



St. John Vianney School

Steps to Independence & Education for Life

THE MISSION STATEMENT OF SAINT JOHN VIANNEY SCHOOL

Saint John Vianney School recognises and accepts that each individual is unique and of equal value in God's eyes. We set out to provide a friendly and encouraging environment in which all are expected to give their best.

We promote the dignity and wholeness of all our children and young people.

Responding to the examples of Jesus Christ, we are a community of joy and sharing, encouraging everybody to learn and achieve.

Document Control	
Title	SAFEGUARDING POLICY
Author	Joe Cassidy, P McLoughlin, J Griffin March 2018
Viewed by Staff	
Ratified by Governors	
Reviewed by Governors	
Reviewed by Staff	
Signed by Head teacher	
Signed by Chairman	
Reviewed	
Review Date	
Related Documents	Pupil Welfare
Distribution	SJV server, Main Office, Staff Room, Catering Department, Meeting Room



Safeguarding Children and Young People Policy Document



CONTENTS

		Page
Section 1	Policy	3
Section 2	Role of the Designated Safeguarding Lead	7
Section 3	Role of the Governors	8
Section 4	Role of all School Staff	8
Section 5	Dealing with disclosures and concerns about a child or young person	9
Appendix 1	Understanding & Identifying abuse & neglect	12
Appendix 2	<i>Specific Safeguarding issues (KCSE 2016)</i>	14
Sub-headings	<i>1. Bullying and cyberbullying</i>	14
	<i>2. Children Missing from education</i>	14
	<i>3. Children missing from home or care</i>	15
	<i>4. Child Sexual Exploitation</i>	15
	<i>5. Domestic Violence</i>	16
	<i>6. Drugs</i>	17
	<i>7. Fabricated or Induced Illness</i>	17
	<i>8. Faith Abuse</i>	18
	<i>9. Female Genital Mutilation</i>	18
	<i>10. Forced marriage</i>	20
	<i>11. Gang and youth violence</i>	20
	<i>12. Honour Based Violence</i>	21
	<i>13. Preventing Radicalisation</i>	21
	<i>14. Mental Health</i>	22
	<i>15. Private Fostering</i>	22
	<i>16. Peer Abuse</i>	23
	<i>17. Relationship abuse</i>	23
	<i>18. Self-Harm</i>	24
	<i>19. Sexting/Youth Produced Sexual Imagery</i>	24
	<i>20. Trafficking</i>	25
	<i>21. Hate crime</i>	26
Appendix 3	Making a referral contacts	27
Appendix 4	Seven golden rules for information sharing	29
Appendix 5	Safeguarding references	30



Saint John Vianney School is committed to safeguarding and promoting the welfare of all its children and young people. We are committed to a practice which protects them and creates a culture of vigilance.

Section 1

Our safeguarding policy

This policy applies to “Everyone who works with children within Saint John Vianney School – including teachers, teaching assistants, support assistants, catering staff, lunchtime organisers, administration staff, school nurse, therapists, school social worker, connections worker and school caretaking staff has a responsibility for keeping them safe.” (Working Together to Safeguard Children DfE 2015)

Safeguarding and promoting the welfare of children is defined for the purposes of this policy 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; and taking action to enable all children to have the best outcomes. (Keeping Children Safe in Education 2016).

Purpose of the policy

- To protect children and young people who are educated at St John Vianney School.
- To provide staff, volunteers and governors with the overarching principles that guide our approach to safeguarding and child protection.

This policy and its appendices should be read alongside the following policies, procedures and appendices:-

- Allegations of abuse against staff Policy
- Care and Control Policy
- E Safety Policy
- Health and Safety Policy
- Positive Behaviour & Discipline Policy
- Recruitment, Selection and Induction Policy
- Whistle Blowing Policy

(All the above mentioned policies, procedures and appendices will be subject to review/ratification on annual basis).

Legal Framework

This policy has been drawn up on the basis of law and guidance that seeks to protect children, namely:-

- Children Act 1989
- Children's Act 2004
- Children Act 2014
- Safeguarding Vulnerable groups Act 2006
- Children and Families Act 2014
- Special educational needs and disability (SEND) code of practice
- Working together to safeguard children 2015
- Keeping children safe in education 2016.

St John Vianney School recognise that:-

- The welfare of the child is paramount as enshrined in the Children Act 1989
- All children regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues
- Working in partnership with children, young people, their parents, carers, and other agencies is essential in promoting young people's welfare.

We will seek to keep children and young people safe through:

1 E-safety

SJV will create an e-safe environment through

- Developing and implementing an effective e-safety policy and related procedures
- Staff follow phone usage guidelines. C&YP's access to phones is restricted during school hours.
- Staff supervise Network and Internet use.

2 Safer recruitment

SJV will ensure safer recruitment through

- Recruiting staff and volunteers safely ensuring all necessary checks are made
- Single central record maintained
- Making decisions about the suitability of the prospective employee based on checks and evidence including criminal record checks (DBS checks),

barred list checks and prohibition checks together with references and interview information.

