

THE QUEENSWELL FEDERATION

SAFEGUARDING & CHILD PROTECTION POLICY

Policy Written by: Spencer Clayton

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Date for Review: September 2024

Ratified by Governors: October 2023



Named Contacts

Designated Safeguarding Lead (DSL) for The Queenswell Federation:

Spencer Clayton – Executive Headteacher

Designated Safeguarding Lead (DSL) for Queenswell Junior School:

Chris Donaghy – Head Of School

Designated Safeguarding Lead (DSL) for Queenswell Infant & Nursery School:

Leanne Oppenheimer – Head Of School

Designated Safeguarding Lead (DSL) for The Queenswell ARP

Sarah Lloyd – ARP Leader

Contact the relevant Head of School directly at the school about all safeguarding matters related to children or staff in the school. If calling from outside, please call the school office, say that that you need to speak with the Headteacher on a confidential matter related to safeguarding, give your contact details and he will call you back. Alternatively, you may speak to a Deputy Designated Safeguarding Lead (see below). Please do not discuss the issue with reception staff. Telephone 020 8445 2056. In his/her absence, speak to whoever is in charge for the day.

Designated Governor: Robert Payne rpayne@queenswellfed.barnet.sch.uk

In the case of a safeguarding concern related to the Executive Headteacher, please contact David Hood, Chair Of Governors, at dhood@queenswellfed.barnet.sch.uk

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

EQUALITIES

At The Queenswell Federation we believe it is the right of all pupils, regardless of their gender, ethnicity, sexual orientation, physical ability or linguistic, cultural or home background to have access to high-quality learning experiences in stimulating and supporting environment where prejudice and stereotyping are challenged.

We are strongly committed to positive action to remove and challenge discrimination in all aspects of the School and its work. The importance of staff awareness regarding the dangers of preconceived expectations based on stereotypes is discussed and we bear this in mind in all matters relating to Safeguarding and Child Protection.

WHAT IS SAFEGUARDING?

Safeguarding is a broad term which both encompasses child protection procedures and attempts to identify possible threats or impediments to the welfare of children, so that appropriate interventions can be made at the earliest possible stage. It emphasises the need for effective interagency working and appropriate sharing of information to ensure the best possible outcomes for children, whose interests and welfare remain central and paramount at all times.

Section 11 of the Children Act 2004 places a statutory duty on key people and bodies to make arrangements to safeguard and promote the welfare of children. Revised statutory guidance on the duty was most recently updated in September 2022.

Schools and further education providers have an equivalent duty through the Education Act 2002, and must have regard to the statutory guidance, Keeping Children Safe In Education September 2022. This means they should comply with it unless exceptional circumstances arise.

The Federation's safeguarding arrangements take into account the procedures and practice of the local authority as part of the inter-agency safeguarding procedures set up by the Local Safeguarding Children Board (LSCB).

Safeguarding can be summarised as:

- Protecting children from maltreatment
- Preventing impairment of children's mental and physical health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe & effective care
- Undertaking that role as to enable those children to have optimum life chances and to enter adulthood successfully.

Safeguarding outcomes for children are:

- Children are safe; the effectiveness of services in taking reasonable steps to ensure that children are safe.

Safeguarding is not just protecting children from deliberate harm. It includes issues such as:

- Pupil health & safety
- Bullying
- Racist abuse
- Harassment & discrimination
- Use of physical intervention
- Meeting the needs of pupils with medical conditions
- Providing first aid
- Drug & substance misuse
- Educational visits
- Intimate care
- Online safety (including filtering & monitoring systems in school)
- Security
- Local issues (contextual safeguarding).

The above issues are covered in other policies. Please refer to the following school's policies:

- Health & Safety
- Security
- Fire Safety
- Behaviour Policy (including Exclusions, Physical Restraint, Anti-Bullying)

- Online Safety
- Equalities
- Administration Of Medication
- First Aid
- SEN
- Drug Education & Incidents
- Attendance
- Educational Visits
- Sex & Relationships
- PSHCE
- Confidentiality
- Procedures For Allegations
- Whistleblowing
- Photographing Pupils.

AIMS & OBJECTIVES

The Queenswell Federation strives to educate all its pupils within an environment where learning, honesty, justice, respect and community are promoted. Consequently, the overall aim of the policy is to safeguard and promote the welfare of the children in our care (in situations where child abuse is suspected, our paramount responsibility is to the child). The Queenswell Federation fully recognises its responsibilities for child protection and safeguarding.

Safeguarding is everyone's responsibility. Staff members working with children are advised to maintain an attitude of 'it could happen here' where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the best interests of the child.

Our policy applies to all staff, governors and volunteers working in the school. There are five main elements to our policy:

- Ensuring we practice safe recruitment in checking the suitability of staff and volunteers to work with children;
- Raising awareness of child protection issues and equipping children with the skills needed to keep them safe including online safety;
- Developing and then implementing procedures for identifying and reporting cases, or suspected cases, of abuse;
- Supporting pupils who have been abused in accordance with his/her agreed child protection plan;
- Establishing a safe environment in which children can learn and develop.

We recognise that because of the day-to-day contact with children, school staff are well placed to observe the outward signs of abuse. The school will therefore:

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to;
- Ensure children know that there are adults in the school whom they can approach if they are worried;
- Include opportunities in the PSHCE and/or RSE curriculum for children to develop the skills they need to recognise and stay safe from abuse.

We will follow the procedures set out by the Barnet Safeguarding Children Board and take account of guidance issued by the Department for Education to:

- Ensure we have a designated senior person for safeguarding who has received appropriate training and support for this role;
- Ensure we have a nominated governor responsible for safeguarding;
- Ensure there is a designated teacher who promotes the educational achievement of children who are 'children in care' – the **designated person is the SENCO (Laura Evans)**;

- Ensure every member of staff (including temporary and supply staff and volunteers) and Governing Bod knows the name of the designated senior person responsible for child protection and their role;
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the designated senior person responsible for child protection;
- Ensure all staff and volunteers are aware of factors outside of school and their families that may put children at risk;
- Ensure all staff are prepared to identify children who may benefit from early help which means providing support as soon as a problem emerges at any point in a child's life;
- On induction, ensure that staff are: aware of their responsibilities for safeguarding; given literature explaining procedures & guidance;
- Arrange safeguarding training for the whole staff every three years; new staff should receive appropriate training as soon as possible after starting – **the last training took place on 2nd September 2021 for all staff**. Safeguarding reminders must also be given annually and throughout the year;
- Ensure that parents have an understanding of the responsibility placed on the school and staff for child protection by setting out its obligations in the school prospectus;
- Notify social services if there is an unexplained absence of more than two days of a pupil who is on the child protection register;
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters including attendance at case conferences;
- Keep written records of concerns about children, even where there is no need to refer the matter immediately;
- Ensure all records are kept securely, separate from the main pupil file;
- Develop and then follow procedures where an allegation is made against a member of staff or volunteer;
- Ensure safe recruitment practices are always followed.

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation and some sense of blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school, their behaviour may be challenging and defiant or they may be withdrawn. The school will support the pupil through:

- The content of the curriculum;
- The school ethos which promotes a positive, supportive and secure environment and gives pupils a sense of being valued;
- Staff reassuring victims that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting abuse, sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.
- Liaison with other agencies that support the pupil such as social services, Child and Adult Mental Health Service, education welfare service and educational psychology service;
- Ensuring that, where a pupil on the child protection register leaves, their information is transferred to the new school immediately and that the child's social worker is informed.

THE DESIGNATED SAFEGUARDING LEAD (DSL)

The Designated Safeguarding Lead is highlighted above. In his/her absence this is the Deputy Safeguarding Leads as highlighted below. The designated teacher's role is to:

- Ensure that all staff are aware of these procedures;
- Ensure that appropriate training and support is provided to all staff and governors;
- Ensure that staff understand & report incidents of safeguarding concerns (staff can use the Concern Form or CPOMS – see Appendix 1);
- Develop effective working relationships with other agencies and services;
- Decide whether to take further action about specific concerns (e.g. refer to Social Services);

- Liaise with Social Services teams over suspected cases of child abuse;
- Ensure children who have had a social worker are supported at school;
- Ensure that accurate records relating to individual children are kept in a secure place;
- Submit reports to, and attend, Child Protection Conferences;
- Ensure that the school effectively monitors children who have been identified as at risk;
- Provide guidance to governors, parents, children and staff about obtaining suitable support;
- Ensure they attend refresher training **every two years** & have undertaken safer recruitment training;
- Ensure staff have access to online safety training including responsibilities regarding filtering and monitoring
- Ensure they follow safer recruitment procedures & guidelines;
- Ensure staff follow the code of conduct;
- Ensure the Single Central Register is checked & monitored regularly.

