behalf of the trust, full or part time, temporary or permanent, in either a paid or voluntary capacity.

Child includes everyone under the age of 18.

Adult refers to anyone over the age of 18.

Parents refers to birth parents and other adults who are in a parenting role, for example step-parents, foster carers and adoptive parents.

Social Care refers to the local authority's social services in which either the child is resident, or who have placed the child.

C-SPA refers to the Children's Single Point of Access and the Child Protection Consultation Line in Surrey. These services will differ within other Local Authorities.

MAP refers to the Multi-Agency Partnership

Introduction Guidance Document

This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002, the non-maintained special schools (England) regulations 2015, and in line with government publications: 'Working Together to Safeguard Children' 2023, Revised Safeguarding Statutory Guidance 2 'Framework for the Assessment of Children in Need and their Families' 2000, 'What to do if You Are Worried a Child is Being Abused' 2015 and the Charity Commission safeguarding guidance 2017 (as updated 2021). The policy also reflects both 'Keeping Children Safe in Education' 2026, and Surrey Safeguarding Children Partnership SSCP Child Protection Procedures¹, Early Years Foundation stage (EYFS) statutory framework (DfE Jan 2024), Domestic Abuse Act 2021, and Online safety Act 2023.

The Trustee Board and its delegated Education Governing Committee takes seriously its responsibility under section 157/175 of the Education Act 2002 the Education (Independent School Standards) Regulations 2014 and Children's Homes (England) Regulations 2023 to safeguard and promote the welfare of children; and to work together with other agencies to ensure adequate arrangements within our trust to identify, assess, and support those children who are suffering harm or at risk of suffering harm.

This policy applies to all members of Staff, Trustees and members of the Education Governing Committee in the organisation.

Equalities statement

With regards to safeguarding, we will consider our duties under the Equality Act 2010 and our general and specific duties under the Public Sector Equality Duty. We will work to;

- Advance equality of opportunity between people who share a protected characteristic and those who do not share it.
- Foster good relationships across all protected characteristics between people who share a protected characteristic and those who do not share it.
- The need to eliminate unlawful sexual violence and sexual harassment, misogyny/misandry, racism and faithbased prejudice.
- Some pupils or students may be more at risk of harm or bullying from specific issues such as sexual violence, derogatory behaviour or other forms of physical violence and conflict, homophobic, biphobia, sexual violence/harassment, misogyny/misandry or transphobic bullying or faith- or race-based discrimination.
- Some children/young people may be more at risk of harm or bullying from specific issues such as sexual violence, homophobic, biphobic or transphobic bullying or faith- or race-based discrimination.

¹ The SSCP Child protection Procedures are only available online at <http://surreyscb.procedures.org.uk/>

Regulations and safeguarding requirements relating to school premises

Toilets must be supplied for the for the opposite biological sex. This includes responding to a request to support any degree of social transition for children who are questioning their gender. A separate toilet for boys and girls aged 8 and over (apart from where individual toilets are in a room that can be locked from the inside, intended for use by one child/young person at a time). This is required by the School Premises (England) Regulations 2012 and the Education (Independent School Standards) Regulations 2014 which apply to both maintained schools, academies and independent schools and reflects schools' safeguarding obligations. If a gender questioning child or young person does not want to use the toilet designated for their biological sex it will be considered if an alternative toilet facility can be provided such as a self-contained individual toilet without compromising the single sex facilities. Any alternative arrangements made will not compromise the safety comfort privacy or the dignity of the child or any other children. School changing rooms are supplied for male and female children and young people in line with **School Premises (England) Regulations 2012**.

If a gender-questioning child does not want to use the changing rooms and showers designated for their sex, an alternative changing room/area will be considered and only implemented if it does not compromise the provision of single-sex facilities. Requirements for a single occupant fully enclosed room – for use by one child at a time that can be secured from the inside – or by allowing access to facilities at an alternative time. These alternative arrangements should not compromise the safety, comfort, privacy or dignity of the child or of any other children. A clear record will be kept to monitor these situations and reviewed on a regularly.

Considering requests for support with social transition

St Joseph's will not initiate any action regarding social transition; this guidance applies where a child or their parent has requested that changes or put support in place in order to facilitate their child presenting as the opposite biological sex ("social transition"). Members of staff should not adopt any changes relating to social transition unless a decision has been made by a St Joseph's and a child's parents or carers have been involved.

When considering any request for support with social transition, schools and colleges should ensure that their decision-making process is documented and records are kept.

St Joseph's will follow legislation and equality and human rights law, ensuring that any assessment of discrimination is informed by their evaluation of the welfare and best interests of the child/young adult.

St Joseph's understands that it has a statutory duty to safeguard and promote the welfare of all children/adults. St Joseph's will consider how best to fulfil that duty towards a child/adult who is questioning their gender, as well as their peers, other children/adults. Ensuring that any agreed course of action takes account of the impact on all of those affected.

This means that the first step when considering a child/young adult request for support with social transition will be to consider what is in the best interests of the child/young adult and other children/adults and a decision relating to social transition may not be the same as a child's wishes.

Sports

As children get older, some sports are typically taught and played in single sex groups. It applies to participation in any sport or game, or activity of a competitive nature, where the physical strength, stamina or physique of the average girl would put her at a disadvantage in competition with the average boy (or vice versa). This means that schools and colleges can separate children according to their biological sex in these circumstances without discriminating unlawfully against them on the basis of their sex. Some sports may need to be played in single-sex groups from a certain age to ensure children's safety, and where this is the case there must be no exceptions. In other cases, schools or colleges may have adopted a policy of single-sex sports for reasons related to fairness.

Where there are no safety concerns and a child makes a request relating to how they participate, St Joseph's will consider the request in light of the advice on "considering requests for support with social transition". St Joseph's would complete a risk assessment and take into account all the relevant factors, including whether supporting social transition is overall in the best interests of the child/young adult, as well as considering the impact on other children and the aim of creating safe and fair environments for children to participate in PE.

Policy Principles and Values

The welfare of the child/young adult is paramount.

Maintain an attitude of "It could happen here".

Maintain a "zero-tolerance approach to sexual violence and sexual harassment and any forms of harassment, discrimination misogyny/misandry, racism and faith based prejudice abuse.

All children/young adults regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection, safeguarding and opportunities. They cannot learn effectively unless they feel safe and secure. The needs and interests of children/young adults are always respected and upheld.

We recognise that all adults, including temporary staff, volunteers and Trustees have a full and active part to play in protecting our children/ young adults from harm and have an equal responsibility to act on any suspicion or disclosure that may suggest a child/young adult is at risk of harm; either in the organisation or community settings, taking into account contextual safeguarding, in accordance with statutory guidance.

We acknowledge that working in partnership with other agencies protects children/young adults and reduces risk, therefore we will continue to engage in partnership working to protect and safeguard young people.

Young people and staff involved in child protection issues will receive appropriate support.

Whilst the trust will work openly with parents as far as possible, it reserves the right to contact Social Care or the police, without notifying parents, if this is believed to be in the child's best interests.

We will always act in the best interests of the young person and ensure that our decisions around safeguarding take a child-centred and coordinated approach.

Policy Aims

To demonstrate the organisation's commitment, regarding safeguarding and child protection, to young people, parents and other partners, recognising that all people have the potential to abuse children/young adults. It occurs in all races, religions and social classes and may be perpetrated by those known to the young person.

It is important that staff understand and maintain the attitude of it could happen here where safeguarding is concerned when concerned about the welfare of a child or young person staff should always act in the best interest of the child.

To support the child's/young adult development in ways that will foster security, confidence and independence.

To provide an environment in which children and young people feel safe, secure, valued and respected, and feel confident to, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.

To ensure consistent good practice across the organisation and ensure that safeguarding follows a whole setting approach.

To develop and promote effective working relationships with other agencies, especially the Police and Social Care and contribute to targeted, Early Help assessments or community based early help of need and support for children.

To ensure that all staff working within our trust, who have substantial access to children, have been checked as to their suitability, including verification of their identity qualifications, and a satisfactory enhanced DBS check (according to guidance)², and that a single central record is kept for audit. Candidates/staff work history is checked and references verified by the safeguarding team.

We comply with the Disqualification under the Childcare Act 2006 guidance issued in August 2023 and for staff in our children's homes, the Disqualification from Caring for Children Regulations 2002.

DBS Update Service

Staff to join the DBS update service at the point that an application for a new DBS check is made, or within 30 calendar days of the issue date on the certificate. Staff are asked to subscribe to the DBS updating service which enables future status checks to be carried out by St Joseph's Specialist Trust to confirm that no new information has been added to the check since its issue. Self-employed staff for example regulations 44 inspector will need to provide their enhanced DBS certificate that is up to date or St Joseph's Specialist Trust will obtain a check.

New DBS Checks for staff and volunteers

- An individual working or volunteering at the school or college moves from a post that was not regulated activity with children into work which is considered to be regulated activity with children. All relevant checks for that regulated activity must be carried out,
- There has been a break in service of 12 weeks or more
- There are concerns about an individual's suitability to work with children.

Homestay

St Joseph's Specialist Trust will follow what is set out in KCSIE in regards to any home stay arrangements and the suitability of the adults in the host families.

Referral to DBS (Disclosure and Barring Service)

St Joseph's will follow what is set out in KCSIE but understand there is a legal requirement for schools and colleges to make a referral to DBS if an individual who would have been removed if they had not left the organisation and believe the individual has:

- Engaged in relevant conduct in relation to children and/or adults, and/or
- satisfied the harm test in relation to children and/or vulnerable adults, and/or
- Been cautioned or convicted of a relevant (automatic barring either with or without the right to make representations) offence.

Referral to the Teaching Regulation Agency

In cases where a teacher's services are dismissed due to serious misconduct St Joseph's Specialist Trust will consider whether to make a referral to the Secretary of State as required by sections 141D and 141E of the Education Act 2002 and our duties under the Public Sector Equality Duty (PSED)

Supporting Children/Young Adults

We recognise that a child who is abused or witnesses' violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.

We recognise that the school may provide the only stability in the lives of children/young adults who have been abused or who are at risk of harm.

We accept that research shows that the behaviour of a child/young adult in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

St Joseph's Specialist Trust will support all children/young adults by:

Encouraging self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression, discrimination or bullying.

Promoting a caring, safe and positive environment within the trust.

Responding sympathetically to any requests for time out to deal with distress and anxiety.

Offering details of helplines, counselling or other avenues of external support.

Liaising and working together with all other support services and those agencies involved in the safeguarding of children.

Notifying Social Care and or police as soon as there is a significant concern.

Providing continuing support to a child/young adult about whom there have been concerns, when they leave the trust, by ensuring that information is shared under confidential cover to the child's new setting and ensuring the trust medical records for the child are forwarded as a matter of priority and within statutory timescales.

Ensuring children/young adults are taught to understand and manage risk through our personal, social, health and economic (PSHE) education and Relationship and Sex Education (RSE) and through all aspects of trust life. This includes online safety.

Prevention / Protection

We recognise that the organisation plays a significant part in the prevention of harm to our children/young adults by providing children/young adults with good lines of communication with trusted adults, supportive friends and an ethos of protection. We recognise that children/young adults with special educational needs or disability (SEND) or have certain medical or physical health conditions makes them more vulnerable and can face additional safeguarding challenges.

The school and children's home community will therefore:

- Work to establish and maintain an ethos where children/young adults feel secure, are encouraged to talk and are always listened to.
- Include regular consultation with children/young adults e.g., through safety questionnaires, participation in anti-bullying week, asking children/young adults to report whether they have had happy/sad lunchtimes/playtimes
- Ensure that all children/young adults know there is an adult, in the school or home, who they can approach if they are worried or in difficulty.
- Include safeguarding across the curriculum, including PSHE opportunities which equip children/young adults with the skills they need to stay safe from harm and to know to whom they should turn for help. In particular this will include anti-bullying work, online-safety, road safety, pedestrian and cycle training.
- Ensure all staff are aware of trust guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks.
- Can face additional challenges, online and offline.
- Children and young adults will not have their mobile phone(s) any device(s) (unless this is an approved communication device or a device that supports the child/young adult with education) Mobile phone/devices will be dropped off to Inclusion support office where they will be locked in a safe for secure keeping and will be collected by the child/ young person/support staff at the end of the school day.

Safeguarding children with medical conditions

The fact that there has been an incident relating to the management of a child or young adult medical condition (including allergies) would not in and of itself warrant a referral to local safeguarding partners. A safeguarding referral would only be needed where an incident highlighted concern that the child or young adult might be at an increased risk of being neglected, abused or exploited by persons inside or outside of their family unit because of their medical condition. This might occur where relevant information about a child or young adult's medical condition is not provided to a school, college or setting, or where they are repeatedly sent without essential medication, thereby putting the individual at risk. Further information is provided in our statutory guidance on supporting Pupils at School with Medical Conditions and Allergy safety in schools.