- Interview panels include a member who is safer recruitment trained.

3 Staff training support and supervision

SJV will provide supportive staff training through

- Providing effective management for staff through supervision, support and training

4 Information handling and sharing

SJV will safely handle and share information by

- Recording information professionally and securely and sharing information about safeguarding and good practice with, children, their families, staff and volunteers via leaflets, posters and one to one discussions
- Using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, parents, families and carers appropriately

5 Allegations and whistleblowing management

SJV will provide an open and questioning environment through

- Using our policy and procedures to manage any allegations against staff and volunteers appropriately.
- Ensuring that we have effective complaints and whistleblowing measures in place

6 Providing an anti-bullying environment

SJV will create an emotionally safe environment through

- Valuing, listening to and respecting our C&YP
- Creating and maintaining an anti-bullying environment using our policy and procedure to help us deal effectively with any bullying that does arise.
-

7 Providing a physically safe environment

SJV will create a safe physical environment through

- Ensuring that we provide a safe physical environment for our children, young people, staff and volunteers by applying health measures in accordance with law and regulatory guidance
- Site manager checks and
- Termly H&S governor site visit

8 Care and control

SJV will ensure safe handling through

- Appointing a Designated Safeguarding Lead, a Deputy DSL and a Governor for safeguarding
- Annual training for all staff in the use of physical restraint procedures.

9 Children with special educational needs and disabilities

SJV will create a safe environment through recognising abuse and neglect in this group of children. These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs;
- Communication barriers and difficulties in overcoming these barriers.

Contact details

Designated Safeguarding Lead

Name Mr J Cassidy

Phone/email 0161 881 7843 j.cassidy@stjohnvianneyschool.co.uk

Deputy Designated Safeguarding Lead

Name Mrs Julie Griffin

Phone/email 0161 881 7843 j.griffin@stjohnvianneyschool.co.uk

Governor for Safeguarding

Name Mrs Carmel Milnes

Phone/email 0161 881 7843 admin@stjohnvianneyschool.co.uk

Trafford Safeguarding Children Board (TSCB)

www.tscb.co.uk/Home.aspx

CEOP

www.ceop.police.uk

NSPCC Helpline

0808 800 5000

Section 2

Role of the Designated Safeguarding Lead

St John Vianney School has appointed a Designated Safeguarding Lead who takes lead responsibility for safeguarding and child protection. Their name and picture is posted in school.

Duties are outlined in Keeping Children Safe in Education 2016, and include;

- Managing all safeguarding and child protection issues, through;
 - Good communication with school staff and external agencies where appropriate including the police, local authority and other relevant agencies.
 - Keeping safeguarding information secure, including plans, reviews and referrals. Maintaining detailed, accurate and secure, records and reports relating to all safeguarding incidents.
 - Ensuring a culture of listening to children and taking account of their wishes and feelings.
 - Acting as a source of support, advice, and expertise for staff.
 - Liaising with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies.
- Leading the evaluation, review and revision of the school Safeguarding policy and procedures.
- Ensure the child protection policy is available to staff and parents.
- Leading the induction of staff and volunteers, staff training and ensuring staff are aware of safeguarding policy and procedures.
- Providing advice, information and support relating to safeguarding issues to staff/adults in the school and the assistance from other pastoral staff to pupils.
- Understanding (and participating) in early help assessments and processes.
- Liaising with the local authority and local safeguarding children board
- Working in partnership with other agencies in referrals, to support and information sharing
- Referring cases of suspected abuse to the local authority as required;
- Supporting staff who make referrals to local authority children's social care.

Deputy Designated Safeguarding Lead (DDSL)

St John Vianney School has appointed a Deputy Designated Safeguarding Lead who deputises for the DSL in his absence. Their role is to support the DSL and to carry out the duties listed above. Their name and picture is posted in school.

Section 3

Role of the Governing Body

The governing body must have regard to guidance in Keeping Children Safe in Education 2016 which includes:-

- The governing body must ensure that the policies, procedures and training in the school comply with the law at all times.
- The governing body must ensure that appropriate policies and procedures in place in order for appropriate action to be taken in a timely manner to safeguard and promote pupils welfare. This should include a safeguarding policy and staff behaviour policy (code of conduct).
- The governing body should appoint an appropriate senior member of staff to the role of Designated Safeguarding Lead and at least one Deputy DSL.
- The governing body must ensure that these policies, along with part 1 of Keeping Children Safe in Education and the role of the DSL should be provided to all staff on induction.
- The Governing body must take a proportional risk based approach to the level of information that is provided to temporary staff and volunteers.
- The governing body should put in place appropriate safeguarding responses to children who go missing from education.