The DSL may delegate the tasks above to Deputies, but takes overall responsibility for implementation of this policy along with the Governing Body.

TRAINING

Name	Role	Safeguarding Training date	Safer Recruitment date
Staff – The Queenswell Federation		2 nd September 2021 (inc. Prevent Duty & FGM)	
<i>Regular updates are given to staff as part of Induction, as guidance changes or evolves and on the first Inset Day in September</i>			
Spencer Clayton	Executive Headteacher/ DSL	3 rd November 2022	23 rd October 2020
Leanne Oppenheimer	Head Of School/ DSL	3 rd November 2022	23 rd October 2020
Chris Donaghy	Head Of School/ DSL	3 rd November 2022	23 rd October 2020
Sarah Lloyd	ARP Leader/ Assistant Headteacher/ Deputy DSL	3 rd November 2022	23 rd October 2020
Amanda Van De Merwe	Assistant Headteacher (Infants)/ Deputy DSL	3 rd November 2022	23 rd October 2020
Elizabeth Johnston	School Business Manager	17th June 2021	23rd October 2020
Laura Evans	SLT/ Deputy DSL	17th June 2021	23 rd October 2020
Lisa Oxland	SLT/ Deputy DSL	15 th October 2021	23 rd October 2020
Nancy Harryman	SLT/ Deputy DSL	3 rd November 2022	
Sally Shearly	Child & Family Support Worker/ Deputy DSL	3 rd November 2022	
Helen Myers	Child & Family Support Worker/ Deputy DSL	3 rd November 2022	
Rob Payne	Safeguarding Governor	3 rd November 2022	

David Hood	Chair Of Governors	3 rd November 2022	
Full Governing Body		Safeguarding Briefing: 11 th March 2019	

GOVERNORS

The Governing Body has a statutory duty (S175 Education Act 2002) to make arrangements to ensure their functions are carried out with a view to safeguarding and promoting the welfare of children. This includes:

- Having awareness of how safeguarding issues are being dealt with in the school;
- Ensuring there is/are a designated governor/ governors with responsibility for safeguarding;
- Monitoring the safeguarding policy annually;
- Monitoring other related policies regularly;
- Ensuring the school has a Designated Safeguarding Lead (DSL) who is a member of the SLT & received refresher training every two years;
- Ensuring there are safeguarding arrangements in place in the absence of the DSL by the appointment of Deputy DSLs;
- Ensuring regular briefings for all school staff has occurred every three years; new staff should receive a briefing on safeguarding and online safety at induction and attend the next available training;
- Ensuring all staff have read part 1 of the most recent 'Keeping Children Safe In Education';
- Seeking assurances that other organisations & bodies using the school premises have appropriate policies & procedures in place to safeguard children & child protection including that staff & volunteers are appropriately vetted;
- Ensuring there are sufficient resources available to the DSL to enable them to effectively carry out their role;
- Understanding the difference between a complaint and an allegation and the different ways that these need to be handled
- Ensuring the Chair of the Governors aware of their role and the procedures for dealing with allegations relating to the Executive Headteacher
- Ensuring the school's safeguarding responsibilities is communicated to parents and available on the school website;
- Ensuring that they have an understanding of the importance of health & safety with regard to safeguarding;
- Ensuring general safeguarding (i.e. Childline, NSPCC) and online safety is included in the curriculum with a designated Governor having responsibility for this area;
- Ensuring that safeguarding is a standing item on the Full Governing Body agenda;
- Ensuring that Safer Recruitment procedures & guidelines are being followed during & after a recruitment process
- Regularly monitoring the school's Single Central Record
- Ensuring that the Federation's online filtering and monitoring systems are fit for purpose

SCHOOL PROCEDURES

- If any member of staff is concerned about a child he or she must inform the Designated Safeguarding Lead (DSL) or his/her deputies;
- Information regarding the concerns must be recorded by the member of staff on the same day. The recording must be a clear, precise, factual account of the observations;
- The DSL will decide whether the concerns should be referred through the Barnet Multi-Agency Safeguarding Hub (MASH). If it is decided to make a referral via MASH, this will be done with prior discussion with the parents, unless the child would be placed at risk. The MASH team will advise of the appropriate procedure at the point of contact
- The DSL will decide if it is necessary to call the police
<https://www.npcc.police.uk/documents/Children%20and%20Young%20people/When%20to%20call%20the%20police%20guidance%20for%20schools%20and%20colleges.pdf>);

- The MASH team will decide what level of intervention is required i.e. at Children Act Section 47 or Section 17 referrals or the initiation of a CAF (Common Assessment Framework)
- The school will work with multi-agencies in its approach to safeguarding;
- Attention will be paid to the attendance and development of any child who has been identified as at risk or who has been placed on the Child Protection Register;
- If a pupil who is known to be on the Child Protection Register changes school, the Headteacher will inform the Social Worker responsible for the case and transfer the appropriate records to the receiving school;
- Children who leave the school should be recorded on the CME form & forwarded to the Educational Welfare Team (see Appendices 7,8 & 9);
- Appropriate DBS clearances must be obtained for any persons engaged in working with children in regulated activity within the school in any capacity – any adults who regularly attend the school must be recorded on the Single Central Record (see Safer Recruitment Policy);
- At the appointment stage of staff, references must be obtained asking for concerns regarding child protection and any gaps in employment must be questioned. References must be from the most recent/ current employer's head of service;
- Information on the Multi-Agency Safeguarding Hub can be found in this policy.

WHEN TO BE CONCERNED ABOUT A CHILD

Staff should be concerned about a pupil if he or she:

- has any injury which is not typical of the bumps and scrapes normally associated with children's activities;
- regularly has unexplained injuries;
- frequently has injuries (even when apparently reasonable explanations are given);
- confused or conflicting explanations are given on how injuries were sustained;
- exhibits significant changes in behaviour, performance or attitude;
- indulges in sexual behaviour which is unusually explicit and/or inappropriate to his or her age;
- discloses an experience in which he or she may have been significantly harmed;
- is often absent or has significant patterns of absence;
- there is evidence of neglect;
- shows signs that they may be at risk from radicalisation.

Staff should not assume a colleague or another professional will take action and share information that might be critical in keeping children safe. They should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision. Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers supports staff who have to make decisions about sharing information. This advice includes the seven golden rules for sharing information and considerations with regard to the Data Protection Act 2018 and General Data Protection Regulation (GDPR). If in any doubt about sharing information, staff should speak to the designated safeguarding lead or a deputy. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children.

All staff should be aware that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. For example, children may feel embarrassed, humiliated, or being threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent staff from having a professional curiosity and speaking to the DSL if they have concerns about a child. It is also important that staff determine how best to build trusted relationships with children and young people which facilitate communication.

If, at any point, there is a risk of immediate serious harm to a child a referral should be made to social services immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point.

In addition, if any member of staff is unhappy with how the safeguarding concern has been dealt with by the designated person, they should contact the MASH team directly.

DEALING WITH A DISCLOSURE

If a pupil discloses that he or she has been abused in some way, the member of staff should:

- listen to what is being said without displaying shock or disbelief;
- accept what is being said;
- allow the child to talk freely;
- reassure the child but not make promises which it might not be possible to keep;
- not promise confidentiality - it might be necessary to refer to Social Services;
- reassure him or her that what has happened is not his or her fault;
- stress that it was the right thing to tell;
- listen, rather than ask direct questions;
- ask open questions rather than leading questions;
- not criticise the perpetrator;
- explain what has to be done next and who has to be told.

Record keeping

When a pupil has disclosed the member of staff should:

- make some brief notes as soon as possible after the conversation (on CPOMS or on the Concern Form kept in the Child & Family Support Worker's office or attached to the policy available on the staff drive); later on, a clear and comprehensive summary of the concern should be produced
- not destroy the original notes in case they are needed by a court;
- record the date, time, place and any noticeable non-verbal behaviour and the words used by the child;
- draw a diagram to indicate the position of any bruising or other injury;
- record statements and observations, rather than interpretations or assumptions.
- record of follow up or outcome

Support

Dealing with a disclosure from a child, and a child protection case in general, is likely to be a stressful experience. The member of staff concerned should, therefore, consider seeking support for him/herself and discuss this with the Headteacher.