Statutory guidance about the support that pupils with medical conditions and allergies should receive at school.

Allergies and Anaphylaxis

St Joseph's is committed to providing protection for individuals with severe, life-threatening allergies (anaphylaxis) from avoidable risks. St Joseph's recognises anaphylaxis as a medical emergency and a safeguarding issue requiring proactive management, effective risk mitigation and a rapid response protocol. St Joseph's holds individual plans for affected individuals and ensures mandatory staff training for all staff on a regular basis including direct administration training for staff authorised to act immediately in the case of emergency. Please refer to the Anaphylaxis and Allergy Policy.

We will ensure that:

- The trust operates a safer recruitment procedure that includes statutory checks on staff suitability to work children and young people.
- All staff and for those not working with Children directly receive information about the trust's safeguarding arrangements, staff code of conduct, safeguarding policy, details regarding the trust's safeguarding team and Keeping Children Safe in Education Part 1.
- All staff receive safeguarding training and how to make a referral using Sleuth module online as part of their induction, which is regularly updated and receive safeguarding updates (for example, via email, staff meetings, etc) at least annually.
- All staff are trained in and receive regular updates regarding online safety.
- All members of staff maintain a zero-tolerance approach to sexual violence and sexual harassment and any forms of harassment, discrimination or abuse.

The child protection policy is made available via the trust website and intranet and that parents are made aware of this, including the roles and responsibilities of staff at the trust in relation to the policy.

All staff to complete including those not working directly with children/young adults iHasco training module on Keeping Children Safe in Education annually iHasco keeps a record of staff completing this training and staff are required to pass the test at the end of the training module. This also applies to the Trustees and members of its delegated Education Governing Committee in relation to part 2 of the same guidance.

Staff, Trustees and members of the Education Governing Committee will receive regular safeguarding awareness training, updated by the DSL as appropriate.

The Safeguarding Policy is made available via the trust website and intranet.

All parents/carers are made aware of the responsibilities of staff members with regards to safeguarding procedures through the publication of the Safeguarding Policy.

We provide a coordinated offer of Early Help where the need is identified through partnership working and contribute to early help arrangements.

The names of the safeguarding team are clearly advertised around site, with a statement explaining the organisation's role in referring cases and how to make a referral of suspected harm and abuse.

Children in Need (CIN)

A child in need is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. Local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17 of the Children Act 1989. As outlined in Working Together to Safeguard Children, local authorities, with their safeguarding partners and any relevant agencies, should 16 See Working Together to Safeguard Children for further information about extra-familial harms and environments outside the family home. 22 develop, agree and publish local protocols for assessments and support. This should set out who can act as lead practitioner in supporting children and their families under section 17 (which is not limited to social workers).

Child Protection Plan - Children suffering or likely to suffer significant harm

Local authorities, with the help of other organisations as appropriate, have a duty to make enquiries under section 47 of the Children Act 1989 (Child protection Plan) if they have reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm. Such enquiries enable them to decide whether they should take any action to safeguard and promote the child's welfare and must be initiated where there are concerns about maltreatment. This includes all forms of abuse, neglect and exploitation.

Young Carers

Being alert to the needs of young carers, recognising that caring responsibilities can impact on their attendance, attainment, behaviour and wellbeing. Early identification is essential to ensure young carers receive support at the right time and by the appropriate services including additional support from external partners such as social care or local authority and health services.

Roles and Responsibilities

All staff

All staff have a vital part to play in identifying concerns, providing support for children and ensuring their safety and wellbeing. To achieve this, they will:

- Provide a safe environment in which children/young adults can learn.
- Know who the safeguarding team are and how to contact them.
- Establish and maintain an environment where children/young adults feel secure, are encouraged to talk and are listened to.
- Ensure that children/young adults feel safe and know that there are adults in the trust that they can approach if they are worried or have any concerns.

- Maintain a zero-tolerance approach to sexual violence and sexual harassment, discrimination, any forms of other harassment or abuse
- Read and understand as a minimum the most up to date addition of KCSIE Part 1 and should also read Annex B annually for further information
- Those working with children aged 0-5 should read section 3 of the Early Years Foundation stage (EYFS) statutory framework alongside KCSIE.
- Be aware that mental health can, in some cases, be an indicator that a child/young adult has suffered or is at risk of suffering abuse, neglect or exploitation.
- Be aware that young people can exhibit behaviours of self – harm which does not automatically mean the child has a mental health concern.
- Understand that only appropriately trained professionals will attempt to make a diagnosis of a mental health condition
- Be well placed to observe children/young adults day-to-day and identify those whose behaviours suggests that they may be experiencing a mental health or be at risk.
- Understand that where children/young people have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact on a young person's life. Staff will be aware of how these experiences can impact on a child's/young adults mental health, behaviour and education and understand the importance of a trauma informed approach when support the children and young adults Immediately take action, where they have a safeguarding concern that is also a mental health concern, by following our child protection policy and procedure and speaking to the safeguarding team.
- Plan opportunities for children/young adults to develop skills and learn to manage risks to keep themselves safe.
- Attend training to ensure they are aware of and alert to the signs, indicators and impact of abuse.
- Maintain an attitude of "it could happen here" with regards to safeguarding.
- Know how to respond to a child/young adult if they make a disclosure of abuse or harm.
- Record their concerns if they are worried that a child/young adult is being abused and report their concerns to the safeguarding team immediately that day. If the DSL is not contactable immediately, a Deputy DSL should be informed.
- Be prepared to refer directly to the appropriate social care team and/or the police, as appropriate, if there is a risk of significant or immediate harm and the safeguarding team are not available.
- Understand that the organisation has a pivotal role to play in multi-agency safeguarding arrangements.
- Follow the allegations procedure within this policy if the allegation is against a member of staff, agency staff, volunteer or contractor.
- Report low-level concerns (as defined in KCSIE 2026) about any member of staff, supply staff or contractor to the DSL (or deputy) and where the concern relates to the DSL, it will be shared with the Executive Principal. If the concern relates to the Executive Principal, the concern will be shared with the Chair of Trustees.
- Provide support to children/young adult that is in keeping with identified plans.
- Treat information with confidentiality and sensitivity but never promising to keep a secret. Notify the safeguarding team of any child/young adult who has an unexplained absence or injuries or is subject of a child protection plan. as well as any concerns about the welfare of a child/young adult.
- Teacher standards state that teachers should safeguard children's wellbeing and maintain public trust in the teaching profession as part of their professional duties.
- Assist the Trustee Board/ Education Governing Committee and Executive Principal in fulfilling their safeguarding responsibilities set out in legislation and statutory guidance.

Have an understanding of Early Help, liaising with the DSL in identifying those who may benefit from Early Help. In some circumstances, it may be appropriate for a member of staff to act as the lead professional in Early Help cases.

- Liaise with other agencies that support the Early Help process.
- Have an awareness of who the Safeguarding Team are, their role and how to contact them.
- Have an awareness of the trust's safeguarding policy, behaviour management policy and staff code of conduct.
- All staff have a duty to inform the Head Teacher and safeguarding team if they have been involved with the police or where they have a child on a child in need plan or child protection plan.

Mental Health

Staff should be aware that mental health problems can, in some cases, develop into safeguarding concerns. This could include self-harm, suicidal ideation or risk of suicide. They could also be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem, however, the staff working with the young people are well placed as they observe children day-to-day and identify those whose behaviour suggests that the child may be experiencing a mental health problem or be at risk of developing one.

If a child/young person is struggling with their mental health, self-harming, has an eating disorder or is experiencing suicidal ideation and making plans to end their life, there are likely to be potential warning signs which education staff are well placed to recognise. These could include:

- Significant changes in behaviour,
- Ongoing difficulty sleeping,
- Withdrawing from social situations,
- Not wanting to do things they usually like, and physical signs of self-harm or neglecting themselves.

Not all children/young people who exhibit these behaviours are suicidal or have a mental health concern but by identifying children showing potential warning signs staff can intervene with those who are struggling with their mental health and or contemplating suicide and offer an early intervention to mitigate the risk.

If a child/young person is in danger, emergency services should be contacted by calling 999 or arrange for them to be taken to A&E immediately by a parent/carer or other suitable person. If child needs help urgently for their mental health, but it's not an emergency, then NHS 111 online or call 111 and select the mental health option. The safeguarding team at St Joseph's also must be informed this can be done by radioing on channel 6 or phoning a safeguarding officer.

The Executive Principal

In addition to the role and responsibilities of all staff, the Executive Principal will ensure that:

- St Joseph's Specialist Trust recognises that, in order to effectively meet a child's/adults needs, safeguard their welfare and protect them from harm, the trust must contribute to inter-agency working in line with Working Together to Safeguard Children 2023,

Keeping Children Safe in Education (KCSIE) 2026, and Care Act 2014 and share information between professionals and agencies where there are concerns.

- The Safeguarding Policy and Procedures are implemented and followed by all staff and make clear that all forms of Abuse, Harm or Harassment as well as sexual harassment, online abuse and sexual violence are unacceptable.
- All staff are aware of the role and identities of the safeguarding team.
- Staff have appropriate knowledge of KCSIE 2026 Part 1 and Part 5 for additional information on child-on-child sexual violence and sexual harassment.
- Sufficient time, training, support, funding and resources (including cover arrangements where needed) is allocated to the DSL to carry out their role effectively, including the provision of advice, support and training for staff, to take part in relevant professional meetings and contribute to the assessment of children.
- All Deputy DSLs are trained to the same standard as the DSL and the role is explicit within their job description.
- With the DSL, ensure that there are appropriate arrangements in place for appropriate cover for out of hours/ out of term times.
- Where there is a safeguarding concern, that the child's/young adults wishes and feelings are taken into account when determining what action is to be taken.
- That there are appropriate, child/young adult centred systems and processes in place to support the expression of children's/young adults views and feelings.
- All staff feel able to raise concerns about poor or unsafe practices and that such concerns are handled sensitively and in accordance with our whistleblowing procedures.
- That young people are provided with opportunities throughout the curriculum to learn about safeguarding, including keeping themselves safe online.
- Opportunities are provided for a coordinated offer of Early Help.
- Ensure that all allegations or concerns against staff are dealt with in accordance with guidance from Department for Education (DfE), Surrey Safeguarding Children Partnership (SSCP), Surrey County Council (SCC) and other placing authorities.
- Ensure that statutory requirements are met to make a referral to the DBS and additionally in the case of teaching staff, the Teacher Regulation Agency where they think an individual has engaged in conduct that harmed (or is likely to harm) a child/young adult or if the person otherwise poses a risk of harm to a child.

The Designated Safeguarding Lead

In addition to the role and responsibilities of all staff, the DSL:

- Will maintain an “It could happen here” approach to safeguarding.
- Hold the lead responsibility for safeguarding and child protection in the trust, which cannot be delegated.
- Will act as a source of support and expertise in carrying out safeguarding duties for the whole safeguarding community.
Will liaise with the relevant local authority and work in partnership with safeguarding partners and other agencies in line with Working Together to Safeguard Children 2023. KCSIE 2026, Safeguarding Vulnerable Groups Act 2006, Mental Capacity Act 2005 and Care Act 2014.
- Will manage and submit a referral for a child/young adult if there are concerns of suspected harm or abuse to the relevant local authority and act as a point of contact and support for staff.
- NPCC - “When to call the police”, should help designated safeguarding leads understand when they should consider calling the police and what to expect when they do.

- Will refer cases where there is a radicalisation concern via the relevant local authority or police force and act as a point of contact and support for staff to discuss concerns. Advice can be sought in Surrey by calling 101 or 01483 632982 and asking to speak to the Prevent supervisor for Surrey. The national police Prevent advice line that can be called is 0800 011 3764. The DfE has established a dedicated helpline to raise concerns around Prevent and Extremism in education (020 7340 7264) and the anti-terrorist hotline is 0800 789321. If in immediate risk, 999 should be called.
- Will refer cases where a crime may have been committed to the Police as required.
- Will liaise with the case manager and Local Authority Designated Officer (LADO) for child protection concerns in cases which concern a member of staff including supply staff, trainee teachers, volunteers, and contractors and refer relevant cases to the DBS and Teacher Regulation Agency as required.
- Will record and share low-level concerns in cases which concern a member of staff, supply staff or contractor. The records should include details of the concern, the context of the concern and actions taken.
- Will follow DfE and KCSIE guidance “Child on Child Abuse (Including Harassment and Violence)” when a concern is raised that there is an allegation of a child abusing another child within the Trust
- Be available for staff to discuss any safeguarding concerns, with appropriate arrangement in place to cover periods where the DSL is absent.
- Will encourage and promote a culture of listening to the child’s wishes and feelings.
- Will regularly access training and support to ensure that they have the knowledge required to carry out the role. DSL training should be updated at least every 2 years.
- Will have a good working knowledge of local safeguarding procedures and understand the assessment process for providing early help and statutory intervention, including their level of need criteria and referral arrangements.
- Will understand and support the trust delivery with regards to the requirements of the Prevent Duty and provide advice and guidance to staff on protecting children/young adults from radicalisation.
- Will understand the risks associated with online activity and be confident that they have the up to date knowledge and capability to keep children/young adults safe whilst they are online at St Joseph’s, in particular being aware of the additional risks young people with SEND face when online.
- Will have a clear understanding of access and referral to the local Early Help offer and be able to advise and support staff where intervention is appropriate.
- Will keep detailed, accurate records that include all concerns about a child/young adult even if there is no need to make an immediate referral and the rationale for decisions made and action taken.
- Will ensure an indication of the existence of the additional safeguarding file is marked on the child’s/young adults school file.
- Will ensure that when a child/young adult transfers school (including in-year), their safeguarding file is passed to the new school as soon as possible and within 5 days (separately from the child’s/young adults main file) and that confirmation of receipt is received.
- Will ensure that where a child transfers and is on a child protection plan, that their information is passed onto the new school immediately and that the child’s social worker is informed. A copy of the plan may be retained until confirmation of receipt has been received.
- Will ensure that all appropriate staff members have a working knowledge and understanding of their role in multi-agency working and meetings, to ensure that they are able to contribute effectively when required to do so.