Section 4

Role of School Staff

- St John Vianney staff have a responsibility to provide a safe environment in which children can learn.
- All staff members should be aware of policies and systems within the school which supports safeguarding and these should be explained to them as part of staff induction policy. This should include the, safeguarding policy, and role of the Designated Safeguarding Lead (DSL).
- All staff are required to read at least Part one of Keeping Children Safe in Education (2016).
- All staff should undergo safeguarding and child protection training at induction. The training should be regularly updated. In addition all staff members will receive regular safeguarding and child protection updates (for example, via email, e-bulletins, staff meetings) as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.
- Have a good knowledge of what to do if a child makes a disclosure of abuse or neglect, to provide a supportive and timely response.
- Staff are advised to maintain an attitude of 'it could happen here' as far as safeguarding is concerned. Knowing what to look for is vital to the early identification of abuse and neglect. If staff members are unsure, they should always speak to the DSL.

- Staff should identify and report emerging problems, to prevent concerns escalating and to safeguard children. Staff will do this by liaising with the Designated Safeguarding Lead, sharing information with other professionals to support early identification and assessment and in some cases, acting as lead professional. (Keeping Children Safe in Education, 2016). When concerned about the welfare of a child, staff members should **always** act in the interest of the child.
- All school staff should be prepared to identify children who may benefit from early help. Early help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to the teenage. Detailed information on early help can be found in Chapter 1 of Working together to safeguard children. In the first instance, staff should discuss early help requirements with the designated safeguarding lead. Staff may be required to support other agencies and professionals in an early help assessment.

Section 5

Dealing with disclosures and concerns about a child or young person (including the referral process)

Step 1 – Record concern / seek advice from DSL

If a member of staff has a concern about a child, they should complete a detailed incident report on CPOMS.

The member of staff can liaise with the Designated Safeguarding Lead (DSL) or Deputy DSL around their concern to access support and guidance if they require this.

Staff involved should:-

Make careful notes and observations of the behaviour and emotional state of the child, outlining their concerns in the incident box.

- Tick the safeguarding category box.
- Highlight injuries using the body map.
- Record time and date.
- Upload any additional files or emails.
- Select other agencies that are involved.
- Record the pupil voice.
- Record action taken by staff already.

Step 2 – DSL to consider, make a decision and take action.

The DSL or Deputy DSL in school may undertake several courses of action and record the decisions on CPOMS action taken section. Actions may include;

- Contacting the child's parent.
- Contacting Children's Social Care Services in the child's local authority.
- Contacting the police.

- Uploading any relevant documents into the action taken section.
- The Designated Safeguarding Lead (DSL) may feel further monitoring and observing is required at this time. The DSL may give staff members a role in observation and monitoring the child.

If a staff member feels that immediate action is required at step 1, it is their responsibility to do this. All staff have the ability to contact Children's Social Care Services to discuss their concerns, even when DSL feels this is not required. It is the responsibility of all staff to follow up their concerns and to make a referral if they feel it is needed and this action has not been undertaken by the school, if a staff member makes a referral they must inform the DSL of the referral as soon as possible. (Working Together 2015).

Step 3 – Referral / Information sharing

If a referral to Children's Social Care Services has been made, this should be followed up in writing within 48 hours. This will include a detailed and completed referral form appropriate to the child's local authority as well as any other information i.e. CAF, Early Help, chronology, observations. This information should be kept securely on CPOMS.

Step 4 – Follow up / Record outcome

A decision on the next course of action will be made by Children's Social Care Services the next working day. The school should be informed about the course of action. If the school is not informed they have a responsibility to follow this up.

The school should record the decision made by Children's social care services on CPOMS.

Any staff involved in the reporting of concerns or making a referral should maintain confidentiality at all times. Information should not be shared with anyone other than the Designated Safeguarding Lead or Deputy DSL in school and other appropriate people involved with the concern.

Guidance when a child makes a disclosure.

<u>Staff should try to;</u>	<u>Staff should try to avoid</u>
<ul style="list-style-type: none"> • Tell the child you are glad they told you and acknowledge that they have been very brave telling you. Reassure them that what has happened is not their fault. • Questions should be limited to those which are needed to confirm or allay suspicion, i.e. how the injury occurred. It's okay to use open questions such as what, where, how. Or tell, explain, describe. • The emphasis should be on LISTENING TO THE CHILD • • Be honest about your position, who you will tell and why. • Make sure the child knows what you are doing next. • Make careful, factual, thorough and accurate notes. • Refer to the Designated Safeguarding Lead. 	<ul style="list-style-type: none"> • Leading questions or intimate examinations could hamper any investigation by the Police or Children's Social Care Services. • DO NOT ask a child to undress or show any signs of abuse they say has been inflicted upon them • DO NOT take a photograph of injuries. This should only be done by a trained medical person

We are committed to working with parents positively, openly and honestly. We ensure that all parents are treated with respect, dignity and courtesy. We respect parents' rights to privacy and confidentiality and will not share sensitive information until we have permission or it is necessary to do so to protect a child.

St John Vianney will share with parents any concerns we may have about their child **unless** to do so may place a child at risk of harm.

Appendix 1

Understanding and Identifying Abuse and Neglect

What to do if you are worried a child is being abused 2015 describes some of the signs that might be indicators of abuse or neglect.

[https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What to do if you are worried a child is being abused.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_are_worried_a_child_is_being_abused.pdf)

Abuse and neglect are forms of maltreatment – a person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.