Allegations involving school staff

If a child, or parent, makes a complaint of abuse against a member of staff (including supply staff, contractors and volunteers), the person receiving the complaint must take it seriously and immediately inform the Executive Headteacher. This also includes [low-level concerns](#) which may not meet the harm threshold, but may require further investigation.

Any member of staff who has reason to suspect that a pupil may have been abused by another member of staff, either at school or elsewhere, must immediately inform the Executive Headteacher. He or she should also make a record of the concerns including a note of anyone else who witnessed the incident or allegation.

If the concerns are about the Executive Headteacher, the Chair of Governors must be contacted.

The Executive Headteacher will not investigate the allegation itself, or take written or detailed statements, but he/she will assess whether it is necessary to refer to the local Social Services team & LADO (Local Authority Designated Office) in accordance with the child protection procedures. In doing this, the Headteacher may consult with HR, Child Protection Education Welfare Officer, Head of the Education Welfare Service or a Senior Officer from Social Services.

If further action is warranted the Executive Headteacher or his/her designated deputy must make a referral direct to the LADO. If the allegation constitutes a serious criminal offence, it will be necessary to contact Social Services before informing the member of staff. The LADO will advise further.

If it is decided that it is not necessary to refer to Social Services, the Executive Headteacher will consider whether there needs to be an internal investigation and/or a referral to external employers.

Should there be subsequent formal or criminal action taken against the member of staff, the Executive Headteacher with HR and the Police will decide on what form this should take. This may also involve informing other agencies.

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.

Please refer to the 'Staff Facing An Allegation Of Abuse: Guidelines & Procedures' for further advice & guidance.

RECOGNISING CHILD ABUSE AND NEGLECT: SIGNS AND SYMPTOMS

The first step in helping abused or neglected children is learning to recognise the signs of child abuse and neglect. The presence of a single sign does not prove child abuse is occurring in a family; however, when these signs appear repeatedly or in combination, you should take a closer look at the situation and consider the possibility of child abuse.

If you do suspect a child is being harmed, reporting your suspicions may protect the child and get help for the family. The following signs may signal the presence of child abuse or neglect.

The Child:

- shows sudden changes in behaviour or school performance;
- has not received help for physical or medical problems brought to the parent's attention;
- has learning problems (or difficulty concentrating) that cannot be attributed to specific physical or psychological causes;
- is always watchful, as though preparing for something bad to happen;
- lacks adult supervision;
- is overly compliant, passive or withdrawn;
- comes to school or other activities early, stays late, and does not want to go home;
- goes 'missing' from school;
- the child or family are travelling to countries known to support terrorist activities or where female genital mutilation is practised.

The Parent:

- shows little concern for the child;
- denies the existence of (or blames the child for) the child's problems in school or at home;
- asks teachers or other caretakers to use harsh physical discipline if the child misbehaves;
- sees the child as entirely bad, worthless or burdensome;
- demands a level of physical or academic performance the child cannot achieve;
- looks primarily to the child for care, attention, and satisfaction of emotional needs.

The Parent and Child:

- rarely touch or look at each other;
- consider their relationship entirely negative;
- state that they do not like each other.

Definition of 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. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

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.

Signs of Physical Abuse

Consider the possibility of physical abuse when the child:

- has unexplained burns, bites, bruises, broken bones, or black eyes;
- has fading bruises or other marks noticeable after an absence from school;
- seems frightened of the parents and protests or cries when it is time to go home;
- shrinks at the approach of adults;
- reports injury by a parent or another adult caregiver.

Consider the possibility of physical abuse when the parent or other adult caregiver:

- offers conflicting, unconvincing, or no explanation for the child's injury;
- describes the child as "evil" or in some other very negative way;
- uses harsh physical discipline with the child;

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, for example, 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.

Signs of Neglect

Consider the possibility of neglect when the child:

- is frequently absent from school;
- begs or steals food or money;
- lacks needed medical or dental care, immunisations, or glasses;
- is consistently dirty and has severe body odour;
- lacks sufficient clothing for the weather;
- abuses alcohol or other drugs;
- states that there is no one at home to provide care;
- may appear significantly underweight or overweight;
- fails to provide lunch for a child.

Consider the possibility of neglect when the parent or other caregiver:

- appears to be indifferent to the child;
- seems apathetic or depressed;
- behaves irrationally or in a bizarre manner;
- is abusing alcohol or other drugs.

Sexual abuse

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

can other children. The sexual abuse of children by other children is a specific safeguarding issue in education.

Signs of sexual abuse:

Consider the possibility of sexual abuse when the child:

- has difficulty walking or sitting;
- suddenly refuses to change for gym or participate in physical activities;
- reports nightmares or bedwetting;
- frequently visits the toilet;
- experiences a sudden change in appetite;
- becomes withdrawn, anxious or depressed;
- a fall in school performance, motivations & aspirations;
- demonstrates bizarre, sophisticated, or unusual sexual knowledge or behaviour;
- has an awareness of inappropriate websites;
- becomes pregnant or contracts a venereal disease, particularly under the age of 14;
- runs away;
- reports sexual abuse by a parent or another adult caregiver.

Consider the possibility of sexual abuse when the parent or other caregiver:

- is unduly protective of the child and severely limits the child's contact with other children, especially of the opposite sex;
- is secretive and isolated;
- is jealous or controlling with family members.

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 from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Signs of emotional abuse

Consider the possibility of emotional abuse when the child:

- shows extremes in behaviour, such as overly compliant or demanding behaviour, extreme passivity, or aggression;
- is either inappropriately adult (parenting other children, for example) or inappropriately infantile (frequently head-banging, for example);
- has attempted suicide;
- reports a lack of attachment to the parent;
- reports incidents of domestic violence.

Consider the possibility of emotional abuse when the parent or other adult caregiver:

- constantly blames, belittles or berates the child;
- is unconcerned about the child and refuses to consider offers of help for the child's problems;
- overtly rejects the child;

Mental Health

Staff should also be aware that mental health problems can be, in some cases, an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem; however, staff are well placed to observe day-to-day and identify those whose behaviour suggests they may be experiencing a mental health problem. If staff have a mental health concern about a child that is also a safeguarding concern, then they should refer to the DSL.

In addition, consideration should be given to other areas of abuse that may link to the above indicators of abuse such as:

Child Sexual Exploitation

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. 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 does not 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. Some of the following signs may be indicators of sexual exploitation:

- Children who appear with unexplained gifts or new possessions;
- Children who associate with other young people involved in exploitation;
- Children who have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant;
- Children who suffer from changes in emotional well-being;
- Children who misuse drugs and alcohol;
- Children who go missing for periods of time or regularly come home late; and
- Children who regularly miss school or education or do not take part in education.

Further guidance can be found on <http://www.chscb.org.uk/wp-content/uploads/2017/06/LONDON-CSE-PROTOCOL.pdf>

Child criminal exploitation: county lines

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity: drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns. In addition children may be coerced into working in cannabis factories, shoplifting or pickpocketing. Key to identifying potential involvement in county lines are missing episodes, when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism should be considered. Like other forms of abuse and exploitation, county lines exploitation:

- can affect any child or young person (male or female) under the age of 18 years;
- can still be exploitation even if the activity appears consensual;
- can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence;
- can be perpetrated by individuals or groups, males or females, and young people or adults;
- is typified by some form of power imbalance in favour of those perpetrating the exploitation. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.
- Children can become trapped by this type of exploitation as perpetrators can threaten victims (and their families) with violence, or entrap and coerce them into debt. They may be coerced into carrying weapons such as knives or begin to carry a knife for a sense of protection from harm from others. As children involved in criminal exploitation often commit crimes themselves, their vulnerability as victims is not always recognised by adults and professionals, (particularly older children), and they are not treated as victims despite the harm they have experienced. They may still have been criminally exploited even if the activity appears to be something they have agreed or consented to.

- it is important to note that the experience of girls who are criminally exploited can be very different to that of boys. The indicators may not be the same, however professionals should be aware that girls are at risk of criminal exploitation too. It is also important to note that both boys and girls being criminally exploited may be at higher risk of sexual exploitation.