- Will report to the Executive Principal any significant issues such as enquiries under section 47 of the Children Act 1989 and any use of local authority escalation procedures.
Will ensure that the allocated social worker is informed of any child who is on a child protection plan who is absent without reason.
- Will ensure that all staff sign to say that they have read and understood the trust's safeguarding policy, code of conduct policy and Part 1 of KCSIE and all policies are used effectively.
- Will organise safeguarding induction training for all staff, ensuring that they receive regular updates at least annually (including online safety), keeping a record of what has been covered. CPD co-ordinator to keep records of attendance on training sessions which take place every 2 years
- Ensure that, in collaboration with the trust's leadership team and Trustee Board that the safeguarding policy is reviewed at least annually and the procedures and implementation are updated and reviewed regularly.
- Ensure that the Safeguarding Policy is available publicly.
- Establish links with the safeguarding partners to make sure that staff are aware of training opportunities and local safeguarding arrangements.
- With the Executive Principal, Trustee Board and members of its Education Governing Committee contribute to the "Audit of statutory duties and associated responsibilities" to be submitted annually to the SCC Education Safeguarding Team.
- Will ensure that details of the trust's safeguarding team are displayed and advertised prominently within the trust, with a statement explaining the trust's role in referring and monitoring cases of suspected abuse.
- Meet all other responsibilities as set out for DSL's in KCSIE 2026.
- Liaise with relevant trust staff on matters of safety and safeguarding and consult threshold documents to inform decision making and liaison with relevant agencies.
- When there has been a report of sexual violence, harassment or online abuse, make a risk and needs assessment, as required.
- Understand the lasting impact that adversity and trauma can have and what is needed in responding to this in promoting educational outcomes.
- Work with the executive principal and relevant strategic leads to promote educational outcomes by knowing the safeguarding issues that children are experiencing and the impact these might have.
- Report to the Executive Principal and significant issues such as police investigations. This should also include being aware of the require for children to have an appropriate adult. Further details can be found in statutory guidance – PACE Code C 2019.

See also KCSIE 2026 annex C.

The Deputy Designated Safeguarding Leads

In addition to the role and responsibilities of all staff, the deputy DSL's will:

- Be trained to the same level as the DSL and the role is explicit within their job description.
- Provide support and capacity to the DSL in carrying out delegated activities of the DSL; however, the lead responsibility cannot be delegated.
- In the absence of the DSL, carry out these activities necessary to ensure the ongoing safety and protection of children/young adults. In the event of the long-term absence of the DSL, the deputies will assume all of the function above.

All members of the Trustee Board and its Education Governing Committee understand and fulfil their responsibilities to ensure that:

- The organisation has effective safeguarding policies and procedures including a code of conduct policy and a response to children who go missing from education. We ensure policies are consistent with SSCP and statutory requirements, are reviewed regularly and that the policy is available on the trust's website.
- The SSCP are informed in line with local requirements about the discharge of duties via the annual safeguarding audit.
The trust operates a safer recruitment procedure that includes statutory checks on staff suitability to work with children and by ensuring that there is at least one person on every recruitment panel who has completed safer recruitment training. If there is not a panel conducting the interview, then the interviewer will have completed the safer recruitment training.
- Trustees and Governors should receive appropriate training at induction, which is updated regularly. This should provide them with the knowledge to provide strategic challenge to test and assure themselves that policies and procedures are effective and support a whole trust approach.
- That at least one member of the Trustee Board and its Education Governing Committee has completed safer recruitment training, to be repeated every 1 year.
- Staff have been appropriately trained and this is updated in line with guidance and all staff have read KCSIE 2026 Part 1 and Annex B; and those mechanisms are in place to assist staff in understanding and discharging their roles and responsibilities as set out in this guidance.
- That all staff including temporary staff and volunteers are provided with the Trust's Safeguarding Policy and Code of Conduct.
- That the trust has procedures for dealing with allegations of abuse against staff, volunteers and against other children and that a referral is made to the DBS and/ or Teaching Regulation Agency and if appropriate, the police, if a person in regulated activity has been removed or dismissed due to safeguarding concerns, or would have, if they had not resigned.
- Ensure that Charity law and Charity Commission safeguarding guidance is adhered to and that serious incident notifications are made where appropriate
- Processes are in place for dealing with concerns which do not meet threshold (low level concerns), as defined in KCSIE 2026.
- That a nominated Trustee for safeguarding is identified.
- They have appointed a DSL who will take lead responsibility for safeguarding and that the role is explicit in the job holder's job description.
- That on appointment, the DSL and deputies undertake interagency training and update this at least every two years.
- That children/young adults are taught about safeguarding (including online safety) as part of a broad and balanced curriculum, covering relevant issues through PSHE and relationships and sex education (RSE). The Trustees will ensure that the trust has appropriate systems in place for monitoring and application filtering, to safeguard children online.
- That the trust will comply with DfE and SCC Children 'Missing Education' requirements.
- The trust complies with regular data returns requested by the local authority.
- That appropriate online filtering systems are in place.
- AI and the safeguarding skill development is paramount: We acknowledge that unrestricted access can negatively impact children's development of fundamental skills such as critical thinking, writing and problem solving. Restricted access to generative AI

- To safeguarding these skills, children will not be given directed access to generative AI tools that could be used to complete assignment or bypass the learning process.
- Enhanced DBS checks are in place for all Trustees/Governors
- That any weaknesses in Safeguarding are remedied quickly.
- There is an awareness that mental health problems can be, in some cases, an indicator that a child/young adult has suffered or is at risk of suffering abuse, neglect or exploitation. Trustees will ensure clear systems and processes and processes are in place for identifying possible mental health problems, including clear referral and escalation processes. Ensure that safeguarding files are maintained as set out in KCSIE 2026 Annex C.
- **A review of filtering and monitoring systems will be completed at least once every academic year. Reviews/checks will be carried out on filtering and monitoring systems. Completed checks will ensure all systems are working appropriately on all internet connected devices by Head of ICT with the support of the DSL and a record of these checks should be kept by the Head of ICT and DSL. Online safety audit risk assessment will be completed using LGfL template. Online Safety = Online safeguarding = Safeguarding**

Regulated Activity

The full legal definition of regulated activity is set out in Schedule 4 of the Safeguarding Vulnerable Groups Act 2006 as amended by the Protection of Freedoms Act 2012 and The Crime and Policing Act 2026.

Regulated activity includes:

- a) Paid and unpaid work that involves teaching, training, instructing, caring for or supervising children, or providing advice or guidance on physical, emotional or educational well-being, or driving a vehicle only for children;
- b) Any other type of paid work for a limited range of establishments (known as 'specified places', which include schools and colleges), with the opportunity for contact with children.

Work under (a) or (b) is regulated activity only if done frequently, on more than 3 days in a 30-day period or overnight. Some activities are always regulated activities, regardless of frequency. This includes:

- c) relevant personal care, or health care provided by or provided under the supervision of a health care professional:
 - Personal care includes helping a child with eating and drinking for reasons of illness or disability or in connection with toileting, washing, bathing and dressing for reasons of age, illness or disability;
 - Health care means care for children provided by, or under the direction or supervision of, a regulated health care professional.

Regulated activity will not be:

- Paid work in specified places which is occasional and temporary and does not involve any of the activities in (a) above.

Confidentiality and Sharing Information

Data protection laws do not prevent the sharing of information for the purposes of keeping children safe and promoting their welfare. If in any doubt about sharing information, staff should speak to the designated safeguarding lead (or a deputy). Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare of children.

All matters relating to safeguarding will be treated as confidential and only shared as per the ['Information Sharing Advice for Practitioners' \(DfE 2023\) guidance](#).

St Joseph's Specialist Trust will refer to the guidance in the data protection: toolkit for schools - <https://www.gov.uk/government/publications/data-protection-toolkit-for-schools>

Information will be shared with staff in the trust who 'need to know'. Relevant staff have due regard to Data Protection principles which allow them to share (and withhold) information.

All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children/young adults and that the Data Protection Act 2018 The Data (Use and Access) Act 2025 General Data Protection Regulations (GDPR) 2018 are not a barrier to information sharing where a failure to do so would put a child/young adult at risk of harm. There is a lawful basis for safeguarding concerns to be shared with agencies who have a statutory duty for safeguarding.

All staff must be aware that they cannot promise a child/young adult to keep secrets which might compromise the child's/young adults safety or wellbeing. However, staff are aware that matters relating to safeguarding are sensitive and personal to children/young adult and families and in this respect are confidential. The DSL's will only disclose information to staff on a need to know basis.

All staff will always undertake to gain consent and/or share our intention to refer a child/young adult to social care with their parents/ carers or young adult if have capacity unless to do so could put the child/young adult at greater risk of harm or impede a criminal investigation.

Upon admission of any child/young adult St Joseph's Specialist Trust will make contact with their previous school and/ or residential placement to request the transfer of relevant files in relation to safeguarding. These must be transferred securely.

Safeguarding Procedure

The following procedure applies to all staff working in the organisation and will be covered by training to enable staff to understand their role and responsibility.

The aim of our procedure is to provide a robust framework which enables staff to take appropriate action when they are concerned that a child/young adult is being harmed or abused, or is at risk of harm or abuse.

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

All staff are aware that our young people may be more likely to communicate concerns through behaviours rather than words. Additionally, staff will question the cause of knocks or injuries to our young people. Any unexplained injuries need to be referred to the safeguarding team immediately by following our safeguarding referrals process.

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:

- Make a record of the information related to the concern, including:
 - Dates and times of their observations
 - Dates and times of any discussions in which they were involved
 - Any injuries observed
 - Explanations given by the child/young adult (in their own words)
 - Rationale for decision making and action taken
 - Any actual words or phrases used by the child/young adult or staff involved
 - The records must be signed and dated by the author or equivalent on electronic based records
 - In the absence of the DSL or their deputies, staff must be prepared to refer directly to C-SPA, social care (and the police if appropriate) if there is the potential for immediate significant harm.
- Report it to the safeguarding team immediately using Sleuth module in Sleuth , phone or face to face.
- The safeguarding team will consider if there is a requirement for immediate medical intervention, however urgent medical intervention should not be delayed if the safeguarding team are not immediately available.
- On a case by case basis, report relevant information to social workers as per a standing arrangement.

Taking Photographs/Videos of Medical Conditions on Young People

If there is a medical concern where a medical professional has requested a photograph/video of a young person's condition a safeguarding referral should be sent so the safeguarding team can assess if this is appropriate or not. No photographs/video of medical concerns on young people can be taken without agreement and guidance from a member of the safeguarding team.

