

# Safeguarding and Child Protection Policy

This policy explains what One-Eighty will do to keep the children and young people who use our services safe from harm.

Approval Date: Review Date: September 2022 September 2023

Description	This policy explains what One-Eighty will do to keep the children and young people who use our services
	safe from harm.
Policy audience	Trustees and staff
	Volunteers and Students
Organisation contact:	Charlie Lewis-Pryde
Other related policies and procedures:	Whistleblowing Policy;
	Lone Working Policy;
	Recording Storing, and Sharing Information; Code of
	Conduct for Staff and Volunteers; Social Media &
	Digital Safeguarding; Anti-harassment and Bullying
	Policy; Safe Touch & Positive Handling Policy
Approved by Trustees:	
Frequency of review:	1 year
Next review date:	September 2023

#### Our Vision:

For every child to enjoy a positive and flourishing relationship with education.

#### Our Mission:

One-Eighty exists to connect vulnerable children and young people (aged 4-18) with a positive learning experience through working on patterns of thinking, behaviours and emotions that hinder learning.

#### Our Values:

- We are goal orientated and outcome focused.
- We are innovative in our approach.
- We offer wrap-around support.
- We are holistic.
- We partner with other agencies to develop a creative support package.
- We see therapeutic work as short-term and intensive.
- We look to psychology research to influence our ideas.
- We are a family.
- We mentor.
- We engage with people where they are at.
- We see families as central to behavioural change.
- We see education as a key to future success.
- We see schools as the anchor for community cohesion.
- We believe children and young people can develop their resilience.
- We are hopeful.

#### About One-Eighty:

One-Eighty is an innovative, and outcomes-driven psychology-focused service, that empowers young people (aged 4-18) and their families to improve their mental health and engage with education. We exist to connect vulnerable young people with a positive learning experience by working with them on patterns of thinking, behaviours and emotions to enhance their learning. This is primarily achieved through our individually tailored interventions and projects, which use Cognitive Behavioural Therapy (CBT) and Dialectical Behavioural Therapy (DBT) as the foundations for support

# Safeguarding and Child Protection Policy

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#### Part 1

#### <u>Purpose</u>

One-Eighty works with children and young people to provide a range of intervention services to increase engagement with learning including one-to-one interventions, and preventative mental health group-based projects. The purpose of this policy is to:

- Set out what One-Eighty will do to keep children and young people, who use our services, safe from harm.
- Provide parents, staff, students, trustees, and volunteers with the overarching principles that guide our approach to child protection.

This policy applies to anyone working on behalf of One-Eighty, including managers and the board of trustees, paid staff, volunteers, sessional workers, and students (for the purpose of this document these groups of people will be referred to as 'staff'). This is also extended to independent contractors who are undertaking direct work with children on behalf of the charity.

#### **Legal Framework**

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children in England. A summary of the key legislation and guidance is available from www.nspcc.org.uk/childprotection.

#### We believe that:

- Children and young people should never experience abuse of any kind.
- We have a responsibility to promote the welfare of all children and young people, to keep them safe and to practise in a way that protects them.

#### We recognise that:

- The welfare of the child is paramount.
- All children, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation 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 to promote young people's welfare.

#### We seek to keep children and young people safe by:

- Valuing, listening to and respecting them.
- Appointing a nominated Overall Designated Safeguarding Lead (Charlie Lewis-Pryde),
  Deputy Safeguarding Leads (Imran Mirza and Cerian Townsend-Allen), additional
  Designated Safeguarding Leads (Kieren Smith and Gemma Lund-Yates) and a Lead
  Trustee for Safeguarding (Jonathan Fisher).

- Developing child protection and safeguarding policies and procedures that reflect best practice.
- 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.
- Sharing information about child protection and safeguarding best practice with children, their families, staff and volunteers through publicity, project work and one-to-one discussions.
- Recruiting staff and volunteers safely, ensuring all necessary checks are made.
- Providing effective management for staff and volunteers through supervision, support, training and quality assurance measures.
- Implementing a code of conduct for staff and volunteers.
- Using our procedures to manage any allegations against staff and volunteers appropriately.
- Ensuring that we have effective complaints and whistleblowing measures in place.
- Ensuring that we provide a safe physical environment for our children, young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance.
- Recording and storing information professionally and securely.

#### **Safeguarding Procedures**

#### **Dealing with Disclosures**

If a young person asks to speak to you about a problem, do not promise confidentiality but explain that it may be necessary to consult a colleague.