Domestic abuse

The cross-government definition of 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;
- emotional.

Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home. All of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

Online safety

It is essential that children are safeguarded from potentially harmful and inappropriate online material at school and at home. Our approach to online safety empowers us to protect and educate pupils, students, and staff in their use of technology and establishes mechanisms to identify, intervene in, and escalate any concerns where appropriate.

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

- **content:** being exposed to illegal, inappropriate, or harmful content, for example: pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation, and extremism.
- **contact:** being subjected to harmful online interaction with other users; for example: peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.
- **conduct:** online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images (e.g. consensual and nonconsensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying,
- **commerce:** - risks such as online gambling, inappropriate advertising, phishing and or financial scams. If you feel your pupils, students or staff are at risk, please report it to the Anti-Phishing Working Group (<https://apwg.org/>)

Further information can be found in our [Online Safety Policy](#).

Homelessness

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The designated safeguarding lead (and any deputies) should be aware of contact details and referral routes in to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity. Indicators that a family may be at risk of homelessness include household debt, rent arrears, domestic abuse and anti-social behaviour, as well as the family being asked to leave a property. Whilst referrals and or discussion with the Local Housing Authority should be progressed as appropriate, and in accordance with local procedures, this does not, and should not, replace a referral into children's social care where a child has been harmed or is at risk of harm.

The Homelessness Reduction Act 2017 places a new legal duty on English councils so that everyone who is homeless or at risk of homelessness will have access to meaningful help including an assessment of their needs and circumstances, the development of a personalised housing plan, and work to help them retain their accommodation or find a new place to live. The following factsheets usefully summarise the new duties: [Homeless Reduction Act Factsheets](#). The new duties shift focus to early intervention and encourage those at risk to seek support as soon as possible, before they are facing a homelessness crisis.

In most cases school and college staff will be considering homelessness in the context of children who live with their families, and intervention will be on that basis. However, it should also be recognised in some cases 16 and 17 year olds could be living independently from their parents or guardians, for example through their exclusion from the family home, and will require a different level of intervention and support. Children's services will be the lead agency for these young people and the designated safeguarding lead (or a deputy) should ensure appropriate referrals are made based on the child's circumstances.

So-called 'honour-based' abuse

So-called 'honour-based' abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBA are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBA, or already having suffered HBA.

Gangs & youth violence

Evidence shows that early-stage intervention is an effective strategy for preventing children becoming involved in violence, crime or antisocial behaviour later in life.

Primary schools, working with local partners, can play an important role in understanding and spotting the warning signs amongst younger children. Where appropriate, head teachers may find it useful to engage with local early help/early intervention teams in order to discuss concerns about pupils and plan appropriate interventions. Early intervention teams are based in every local authority. Their role is to work with safeguarding teams to identify early signs of problems and work with children and families to prevent problems from escalating.

Providing the right support whilst a child is still in primary school can protect those vulnerable to exploitation by older gang members and those who are at risk of being drawn further into violent or negative behaviour over time. It is good practice for schools to work together to take preventative measures to support the younger siblings of gang members. It is also advisable for primary schools in areas affected by gang and youth violence issues to work with younger children to strengthen social and emotional skills, build resilience to negative influences, and develop an ability to understand risk and risky situations.

Further advice can be found on

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/418131/Preventing_youth_violence_and_gang_involvement_v3_March2015.pdf

Child on Child abuse

Children can abuse other children. This is generally referred to as child on child abuse and can take many forms. This can include (but is not limited to):

- bullying (including cyberbullying, prejudice-based and discriminatory bullying);
- abuse in intimate personal relationships between children;
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse);
- sexual violence, such as rape, assault by penetration and sexual assault; (this may include an online element which facilitates, threatens and/or encourages sexual violence);
- sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse;

- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party;
- consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery);
- upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm;
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

Sexual violence and sexual harassment between children

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment. Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physical and verbal) and are never acceptable. It is important that all victims are taken seriously and offered appropriate support. Staff should be aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk.

Staff should be aware of the importance of:

- making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up;
- not tolerating or dismissing sexual violence or sexual harassment as “banter”, “part of growing up”, “just having a laugh” or “boys being boys”;
- challenging behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them.

All staff should be clear as to the school's or college's policy and procedures with regard to child on child abuse and the important role they have to play in preventing it and responding where they believe a child may be at risk from it. The initial response to a report from a child is incredibly important. How staff respond to a report can encourage, undermine the confidence of future victims of sexual violence and sexual harassment to report, or come forward. It is essential that all victims are reassured that they are being taken seriously, regardless of how long it has taken them to come forward and that they will be supported and kept safe.

Sexual harassment

When referring to sexual harassment we mean ‘unwanted conduct of a sexual nature’ that can occur online and offline. When we reference sexual harassment, we do so in the context of child on child sexual harassment. Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
- sexual “jokes” or taunting;
- physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (schools and colleges should be considering when any of this crosses a line into sexual violence - it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature; and
- online sexual harassment. This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include:
 - non-consensual sharing of sexual images and videos;
 - sexualised online bullying;
 - unwanted sexual comments and messages, including, on social media;

- sexual exploitation; coercion and threats.

The response to a report of sexual violence or sexual harassment

The initial response to a report from a child is important. It is essential that all victims are reassured that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

If staff have a concern about a child or a child makes a report to them, they should follow the referral process.

Sharing Nudes & Semi-Nudes

All schools (regardless of phase) should refer to the UK Council for Internet Safety (UKCIS) guidance on sharing nudes or semi nudes in schools. NB - where one of the parties is over 18, this is no longer sexting but child sexual abuse.

There is a one-page overview called [Sharing nudes and semi nudes: how to respond to an incident](#) for all staff (not just classroom-based staff) to read, in recognition of the fact that it is mostly someone other than the designated safeguarding lead (DSL) or online safety lead to first become aware of an incident, and it is vital that the correct steps are taken. Staff other than the DSL must not attempt to view, share or delete the image or ask anyone else to do so, but to go straight to the DSL.

The school DSL will in turn use the full guidance document [Sharing nudes and semi nudes](#) to decide next steps and whether other agencies need to be involved.

It is important that everyone understands that whilst the sending of nudes and semi-nudes is illegal, pupils/students can come and talk to members of staff if they have made a mistake or had a problem in this area.

Serious violence

Indicators which may signal a pupil is at risk from, or is involved with, serious violent crime. These indicators include, but are not limited to, the following:

- increased absence from school;
- a change in friendships;
- new relationships with older individuals or groups;
- a significant decline in academic performance;
- signs of self-harm;
- a significant change in wellbeing;
- signs of assault;
- unexplained injuries;
- unexplained gifts or new possessions.

The most significant risk factors that could increase a pupil's vulnerability to becoming involved in serious violent crime. These risk factors include, but are not limited to, the following:

- being male
- a history of committing offences;
- substance abuse;
- anti-social behaviour;
- truancy or frequently excluded;
- peers involved in crime and/or anti-social behaviour.
- child maltreatment

Pupils who have a social worker

Children may need a social worker due to safeguarding or welfare needs. The Local Authority should share this information with the school so that decisions can be made in the best interests of the child and decisions regarding safeguarding.

Pupils with family members in prison

Pupils with a family member in prison will be offered pastoral support as necessary. They will receive a copy of 'Are you a young person with a family member in prison' from Action for Prisoners' Families where appropriate and allowed the opportunity to discuss questions and concerns.

Pupils required to give evidence in court

Pupils required to give evidence in criminal courts, either for crimes committed against them or crimes they have witnessed, will be offered appropriate pastoral support. Pupils will also be provided with the booklet 'Going to Court' from HM Courts and Tribunals Service (HMCTS) where appropriate and allowed the opportunity to discuss questions and concerns.

The use of 'reasonable force'

Positive Handling (or 'reasonable force') should be limited to emergency situations and used only in the last resort. Section 550A of the Education Act 1996 and DFEE Circular 10/98 allow teachers, and other members of staff at a school who are authorised by the Headteacher, to use such force as is reasonable in circumstances where the pupil may need to be prevented from engaging in behaviours which are likely to cause injury to themselves, others or damage to property. The guidance extends this to maintaining good order and discipline, for both on-site and off-site activities.