Physical abuse:

Deliberately physically hurting a child.

It might take a variety of different forms, including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child. Physical harm may also be caused when a parent/carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse:

The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children to frequently feel frightened or in danger. It may involve the exploitation or corruption of children.

Sexual abuse:

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

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

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

You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong. Sexual abuse can have a long-term impact on mental health.

Neglect:

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/carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment).
- Protect a child from physical and emotional harm or danger.
- Ensure adequate supervision (including the use of inadequate care-givers).
- Ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action. However, while you may be concerned about a child, neglect is not always straightforward to identify.

Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

Appendix 2

Other Specific Safeguarding Issues for Keeping Children Safe in Education

1. Bullying Including Cyberbullying

There is no legal definition of bullying, however, it is usually defined as behaviour that is repeated; Intended to hurt someone either physically or emotionally; Often aimed at certain groups, for example because of race, religion, gender or sexual orientation.

It takes many forms and can include: Physical assault, teasing, making, threats, name calling and cyberbullying – (bullying via mobile phone or online, for example email, social networks and instant messenger) (Preventing and Tackling Bullying 2017).

Some forms of bullying are illegal and should be reported to the police. These include: violence or assault, theft, repeated harassment or intimidation, for example name calling, threats and abusive phone calls, emails or text messages, hate crimes (Preventing and Tackling Bullying 2017).

St John Vianney has a separate policy to address bullying, the Anti bullying policy. Bullying is included in the Safeguarding and Child Protection policy as all staff have a responsibility to support children who are bullied and make appropriate provision for a child's needs. Bullying, especially if left unaddressed, can have a devastating effect on individuals. It can be a barrier to their learning and have serious consequences for their mental health.

Where bullying outside school is reported to school staff, it should be investigated and acted on. The head teacher should also consider whether it is appropriate to notify the police or anti-social behaviour coordinator in their local authority of the action taken against a pupil. If the misbehaviour could be criminal or poses a serious threat to a member of the public, the police should always be informed.

Link to guidance "Preventing and Tackling Bullying: Advice for head teachers, staff and governing bodies", (2017)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/623895/Preventing_and_tackling_bullying_advice.pdf

2. Children Missing From Education

Children missing education are children of compulsory school age who are not registered pupils at a school and are not receiving suitable education otherwise than at a school. Children missing education are at significant risk of underachieving, being victims of harm, exploitation or radicalisation, and becoming NEET (not in education, employment or training).

Schools must monitor pupils' attendance through their daily register. If a pupil fails to attend on the agreed or notified date, the school should undertake reasonable enquiries to establish the child's whereabouts and consider notifying the local authority at the earliest opportunity. St John Vianney School has a safeguarding duty in respect of our pupils, and as part of this we are required to investigate any unexplained absences

Link to guidance "Children Missing in Education, Statutory Guidance for local authorities" (2016);

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550416/Children_Missing_Education_-_statutory_guidance.pdf

3. Children Missing From Home Or Care

When a child goes missing or runs away they are at risk. Safeguarding children therefore includes protecting them from this risk. Local authorities are responsible for protecting children whether they go missing from their family home or from local authority care. . There are particular concerns about the links between children running away and the risks of sexual exploitation. Missing children may also be vulnerable to other forms of exploitation, to violent crime, gang exploitation, or to drug and alcohol misuse.

St John Vianney School has a role to play in providing relevant data and such as attendance and absence data and sharing appropriate information about a child with relevant agencies (Statutory guidance on children who run away or go missing from home or care, 2014).

Link to guidance "Statutory guidance on children who run away or go missing from home or care" (2014);

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/307867/Statutory_Guidance_-_Missing_from_care_3_.pdf

4. Child Sexual Exploitation

Child Sexual Exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. Children who are sexually exploited are the victims of sexual abuse and should be safeguarded from further harm.

It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation doesn't always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.

Indicators can include:-

- Children who appear with unexplained gifts or new possessions;
- associating with other young people involved in exploitation
- older boyfriends or girlfriends
- sexually transmitted infections or pregnancy
- changes in emotional well-being
- misuse of drugs and alcohol
- missing for periods of time or regularly come home late
- regularly missing school or education or not taking part in education

Keeping Children Safe in Education (2016) suggests that, additionally, staff should access "What to do if you're worried a child is being abused" (2015); [https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What to do if you re worried a child is being abused.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

5. Domestic Violence

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

Controlling Behaviour

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

Adolescent to parent violence and abuse (APVA) is a hidden form of domestic violence and abuse that is often not spoken about. Staff should liaise with the DSL and follow the school safeguarding process if they have concerns regarding this.

Link to guidance Adolescent to parent violence and abuse (APVA):

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/420963/APVA.pdf

Operation Encompass is in Greater Manchester, and involves the police reporting to schools before 9am on a school day when a child or young person has been involved or exposed to a domestic abuse incident the previous evening.