#### Receive

Always stop and listen straight away to someone who wants to tell you about incidents or suspicions of abuse. Listen quietly and actively, giving your undivided attention. Allow silences when needed. Do not show shock or disbelieve and take what is said seriously.

#### Reassure

Stay calm, make no judgements, empathise. Never make a promise that you can keep what a young person has said a secret. Give reassurance that only those who need to know will be told. Reassure the young person that they were right to tell you.

#### React

React to the young person only as far as is necessary for you to establish whether or not you need to refer this matter, but don't interrogate for full details.

Do not ask leading questions – keep the questions open, e.g. 'is there anything else you want to say?'

Do not criticize the perpetrator; the young person may have affection for them.

Explain what you will do next – inform designated staff member, keep in contact.

#### Record

If possible, make brief notes about what they are actually telling you at the time. Keep these notes, however rough they are. If you are unable to make notes at the time write down what was said as soon as you can.

Try to record what was actually said by the young person rather than your interpretation of what they are telling you.

Record the date, time, place and any noticeable nonverbal behaviour.

#### Report

Report the incident to the Designated Safeguarding Lead (DSL) and do not tell any other adults or children what you have been told until given further advice to.

Never attempt to carry out an investigation of suspected abuse by interviewing the young person or any others involved. This is a highly skilled role and any attempts by yourself could affect possible criminal proceedings.

#### What to do if you have <u>concerns</u> about a child or young person:

If staff members have any concerns about a child (as opposed to a child being in immediate danger) they will need to decide what action to take. Where possible, there should be a conversation with the DSL to agree a course of action, although any staff member can make a referral to children's social care. Other options could include a referral to specialist services or early help services and should be made in accordance with the referral threshold set by the Oxfordshire Safeguarding Children Board. <a href="http://www.oscb.org.uk/">http://www.oscb.org.uk/</a>.

If anyone other than the DSL makes the referral, they should inform the DSL as soon as possible.

If after a referral the child's situation does not appear to be improving, the DSL (or the person that made the referral) should press for re-consideration to ensure their concerns have been addressed and, most importantly, that the child's situation improves.

If early help is appropriate the DSL should support the staff member in liaising with other agencies and setting up an inter-agency assessment as appropriate.

If early help and or other support is appropriate the case should be kept under constant review and consideration given to a referral to children's social care if the child's situation doesn't appear to be improving.

If a disclosure is made to you (or something in the session has given you cause for concern about the child) whilst in a school setting you must inform the DSL in the school as soon as possible and before leaving the school, then contact One-Eighty's DSL as well. Take down the contact details for the DSL at the school so One-Eighty can liaise with them about next steps.

If you become aware that an act of Female Genital Mutilation (FGM) appears to have been carried out on a girl under the age of 18 you must report this to the police, rather than seeking

support from a DSL first. Instead, after contacting the police, contact the DSL as soon as possible so they can support you.

#### What to do if a child or young person is in immediate danger or is at risk of harm:

If a child is in immediate danger or is at risk of harm a referral should be made to children's social care and/or the police immediately. Anyone can make a referral. Where referrals are not made by the DSL, the DSL should be informed, as soon as possible, that a referral has been made.

#### What to do if you have concerns about another member of staff:

If our staff members have concerns about another staff member then this must be referred to the Overall Designated Safeguarding Lead (Charlie Lewis-Pryde). Where there are concerns about the Overall Designated Safeguarding Lead this should be referred to the chair of the Trustee Board (Tina Elder) or the nominated Safeguarding trustee (Jonathan Fisher) if inappropriate to raise with the overall DSL first.

#### What to do if you have concerns about safeguarding practices at One-Eighty:

All our staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in One-Eighty's safeguarding regime and that such concerns will be taken seriously by the Senior Leadership Team.

Appropriate whistleblowing procedures, which are suitably reflected in staff training and staff behaviour policies, should be in place for such concerns to be raised with One-Eighty's Senior Leadership Team.

Where a staff member feels unable to raise an issue with management or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them:

- General guidance can be found at- Advice on whistleblowing
- The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. 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

#### Part 2

#### **Key Responsibilities**

#### **Key Contacts at One-Eighty**

The Chief Executive Officer is Susie Besant. She is also a VCS (Voluntary and Community Sector) representative on the Oxfordshire Children's Safeguarding Board.

The Overall Designated Lead for Safeguarding is: Charlie Lewis-Pryde (Service Manager).

Deputy Designated Safeguarding Leads are: Imran Mirza and Cerian Townsend-Allen (Lead Practitioners – Mental & Emotional Health).