No photograph can be taken without the consent of either the young person or their responsible adult. 2 people must be present

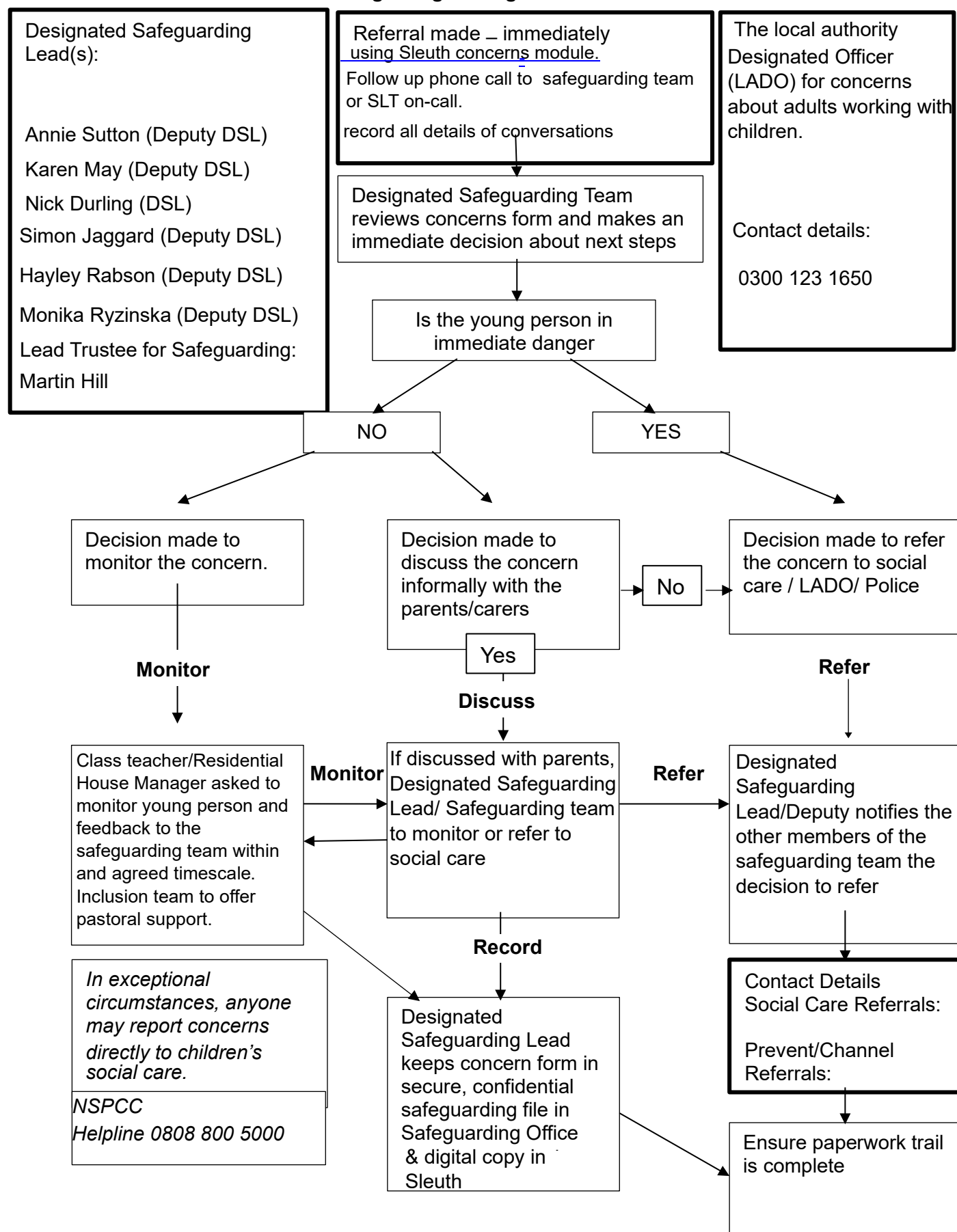
Safeguarding Team to Consider

- Consent from Parents and young person if young adult where appropriate - See above. Must be written consent. If no consent – no photo
- Request evidence of request made from Health Professional and reason why a photograph rather than in person visit
- What part(s) of the body is photograph/video needed of? Example there might be a request made to video a seizure.
- Can the child be identified
- Safeguards around the child. (for example, Child Protection Order, and Child in Need Plan)
- GDPR – what happens to the photo after it is taken
- Only controlled group must have access to the data

Following a report of concerns, the Safeguarding team must:

- Using the responsible authority's threshold document, decide whether or not there are sufficient grounds for suspecting significant harm, in which case a referral must be made to the relevant local authority and the police if appropriate.
- Normally the DSL should try to discuss any concerns about a child's/young adult welfare with the family and where possible, seek their agreement, before making a referral to the social care team. However, this should only be done where it will not place the child/young adult at further risk or could impact on any agency's investigation. The child's views should also be taken into account.
- If there are grounds to suspect a child/young adult is suffering, or is likely to suffer, significant harm or abuse then the safeguarding team must make a referral to social care. If a child is in immediate danger and urgent protective action is required, the police must be called. The safeguarding team must also notify social care of the occurrence and any action that has been taken.
- If the DSLs are unsure about whether a referral is appropriate, they may call social care for a consultation or consider an Early Help referral to social care which is a more structured, targeted intervention approach.
- If there is not a risk of significant harm, the safeguarding team will either actively monitor the situation and or offer community based early help.
- Where there are doubts or reservations about involving the child's/young adults family, the safeguarding team should clarify with 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 there may be a criminal investigation.
- When a pupil is in need of urgent medical attention and there is suspicion of abuse, the safeguarding team should take the child to the nearest accident and emergency unit, having first notified social care. The DSL should seek advice about what action will be taken about informing parents, remembering that parents should normally be informed if a child requires urgent medical attention.
- The exception to this will be in cases of known Female Genital Mutilation (FGM)where there is a mandatory requirement for teachers to report directly to the police. The safeguarding team must also be made aware.

Flow Chart for Raising Safeguarding Concerns about a Student



Dealing with disclosures

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

Additional consideration needs to be given to children with communication difficulties and 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 DSLs are and who to approach if the DSL is not available. All staff have the right to make a referral to social care or police directly and should do this if, for whatever reason, there are difficulties in following the agreed protocol, for example if there are no other staff on site and the staff member has a concern about sending the child home.

Guiding principles, the seven R's

Receive

- Listen to what is being said, without displaying shock, disgust 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, such as "I won't tell anyone"
- Do reassure, for example, you could say "I believe you"

Respond

- Respond to the pupil as far as necessary for you to establish whether or not you need to refer this matter
- Do not ask leading questions. Such questioning may invalidate your evidence (and the child's) in any further proceedings. Use open questions such as "Can you tell me more"
 - Do not ask the child/young adult why something happened
- Do not criticise the alleged perpetrator; the student may care about him/ her and reconciliation may be possible
- Do not ask the young person to repeat it all to another member of staff. Explain what you have to do next and whom you have to talk to. Reassure the young person that it will be a senior member of staff.

Report

- Share your concerns with the safeguarding team immediately
- If you are not able to contact the safeguarding team and the child is at risk of immediate harm, contact social care or the police directly, as appropriate.
- If you are dissatisfied with the level of response that you receive following your concerns, you should press for re-consideration.

Record

- If possible, make some very brief notes at the time and email them to the Safeguarding Team as soon as possible. If this cannot be done at the time, a record should be made as soon as possible after the disclosure.
- Keep your original notes

- Record the date, time, place, persons present and the words used by the child/young adult, rather than translating them into 'proper' words
- If appropriate, complete a body map to indicate the position of any noticeable injury
- Record the facts and observable things, rather than your interpretations or assumptions
- This should be sent directly via email to the safeguarding team

Remember

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

Review (by DSL)

- Has the action taken provided good outcomes for the child?
- Did the procedure work?
- Were any deficiencies or weaknesses identified in the procedure? Have these been remedied?
- Is further training required?
- Has any appropriate documentation been updated to reflect recent events, such as risk assessments?

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 safeguarding team what has happened following a report being made. If they do not receive this information, they should seek it out.

If they have concerns that the disclosure has not been acted upon appropriately, they might inform the Executive Principal or Safeguarding Trustee of the trust and/or may contact social care.

Receiving a disclosure can be upsetting for the member of staff and the organisation should have a process or procedure for supporting them after the disclosure. This may include reassurance that they have followed the 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.

Safeguarding concerns and 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 including agency staff, trainee teachers in the organisation, or another adult who works with children has:

- Behaved in a way that has harmed a child/young adult or may have harmed a child/young adult.
- Possibly committed a criminal offence against or related to a child/young adult.
- Behaved towards a child or children/young adult in a way that indicates he or she would pose a risk of harm to children/young adult; or
- Behaved or been involved in an incident outside of a setting which did not involve children but could impact on their suitability to work with children /vulnerable young adults.

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 Executive Principal and DSL immediately, by completing a referral in sleuth using the concerns module.
- If an allegation is made against the Executive Principal or safeguarding officer the concerns need to be raised to the Lead Trustee for Safeguarding Martin Hill or Chair of Trustees, Dominic Gorton, as soon as possible. If neither are available, then the LADO should be contacted directly and for the Trustee to update the DSL as appropriate
- There may be situations when the Executive Principal or above Trustees will want to involve the police immediately if the person is deemed to be an immediate risk to children/young adults or there is evidence of a possible criminal offence.
- Once an allegation has been received by the Executive Principal or Trustees, they will contact the LADO team on 0300 123 1650 or by email on LADO@surreycc.gov.uk immediately and before taking any action or investigation.
- Following consultation with the LADO, inform the parents of the allegation unless there is a good reason not to.

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

If the matter is investigated internally, the LADO will advise the trust to seek guidance from local authority colleagues as set out in Part 4 of KCSIE 2026 and local procedures.

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

Suspension of a member of staff against whom an allegation has been made needs careful consideration and the Executive Principal or Lead Trustee for Safeguarding of Chair of Trustees, will seek advice of the LADO, Director of Human Resources or a HR consultant in making this decision whilst completing a suspension risk assessment.

In the situation where an allegation has been made about an agency member of staff as they are not directly employed by St Joseph's disciplinary actions will be completed by the supply agency. St Joseph's will take the safeguarding lead on any alleged/safeguarding concerns that

have happened while working at the Trust and will work closely with the agency company/LADO in managing any cases.

Low level concerns

The term “low-level concern” does not mean that it is insignificant. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a “nagging doubt” – that an adult working in or on behalf of the trust may have acted in a way that:

- Is inconsistent with the staff code of conduct, including inappropriate conduct outside of work and
- Does not meet the harm threshold or is otherwise not serious enough to consider a referral to the LADO.

The purpose of reporting low-level concerns is to create and embed a culture of openness, trust and transparency in which the trust’s values and expected behaviour set out in our staff code of conduct are lived, monitored and reinforced constantly by all staff.

The setting creates an environment where staff are encouraged and feel confident to self-refer where they have found themselves in a situation.

Reports should be made to the safeguarding team in a timely manner. If they have any doubt as to whether the information shared about the individual as a low-level concern in fact meets the harm threshold, they will consult with the LADO.

What is child abuse?

The following definitions are taken from Working Together to Safeguard Children 2023. In addition to these definitions, it should be understood that children can also be abused by being sexually exploited, through honour based abuse, forced marriage or female genital mutilation. To support the local context, all staff have access to the Surrey Safeguarding Children’s Partnership level of need document.

All staff should be aware that abuse, neglect, exploitation, and safeguarding issues are rarely standalone events and cannot be covered by one definition or one label alone. In most cases, multiple issues will overlap.

What is abuse and neglect?

Abuse and neglect are a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear or experience its effects. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children. Children may also cause harm to other family members, often referred to as child to parent or care giver abuse.

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. It may also include concerns such as force feeding and unjustified use of physical interventions. Additionally, it may include concerns over the use of medication for the purpose of tranquilisation and sedation.

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. It may also include verbal abuse, such as persistent criticism, belittling, or name-calling, as well as not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

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. In this setting, it may include intentionally restricting access to family or friends.

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 in isolation.

Sexual abuse

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.

The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse.

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

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 caregivers)
- ensure access to appropriate medical care or treatment

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

[The SSCB Neglect Strategy](#) and the [Neglect Risk Assessment Tool](#) are available to provide more detailed information regarding 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 in Need and 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 years old:

- 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 staff should 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. The [Neglect Risk Assessment Tool](#) provides staff with a resource to identify and act on concerns regarding neglect.

Physical indicators of neglect (but not limited to those listed below)

- Constant hunger and stealing food
- Poor personal hygiene - unkempt, dirty or smelly
- Underweight/ overweight
- Dress unsuitable for weather
- Poor state of clothing
- Illness or injury untreated

Behavioural indicators of neglect (but not limited to those listed below)

- Constant tiredness
- Unexplainable frequent absence from school or lateness
- Missing medical appointments
- Isolated among peers
- Frequently unsupervised
- Stealing or scavenging, especially food
- Destructive tendencies
- Drug taking and/or alcohol misuse

Serious violence, criminal exploitation (including that linked to county lines), radicalisation

Consensual and non-consensual making or sharing of nudes or semi nudes.

Emotional abuse

The nature of emotional abuse

The persistent emotional maltreatment of a child such as to cause severe and 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 verbal abuse, such as persistent criticism, belittling, or name-calling, as well as 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 from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

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 abuse.

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

Indicators of emotional abuse (but not limited to those listed below)

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
- 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. knees, 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 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. Body maps should be sent to the safeguarding team.