<http://www.operationencompass.org/wp-content/uploads/2017/03/A-Background-Information-Booklet-2017.pdf>

6. Drugs

There are serious risks involved in drug use but most of those who try illegal drugs do not usually suffer any long-term harm to their health (Talk to Frank website). St John Vianney School staff should follow the school internal safeguarding process (Appendix 3), with regard for "DfE and ACPO drug advice for schools" (2012). Staff should also consider the guidance from the DfE "**Searching, screening and confiscation Advice for headteachers, school staff and governing bodies**" (2014);

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/554415/searching_screening_confiscation_advice_Sept_2016.pdf

Link to "DfE and ACPO drug advice for schools" (2012);

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/270169/drug_advice_for_schools.pdf

7. Fabricated or Induced Illness

Fabricated or induced illness (FII) is a rare form of child abuse. It occurs when a parent or carer, exaggerates or deliberately causes symptoms of illness in the child.

There are three main ways of the carer fabricating or inducing illness in a child. These are not mutually exclusive and include:

- Fabrication of signs and symptoms. This may include fabrication of past medical history;
- Fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents;
- Induction of illness by a variety of means

There are a number of factors that teachers and other school staff should be aware of that can indicate that a pupil may be at risk of harm. Some of these factors can be:

- Frequent and unexplained absences from school, particularly from PE lessons.
- Regular absences to keep a doctor's or a hospital appointment.
- Repeated claims by parent(s) that a child is frequently unwell and that he/she requires medical attention for symptoms which, when described, are vague in nature, difficult to diagnose and which teachers/ early years staff have not themselves noticed eg headaches, tummy aches, dizzy spells, frequent contact with opticians and/or dentists or referrals for second opinions.

The child may disclose some form of ill-treatment to a member of staff or might complain about multiple visits to the doctor. Either the child or his or her parent(s) may relate conflicting or patently untrue stories about illnesses, accidents or deaths in the family. Where there is a sibling in the same institution, teachers/early years staff should discuss their concerns with each other to see if children of different ages in the same family are presenting similar concerns.

Link to guidance “Safeguarding children in whom illness is fabricated or induced”;

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/277314/Safeguarding_Children_in_whom_illness_is_fabricated_or_induced.pdf

8. Faith Abuse

Staff should have an awareness of the issue of child abuse linked to faith or belief and to encourage practical steps to be taken to prevent such abuse.

Belief in witchcraft, spirit possession and other forms of the supernatural can lead to children being blamed for bad luck, and subsequently abused. Fear of the supernatural is also known to be used to make children comply with being trafficked for domestic slavery or sexual exploitation.

Such abuse generally occurs when a parent/carer views a child as being "different", because of perceived disobedience, independence, bed-wetting, nightmares, illness or disability. A parent / carer may attribute this difference to the child being "possessed" or involved in "witchcraft". Children could be more vulnerable if there is family stress and/or a change in the family structure. Any concerns about a child which arise in this context must be taken seriously.

Staff can find details of religions and further guidance via the Greater Manchester Safeguarding Partnership online procedures.

http://greatermanchesterscb.proceduresonline.com/chapters/p_abuse_linked_spiritual.html

Link to guidance “National action plan to tackle child abuse linked to faith or belief” (2012);

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/175437/Action_Plan_-_Abuse_linked_to_Faith_or_Belief.pdf

9. Female Genital Mutilation (FGM) And Forced Marriage

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.

Professionals need to be alert to the possibility of a girl being at risk of **FGM**, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM:

- Knowing that the family belongs to a community in which FGM is practised and is making preparations for the child to take a holiday, arranging vaccinations or planning absence from school;
- The child may also talk about a special procedure/ceremony that is going to take place or a special occasion to 'become a woman'.

Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.

Indicators that FGM may already have occurred:

- Prolonged absence from school or other activities with noticeable behaviour change on return, possibly with bladder or menstrual problems;
- Difficulty walking, sitting or standing, and look uncomfortable;
- Spending longer than normal in the bathroom or toilet
- Complaining about pain between their legs, or talking of something somebody did to them that they are not allowed to talk about.

Where FGM has taken place, since 31 October 2015 there has been a statutory reporting duty placed on teachers, to report to the police where they discover, (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18.

All Staff in St John Vianney School must personally report FGM to the Police and Designated Safeguarding Lead/Deputy Designated Safeguarding Lead

Unless the teacher has a good reason not to, they should also still consider and discuss any such case with the school DSL and involve children's social care as appropriate. The duty does not apply in relation to at risk or suspected cases (i.e. where the teacher does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is 18 or over.

Link to guidance:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/512906/Multi_Agency_Statutory_Guidance_on_FGM_-_FINAL.pdf

10. Forced Marriage

A forced marriage is where one or both people do not (or in cases of people with learning disabilities, cannot) consent to the marriage and pressure or abuse is used.

The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they're bringing shame on their family). Financial abuse (taking your wages or not giving you any money) can also be a factor.