Designated Safeguarding Leads are: Kieren Smith and Gemma Lund-Yates (Team Leaders)

A hard copy of the list of the DSL's is available on the door to the Comms Room with contact details of the person nominated to respond to and support staff with concerns on any given day. Staff will also find the names DSL and their phone number at the top of each day in their working online calendars. One-Eighty has a policy that at least 2 safeguarding leads will be available (working) on each day that One-Eighty is open. If you find the DSL for the day is unavailable, you can contact another DSL.

#### The Trustee Board

The Trustee Board of One-Eighty undertake regular reviews of safeguarding related policies and procedures that operate in our organisation. The trustee board have a crucial role in monitoring and challenging of staff on the effectiveness of safeguarding arrangements.

Our trustee board ensures One-Eighty has the following in place:

- A DSL for safeguarding and child protection who is a member of the Senior Leadership Team and who has undertaken the approved DSL Training in addition to basic child protection training.
- Child protection policy and procedures that are consistent with OSCB requirements, reviewed annually and made available to parents/carers on request.
- A Safeguarding statement is visible to the public on One-Eighty's website.
- Procedures for dealing with allegations of abuse made against members of staff including allegations made against the CEO or overall DSL.
- Safer recruitment procedures that include the requirement for appropriate checks in line with national guidance.
- A training strategy that ensures all staff, including the CEO, receive child protection training, with refresher training at three-yearly intervals. The DSLs should receive refresher training at two-yearly intervals.
- Regular update sessions for staff regarding safeguarding. Keeping staff up to date with any changes and ensuring that safeguarding remains a priority within the setting.
- Arrangements to ensure that all temporary staff and volunteers are made aware of One-Eighty's arrangements for child protection.
- The trustee board nominates a member (Jonathan Fisher) to be responsible for liaising with the local authority and other agencies in the event of an allegation being made against the CEO.
- Trustee with Safeguarding oversight (Jonathan Fisher) feeds relevant and necessary safeguarding updates into quarterly Trustee Meetings.

#### The CEO

- Ensures that the safeguarding and child protection policy and procedures are implemented and followed by all staff.
- Allocates sufficient time and resources to enable the DSL and deputy(s) to carry out their roles effectively.

• Ensures that all staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the One-Eighty's whistle blowing procedures.

#### One-Eighty has ensured that the DSL:

- Is appropriately trained.
- Acts as a source of support and expertise to the One-Eighty team.
- Has an understanding of OSCB procedures.
- Keeps written records of all concerns when noted and reported by staff or when disclosed by a child, ensuring that such records are stored securely and reported onward in accordance with this policy guidance.
- Refers cases of suspected neglect and/or abuse to children's social care or police in accordance with this guidance and local procedure.
- Attends and/or contributes to child protection conferences in accordance with local procedure and guidance.
- Develops effective links with relevant statutory and voluntary agencies.
- Ensures that all staff sign to indicate that they have read and understood this policy.
- Ensures that the safeguarding policy is updated annually.
- Liaises with the nominated Trustee and CEO (where the role is not carried out by the CEO) as appropriate.
- Keeps a record of staff attendance at safeguarding training.
- Makes this policy available to parents.

#### Deputy DSL(s):

Are appropriately trained and, in the absence of the DSL, carries out those functions necessary to ensure the ongoing safety and protection of children. In the event of the long-term absence of the designated person, a nominated deputy will assume all of the functions above.

#### All staff will:

Follow the Oxfordshire Safeguarding Children Board Procedures/Local Authority guidance in all cases of abuse, or suspected abuse (these can be found at www.OSCB.org.uk ).

#### We will therefore:

- Implement and follow Part 1 of this guidance.
- Understand that our responsibility to safeguard children requires that we all appropriately share any concerns that we may have about children.
- Support the child's development in ways that will foster security, confidence and resilience.
- Provide an environment in which children and young people feel safe, secure, valued and respected, feel confident and know how to approach adults if they are in difficulties.
- Provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we contribute to assessments of need and support plans for those children where appropriate.

- Ensure that detailed and accurate written records of concerns about a child are kept even if there is no need to make an immediate referral. See guidance on record keeping.
  - http://portal.oxfordshire.gov.uk/content/public/CYPF/schools/behaviour\_attendance/safeguarding\_child\_protection/Keeping\_Child\_Protection\_Records.doc

#### **Supporting Children**

- We recognise that a child who is abused, who witnesses violence or who lives in a violent environment may feel helpless and humiliated, may blame him/herself, and find it difficult to develop and maintain a sense of self-worth.
- We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

#### One-Eighty will support all children and young people by:

- Encouraging the development of self-esteem and resilience in every aspect of life.
- Promoting a caring, safe and positive environment.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notifying the relevant agency, such as MASH or Social Care as soon as there is a significant concern.