Positive Handling should only be used when all other strategies which do not employ force have been tried and found unsuccessful **or in an emergency situation.**

Further information can be found in the school's Behaviour Policy.

Children who are lesbian, gay, bi, or trans (LGBT)

The fact that a child may be LGBT is not in itself an inherent risk factor for harm. However, children who are LGBT can be targeted by other children. In some cases, a child who is perceived by other children to be LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT. Risks can be compounded where children who are LGBT lack a trusted adult with whom they can be open. It is therefore vital that staff endeavour to reduce the additional barriers faced, and provide a safe space for them to speak out or share their concerns with members of staff.

Children In Care and previously Children In Care

The most common reason for children becoming looked after is as a result of abuse and/or neglect. With the Local Authority (through the Virtual School), the school should have information regarding current status and childcare arrangements. Please refer to the Children In Care Policy.

Children with special educational needs and disabilities

Children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. Governing bodies and proprietors should ensure their child protection policy reflects the fact that additional barriers can exist when 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;
- being more prone to peer group isolation than other children;
- the potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs; and
- communication barriers and difficulties in overcoming these barriers.

To address these additional challenges, schools and colleges should consider extra pastoral support for children with SEN and disabilities.

For further guidance, please refer to UKCCIS guidance: Sexting in schools and colleges: responding to incidents and safeguarding young people.

Further information on the above can be found in the Keeping Children Safe In Education; DfE September 2022: <https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

IMPLEMENTATION, MONITORING & EVALUATION

This policy will be implemented in the day-to-day running of the school. The success of this policy will be monitored by the Executive Headteacher & Governors, in consultation with the staff. The policy will be monitored & updated annually. As the interests and welfare of the children at The Queenswell Federation are paramount, review is at least annual but may be sooner in response to changes in legislation, local authority guidance or any perceived weaknesses in current practice.

FURTHER REFERENCES

- Barnet Safeguarding Children Partnership (www.thebarnetscp.org.uk/bcsp)
- London Safeguarding Children Partnership (www.londoncp.co.uk)
- [Working Together to Safeguard Children- A Guide to Inter-Agency Working to Safeguard and Promote the Welfare of Children \(DfE 2018\)](#)
- [Safer Working Practice for Adults who work with Children and Young People \(DCSF 2000\)](#)
- [Keeping Children Safe In Education 2022](#)
- [Working Together To Safeguard Children \(DfE 2018\)](#)
- Staff Code Of Conduct
- Online Safety Policy
- Alleged Abuse Procedures
- [The Prevent Duty: Departmental advice for schools and childcare providers \(DfE 2015\)](#)
- [Information Sharing – Advice for practitioners providing safeguarding services to children, young people, parents & carers \(DfE 2018\)](#)
- [Guidance for safer working practice for those working with children and young people in education settings \(Safer Recruitment Consortium May 2019\)](#)
- [Child sexual exploitation \(DfE 2017\)](#)
- [Sexual violence and sexual harassment between children in schools and colleges \(DfE 2021\)](#)
- [What to do if you're worried a child is being abused \(DfE 2015\)](#)
- [The right to choose: government guidance on forced marriages \(Home Office 2023\)](#)
- Brook (www.brook.org.uk)
- Contextual Safeguarding Network (www.csnetwork.org.uk)
- [Teaching about relationships & health \(DfE 2021\)](#)

LIST OF APPENDICES

- 1) Concern Form – for use by staff/ volunteers to log a concern
- 2) Information regarding MASH (Barnet's Multi-Agency Safeguarding Hub)
- 3) Definitions, signs & symptoms of abuse
- 4) Supplementary Safeguarding for staff
- 5) Building Children's Resilience In Relation To The Prevent Duty
- 6) Barnet Prevent Referral Process
- 7) New duty for health and social care professionals and qualified teachers to report female genital mutilation (FGM) to the police
- 8) Guidance regarding Children Missing In Education
- 9) Children Missing From School form
- 10) Off-Roll Notification
- 11) Private fostering guidance
- 12) Barnet Safeguarding Partnership Resolution Policy
- 13) Modern Slavery.

THE QUEENSWELL FEDERATION CONCERN FORM

Date:	Time:	Person completing report
<u>Full name</u> of child involved:		Class
FACTS: Please indicate where you have interpreted what you have been told. Use direct quotes, if relevant Who is/ has been involved? What happened? Where did it take place? How often / how long ago?		
OPINION: Please offer your opinion about what you have heard/ seen/ been told/ previous concerns (continue on a separate sheet if necessary)		
Any action taken by you:		
Name of person to whom you are passing this information to:		
Your name:	Your Job title:	
Your signature:		

SEE OVERLEAF FOR FURTHER GUIDANCE

ACTION TAKEN BY DSLs

IF NECESSARY PLEASE INCLUDE A BODY MAP IF BRUISES etc. UNDER NO CIRCUMSTANCES TAKE PICTURES OF ANY BRUISES etc ON A CHILD

Name:	Job Title:
Date:	Signature

WHAT TO DO IF SOMEONE DISCLOSES TO YOU

A child may confide in any member of staff & not always go to teachers. Staff to whom a disclosure is made should remember:

- Yours is a listening role; do not interrupt the child if he/she is freely recalling a significant event. Any questions that may be needed to clarify what the child is saying should be framed in an open manner & not lead the child in any way. *Use TED questions (Tell, Explain, Describe).*
- Make a note of the discussion **as soon as possible** and pass to the Designated Teacher. The note should include record the time, date, place & people who were present as well as what was said – this may be used in any subsequent court proceedings.
- Do not give an undertaking of absolute confidentiality;
- If your concern is about another member of staff, inform the Designated Teacher immediately
- Finally, inform the Designated Teacher and give your notes to them. **Your responsibility in terms referring concerns ends at this point unless you are unhappy with how it is being dealt with; in this instance, you should contact Barnet MASH team directly.**

If you are not sure if it is a serious disclosure, always see the Designated Safeguarding Lead or refer to the Safeguarding & Child Protection Policy. Better safe than sorry. **The Designated Safeguarding Leads and his/her Deputies are prominently displayed in the school entrances.**

APPENDIX 2: Multi-Agency Safeguarding Hub (MASH)

What is the Multi-Agency Safeguarding Hub?

<https://www.barnet.gov.uk/www-home/practitioner-guidance/multi-agency-safeguarding-hub-mash.html>

The Multi-Agency Safeguarding Hub (MASH) was developed by the police, Local Authorities and other agencies to co-locate safeguarding agencies and their data into a secure, research and decision-making unit. This was in response to the inability of agencies, on occasions to effectively share information which has been the comment of numerous Serious Case Reviews and public enquiries.

MASH in Barnet is the single point of entry for all referrals regarding concerns for a child or young person (unborn-18 years) or where it is felt they would benefit from additional support. Referrals will cover all thresholds of need from child protection to early help. Core agencies include the police public protection desk, children's social care, health and education, with representatives attending from CAHMS, adult services, substance misuse, the early intervention services, probation, housing and others.

MASH is a screening, information and co-ordinating process only. It is not a case holding team. It is located at North London Business Park.

How do I refer?

Before referring to the MASH you need to consider if the child or young person's needs can be met by services from within your own agency, or by other professionals already involved with the family.

In order to make a referral you will need to complete a [referral form](#). You will then receive an acknowledgement email from the MASH with a reference number.

Before making a referral you must tell the family and seek consent. Please also download the information leaflet on the MASH website explaining the MASH process which you can give to families.

You should not seek consent in cases where you consider to do so may increase the risk of harm to the child. In cases where you have concerns for a child's welfare which indicate that they are at a level that may require an assessment by children's social care, if having informed the parents you are making a referral consent has not been given, a referral can still be made. The MASH team will consider if/what information needs to be shared to ensure the child's needs are being met.

If you have concerns about a child's safety you can telephone the MASH team on 020 8359 4066 to discuss your concerns and give the initial details. You will be expected to follow this with an online referral the same day.

The Consultation line for professionals who would like to discuss a case without making a referral will remain operational on **020 8359 4336** on Tuesday and Wednesday between 9.30 to 11.30am.

Operating hours

The MASH operates Monday–Thursday 9am to 5.15pm and 9am to 5pm on Fridays. Outside of these hours care and welfare concerns about children and young people that require an immediate response should be reported to the Emergency Duty Team on **020 8359 2000**. Where an emergency response is required, at any time, the police should be called.