Indicators of physical abuse / factors that should increase concern (but not limited to those listed below)

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

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

You should be concerned if a child:

- 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/young adult – e.g. relatives, family friends, neighbours, babysitters, and people working with the child in school, faith settings, clubs or activities. Children can be sexually abused within the family, an institution or a community setting, and are more likely to know their abuser than not. Children can also be subject to child sexual exploitation. Sexual abuse can involve forcing or enticing a child or young person to take part in sexual activities, not necessarily involving 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 penetration with an object) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online as well as offline, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a

specific safeguarding issue in education. There are specific offences for children under 13, who can never provide valid consent to sexual activity and there are specific offences which make clear that sexual activity with a child under 16 is an offence, regardless of whether they agreed to that activity.

Sexual exploitation is seen as a separate category of sexual abuse. The [SSCB Screening Tool and guidance](#) provides trust staff with information regarding indicators of CSE (further information about CSE is available on pages 45-46).

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 (this may occur online)
- 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 (but not limited to those listed below)

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 inappropriate behaviour
- Hinting at sexual activity
- Inexplicable decline in education progress
- Depression or other sudden apparent changes in personality as becoming insecure
- 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
- Arriving early at school, leaving late, running away from home
- Suicide attempts, self-mutilation,
- 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.
- **Stalking/being stalked**

Sexual violence and sexual harassment between children in schools Child to child Abuse (including harassment & violence) – Policy Framework

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 young people and trust and college staff are supported and protected as appropriate.

Policy

We believe that all children have a right to attend school and learn and live in a safe environment. Children should be free from harm by adults and other children in school and children's homes. Children can abuse other children (often referred to as child-on-child abuse), and that it can happen both inside and outside of school or college and online. Any concerns of child-on-child abuse must be reported to the safeguarding team by making a referral and followed up with a phone call/radio message on channel 6 to inform Designated Safeguarding (DSL) Lead or Deputy (DDSL)

We recognise that children are capable of abusing other children and this will be dealt with under our child protection policy and in line with KCSIE (2026) and following recommendations from the Sexual Violence and Sexual Harassment between Children in Schools and Colleges guidance (DfE 2021).

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

Child on Child abuse (including harassment and violence) is most likely to include, but may not be limited to:

- Bullying abuse in intimate personal relationships between children (sometimes known as 'teenage relationship abuse')
- Bullying (including cyberbullying, prejudice-based and discriminatory bullying),

- It is a safeguarding issue for both victim and alleged perpetrator, it is preventable and it may involve serious physical harm or threats involving weapons.
- Abuse in intimate personal relationships between children (sometimes known as 'teenage relationship abuse'),
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse),
- serious physical assault and harm, or the threat of harm with a weapon,
- Physical abuse or otherwise causing physical harm
- Sexual violence such as rape, assault by penetration and sexual assault. This may include an online element which facilitates, threatens or encourages sexual violence.
- Sexual harassment such as sexual comments, remarks, jokes and online harassment, which may be standalone or part of a broader pattern of abuse.
- Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party,
- Consensual and non-consensual making or sharing of nudes and semi nudes,
- Upskirting which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm, and
- Causing someone to engage in sexual activity without consent, such as forcing them to strip, touch themselves sexually or to engage in sexual activity with a third party.
- Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

We will minimise the risk of peer on peer/ child on child abuse (including harassment and violence) by:

Prevention

Taking a whole trust approach to safeguarding & child protection

Providing training to all staff.

Providing a clear set of values and standards, underpinned by the organisation's behaviour policy and pastoral support; and by a planned programme of evidence-based content delivered through the curriculum. We believe that failing to do so can lead to a culture of unacceptable behaviour, an unsafe environment and in worst case scenarios a culture that normalises abuse.

Engaging with specialist support and interventions.

Teaching young people about safe behaviours and relationships through RSE as part of our curriculum.

Recognising acknowledging and understanding the scale of harassment and that even if there are no reports, it does not mean that it is not happening.

Challenging physical behaviours such as grabbing bottoms, breasts and genitalia, as we believe that dismissing or tolerating them, risks normalising these behaviours.

Responding to reports of sexual violence and sexual harassment

Children making a report of sexual violence or sexual harassment will be taken seriously, kept safe and be well supported.

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

If the report includes an online element staff will be mindful of the Searching, Screening and Confiscation: advice for schools (DfE 2022) guidance. The key consideration is for staff not to view or forward illegal images of a child. The guidance provides more details on what to do if viewing an image is unavoidable.

Staff taking the report will inform the safeguarding team immediately by Making a referral in Sleuth using safeguarding module.

Staff taking a report will never promise confidentiality.

Parents or carers should usually be informed (unless this would put the child at greater risk).

If a child is at risk of harm, is in immediate danger, or has been harmed, a referral will be made to social care.

Risk Assessment:

Following a report, the safeguarding team 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 children at the trust.

- The victim and the alleged perpetrator sharing classes and space at St Joseph's.

The risk assessment will be recorded and kept under review.

Where there has been other professional intervention and/or other specialist risk assessments, these professional assessments will be used to inform the organisation's approach to supporting and protecting young people.

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 children involved.

Developmental stages of the children.

Any power imbalance between the children.

Any previous incidents.

That sexual violence and sexual harassment can take place within intimate personal relationships between children.

The importance of understanding the intra familial harms and any necessary support for siblings following incidents.

Ongoing risks.

Other related issues or wider context.

Confidentiality

The victim might ask not to share information with anyone about the sexual violence or sexual harassment. If the victim does not give consent to share information, staff may still lawfully share it if there is another legal basis under UK GDPR that applies. The DSL will consider;

- Parents or carers should normally be informed unless to do so would put the victim at greater risk.
- The basic safeguarding principal is if a child is at risk of harm, is in immediate danger or has been harmed, a referral should be made to children's social care, and
- Rape, assault by penetration and sexual assaults are crimes. Where a report of rape, assault by penetration or sexual assault is made, this should be referred to the police. Whilst the age of criminal responsibility is 10, if the alleged perpetrator is under 10, the starting principal is the same.

Options: The DSL will make a decision regarding the issue, with the following possible options:

Manage internally.

Early Help intervention.

Refer to social care.

Report to the police (generally in parallel with a referral to social care).

Ongoing Response:

The DSL will manage each case individually and will ensure the risk assessment is reviewed regularly with relevant partner agencies, for example the police and Children's Social Care. Where an allegation of sexual violence or sexual harassment is progressing through the criminal justice system, settings should be aware of anonymity, witness support and the criminal process in general, so they can offer support and act appropriately.

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 trust premises and on transport where appropriate.

Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, the trust 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 may lead to the view that allowing the perpetrator to remain in the same school or college would seriously harm the education or welfare of the victim (and potentially themselves and other young people).

Where a criminal investigation into sexual assault leads to a conviction or caution, the Trust will, if it has not already, consider any suitable sanctions in light of their behaviour policy, which may include consideration of permanent exclusion. Where the perpetrator is going to remain at the school or college, the Executive Principal should continue keeping the victim and perpetrator in separate classes and continue to consider the most appropriate way to manage potential contact on school and 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 any other affected children or adults will receive appropriate support and safeguards on a case-by-case basis.

The trust will take any disciplinary action against the alleged perpetrator in accordance with the trust behaviour policy.

The trust recognises that taking disciplinary action and providing appropriate support are not mutually exclusive actions and will occur at the same time if necessary.

The trust will consider the potential impact of social media in facilitating the spreading of rumours and exposing victims' identities.

We recognise that those who have experienced sexual violence may display a wide range of responses or no overt signs at all.

Physical Abuse

While a clear focus of peer on peer/ child on child abuse (including harassment and violence) is around sexual abuse and harassment, physical assaults and initiation violence and rituals from young people to young people 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.

References:

DfE Keeping Children Safe in Education 2026

[DfE Sexual Violence and Sexual Harassment between Children in Schools and Colleges 2021](#)

Harmful Sexual Behaviour (HSB)

There are a number of resources available to assist schools to categorise the sexual behaviours of young people and is designed to help professionals:

- Make decisions about safeguarding children and young people
- Assess and respond appropriately to sexual behaviour in children and young people
- Understand healthy sexual development and distinguish it from harmful behaviour
- By categorising sexual behaviours, St Joseph's can work with other agencies to the same standardised criteria when making decisions and can protect children and young people with a multi-agency approach.

The trust recognise that it is vital that professionals agree on how behaviours should be categorised regardless of culture, faith, beliefs, and their own experiences or values.

Children's sexual behaviour exists on a continuum, ranging from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. It can occur face-to-face and/or online.

In the context of St Joseph's Specialist Trust, the different diagnoses of our young people may mean that children present with behaviours typical of those younger to them. Any concerns or queries must be referred to the safeguarding team. Advice on stages of typical sexual development and behaviour for different age groups can be found in **Sexual development and behaviour in children | NSPCC Learning**.

Sexual violence

Rape: A person (A) commits an offence of rape if: s/he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration, and A does not reasonably believe that B consents.

Assault by Penetration:

A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.

Sexual Assault:

A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching, and A does not reasonably believe that B consents. (NOTE - sexual assault covers a very wide range of behaviour so a single act of kissing someone without consent or touching someone's bottom/breasts/genitalia without consent, can still constitute sexual assault).

Causing someone to engage in sexual activity without consent:

A person (A) commits an offence if: s/he intentionally causes another person (B) to engage in an activity, the activity is sexual, B does not consent to engaging in the activity, and A does not reasonably believe that B consents. (NOTE – this could include forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party).

What consent is:

Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity, and each time activity occurs. Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice:

- A child under the age of 13 can never consent to any sexual activity,
- The age of consent is 16
- Sexual intercourse without consent is rape

More information/guidance can be found **Rape Crisis England & Wales - Sexual consent.**

Residential Accommodation on School Trips

To comply with their safeguarding duties, St Joseph's will not allow a child/young adult to share overnight accommodation with a child/young adult of the opposite biological sex. Responding to a request to support any degree of social transition must not include allowing access to boarding or residential accommodation designated for the opposite sex.

In allocating sleeping arrangements such as dormitories, tents or shared rooms for trips, St Joseph's will follow duties under the Equality Act, their safeguarding obligations, and other relevant regulations and standards, including those relating to boarding and residential accommodation.

If, however, a child does not want to share a room with another child of the same biological sex, alternative arrangements should be sought where possible. Alternative arrangements should not compromise the safety, comfort, privacy or dignity of any child. They might include, for instance, finding a suitable separate room for the child.

Anti-Bullying/ Cyberbullying

The Trust's policy on anti-bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures.

We keep a record of known bullying incidents which is shared with and analysed by the Trustee Board by its delegated committee for Care. All staff are aware that children with SEND and/or differences/ perceived differences are more susceptible to being bullied/victims of child abuse.

When there is 'reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm' a bullying incident should be addressed as a child protection concern. If the anti-bullying procedures are seen to be ineffective, the Executive Principal and the safeguarding team will also consider child protection procedures.

The fact that a young person may be LGBTQ+ is not in itself an inherent risk factor of harm. However, young people who are LGBTQ+ can be targeted by other young people. In some cases, a young person who is believed to be LGBTQ+ can be just as vulnerable as someone who identifies as LGBTQ+.

Risks can be compounded where young people who are LGBTQ+ lack a trusted adult with whom they can be open. It is therefore vital that staff endeavour to reduce the additional barriers faced and provide a safe space for them to speak out or share concerns with staff. LGBTQ+ inclusion is part of the RSE curriculum and there is a range of support available for settings to counter bullying and abuse.

PHSE education regularly provides opportunities for children to understand bullying is wrong, its impact and how to deal with it.

Online Safety

The trust has an online safety policy which explains how we try to keep young people safe in school and how we respond to online safety incidents.

Children increasingly use electronic equipment on a daily basis to access the internet, share and view content and images via social media sites such as Facebook, twitter, Instagram, snapchat and TikTok, and for online gaming.

Some adults and other children use these technologies to harm children. The harm might range from sending hurtful or abusive texts or emails, to grooming and enticing children to engage in extremist or sexual behaviour such as webcam photography or face-to-face meetings.

Sharing pictures online without consent is a priority offence under the online safety act 2023 as well as using AI generated pictures to make fake images. Online threats also include identity theft, phishing scams, malware, cyberbullying and inappropriate content. Any concerns need to be reported to the safeguarding team.

Young people may also be distressed or harmed by accessing inappropriate material such as pornographic websites or those which promote extremist behaviour, criminal activity, suicide or eating disorders

Young people are taught about online safety throughout the curriculum and all staff receive online safety training which is regularly updated.

Children with particular skills and interest in computing and technology may inadvertently or deliberately stray into cyber-dependent crime. If there are concerns about a child of this nature, the DSL will consider a referral into the cyber choices programme.

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

- **Content:**

Being exposed to illegal, inappropriate, or harmful content, for example: pornography, racism, misogyny/misandry, self-harm, suicide, antisemitism, radicalisation, extremism, extreme sexual or physical violence, misinformation, disinformation (including fake news) and conspiracy theories.

- **Contact:**

Being subjected to harmful online interaction with other users or generative AI applications that simulate this; for example: peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.