#### **Confidentiality**

- We recognise that all matters relating to child protection are confidential.
- The Designated Person will disclose personal information about a child or young person to other members of staff on a need to know basis only.
- However, all staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being or that of another.
- We will always undertake to share our intention to refer a child to Social Care with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with the OSCB or Social Care on this point.
- We will take no names consultations with our local Assessment Teams (LCSS) / MASH team to discuss concerns we may have, but we understand that if they then ask for a name we will disclose those details and it will become a referral.

#### **Supporting Staff**

- We recognise that staff working at One-Eighty who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.
- We will support such staff by providing an opportunity to talk through their anxieties with the DSL and to seek further support. This is likely to be with their line manager or a Lead Practitioner Mental & Emotional Health.

- In consultation with all staff, we have adopted a code of conduct for staff at our setting. This forms part of staff induction and forms an annexe to all contracts as well as being in the employee handbook. We understand that staff should have access to advice on the boundaries of appropriate behaviour.
- We recognise that our DSL's should have access to support and appropriate workshops, courses or meetings as organised by the Local Authority.

#### Allegations against staff

- All staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for one-to-one work with children or parents to be conducted in view of other adults.
- We understand that a child or young person may make an allegation against a member of staff. If such an allegation is made, the member of staff receiving the allegation will immediately inform the overall DSL or the most senior member of staff available.
- The manager on all such occasions will discuss the content of the allegation with the Designated Officer for the Local Authority (LADO), before taking any action. In our county contact should be made with
  - o Jo Lloyd, Designated Officer (01865 810603),
  - o Donna Crozier, Assistant Designated Officer (01865 816382).
  - o LADO team 01865 810603 or
  - o Lado.safeguardingchildren@oxfordshire.gov.uk
- If the allegation made to a member of staff concerns the manager themselves, the person receiving the allegation will immediately inform the Chair of the Trustees or nominated trustee for safeguarding who will consult with LADO, without notifying the manger first.
- One-Eighty will follow the procedures for managing allegations against staff, as outlined in Keeping Children Safe in Education 2021.
- Suspension of the member of staff against whom an allegation has been made needs careful consideration, and we will consult with LADO and HR support (HR representative on the trustee board).

#### **Whistleblowing**

- 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 about the attitude or actions
  of colleagues and appropriate advice will be sought from the LADO or Safeguarding
  Team where necessary.
- See full details in our whistleblowing policy.

#### Physical Intervention/Positive Handling

- Our policy on physical intervention/positive handling by staff is set out separately, as part of our Safe Touch and Positive Handling Policy.
- Such events should be recorded and signed by a witness.
- We recommend that staff who are likely to need to use physical intervention should be appropriately trained.

- We understand that physical intervention of a nature which is both unreasonable and disproportionate to the circumstances and or causes injury or distress to a child may be considered under child protection or disciplinary procedures.
- See full details in our Safe Touch and Positive Handling Policy

#### <u>Children with Special Educational Needs</u>

At One-Eighty we recognise that children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. This policy reflects the fact that additional barriers can exist when recognising abuse and neglect in this group of children. This can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- children with SEN and disabilities can be disproportionally impacted by things like bullying- without outwardly showing any signs; and
- communication barriers and difficulties in overcoming these barriers.

# Appendices Appendix A

#### Types of abuse and neglect

All staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases multiple issues will overlap with one another.

Abuse: 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. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

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

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

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

**Neglect**: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate

care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

#### Child sexual exploitation (CSE)

The sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people, (or a third person or persons) receive something, (e.g. food, accommodation, drugs, alcohol, cigarettes, affections, gifts, money) as a result of them performing and/or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidations are common, involvement in exploitative relationships being characterised in the main by the child's or young person's limited availability of choice, resulting from their social/economic and/or emotional vulnerability. (DCSF 2009).

#### Key Facts about CSE

- Sexual exploitation often starts around the age of 10 years old. Girls are usually targeted from age 10 and boys from age 8.
- It affects both girls and boys and can happen in all communities.
- Any person can be targeted but there are some particularly vulnerable groups: Looked after Children, Children Leaving Care and Children with Disabilities.
- Victims of CSE may also be trafficked (locally, nationally and internationally).
- Over 70% of adults involved in prostitution were sexually exploited as children or teenagers.