Potential warning signs or indicators can include, but are not limited to;

- Absence and persistent absence
- Request for extended leave of absence and failure to return from visits to country of origin
- Fear about forthcoming school holidays
- Surveillance by siblings or cousins at school
- Decline in behaviour, engagement, performance or punctuality
- Poor exam results
- Being withdrawn from school by those with parental responsibility.
- Not allowed to attend extra-curricular activities.
- Sudden announcement of engagement to a stranger.
- Prevented from going on to further/higher education.

The **One Chance Rule**. The idea behind the **One Chance Rule** is that you might only have **one chance** to speak to a potential victim and, therefore, have **one chance** to save a life. The Designated Safeguarding Lead and Deputy Safeguarding Lead should be informed immediately so they can make a referral to the forced marriage unit.

Link to guidance, "The Right to Choose: Multi-agency statutory guidance for dealing with forced marriage", (2014);

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/322310/HMG_Statutory_Guidance_publication_180614_Final.pdf

11. Gang and Youth Violence

Staff in St John Vianney should be alert to the potential of children being affected by gang or youth violence. There could be a potential risk of harm to the child as a victim, a perpetrator or both - 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 can be at risk of significant harm through physical, sexual and emotional abuse. Girls may be particularly at risk of sexual exploitation.

Potential indicators may include:-

A sudden loss of interest in school

- Decline in academic achievement
- Starting to know new or unknown slang words
- Graffiti style 'tags' on possessions, school books, walls
- A new nickname
- Adopting codes of group behaviour

Link to guidance from Greater Manchester Safeguarding Partnership;
http://greatermanchesterscb.proceduresonline.com/chapters/p_sg_ch_yp_gan_g_act.html

12. Honour-Based Violence

The terms "honour crime" or "honour-based violence" or "izzat" embrace a variety of crimes of violence (mainly but not exclusively against women), including assault, imprisonment and murder where the person is being punished by their family or their community. They are being punished for actually, or allegedly, undermining what the family or community believes to be the correct code of behaviour. In transgressing this correct code of behaviour, the person shows that they have not been properly controlled to conform by their family and this is to the "shame" or "dishonour" of the family. It can be distinguished from other forms of abuse, as it is often committed with some degree of approval and/or collusion from family and/ community members. Victims will have multiple perpetrators not only in the UK; HBV can be a trigger for a forced marriage. (The Right to Choose: Multi-agency statutory guidance for dealing with forced marriage, 2014).

13. Preventing Radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. Protecting children from the risk of radicalisation is part of St John Vianney's wider safeguarding duties, and is similar in nature to protecting children from other forms of harm and abuse.

All staff should have due regard to the need to prevent people from being drawn into terrorism, under the Counter Terrorism and Security Act 2015. St John Vianney staff will work alongside local authorities to safeguard children from radicalisation. The government Prevent Strategy also identifies school as a key place for children and young people to challenge extremism and ideology.

Questions to consider	Potential risk factors
<ul style="list-style-type: none"> - Radicalisation occurs in a similar way to 'Grooming'. - Is the child or young person at risk of being radicalised? - Are they likely to be exposed to terrorist ideology, or extremist ideas? 	<ul style="list-style-type: none"> - Underachievement - Possession of extremist literature - Poverty - Social exclusion - Traumatic events - Global or national events - Religious conversion - Change in behaviour

<ul style="list-style-type: none"> - Is the child or young person using language that suggests they are involved or exposed to terrorist ideology? - Is the child behaving differently? 	<ul style="list-style-type: none"> - Extremist influences - Conflict with family over lifestyle - Victim/witness to race/hate crimes - Rejection by peers, family, social or faith groups.
-	-

All staff members will access internal training using e-learning prevent home office resources.

www.elearning.prevent.homeoffice.gov.uk

Where there is a radicalisation concern, a referral may be made to the Channel Programme.

<https://www.gov.uk/government/publications/channel-guidance>

Link to educate against hate website, which provides teachers, parents, and school leaders with practical advice and information on protecting children from extremism and radicalisation:-

<http://educateagainsthate.com>

14. Mental Health

Some children experience a range of emotional and behavioural problems that are outside the normal range for their age or gender. These children and young people could be described as experiencing mental health problems or disorders. In order to help their pupils succeed, staff in school have a role to play in supporting them to be resilient and mentally healthy. This can include identifying children who may benefit from additional support in school or through external services such as counselling or Healthy Young Minds / CAMHS. Additionally staff have a role in supporting children to develop social skills, liaising with parents and carers and promoting a culture of positive mental health (Mental Health and behaviour in Schools, 2016).

Link to guidance "Mental health and behaviour in schools. Departmental advice for school staff" (2016);

[https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/Mental Health and Behaviour - advice for Schools 160316.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/Mental_Health_and_Behaviour_-_advice_for_Schools_160316.pdf)

15. Private Fostering

A private fostering arrangement is essentially one that is made privately (that is to say without the involvement of a local authority) for the care of a child under the age of 16 (under 18, if disabled) by someone other than a parent or close relative - grandparent, brother, sister, uncle or aunt (whether of full or

half blood or by affinity (marriage or civil partnership, or step parent) - with the intention that it should last for 28 days or more

Link to Greater Manchester Safeguarding Partnership guidance;

http://greatermanchesterscb.proceduresonline.com/chapters/p_privately_fost_ch.html

16. Peer on Peer Abuse

Peer-on-peer abuse is any form

- Physical
- Sexual
- Emotional
- Financial abuse
- Coercive control

When exercised between children and within children's relationships (both intimate and non-intimate).