- **Conduct:**

Online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images, including those generated using AI and online bullying.

- **Commerce:**

Risks such as online gambling, inappropriate advertising, phishing and or financial scams.

- **Cybercrime:**

Cybercrime is a criminal activity committed using computers and/or the internet. It is broadly categorised as either 'cyber-enabled' (crimes that can happen off-line but are enabled at scale and at speed on-line) or 'cyber dependent' (crimes that can be committed only by using a computer). Cyber-dependent crime continues to represent one of the most significant and rapidly evolving threats within the United Kingdom's (UK) crime landscape. Incidents have increased under Computer Misuse Act 1990 (CMA) Young people across the UK experiment with illegal online activity, often without understanding the legal or ethical implications. The impact of cybercrime extends well beyond immediate financial losses, with scope to cause disruption to national infrastructure.

Cyber-dependent crimes include:

Unauthorised access to computers (illegal 'hacking'), for example accessing a school's computer network to look for test paper answers or change grades awarded.

Denial of Service' (Dos or DDoS) attacks or 'booting'. These are attempts to make a computer, network or website unavailable by overwhelming it with internet traffic from multiple sources.

Making, supplying or obtaining malware (malicious software) such as viruses, spyware, ransomware, botnets and Remote Access Trojans with the intent to commit further offence, including those above.

Racist Incidents

Our policy on racist incidents is set out separately and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of racist incidents.

Radicalisation, Terrorism and Extremism

The Prevent Duty for England and Wales (2023) under section 26 of the Counter-Terrorism and Security Act 2015 places a duty on education and other children's services to have due regard to the need to prevent people from being drawn into terrorism.

Extremism is defined as '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.

Terrorism is an action that endangers or causes serious violence to a person/ people; causes serious damage to property; or seriously interferes with an electronic system. The use of threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

Some children are at risk of being radicalised; adopting beliefs and engaging in activities which are harmful, criminal or dangerous. This can happen both online and offline.

The trust is clear that exploitation of vulnerable children and radicalisation should be viewed as a safeguarding concern and follows the Department for Education guidance for schools and childcare providers on preventing children and young people from being drawn into terrorism.

The trust 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.

Trust staff receive training to help identify early signs of radicalisation and extremism.

Opportunities are provided in the curriculum to enable young people to discuss issues of religion, ethnicity and culture and the school follows the [DfE advice Promoting Fundamental British Values as part of SMSC \(spiritual, moral, social and cultural education\) in Schools \(2014\).](#)

The Trustee Board, members of its Education Governing Committee, the Executive Principal and the Safeguarding Team will assess the level of risk within the trust and put actions in place

to reduce that risk. Risk assessment may include, [the use of school premises by external agencies](#), anti-bullying policy and other issues specific to the trust's profile, community and philosophy.

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 DSL's. They should then follow the safeguarding procedures and refer cases to the preventreferrals@surrey.pnn.police.uk following the prevent referral process using the [Prevent referral form](#) . If the matter is urgent then police must be contacted by dialling 999. In non-urgent cases where police advice is sought then dial 101 or 01483 632982 and ask to speak to the Surrey Police Prevent Coordinator. The national police prevent advice line that can be called is 0800 011 3764.

The Department of Education has also set up a dedicated telephone helpline for staff and Trustees and members of the Education Governing Committee to raise concerns around Prevent (020 7340 7264). and the anti-terrorist hotline is 0800 789 321.

Any significant event or allegation relating to terrorism or extremism will be notified to the Charity Commission via a serious incident notification.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.

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.

The Department of Education guidance [The Prevent Duty](#) can be accessed via this link.

Domestic Abuse

Domestic abuse is actual or threatened physical, emotional, psychological or sexual abuse. It involves the use of power and control by one person over another. It occurs regardless of race, ethnicity, gender, class, sexuality, age, religion, mental or physical ability. Domestic abuse can also involve other types of abuse.

The Domestic Abuse Act received Royal Assent in April 2021. The act introduces the first ever statutory definition of domestic abuse and recognises the impact of domestic abuse on children. The statutory definition ensures that different types of relationships are captured and different abusive behaviours such as economic abuse and coercive and controlling behaviours. Both the person carrying out the behaviour and the person whom the behaviours are directed towards must be aged 16 or over and must be "personally connected".

All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Experiencing domestic abuse can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

We use the term domestic abuse to reflect that a number of abusive and controlling behaviours are involved beyond violence. Slapping, punching, kicking, bruising, rape, ridicule, constant

criticism, threats, manipulation, sleep deprivation, social isolation, and other controlling behaviours all count as abuse.

Living in a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, wellbeing and understanding of healthy, positive relationships. Children who witness domestic abuse are at risk of significant harm and staff are alert to the signs and symptoms of a child suffering or witnessing domestic abuse.

The trust is enrolled onto the Operation Encompass scheme, a joint project between Surrey Police, Surrey County Council, Surrey Domestic Abuse Service and Surrey Schools; where every school day morning our DSL is notified of all domestic abuse incidents that have occurred and been reported to Police in the previous 24 hours which involved a child at this school (72 hours on a Monday morning). This provides an opportunity for us to ensure the right support is in place at the right time for children who are experiencing domestic abuse.

Homelessness

Being homeless or being at risk of homelessness presents a real risk to a child's welfare. The safeguarding team is aware of contact details and referral routes into the LA housing authority so that they can raise/ progress concerns at the earliest opportunity.

Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of child sexual abuse.

It occurs where an individual or group, organised networks takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 which includes 16 and 17 year olds who can legally consent to sex. into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. Victims may be criminalised for actions taken under coercion.

The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. All staff are aware of the link between online safety and vulnerability to CSE.

Any concerns that a child is being or is at risk of being sexually exploited should be passed immediately to the DSL/DDSL by making a referral using concerns module in Sleuth contacting.

The Trust is aware there is a clear link between regular non-attendance at school and CSE. Staff will consider a child to be at potential CSE risk in the case of regular non-attendance at school and make reasonable enquiries with the child and parents to assess this risk.

All staff are aware that safeguarding incidents and/ or behaviours can be associated with factors outside the Trust and/ or can occur between young people outside of these environments. All staff, but especially the safeguarding team, will consider whether children are at risk of abuse or exploitation outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including sexual exploitation, criminal exploitation and serious youth violence.

The staff who know the child will complete a CSE risk assessment for every child to assess whether a child is being, or is at risk of being, sexually exploited or where indicators have been observed that are consistent with a child who is being or who is at risk of being sexually exploited.

In all cases, if the risk assessment identifies that a child is at high risk of CSE, a referral should be made to social care by the safeguarding team and discussed with parents. If a child is in immediate danger the police should be called on 999.

The trust is aware that a child often is not able to recognise the coercive nature of the abuse and does not see themselves as a victim. As a consequence, the child may resent what they perceive as interference by staff. However, staff must act on their concerns as they would for any other type of abuse. Children also rarely self-report CSE so staff must be particularly vigilant to potential indicators of risk.

The trust includes the risks of sexual exploitation in the PHSE and RSE curriculum. Young people will be informed of the grooming process and how to protect themselves from people who may potentially be intent on causing harm. They will be supported in terms of recognising and assessing risk in relation to CSE, including online, and knowing how and where to get help.

Child Criminal Exploitation (CCE), Child Sexual Exploitation (CSE) and Gangs.

CCE is a form of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into criminal activity. It may involve an exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. This can be committed or facilitated by an organised network or gang, and the victim may identify as being part of this group. CCE and CSE can affect children, both male and female, and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation. This may constitute modern slavery, and further information is available in the **Modern Slavery statutory guidance March 2020**. In accordance with this guidance, a relevant child protection and modern slavery referral should be completed where a potential victim of CCE or CSE is identified.

There are a number of areas in which young people are put at risk by gang activity, both through participation in, and as victims of, gang violence which can be in relation to their peers or to a gang-involved adult in their household.

A child who is affected by gang activity or serious youth violence may have suffered, or may be likely to suffer, significant harm through physical, sexual and emotional abuse or neglect.

The risk or potential risk of harm to the child may be as a victim, a gang member or both - in relation to their peers or to a gang-involved adult in their household. Teenagers can be particularly vulnerable to recruitment into gangs and involvement in gang violence. This vulnerability may be exacerbated by risk factors in an individual's background, including violence in the family, involvement of siblings in gangs, poor educational attainment, cognitive impairment, poverty or mental health problems.

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

- Go missing (from school or home) and are subsequently found in areas away from their home.
- Have been the victim, perpetrator or alleged perpetrator of serious violence (e.g. knife crime), Are involved in receiving requests for drugs via a phone line, moving drugs, handing over and collecting money for drugs.
- Are exposed to techniques such as 'plugging', where drugs are concealed internally to avoid detection,
- Are found in accommodation that they have no connection with, often called a 'trap house' or 'cuckooing' or hotel room where there is drug activity.
- Owe a 'debt bond' to their exploiters, and have their bank accounts used to facilitate drug dealing.

Criminal exploitation of children is a typical feature of county lines criminal activity. Key identifying features of involvement in county lines are when children are missing, or when the victim may have been trafficked for transporting drugs. A referral to the National Referral Mechanism should be considered with Social Care and police colleagues. County Lines is a term used to describe gangs and organised crime networks involved in exporting illegal drugs (primarily crack cocaine and heroin) into one or more importing areas [within the UK], using dedicated mobile phone lines or other forms of 'deal lines'.

Some specific forms of CCE can include children being forced or manipulated into transporting drugs or money through county lines, working in cannabis factories, shoplifting or pickpocketing. They can also be forced or manipulated into committing vehicle crime or threatening/committing serious violence to other.

Any concerns that a child is being or is at risk of being criminally exploited will be passed without delay to the safeguarding team. The trust is aware there is a clear link between regular non-attendance at school and exploitation. Staff will consider a child to be at potential risk in the case of regular non-attendance at school and make reasonable enquiries with the child and parents to assess this risk.

A referral to social care will be made when any concern of harm to a child as a consequence of gang activity including child criminal exploitation becomes known. Any member of staff who has concerns that a child may be at risk of harm should immediately inform the safeguarding team. The safeguarding team will contact social care. If there is concern about a child's immediate safety, the police will be contacted on 999.

Serious Violence

Serious violence is a continuing safeguarding concern. It may involve physical assault, carrying, threatening with, or using weapons, often in the context of peer conflict or bullying,

and it can also be associated with criminal exploitation. Staff should report any concerns about a child carrying or using a weapon (or expressing intent to do so) to the designated safeguarding lead (or a deputy). The designated safeguarding lead will assess the risk to both the individual child/young person and others in the school, considering wider information or concerns, and take appropriate action. Depending on the risk, a safety and support plan can be implemented and risk assessment and behaviour support plan updated and where appropriate de-escalate peer conflict. We understand that we play a key role in protecting children from violence, safeguarding victims, as well as those who may be at risk of, or are involved in committing violence (who may also be victims themselves). All staff should be aware that children/young people are at risk or be involved in serious violence. The risks are higher for those who are vulnerable, have a history of offending needed to move schools attending alternative provisions. All staff should be aware of when children and young people might be at higher risk example at the end of the school day. Protective actions relating to serious violence is provided in Annex A in Keeping Children Safe in Education (KCSIE)

Alternative Provision

If a child/young people attends an alternative provisions example- college placement we will make sure that written confirmation is received to ensure all necessary safeguarding checks have been completed by the provision in line with safer recruitment and we must be satisfied that the placement can meet the child/young adult's needs.

There are a number of indicators which may signal children are at risk from, or are involved in, serious violent crime. These may include:

- Increased absence
- A change in friendships or relationships with older individuals or groups
- A significant decline in performance
- Signs of self-harm or a significant change in wellbeing or signs of assault or unexplained injuries.
- Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs and may be at risk of criminal exploitation.

Staff are aware that violence can often peak just before and after the children attend the school when pupils are traveling to and from school and can concentrate in particular places. It is important that we identify try to understand where these places are, with a view to working with partners to promote safety for children. The sharing of information with other agencies helps to form a better picture of high-risk locations to protect children/young adults. Listening to children and consulting with staff can help establish when and where they feel unsafe. Working with wider partners can also help build understanding of the local context beyond St Joseph's and help co-ordinate a collective safeguarding response around the school day.

The likelihood of involvement in serious violence may be increased by factors such as:

- Being male
- Having been suspended, spent time in Alternative Provision or permanently excluded from school,
- Having experienced child maltreatment,
- Having been involved in offending, such as theft or robbery,
- Having used drugs or alcohol in early adolescence, and
- Having previously been a victim or previously perpetrated violence

Sharing nudes and semi-nudes, Including where generated by AI

The practice of children sharing images and videos via text message, email, social media or mobile messaging apps has become commonplace. However, this online technology has also given children the opportunity to produce and distribute sexual imagery in the form of photos and videos & live streaming. Such imagery involving anyone under the age of 18 is unlawful.