What happens next?

All contacts/referrals will then be screened; this will include checking to see if the child already has a social worker or a lead professional as a result of a [CAF \(Common Assessment Framework\)](#).

If there is an allocated social worker, they are considered the best person to support the child, so the case is referred directly on to them.

If there is no allocated social worker, then the MASH senior social worker assesses the level of risk. The MASH Manager confirms the level of risk.

The MASH will use BRAG Ratings Blue, Red, Amber and Green. Red being the highest risk where there is a serious safeguarding concern requiring immediate action. A Green rating would be a low risk which may require a child in need assessment (sect17) or a Common Assessment Framework (CAF).

For further information regarding Thresholds and the BRAG ratings and to assist you in making a referral please see the 'Common Assessment Framework (CAF) and Social Care Threshold Guidance' available on the MASH website.

Following receipt of all referral through the MASH the outcome could vary from; a referral to the Children's Social Care Duty Assessment Team (DAT) for a social work assessment, referral to the Early Help and Prevention services such as [CAF](#).

How will I know what has happened to the case?

The MASH team are responsible for providing referrers with appropriate and proportionate feedback about the progress of a case being dealt with by the MASH either by email or telephone.

How will the child/family know what has happened?

The MASH team are also responsible for ensuring that actions are put in place to ensure that appropriate and proportionate feedback is provided to children and families. This may be done by a Children's Social Care professional either from the MASH or another team such as the Duty Assessment Team or CAF team visiting the family, sending a letter, or telephoning. On other occasions you, as someone who knows the child and or family might be asked to contribute to the process of providing verbal feedback.

What are my responsibilities if I am contacted by the MASH team for information?

When a case comes to the attention of the MASH team that requires information gathering, the relevant professionals will receive an email with a MASH information collection form. In some cases, they will receive a telephone call first advising them this form has been sent. The request will contain a summary of the referral concerns and we ask that you provide relevant information on the form. This should include strengths in the family as well as knowledge of issues such as domestic violence, substance misuse, mental health difficulties and concerns about the child such as neglect, emotional or behavioural problems. Please also comment on the family's ability to engage with services and keep appointments.

In order to observe time scales for BRAG ratings, professionals should where possible respond immediately to the request. If this is not possible it is important in order to protect and maintain the welfare of children and young people to return the form within the time scale specified according to the BRAG rating given on the form. Information must be returned securely.

It is expected that families will be aware of the information you hold on them and the form you receive will indicate if they have given consent for this to be shared. Where consent has not been obtained or has been refused the MASH are still able to gather information either because it is a child protection concern or under Section 10 of the Children's Act (please see Data Sharing and Fair Processing below). In exceptional circumstances, an agency such as the police may hold information that is restricted to other professionals and in some cases to the family concerned. In these circumstances, this information should be shared with the MASH but will not be shared with professionals outside the MASH and will be recorded on a separate restricted file.

What should I do if I am concerned about the way in which the MASH team has dealt with a concern I have raised?

In the first instance, you could discuss the action taken with the MASH Team Manager. Alternatively, you could speak to the Service Manager who is also based at NLBP. Contact details are given in the CAF /Social care threshold document.

What to do if I am not happy?

If you are not happy about the way the MASH team deals with any referral about your family, please raise this first with the MASH manager. He or she will explain why the information was shared and how the decision on your case was made.

If you are still not happy, you can make a complaint by contacting the Children's Service Complaints Officer on 020 8359 7008 or via childrens.service.complaints@barnet.gov.uk

Please also refer to the BSCP Resolution Policy.

Consultation Line

If you are a professional and are worried about a child and would like to talk over any concerns, you have you can contact our Consultation Line on **0208 359 4336**. This may be particularly helpful for long term chronic situations or where the concerns are border line or if the issue is unusual or complex. If we feel the child is at risk, we will insist that you make a referral. If the situation is an emergency, we would expect you to contact the MASH team immediately.

The Consultation Line is open on Tuesdays and Wednesdays between 9.30am and 11.30am.

Data sharing and Fair Processing

All partner agencies have signed up to Barnet Council's MASH Information Sharing Agreement that specifies what data can be shared in the MASH and the legal basis for doing so. All partner agencies are required to ensure staff are fully trained and aware of their responsibilities under the Data Protection Act. They are required to ensure all information sharing is done in adherence with the Information Commissioner's Data Sharing Code of Practice.

Section 10 of the Children's Act 2004 places a duty on key agencies to cooperate to improve the wellbeing of children and young people. This includes the proportionate sharing of information, where appropriate, to make the best decisions for children and young people. It is the responsibility of all professionals to ensure they are aware of their responsibilities in this regard in order to ensure they are able to respond within set time scales to enquiries from the MASH and so safeguard children and young people.

Additional information can be found at <https://thebarnetscp.org.uk/bscp>. The website contains information about a variety of the aspects of our work including training and guidance/ advice. It has sections giving information about how to ensure the safety of children and young people. It is a tool designed to raise awareness and highlight how we can all work together. Please remember that "safeguarding children is everyone's business".

APPENDIX 3: Definitions, signs and symptoms of abuse

Physical Abuse	
Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.	
Child	
Bruises –shape, grouping, site, repeat or multiple	Withdrawal from physical contact
Bite marks – site and size Burns and Scalds – shape, definition, size, depth, scars	Aggression towards others, emotional and behaviour problems
Improbable, conflicting explanations for injuries or unexplained injuries	Frequently absent from school
Untreated injuries	Admission of punishment which appears excessive
Injuries on parts of body where accidental injury is unlikely	Fractures
Repeated or multiple injuries	Fabricated or induced illness -
Parent	Family/environment
Parent with injuries	History of mental health, alcohol or drug misuse or domestic violence.
Evasive or aggressive towards child or others	Past history in the family of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
Explanation inconsistent with injury	Marginalised or isolated by the community.
Fear of medical help / parents not seeking medical help	Physical or sexual assault or a culture of physical chastisement.

Over chastisement of child	

Emotional Abuse <p>Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, not giving the child opportunities to express their views, 'making fun' of what they say or how they communicate - hearing the ill-treatment of another and serious bullying (including cyber bullying).</p>	
Child	
Self-harm	Over-reaction to mistakes / Inappropriate emotional responses
Chronic running away	Abnormal or indiscriminate attachment
Drug/solvent abuse	Low self-esteem
Compulsive stealing	Extremes of passivity or aggression
Makes a disclosure	Social isolation – withdrawn, a 'loner' Frozen watchfulness particularly pre school
Developmental delay	Depression
Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)	Desperate attention-seeking behaviour
Parent	Family/environment
Observed to be aggressive towards child or others	Marginalised or isolated by the community.
Intensely involved with their children, never allowing anyone else to undertake their child's care.	History of mental health, alcohol or drug misuse or domestic violence.
Previous domestic violence	History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

History of abuse or mental health problems	Past history in the care of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault
Mental health, drug or alcohol difficulties	Wider parenting difficulties
Cold and unresponsive to the child's emotional needs	Physical or sexual assault or a culture of physical chastisement.
Overly critical of the child	Lack of support from family or social network.

<p>Neglect Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development.</p>	
Child	
Failure to thrive - underweight, small stature	Low self-esteem
Dirty and unkempt condition	Inadequate social skills and poor socialisation
Inadequately clothed	Frequent lateness or non-attendance at school
Dry sparse hair Untreated medical problems	Abnormal voracious appetite at school or nursery Self-harming behaviour
Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold	Constant tiredness
Swollen limbs with sores that are slow to heal, usually associated with cold injury	Disturbed peer relationships
Parent	Family/environment

Failure to meet the child's basic essential needs including health needs	Marginalised or isolated by the community.
Leaving a child alone	History of mental health, alcohol or drug misuse or domestic violence.
Failure to provide adequate caretakers	History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
Keeping an unhygienic dangerous or hazardous home environment	Past history in the family of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault
Unkempt presentation	Lack of opportunities for child to play and learn
Unable to meet child's emotional needs	Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
Mental health, alcohol or drug difficulties	

<p>Sexual abuse Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact or non-contact activities, such as involving children in looking at sexual images or being groomed on line / child exploitation.</p>	
Child	
Self-harm - eating disorders, self-mutilation and suicide attempts	Poor self-image, self-harm, self-hatred
Running away from home	Inappropriate sexualised conduct
Reluctant to undress for PE	Withdrawal, isolation or excessive worrying

Pregnancy	Sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
Inexplicable changes in behaviour, such as becoming aggressive or withdrawn	Poor attention / concentration (world of their own)
Pain, bleeding, bruising or itching in genital and /or anal area	Sudden changes in school work habits, become truant
Sexually exploited or indiscriminate choice of sexual partners	
Parent	Family/environment
History of sexual abuse	Marginalised or isolated by the community.
Excessively interested in the child.	History of mental health, alcohol or drug misuse or domestic violence.
Parent displays inappropriate behaviour towards the child or other children	History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
Conviction for sexual offences	Past history in the care of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault
Comments made by the parent/carer about the child.	Grooming behaviour
Lack of sexual boundaries	Physical or sexual assault or a culture of physical chastisement.