Peer-on-Peer Abuse can take various forms, including:

- Serious bullying (including cyber-bullying),
- Relationship abuse, domestic violence, child sexual exploitation,
- Youth and serious youth violence,
- Harmful sexual behaviour, and/or gender based violence.

Procedure for dealing with allegation of Peer on Peer Abuse

Incident/allegation to be recorded on CPOMS

Designated Safeguarding Lead will follow through the discussions of the incident/allegation and make a referral where appropriate, if the allegations indicates that a potential criminal offence has taken place the police and social services will become involved.

Parents/Carers of both student(s) being complained about and alleged victim(s) will be informed and kept updated on the progress of the referral.

17. Relationship Abuse

Abusive behaviour in relationships between young people can take the form of physical, emotional sexual and financial abuse, where the young people have been or are in an intimate relationship. This includes long term boyfriend or girlfriend relationships to one-off encounters.

It can involve control of who or where a young person is 'allowed' to what to see or who to communicate with e.g. through social networking pages or mobile phone. Such control leads to isolation from the peer group and trusted friends in whom a young person might confide. Coercion may be used to force sexual activity. Young people may also be coerced into sending inappropriate images or 'sexting' via social media. Sexting is "the exchange of sexual

messages and images, creating, sharing and forwarding sexually suggestive nude or nearly nude images through mobile phones and the internet”.

School staff have a duty to safeguard and promote the welfare of children under the Education Act 2002. Any adult in school who is concerned that a pupil may be experiencing relationship abuse must report their concerns to the Designated Safeguarding Lead in the school, in line with the school’s Safeguarding policy and procedures.

18. Self Harm

Self-harm is the term used to describe a situation where an individual deliberately initiates behaviour with the intention that it will cause them harm.

People self harm in different ways, and types of self-harm include: cutting; burning; banging or scratching one's own body; breaking bones; hair pulling; ingesting toxic substances or objects; ligature strangulation; cyber Self-Harm / 'Self-Trolling.

Self harm is not necessarily about suicide, it can be used as a coping mechanism. It is not “just attention seeking” and should be taken seriously.

If a member of staff becomes aware that self harm has occurred or the intent to self harm has been expressed – the member of staff should try to keep calm, give reassurance to the child and initially ensure appropriate medical attention is sought. The member of staff should then continue to follow the internal school flow chart (appendix 3) to pass on concerns which will then instigate the Greater Manchester Children’s Safeguarding Board Self-Harm pathway (under 18’s only);

http://greatermanchesterscb.proceduresonline.com/pdfs/gen_pw.pdf

If a young person has a self-inflicted injury (but has not taken medication / an overdose), he or she should not be sent to a hospital Emergency Department (ED) unless a first-aider has confirmed that the young person has injuries requiring emergency medical treatment, or this has been advised by a CAMHS team member or other medical practitioner. Injuries that require emergency medical treatment include: burns that are blistering or red, cuts that are deep and / or bleeding profusely, where the young person has lost consciousness or has recently overdosed or ingested harmful liquids (GMSP).

19. Sexting/Youth Produced Sexual Imagery

Youth Produced Sexual Imagery is a term that was introduced in guidance by UK Council for Child Internet Safety (2016) instead of “sexting”.

Youth produced sexual imagery includes:-

- A person under the age of 18 creating and sharing sexual imagery of themselves with a peer under the age of 18
- A person under the age of 18 sharing sexual imagery 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 who is in possession of sexual imagery created by another person under the age of 18

Youth produced sexual imagery **does not** cover:

- The sharing of sexual imagery of people under 18 by adults as this constitutes child sexual abuse and schools should always inform the police.
- Young people under the age of 18 sharing adult pornography or exchanging sexual texts which don't contain imagery.

Making, possessing and distributing any imagery of someone under 18 which is 'indecent' is illegal. This includes imagery a child makes themselves if they are aged under 18 or a vulnerable adult. It is an offence to possess, distribute, show and make indecent images of children. The Sexual Offences Act 2003 (England and Wales) defines a child, for the purposes of indecent images, as anyone under the age of 18.

All incidents involving youth produced sexual imagery should be responded to in line with the school's safeguarding and child protection policy.

When an incident involving youth produced sexual imagery comes to the school's attention:

- The incident should be referred to the DSL as soon as possible
- The DSL should hold a meeting with appropriate school staff
- There should be subsequent interviews with the young people involved (if appropriate)
- Parents should be informed at an early stage and involved in the process unless there is good reason to believe that involving parents would put the young person at risk of harm
- At any point in the process if there is a concern a young person has been harmed or is at risk of harm a referral should be made to children's social care and/or the police immediately.