Making and Sharing nudes/ semi nudes refers to both images and videos where:

- A person under the age of 18 makes or shares nude or semi nudes of themselves (Self-generated imagery) with a peer under the age of 18.
- A person under the age of 18 makes or shares nudes or semi nudes created by another person under the age of 18 with a peer under the age of 18 or an adult.
- A person under the age of 18 is in possession of nudes or semi nudes created by another person under the age of 18.
- Images may also be digitally altered or wholly generated using artificial intelligence, including what are sometimes described as 'deepfakes' or 'deep nudes'.

All incidents of this nature should be treated as a safeguarding concern and in line with the UKCCIS guidance [sharing nudes/ semi nudes: advice for education settings working with children and young people.](#)

Cases where someone makes or shares nude or semi nudes of people under 18 has been shared by adults and where sexual imagery of a person of any age has been shared by an adult to a child is child sexual abuse and should be responded to.

If a member of staff becomes aware of an incident involving a youth making or sharing nudes or semi nudes, they should follow the child protection procedures and refer to the safeguarding team immediately.

The member of staff should, if possible, remove the device involved and set it to flight mode or, if this is not possible, turn it off. Staff must not view, copy or print the youth produced sexual imagery.

The safeguarding team should discuss the concerns with social care or, if there is a perceived risk of immediate danger, the police.

Parents should be informed at an early stage and involved in the process unless there is reason to believe that involving parents would put the child at risk of harm.

Immediate referral should be made to Children's Social Care/police if:

- The incident involves an adult.
- There is good reason to believe that a young person has been coerced, blackmailed or groomed or if there are concerns about their capacity to consent (for example, owing to special education needs).
- What you know about the imagery suggests the content depicts sexual acts which are unusual for the child's development stage or are violent.
- The imagery involves sexual acts.

- The imagery involves anyone aged 12 or under.
- There is reason to believe a child is at immediate risk of harm owing to the sharing of the imagery, for example the child is presenting as suicidal or self harming.

If none of the above apply then the DSL will use their professional judgement to assess the risk to young people involved and may decide, with input from the Executive Principal, to respond to the incident without referral to social care or the police.

During the decision making the DSL will consider if:

- There is a significant age difference between the sender/receiver.
- There is any coercion or encouragement beyond the sender/receiver.
- The imagery was shared and received with the knowledge of the child in the imagery.
- The child is vulnerable, for example subject to Child in Need, Child Protection or Early Help plans, Looked After, level of need/ diagnoses.
- There is a significant impact on the children involved.
- The image is of a severe or extreme nature.
- The child involved understands consent.
- The situation is isolated or if the image been more widely distributed.
- There other circumstances relating to either the sender or recipient that may add cause for concern.
- The children have been involved in incidents relating to youth produced imagery before.

If any of these circumstances are present the situation will be referred according to our child protection procedures, including referral to social care or the police.

The DSL will record all incidents of youth produced sexual imagery, including the actions taken, rationale for actions and the outcome.

Modern Slavery & National Referral Mechanism

Modern slavery encompasses human trafficking and slavery, servitude and forced or compulsory labour. Exploitation can take many forms, including sexual exploitation, criminal financial exploitation, forced labour, forced criminality and the removal of organs.

The National Referral Mechanism is the system used within the UK to support potential victims of exploitation and modern slavery. Further information on the signs that someone may be a victim of exploitation and modern slavery, the support available to victims and how to refer them to the NRM is available in statutory guidance Modern slavery: how to identify and support victims - GOV.UK.

Children who are referred into the NRM in England and Wales may also have access to an Independent Child Trafficking Guardian (ICTG)¹. ICTGs provide advocacy for children and help to promote and support their recovery.

Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act (2003). It is a form of child abuse and violence against women. [A mandatory reporting duty requires teachers along with regulated health and social care professionals to report 'known' cases of](#)

[FGM in under 18s](#), which are identified in the course of their professional work, to the police where they either:

- Are informed by a girl under 18 that an act of FGM has been carried out on her; or
- Observe physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girls health or for the purposes connected with labour or birth.

The duty applies to all persons in St Joseph's who is employed or engaged to carry out 'teaching work' in the school, whether or not they have qualified teacher status.

The duty applies to the individual who becomes aware of the case to make a report. It should not be transferred to the Safeguarding Team, however they should be informed.

If a teacher is informed by a girl under 18 that an act of FGM has been carried out on her or a teacher observes physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth, the teacher should personally make a report to the police force in which the girl resides by calling 101. The report should be made immediately.

Trust staff are trained to be aware of risk indicators of FGM.

Concerns about FGM outside of the mandatory reporting duty should be reported using the trust's child protection procedures. Staff should be particularly alert to suspicions or concerns expressed by female young people about going on a long holiday during the summer holiday.

There should also be consideration of potential risk to other girls in the family and practicing community. Where there is a risk to life or likelihood of serious immediate harm the teacher should report the case immediately to the police, including dialling 999 if appropriate.

There are no circumstances in which a teacher or other member of staff should examine a girl.

Information on when and how to make a report can be found at: **Mandatory reporting of female genital mutilation procedural information.**

Forced Marriage

A forced marriage is a marriage in which one or both people do not (or in cases of people with learning disabilities cannot) consent to the marriage but are coerced into it. Coercion may include physical, psychological, financial, sexual and emotional pressure. It may also involve physical or sexual violence and abuse.

Forced marriage is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights. Since June 2014 forcing someone to marry has become a criminal offence in England and Wales under the Anti-Social Behaviour, Crime and Policing Act 2014. Since February 2023, it has also been a crime to carry out any conduct whose purpose is to cause a child to marry before their eighteenth birthday even if violence threats or another form of coercion are not used. As with the existing forced marriage law this applies to non-binding, unofficial 'marriages' as well as legal marriages.

A forced marriage is not the same as an arranged marriage which is common in many cultures. The families of both spouses take a leading role in arranging the marriage but the choice of whether or not to accept the arrangement remains with the prospective spouses.

Trust staff should never attempt to intervene directly as a school or through a third party. Contact should be made with social care, police and/or the Forced Marriage Unit 020 7008 0151 or email fmufco.gov.uk for further assistance.

Honour-based abuse

Honour based abuse (HBA) can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. including female genital mutilation (FGM), forced marriages and practices such as breast ironing. Abuse committed in the context or preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrators. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

Honour based abuse might be committed against people who:

- become involved with a boyfriend or girlfriend from a different culture or religion.
- want to get out of an arranged marriage.
- want to get out of a forced marriage
- wear clothes or take part in activities that might not be considered traditional within a particular culture

It is considered a violation of human rights and may be a form of physical, domestic and/or sexual abuse.

One Chance Rule

All staff are aware of the 'One Chance' Rule' in relation to forced marriage, FGM and HBA. Staff recognise they may only have 'one chance' to speak to a child/young adult who is a potential victim and have just one chance to save a life.

The trust are aware that if the victim is not offered support following disclosure then the 'One Chance' opportunity may be lost. Therefore, all staff are aware of their responsibilities and obligations when they become aware of potential forced marriage, FGM, breast ironing and HBA cases.

Contextual Safeguarding

Contextual safeguarding looks to understand and respond to the experiences and relationships that young people have beyond their family home that may contain elements of abuse and/ or violence. In most cases, families have very little influence over these experiences or relationships, therefore it is vital to engage with those who do have influence to understand, manage and support the young person and any factors contributing to potential harm.

St Joseph's Specialist Trust acts as part of this larger network, who may have information regarding relationships with peers, online activity, etc and will seek to actively engage with agencies regarding any concerns noted in relation to a young person's safety or wellbeing.

At St. Josephs Specialist Trust we acknowledge that we also have young people who are eighteen years of age and above and the Care Act 2014 outlines types of abuse include physical abuse, sexual abuse, emotional & psychological abuse, financial or material abuse, neglect and acts of omission, discriminatory abuse, organisational abuse, domestic abuse, modern slavery and self-neglect, please see our adult safeguarding policy.

Private Fostering Arrangements

A private fostering arrangement occurs when someone other than a parent or close relative legal guardian or person with parental responsibility cares for a child for a period of 28 days or more. It applies to children under the age of 16 years old or 18 years old if the child is disabled. This arrangement must be planned and can include occasional short breaks. The local authority where the private foster carer lives must be notified of the arrangement as least six weeks prior to the arrangement is due to start or as soon as possible after making the arrangement to ensure that the child's welfare is safeguarded and that the arrangement is suitable. The local authority is responsible for ensuring the safety and welfare of the child, which includes regular visits to the child to assess their well-being. Parents though retain parental responsibility, including financial responsibility of the child.

Children looked after by the local authority or who are placed in residential schools, children's homes or hospitals are not considered to be privately fostered.

Private fostering occurs in all cultures and children may be privately fostered at any age.

The trust recognise that most privately fostered children remain safe and well but are aware that safeguarding concerns have been raised in some cases. Therefore, all staff are alert to possible safeguarding issues, including the possibility that the child has been trafficked into the country.

By law, a parent, private foster carer or other persons involved in making a private fostering arrangement must notify Children's Social Care immediately. However, where a member of staff becomes aware that a young person may be in a private fostering arrangement, they will raise this with the safeguarding team and the safeguarding team will notify social care immediately.

Children Looked After

One of the most common reasons for children becoming looked after is as a result of abuse and neglect. However, amongst the children at St Joseph's Specialist Trust, the most common reason is a voluntary arrangement because of their residential status.

The trust 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, including the level of authority delegated to the carer by the authority looking after the child and contact arrangements with birth parents or those with parental responsibility.

The designated teacher and governor for children looked after will have the appropriate level of training to equip them with the knowledge and skills to undertake their role.

The designated teacher for children looked after and the DSL have details of the child's social worker and the name and contact details of the local authority's Head of Virtual School will work together on improving attendance

The designated teacher for children looked after and children previously looked after will work in partnership with the Virtual School Assistant and Executive Principal to discuss how Pupil Premium Plus funding can be best used to support the progress of children looked after in the school and meet the needs of the child within their personal education plan.

Children Missing Education

All children, regardless of their circumstances, are entitled to an efficient, full time education which is suitable to their age, ability, aptitude and any special educational needs they may have.

Children being absent from education for prolonged periods and/or on repeat occasions can act as a vital warning sign to a range of safeguarding issues including neglect, child sexual and child criminal exploitation - particularly county lines. It is important the school or college's response to persistently absent pupils, and children missing education (CME) supports identifying such abuse, and in the case of absent pupils, helps prevent the risk of them becoming a child missing education in the future. This includes when problems are first emerging but also where a child is already known to local authority children's social care and needs a social worker (such as a child who is a child in need or who has a child protection plan, or is a looked after child), where being absent from education may increase known safeguarding risks within the family or in the community.

The organisation recognises that children missing education are at significant risk of underachieving, being victims of abuse and harm, exploitation or radicalisation, and becoming NEET (not in education, employment or training) later in life.

Where possible the trust will hold more than one emergency contact number for each pupil.

The organisation will ensure that there is a record of joiners and leavers as defined in The Education (Pupil Registration) (England) 2006 (amended 2016).

When removing a child's name, the trust will notify the Local Authority of: (a) the full name of the child, (b) the full name and address of any parent with whom the child normally resides, (c) at least one telephone number of the parent, (d) the child's future address and destination school, if applicable, and (e) the ground in regulation 8 under which the child's name is to be removed from the school register.

The organisation will make reasonable enquiries to establish the whereabouts of a child jointly with the Local Authority, before deleting the child's name from the school register if the deletion is under regulation 8(1), sub-paragraphs (f) (iii) and (h) (iii) of The Education (Pupil Registration) (England) 2006 (amended 2016).

The organisation will:

- Enter children on the admissions register on the first day on which the trust has agreed, or has been notified, that the pupil will attend the school.
- Notify the Local Authority within five days of adding a child's name to the admission register. The notification must include all the details contained in the admission register for the new pupil.
- Monitor each child's attendance through their daily register and follow the SCC procedure in cases of unauthorised absence.
- Remove a child's name from the admissions register on the date that the child leaves the school.
- The trust will notify the Local Authority when they are about to remove a child's name from the school register, under any of the fifteen grounds listed in the regulations, no later than the date that the child's name is due to be removed.

- Where parents notify the trust, in writing, of their intention to electively home educate, the trust will forward a copy of the letter to the Elective Home Education Team / Education Welfare. Where parents orally indicate that they intend to withdraw their child to be home educated and no letter has been received, the trust will not remove the child from roll and will notify Education Welfare at the earliest opportunity.

Pupils Missing Out on Education (PMOOE)

The vast majority of children engage positively with trust and attend regularly. However, in order to flourish, some children require an alternative education offer or may require a modified timetable to support a return to full time education provision. It is recognised that children accessing alternative provision, or a reduced or modified timetable may have additional vulnerabilities. Ofsted refer to these as Pupil Missing Out On Education (PMOOE), because they are not accessing their education in school in the 'usual way'.