APPENDIX 4: SUPPLEMENTARY SAFEGUARDING GUIDANCE

INTIMATE CARE

From time to time children may need assistance in having their clothing changed e.g. in the event of wetting, spillages and accidents. During the induction meetings, parents and carers will be informed that any member of DBS checked staff is able to help a child to do this. Parents and carers who do not agree this policy will be invited to come into school and assist with changing of the child themselves.

All children have the right to be treated with dignity and respect. These guidelines are designed to support good practice in intimate care and to safeguard children from abuse and staff from false allegations.

Young and/or disabled children are vulnerable. Staff involved in their care need to be sensitive to a child's needs and to be aware that some tasks may be open to misinterpretation.

1. Treat every child with respect and ensure appropriate privacy.
2. Inform a colleague that you will be engaging in intimate care and **ask for assistance if necessary**.
3. Involve the child in their own intimate care as far as possible and do not rush them. Remember the child may need assistance.
 - ask the child to remove wet/soiled clothing
 - ask the child to wash themselves where necessary
 - encourage the child to put on clean clothing
3. Be supportive to a child's reactions.
4. Intimate care routines should be consistent. Staff should never carry out a task unless they are sure of the routine or procedure. Please seek advice from the Designated Safeguarding Leads.
5. Report any concern to the nominated person if:
 - during intimate care you accidentally hurt a child
 - a child is tender or sore in the genital area
 - a child misunderstands or misinterprets something
 - a child has a puzzling emotional reaction
6. When a child needs regular intimate care the school will seek a meeting with the parents/carers to clarify needs and agree a care plan. Parents/carers will be informed of the names of the staff who will be responsible for helping the child and will be asked to sign a form indicating their agreement.
7. Some children may require rectal valium or suppositories. Only staff who have been formally trained and assessed as competent are able to carry out this kind of intimate care. Advice is always sought from our link school nurse.

INJURIES/ UNDRESSING A CHILD

If a child has an injury within the school, they should:

- Be sent to the medical room – if they need assistance, then an adult should take them to inform welfare staff
- If the child is unable to be moved, the first aid staff should be called to the scene by another adult. Non-qualified staff should not be involved in treating the injury EXCEPT in extreme circumstances – staff should comfort & reassure the child; other adults should ensure other children are not in the vicinity. First aid staff will take necessary action based on their assessment
- If a child is brought to the medical room and they need undressing to treat the injury, this must be done in the presence of two adults. Similarly, if a request is made by Social Services to

look at reported injuries, then this must be undertaken in the presence of two adults – parents/cares should be informed of any treatment and its circumstances; however, there may be some restrictions where the request is made by Social Services

- If the child is able to undress themselves, then they should not be helped by an adult

CHANGING FOR PE

The majority of children should change together as part of the PE lesson; this is good safeguarding because it means children are monitored and supervised.

However, as the children get into the upper school, it may be necessary to segregate the sexes. Wherever possible, this should be done in classrooms so children can continue to be monitored & supervised. If children go into toilets, parents/carers should be advised that there may be a lack of supervision – although the class teacher retains overall responsibility for the children.

If children persistently do not bring in PE kits or refuse to get changed in front of others, then this may be a cause for concern and teachers should speak to parents/carers or express their concerns in line with the usual procedures.

WORKING WITH PUPILS OF THE OPPOSITE SEX

There is positive value in both female and male staff being involved in appropriate ways with children. Ideally every child should be offered the choice of a same sex carer for their intimate care. However all staff should be aware of the procedures described above in intimate care.

When children are engaged in outside trips, staff should check that male public toilets are suitable for use by entering them and checking if possible. Otherwise boys should use female or gender neutral public toilets to allow supervision at all times.

LONE WORKING

Staff who work or deal 1:1 with children may sometimes do so in offices or rooms where there are no other adults. In this case, it is essential that staff are aware of their own responsibilities and behaviours regarding safeguarding and to protect themselves from misunderstandings and allegations.

Staff should ensure:

- Their actions can be witnessed through the door/ window
- Doors should be kept open whenever possible
- Other adults can hear what is being said, particularly if the child is being reprimanded
- That they are not touching children in a way that could be construed as inappropriate to witnesses

Volunteers/ parent helpers etc. **MUST NOT** take children into unsupervised rooms on their own. Any such activities must take place in public areas of the school. Music teachers, employed by the Barnet Education Arts Trust and DBS checked, through the nature of their role, have to work with children 1:1 in a room with the door closed. However, they should take all necessary precautions as outlined above.

SWIMMING

As children cannot be left unsupervised, staff will need to supervise children as they get changed for and after swimming in appropriate changing rooms; this is good safeguarding because it means children are monitored and supervised. The teacher is there in a supervisory role and should respect the privacy of individuals within a safe environment.

If children persistently do not bring in swimming kits or refuse to get changed in front of others, then this may be a cause for concern and teachers should speak to parents/carers or express their concerns in line with the usual procedures.

ONLINE SAFETY

This area of safeguarding is explored in more detail in the Online Safety policy. In summary, staff should have regard to:

- Conduct in using technologies such as social networking sites
- Use of the internet and mobile phones at school
- Not contacting children using technologies
- Awareness of instances of cyberbullying

APPENDIX 5: BUILDING CHILDREN'S RESILIENCE IN RELATION TO THE PREVENT DUTY

- A safe environment for debating controversial issues is a good way to help develop children's resistance to radicalisation. This will help children to understand how they can influence and participate in decision-making.
- Schools must promote fundamental British values, alongside pupils' spiritual, moral, social and cultural development.
- Pupils should be given time to explore sensitive and controversial issues.
- Pupils should be given the knowledge and skills to understand and manage potentially difficult situations, recognise risk, make safe choices and recognise where pressure from others threatens their personal safety and wellbeing.
- Schools should equip pupils to explore political and social issues critically, weigh evidence, debate, and make reasoned arguments.
- Pupils should learn about how democracy, government and law making/enforcement occurs.
- Mutual respect and understanding for the diverse national, regional, religious and ethnic identities of the UK should be promoted.

The DfE has a dedicated helpline (020 7340 7264), and email (counter.extremism@education.gsi.gov.uk) where staff and governors can raise concerns. There is also advice and resources on www.educateagainsthate.com

Other resources include:

Educate Against Hate (<https://educateagainsthate.com>) a website launched by the Her Majesty's Government has been developed to support and equip school and college leaders, teachers, and parents with information, tools and resources (including on the promotion of fundamental British values) to help recognise and address extremism and radicalisation in young people. The platform provides information on and access to training resources for teachers, staff and school and college leaders, some of which are free such as Prevent e-learning, via the Prevent Training catalogue.

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages. Guidance on Channel is available at: Channel guidance (https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/425189/Channel_Duty_Guidance_April_2015.pdf), and a Channel awareness e-learning programme is available for staff at: Channel General Awareness.

The school's Designated Safeguarding Lead (and any deputies) should be aware of local procedures for making a Channel referral. As a Channel partner, the school or college may be asked to attend a Channel panel to discuss the individual referred to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support required.

Barnet's Prevent Team

BarnetCST@barnet.gov.uk

Advice on policy and procedure, first contact for any low level concerns and advice, Prevent awareness training for all staff, provides updates following national incidents regarding safe travel and any heightened risk. Contact for all general advice regarding classroom resources and further support.

APPENDIX 6: Barnet Prevent Referral Process

“The Prevent Duty is the duty in the Counter-Terrorism and Security Act 2015 on specified authorities, in the exercise of their duties, to have due regard to the need to prevent people from being drawn into terrorism.”