Link to "Sexting in schools and colleges: Responding to incidents and safeguarding young people", (2016);

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/609874/6_2939_SP_NCA_Sexting_In_Schools_FINAL_Update_Jan17.pdf

20. Trafficking

"Child trafficking": Human trafficking is defined by the Office of the United Nations High Commissioner for Refugees (United Nations Commissions Refugee

Agency UNHCR) as a process that is a combination of three basic components (Greater Manchester Safeguarding Procedures GMSP guidance):

1. Movement (including within the UK)
2. Control, through harm / threat of harm or fraud
3. For the purpose of exploitation.

Although human trafficking often involves an international cross-border element, it is also possible to be a victim of modern slavery within your own country. Children cannot give consent to being exploited therefore the element of coercion or deception does not need to be present to prove an offence.

Some signs a child has been trafficked include

- Spending a lot of time doing household chores
- Rarely leaves the house
- Lives in substandard accommodation
- Unsure which town or city they are in
- Unable or reluctant to give details of accommodation or personal details.

Link to guidance, Greater Manchester Safeguarding Procedure;

http://greatermanchesterscb.proceduresonline.com/chapters/p_sg_ch_trafficked.html

21. Hate crime

A Hate Crime is any behaviour that someone thinks was caused by hostility, prejudice or hatred of:

- **Disability** - including physical impairments, Mental Health problems, learning disabilities, hearing and visual impairment
- **Gender identity** - includes people who are transgender, transsexual or transvestite
- **Race** - skin colour, nationality, ethnicity or heritage
- **Religion** - faith or belief including people without a religious belief
- **Sexual Orientation** - people who are lesbian, gay, bisexual or heterosexual
- There are many different types of Hate Crimes. These can include:-
 1. **Physical attacks** - such as physical assault, damage to property, offensive graffiti
 2. **Threat of attack** – including offensive letters, abusive or obscene telephone calls or text messages, groups hanging around to intimidate and unfounded, malicious complaints
 3. **Verbal abuse or insults** – offensive leaflets and posters, abusive gestures, offensive comments and/or name calling

<https://educateagainsthate.com/>

<https://www.gov.uk/government/publications/hate-crime-action-plan-2016>

Appendix 3

Making a referral contacts

In the event of a referral being made to Children's Social Care Services, it is the child's own Local Authority who will be contacted.

In the event of an adult within the school being accused of the abuse of a child, Trafford Authority should be contacted;

Tel: 0161 912 5124

Manchester

Manchester Central Service – Safeguarding

Referral by:

Telephone 0161 234 5001

FAX 0161 255 8266

E-MAIL MCSreply@manchester.gov.uk

Stockport

George Gilmore Service Manager

Tel: 474 5658

Sanderling Building

Bird Hall Lane

Cheadle Heath

SK3 0RF

Trafford

Multi Agency Referral & Assessment Team (MARAT)

Duty Team – Safeguarding

Tel: 912 5125

Quay West

Trafford Wharf Road

Trafford Park

M17 1HH

Tameside

Tameside B.C.

Tel: 342 3212

Duty Officer

The Denton Centre

Acre Street

Denton

M32 2BW

Salford

Referral & Initial Assessment Team (RIAT) Tel: 603 4500

3rd Floor

Salford Civic Centre

Chorley Road

Swinton

M27 5DA

Appendix 4

The seven golden rules to sharing information

1. Remember that the Data Protection Act 1998 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4. Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be certain of the basis upon which you are doing so. Where you have consent, be mindful that an individual might not expect information to be shared.
5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see principles).

Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose

Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (2015)

Appendix 5

Safeguarding References

- **Keeping Children Safe in Education (September 2016)**
- TSCB Safeguarding Children Procedures (2009)
- Children Missing in Education, Statutory Guidance for local authorities" (2016);
- DfE and ACPO drug advice for schools (2015)
- Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, young People, parents and Carers (2015)
- Guidance for Safe working Practice for the Protection of children and staff in education settings (2009)
- Greater Manchester Safeguarding Partnership online procedures
- Mental health and behaviour in schools. Departmental advice for school staff (2016)
- Multi Agency Statutory Guidance on FGM (2015)
- National action plan to tackle child abuse linked to faith or belief" (2012);
- NSPCC guidance and resources
- Preventing and Tackling Bullying: Advice for headteachers, staff and governing bodies (2017)
- Safeguarding children in whom illness is fabricated or induced
- Safeguarding Disabled Children: Practice guidance (July 2009)
- Searching, screening and confiscation Advice for headteachers, school staff and governing bodies (2014)
- Sexting in schools and colleges: Responding to incidents and safeguarding young people", (2016)

- Statutory guidance on children who run away or go missing from home or care” (2014);
- TSCB Safeguarding Children Procedures (2009)
- The Right to Choose: Multi-agency statutory guidance for dealing with forced marriage”, (2014);
- Working Together to Safeguard Children (DfE 2015)
- What to do if you are worried a child is being abused (DfE 2006)

Websites:

www.education.gov.uk

www.tscb.org.uk

www.cwdcouncil.org.uk