Sexual violence or abuse against children represents a major public health and social welfare problem within UK society, affecting 16% of children under 16. That is approximately 2 million children.

#### Good practice – Individuals

- Recognise the symptoms and distinguish them from other forms of abuse
- Treat the child/young person as a victim of abuse
- Understand the perspective / behaviour of the child/young person and be patient with them
- Help the child/young person to recognise that they are being exploited
- Collate as much information as possible
- Share information with other agencies and seek advice / refer to Social Care

#### Good practice – Organisations

- Ensure robust safeguarding policies and procedures are in place which cover CSE
- Promote and engage in effective multi-agency working to prevent abuse
- Work to help victims move out of exploitation
- Cooperate to enable successful investigations and prosecutions of perpetrators

#### Female Genital Mutilation FGM

FGM is child abuse and a form of violence against women and girls, and therefore should be dealt with as part of existing child safeguarding/protection structures, policies and procedures.

FGM is illegal in the UK. In England, Wales and Northern Ireland, the practice is illegal under the Female Genital Mutilation Act 2003.

Other than in the excepted circumstances, it is an offence for any person (regardless of their nationality or residence status) to:

- perform FGM in England, Wales or Northern Ireland (section 1 of the Act);
- assist a girl to carry out FGM on herself in England, Wales or Northern Ireland (section 2 of the Act); and
- Assist (from England, Wales or Northern Ireland) a non-UK person to carry out FGM outside the UK on a **UK national or permanent UK resident** (section 3 of the Act).

#### Forced marriages (FM)

FM is now a specific offence under s121 of the Anti-Social Behaviour, Crime and Policing Act 2014 that came into force on 16 June 2014.

A FM is a marriage conducted without the valid consent of one or both parties, and where duress is a factor Forced marriage is when someone faces physical pressure to marry (e.g. threats, physical violence or sexual violence) or emotional and psychological pressure (e.g. if someone is made to feel like they're bringing shame on their family). This is very different to an arranged marriage where both parties give consent.

FM is illegal in England and Wales. This includes:

- taking someone overseas to force them to marry (whether or not the forced marriage takes place)
- marrying someone who lacks the mental capacity to consent to the marriage (whether they're pressured to or not)

#### Radicalisation

The Counter Terrorism & Security Act 2015

The Act places a Prevent duty on specified schools to have "due regard to the need to prevent people from being drawn into terrorism". The education and childcare specified authorities in Schedule 6 to the Act are as follows:

• The proprietors of maintained schools, non-maintained special schools, maintained nursery schools, independent schools (including academies and free schools) and alternative provision academies, PRUs, registered early years providers, registered late years providers and some holiday schemes.

Schools/settings subject to the Prevent Duty will be expected to demonstrate activity in the following areas –

- Assessing the risk of children being drawn into terrorism
- Demonstrate that they are protecting children and young people from being drawn into terrorism by having robust safeguarding policies.
- Ensure that their safeguarding arrangements take into account the policies and procedures of the Local Safeguarding Children Board.
- Make sure that staff have training that gives them the knowledge and confidence to identify children at risk of being drawn into terrorism, and to challenge extremist ideas which can be used to legitimise terrorism
- Expected to ensure children are safe from terrorist and extremist material when accessing the internet in school

#### Sexting in schools

Flowchart for settings

http://schools.oxfordshire.gov.uk/cms/sites/schools/files/folders/folders/documents/behavioursupportservice/SextinginSchools-FlowchartofConcern.pdf

Information booklet

http://schools.oxfordshire.gov.uk/cms/sites/schools/files/folders/folders/documents/behavioursupportservice/SextinginSchools-InformationBooklet.pdf

Risk assessment

http://schools.oxfordshire.gov.uk/cms/sites/schools/files/folders/documents/behavioursupportservice/SextinginSchools-RiskAssessment.pdf