The organisation will gain consent (if required in statute) from parents to put in place alternative provision and/or a reduced or modified timetable

The organisation will ensure that and parents (and the local authority where the pupil has an EHCP) are given clear information about alternative provision placements and reduced or modified timetables: why, when, where, and how they will be reviewed;

The organisation will keep the placement and timetable under review and involve parents in the review. Reviews will be frequent enough to provide assurance that the off-site education and/or modified timetable is achieving its objectives and that the pupil is benefitting from it.

The organisation will monitor and track children attending alternative provision to ensure that the provision meets the needs of the child. The trust continues to be responsible for the safeguarding of that young person. The trust will obtain written confirmation from the alternative provider that appropriate safeguarding checks have been carried out on individuals working at the establishment.

The organisation will comply with regular data returns requested by the Local Authority, regarding all young people, of statutory school age, attending alternative provision and/or on a reduced or modified timetable.

The Trust's leadership will report to Trustees of any formal direction of a pupil to alternative provision to improve behaviour.

The Trust's leadership will report to Trustees, information regarding the use and effectiveness of the use of alternative provision and modified timetables.

School Attendance and Behaviour

Additional policies and procedures are in place regarding school attendance and behaviour.

The trust recognises that absence from school and exclusion from school may be indicators of abuse and neglect, including the exploitation of children. The DSL will regularly liaise with members of school staff with responsibility for behaviour and attendance to ensure risk is identified and appropriate intervention is in place to protect children from harm.

The trust will work in partnership with Surrey Police and other partners for reporting children that go missing from the site during the school day. Staff will be alert to signs of children at risk of travelling to conflict zones, female genital mutilation and forced marriage.

Physical Intervention

We acknowledge that staff must only ever use physical intervention as a last resort, when a child is or is at immediate risk of harming themselves or others and that at all times it must be the minimal force necessary to prevent injury to another person. Such events should be fully recorded on Sleuth, detailing witnesses.

All staff will be trained appropriately in Team Teach, including as part of their induction.

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

We recognise that touch is appropriate in the context of working with children, and that all staff have been given 'safe practice' guidance to ensure that they are clear about professional boundaries.

The Trust has a separate Inclusion Support (Behaviour Management) Policy, which all staff must be aware of and is reflected in the training that all staff receive by in house Team Teach tutors. The Inclusion Support (Behaviour Management) Policy covers the use of reasonable force.

Whistle-blowing

We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.

All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues, poor or unsafe practice and potential failures in the trust's safeguarding arrangements. If it becomes necessary to consult outside the trust, they should speak in the first instance, to the Area Schools Officer or LADO in accordance with the Whistleblowing Policy.

The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally or have concerns about a way a concern is being handled by their school. Staff can call: 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and Email: help@nspcc.org.uk.

Whistle-blowing regarding the Executive Principal should be made to the Chair of the Trustees whose contact details are available to staff.

Any member of staff or volunteer can also whistle blow to the Charity Commission via email on whistleblowing@charitycommission.gov.uk

This policy also links to our policies on:

- Administration of medicines
- Allegations against staff
- Anti-bullying
- Code of conduct
- Curriculum
- Disciplinary

ICT
Inclusion Support (Behaviour Management)
Intimate care
Missing child policy
Physical contact
PSHE
Recruitment
Social media
Whistleblowing

For further advice and information, visit;

[Surrey County Council Education Safeguarding Team](#)

NSPCC: <http://www.nspcc.org.uk/>

ChildLine: <http://www.childline.org.uk/pages/home.aspx>

CEOP Thinkuknow: <https://www.thinkuknow.co.uk/>

Anti-Bullying Alliance: <http://anti-bullyingalliance.org.uk/>

Beat Bullying: <http://www.beatbullying.org/>

Childnet International –making the internet a great and safe place for children. Includes resources for professionals and parents <http://www.childnet.com/>

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

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

Contextual Safeguarding Network <https://www.contextualsafeguarding.org.uk/>

[Charity Commission safeguarding guidance 2017](#)

[Charity Commission serious incident notifications](#)

[Charity Commission whistleblowing number](#)

Please refer to Keeping Children Safe in Education for additional advice and support on pages 172 - 180

Additional Resources

Context

In March 2020, the government stated that vulnerable children and children of keyworkers (as detailed in their published guidance) should attend school and that other children should remain at home. These measures were instigated in response to the Covid-19 pandemic. This update aims to provide clarity of the safeguarding provision during this period. In the context of the government's briefings, all of the young people on register are deemed to be vulnerable and St Joseph's will continue to work with families and local authorities to support and protect them.

Safeguarding Team/ DSL

St Joseph's Specialist Trust has a Designated Safeguarding Lead (DSL) and a number of Deputy DSL's. We aim to have a member of our Safeguarding Team on-site at all times during the school day and available by telephone for consultation outside of those hours. If there should be a period where no member of the Safeguarding Team is on-site then staff, or a nominated senior leader will make telephone contact with the DSL.

The Safeguarding Team will continue to respond to and action all concerns reported in relation to safeguarding concerns and will work closely with local authorities, social workers and families to coordinate their response.

Whatever the scenario, it is essential that all staff and children have access to a DSL at all times.

Reporting concerns

Where staff have a concern about a child, they should continue to follow the process as outlined in the trust's Safeguarding Policy.

In the unlikely event that staff cannot access their emails to make such a referral or Sleuth safeguarding module they must call a member of the safeguarding team or make a radio call on channel 6 to discuss their concerns. In the event that their concern is in relation to the Executive Principal, concerns should be discussed with the Chair of Trustees, whose details can be obtained from the Clerk to Trustees. **All staff are reminded that they must report all concerns without delay.**

Safeguarding Training and Induction

All existing staff have received full safeguarding training as part of our standard induction/ refresher training programmes and are expected to read Keeping Children Safe in Education 2026 Part 1 in full.

During this period, the DSL and Safeguarding Team will communicate to staff, any changes in legislation, policy or practice relevant to the organisation or their roles.

Any new staff recruited will continue to be given safeguarding training as part of their induction. Any visitors or agency staff coming onto the site will continue to be provided with appropriate safeguarding information to allow them to make a referral if the need arises.

Safer Recruitment

It remains essential that individuals who are not suitable to work with children are prevented from accessing St Joseph's Specialist Trust. To this end, the organisation continues to follow extensive safer recruitment processes, including relevant areas of KCSIE Part 3, under the support of the Safeguarding Team.

Where St Joseph's Specialist Trust are utilising volunteers, we will continue to follow the checking and risk assessment process as set out in KCSIE. Under no circumstances will a volunteer or any other person who has not been checked be left unsupervised or allowed to work in regulated activity.

St Joseph's Specialist Trust will continue to comply with the legal duty to refer to the DBS anyone who has harmed or poses a risk of harm to a child or vulnerable adult. Full details can be found at paragraph 329 of KCSIE.

St Joseph's Specialist Trust will continue to consider and make referrals to the Teaching Regulation Agency (TRA) as per paragraph 333 of KCSIE and the TRA's 'Teacher misconduct: advice for making a referral'.

Supporting Children/young adults at Home

St Joseph's Specialist Trust continues its commitment to ensuring the safety and wellbeing of all of its students and the children and young adults who reside in the children's home onsite which is regulated by care Ofsted and is regulated against The Children's Homes (England) Regulations 2015.

To this end, the trust will continue to maintain close contact with families and social workers to ensure that any concerns are addressed effectively.

St Joseph's Specialist Trust recognises that school is a protective factor for children and young people, and the current circumstances have a significant potential to affect the mental health of pupils and their parents.

Supporting children/young adults in school

St Joseph's Specialist Trust is committed to ensuring the safety and wellbeing of all of its students. St Joseph's Specialist Trust will continue to be a safe space for all children to attend and flourish. The Headteacher will ensure that appropriate staff are on site and staff to pupil ratio numbers are appropriate, maximising safety.

St Joseph's Specialist Trust will refer to the Government guidance for education and childcare settings on how to implement social distancing and continue to follow the advice from Public Health England on handwashing and other measures to limit the risk of spread of coronavirus.

St Joseph's understands that the Covid-19 situation is likely to cause significant anxiety to our young people. In view of this, our therapies team continues to develop relevant materials to support in their understanding, through social stories and scripts for staff.

Consultations and professional's meetings

During this period, we will continue to work closely with our safeguarding partners and other agencies. To facilitate these meetings and discussions, we will continue to utilise technology and media. We will endeavour to comply with all statutory requests for information sharing. It's understood that information sharing with consent is needed. In cases where gaining this consent could/would put the child/young adult at risk then consent might not be sought. This would be to keep child/young adult safe. This decision would be completed with guidance and support from outside agencies such as social care/LADO.

Online Safety Resources

- DfE advice for schools: **Teaching online safety in schools**,
- The Oak National Academy have produced classroom resources to support teaching of the updated curriculum: **Free, time-saving teacher resources | Oak National Academy**,
- UK Council for Internet Safety (UKCIS) guidance: **Education for a connected world**
UKCIS guidance: **Sharing nudes and semi-nudes: advice for education settings working with children and young people**
- The UKCIS **external visitors guidance** will help schools and colleges to ensure the maximum impact of any online safety sessions delivered by external visitors,
- National Crime Agency's **CEOP Education Programme**: Protecting children and young people from online child sexual abuse through education. Including PSHE Association accredited **lesson plans and resources** aligned to the RSHE curriculum, regular e-bulletins

on new and emerging threats and **training for professionals on online child sexual abuse**, • Public Health England: **Every Mind Matters**, and • **Harmful online challenges and online hoaxes** - this includes advice on preparing for any online challenges and hoaxes, sharing information with parents and carers and where to get help and support. Guidance to understand safety considerations and legal responsibilities can be found if we choose to use Generative AI (either teacher-facing or pupil-facing) can be found at **Generative artificial intelligence in education**.

Review Schedule

Date	Changes	Reviewed by	Version	Trustee Ratification Due By	Trustee Ratification Received
October 2007	Policy Developed		V1	-	-
December 2008	v1.2	December 2008	v1.2	-	-
April 2010	v1.3	April 2010	v1.3	-	-
June 2011	Various	Alan Day	v1.4	-	-
June 2012	Changed references of Principal to Principal Inserted new Skin Map form (page 18)	Alan Day	v1.5	-	-
November 2013	Significant changes including addition of information regarding i) Female Genital Mutilation ii) Working Together to Safeguard Children March 2013 iii) and new Skin Map Appendix iv) Child Exploitation concerns and guidance.	Alan Day	v1.6	-	-
March 2014	Updated Appendix 4 – removed Simon Charleton from CPLO list	Liz Wright	v1.7	-	-
January 2015	Updated All Sections	Alan Day	v1.8	-	-
June 2015	Updated Extremism and Radicalisation Information	Alan Day	v1.9	-	-
September 2015	Updated	Alan Day	v2	-	-
November 2015	Minor amendments	Jay Shekleton	v2.1	-	-
May 2016	Updated DCPOs	Alan Day	v2.2	-	-
February 2017	Updated DCPOs and changed learner to student (no need for new version) Minor amends to Appendix 1 (no need for new version)	Alan Day Nicola Marklew		-	-
September 2017	Amended job titles Minor amends	Alan Day	V2.4	-	-
November 2017	Full update review	Alan Day	V2.5	-	-
May 2023	Amended named safeguarding lead	Jay Shekleton	V2.6	-	-
November 2023	Full update to reflect legislative changes	Jay Shekleton	V3	-	-

January 2019	Minor change to Trust	Alan Day	V3.1	-	-
November 2019	Full update review	Jay Shekleton	V3.2	-	-
August 2020	Full update/ review	Jay Shekleton	V3.3	-	-
August 2021	Updated following KCSIE 2021 release	Jay Shekleton	V3.4	-	-
March 2022	Updated following review	Jay Shekleton	V3.5	01/04/2022	
August 2022	Updated following KCSIE 2022 release	Jay Shekleton	V4	06/09/2022 by JS	
February 2025	Additions to Safeguarding Officers and change DSL to Nick Durling as Acting Safeguarding Lead	Annie Sutton	V4.1		
March 2025	Change Head of Safeguarding to Nick Durling	Annie Sutton	V4.2		
September 2025	Changes to KCSIE 2025	Alan Day	V4.3		
September 2024	No changes	Nick Durling	V4.4		
April 2025	Changes to Safeguarding Procedure	Nick Durling	V4.5		
September 2025	Some changes and updates	Alan Day	V4.6		
March 2026	Safeguarding Team and Updates	Nick Durling	V4.7		
June 2026	Updated Safeguarding Team	Nick Durling	V4.8		
August 2026	Updates made to be in line with KCSIE 2026	Nick Durling	V4.9		
October 2026	Updates made to be in line with KCSIE 2026	Nick Durling	V4.10		