#### Specific safeguarding issues and further resources

- All staff have an awareness of safeguarding issues- some of which are listed below. Staff are made aware that behaviours linked to the likes of drug taking, alcohol abuse, truanting and sexting put children in danger.
- All staff are made aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but not limited to: bullying (including cyber bullying), gender based violence/sexual assaults and sexting. Staff are made clear of our policy and procedures with regards to peer on peer abuse.
  - Bullying including cyberbullying http://schools.oxfordshire.gov.uk/cms/content/anti-bullying
  - Children missing education http://schools.oxfordshire.gov.uk/cms/content/pupil-tracking
  - Child missing from home or care
     https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/307867/statutory\_guidance\_-\_missing\_from\_care\_\_\_3\_.pdf
  - o Child sexual exploitation (CSE) <a href="http://www.oscb.org.uk/themes-tools/cse/">http://www.oscb.org.uk/themes-tools/cse/</a> and annex a
  - o Domestic violence <a href="http://www.oscb.org.uk/themes-tools/domestic-abuse/">http://www.oscb.org.uk/themes-tools/domestic-abuse/</a>
  - Drugs
     https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/270169/drug\_advice\_for\_schools.pdf
  - Fabricated or induced illness
     https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/277314/safeguarding children in whom illness is fabricated or induced.pdf
  - Faith abuse
     https://www.gov.uk/government/uploads/system/uploads/attachment\_data/
     file/175437/action\_plan\_-\_abuse\_linked\_to\_faith\_or\_belief.pdf
  - Female genital mutilation (FGM) <a href="http://www.oscb.org.uk/themes-tools/fgm/">http://www.oscb.org.uk/themes-tools/fgm/</a> and annex a
  - Forced marriage and honour based violence https://www.gov.uk/guidance/forced-marriage and annex a

- o Gangs and youth violence https://www.gov.uk/government/publications/advice-to-schools-andcolleges-on-gangs-and-youth-violence
- Gender-based violence/violence against women and girls (VAWG)
   <a href="https://www.gov.uk/government/policies/violence-against-women-and-girls">https://www.gov.uk/government/policies/violence-against-women-and-girls</a>
- o Hate <a href="http://educateagainsthate.com/">http://educateagainsthate.com/</a>
- o Mental health <u>https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2</u>
- Missing children and adults strategy <u>https://www.gov.uk/government/publications/missing-children-and-adults-strategy</u>
- Online safety <u>http://schools.oxfordshire.gov.uk/cms/content/internet-safety-and-cyberbullying</u>
- Private fostering <a href="https://intranet.oxfordshire.gov.uk/cms/team-content/private-fostering">https://intranet.oxfordshire.gov.uk/cms/team-content/private-fostering</a>
- o Preventing radicalisation <a href="http://www.oscb.org.uk/themes-tools/prevent-extremism/">http://www.oscb.org.uk/themes-tools/prevent-extremism/</a> and annex a
- Relationship abuse <u>https://www.disrespectnobody.co.uk/relationship-abuse/what-is-relationship-abuse/</u>
- Sexting <a href="https://www.disrespectnobody.co.uk/sexting/what-is-sexting/">https://www.disrespectnobody.co.uk/sexting/what-is-sexting/</a> and annex a
- Trafficking
   https://www.gov.uk/government/publications/safeguarding-children-who-may-have-been-trafficked-practice-guidance

#### Allegations of abuse made against other children (peer on peer abuse)

Our staff recognise that children are capable of abusing their peers. In a situation where child abuse is alleged to have been carried out by another child, our child protection procedures should be adhered to for both the victim and the alleged abuser; this means it should be considered as a child care and protection issue for both children.

Peer on peer abuse can take many forms, and gender issues can be prevalent when dealing with this type of abuse this could for example include girls being sexually touched/assaulted or boys being subject to initiation/hazing type violence.

#### Record Keeping

The Designated Leads for child protection are responsible for ensuring that the necessary paperwork is completed and sent to the relevant people and stored in a safe and confidential place. This means that the records will be a coherent factual record of the concerns that are stored on individual children in a clear chronological order.

http://schools.oxfordshire.gov.uk/cms/sites/schools/files/folders/folders/documents/safeguarding/Keeping\_Child\_Protection\_Records.doc

#### Appendix B

Actions where there are concerns about a child (flowchart)

### Staff have concerns about a child or young person

referral not required, setting takes relevant action, possibly including early help and monitors in house

referral made in concerns escalate

DSL or (staff member) make referral to social care/police

Social care makes a decision on how to progress the referral and the type of repsonse required

Child in need of immediate protection (referrer informed)

Section 47 enquiry (referrer informed) Section 17 enquiry (referrer informed) No further action required (referrer informed)

Appropriate emergancy action taken by police or social care Identify child at risk of significant harm, will proceed to initial child protection plan (ICPC) Identify child in need, offer appropriate support to child and family Setting consider early help assesment, working with other universal sevices (consider CAF)

At all stages, staff should keep the child's best interest at the forefront of any decisions, the child's circumstances should be kept under review, and re-referrals should be made where appropriate.