Making a referral: What you should do in the first instance if you are concerned that:

- A person is at risk of radicalisation
- A venue is being used for promoting extremism
- A speaker at a public or council venue is promoting extremism
- A person is involved in terrorist activity or an act of terrorism.

Definitions

Radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Terrorism

The use of serious violence against persons or property, or threat to use such violence, to intimidate or coerce a government, the public or any section of the public, in order to promote political, social or ideological objectives.

Extremism

Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.

Referrals made in relation to safeguarding concerns for children and young people that may be at risk of radicalisation are made in the same way as any other safeguarding issues and should be made through the Barnet MASH team on 020 8359 4066, mash@barnet.gov.uk or online on the MASH Referral Form

The MASH team are open from 9am - 5pm Monday to Friday. If you require an immediate response outside these hours, you should report your concerns to the Emergency Duty team on 020 8359 2000.

If you are concerned that a person may be involved in terrorist activity, or an act of terrorism, contact the National Anti-Terrorist hotline on 0800 789 321.

If there is a risk of immediate harm or danger to a child or young person, you should contact the Police via 999.

If you are unsure of whether or not to make a referral or need any other advice regarding the Prevent Duty, please contact:

Perryn Jasper, Prevent Education Officer, perryn.jasper@barnet.gov.uk, 020 8359 7371

APPENDIX 7: New duty for health and social care professionals and teachers to report female genital mutilation (FGM) to the police

What is the new duty?

On 31 October 2015, a new duty was introduced that requires health and social care professionals and qualified teachers to report 'known' cases of FGM in girls aged under 18 directly to the police. For example, if a doctor sees that a girl aged under 18 has had FGM they will need to make a report to the police. Or, if a girl tells her teacher that she has had FGM, the teacher will need to report this to the police.

What will happen after the case has been reported to the police?

FGM is a serious crime and the police will need to investigate each reported case appropriately. The police will work with social care professionals to make sure that the girl is safe and her needs are put first.

Why is it being introduced?

When a girl has undergone FGM, a serious crime has taken place so it is very important that the police are involved as soon as possible. This will make sure that a proper investigation can take place.

The purpose of the new duty is to help make sure that professionals have the confidence to confront FGM and to help increase the number of referrals to the police so that cases can be investigated appropriately.

What the new duty won't do

It doesn't mean that police will take action without consulting appropriately with social care professionals and other relevant professionals.

It won't require professionals to report cases to the police where they suspect FGM may have been carried out or think a girl may be at risk. The duty also doesn't apply to women aged 18 or over. Professionals will follow existing safeguarding procedures in these cases.

Summary: Mandatory reporting of FGM Duty* applies to regulated health and social care professionals and qualified teachers in England and Wales requires these professionals to make a report to the police if, in the course of their professional duties, they are informed by a girl under 18 that an act of FGM has been carried out on her; or observe physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and have no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth. Unqualified teachers and other staff must report concerns regarding FGM to the DSL.

**introduced in Section 5B of the FGM Act 2003, as inserted by section 74 of the Serious Crime Act*

Children in years 5 & 6 are given basic awareness of FGM.

APPENDIX 8: Changes to Pupil Registration Regulations: children missing from education.

Following the DfE's consultation *Identifying children who are missing education*, new registration regulations come into force on **1 September 2016**. Governing bodies and proprietors should put in place appropriate safeguarding responses to children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual abuse or exploitation, and to help prevent the risks of their going missing in future.

The new regulations require all schools, in addition to existing duties, to

1. Include in the admissions register any new address where the pupil will be living and any new school he/she will be attending, when a parent provides such information.
2. Notify the Local Authority each time a pupil is added to the register, giving all the information in the register relating to the pupil.
3. Make enquiries jointly with the Local Authority where a pupil is missing from school without explanation.
4. Notify the Local Authority **each time a pupil is removed from the register** other than at the end of its final year (Y6). Notifications must include any new address and new school.

The first provision is largely for admissions secretaries and the second accounted for in schools' work with Admissions. **No school or academy can admit a new pupil without informing the Local Authority.**

The third provision relates to children who fail to return within ten days of leave of absence or fail to attend for four weeks. The new requirement to work jointly with the Local Authority to make enquiries is covered by the **Children Missing School form**, which must be sent to the Children Missing Education Officer or Education Welfare Officer.

The fourth provision requires all schools and academies to notify the Local Authority (the Children Missing Education Officer) of **all** removals from the school roll using the revised **Off-roll Notification Form**. To fulfil the requirement to jointly make enquiries, no pupil can be removed from roll unless there has been a **Children Missing School form** submitted earlier. These regulations will have an impact on schools' administration of their off-roll procedures with a large amount of information coming to the Children Missing Education Officer. The EWT will maintain a log of all movements and will seek to streamline the flow of information in due course.

Notifying of new starters

The requirement to notify the LA of new starters in schools is **not** generally required of schools as the Admissions Team manages almost all school allocations. The exceptions are the small number of schools managing their own admissions or making *ad hoc* admissions arrangements independent of the Admissions Team. These schools were advised on **7 October 2016** of their duty to inform the LA via the CME Officers.

Independent schools are subject to the same provisions and have been provided with information and referral forms.

Children Missing from School (CMS) – see Appendix 7

Children who are missing from school must be notified to the EWT or TYS using the relevant form where

- the child has failed to return **five** days after a period of leave of absence, or
- the reason is unknown and the child has been absent for **ten** days

Children in these categories cannot be removed from roll unless the school and the CME Officer have investigated their whereabouts. These children are removed from roll under categories f and h in Regulation 8 of the Pupil Registration regulations and will generate both a CMS form at the start of the process and a CME form at the point of removal from roll. **This two-step process is obligatory and is aimed at prompt investigation of unexplained absence.**

Failure to attend

- Where the child refuses to attend or the parent withdraws the child from school, and the absence is ten days

Such pupils should be subject to intervention from Education Welfare Officers or Targeted Youth Workers, as appropriate. Schools are responsible for ensuring that such action is taken.

CME Officers will log these cases and await their resolution by the relevant officer (EWO, TYW or school colleague responsible for attendance).

Elective Home Education

Schools should never suggest Elective Home Education to parents. When a parent makes this choice, the child is removed from the roll.

Children who are absent from education

All staff should be aware that children being absent from school, particularly repeatedly and/or for prolonged periods, and children missing education can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect such as sexual abuse or exploitation and can also be a sign of child criminal exploitation including involvement in county lines. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation, so-called 'honour'-based abuse or risk of forced marriage. Early intervention is essential to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future. It is important that staff are aware of their school or college's unauthorised absence procedures and children missing education procedures.

Removal from roll (see Appendix 9)

Schools are required to notify CME officers of all children removed from roll, for all the possible circumstances, using the off-roll form.

Where schools are unsure which category to use, they must discuss the matter with a CME Officer before removing a child from roll.

Reinstatement

It is illegal for a school to remove a child from its roll for any reason other than those provided in regulations. The Local Authority will require immediate reinstatement, should this occur.

The regulations include a requirement on the DfE to review arrangements by September 2019. In the meantime, Headteachers should expect that Ofsted inspections will consider schools' practice in this area as a safeguarding issue.

Please contact ewt@barnet.gov.uk or 020 8359 7684

APPENDIX 9: Child Missing from School (CME) Referral

School		Date of last attendance	
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CHILD'S DETAILS

Surname		Forename	
Date of birth	<input type="text"/>	Year	<input type="text"/>
	Male/Female	<input type="text"/>	Ethnicity
		<input type="text"/>	<input type="text"/>
Looked-after child <input type="checkbox"/> Child Protection Plan <input type="checkbox"/> Child in Need <input type="checkbox"/> CAF <input type="checkbox"/> SEN <input type="checkbox"/>			

Home address			
Postcode	<input type="text"/>	Borough of residence	<input type="text"/>
Parent / Carer	<input type="text"/>	Tel number(s)	<input type="text"/>

Reason for referral	Tick as applicable	Additional information required
ABSENT FOR TEN SCHOOL DAYS	<input type="checkbox"/>	LAST DAY OF ATTENDANCE
ABSENT FOR FIVE DAYS FOLLOWING AGREED RETURN DATE FROM LEAVE	<input type="checkbox"/>	AGREED RETURN DATE
PUPIL REFUSING TO ATTEND OR PARENT REFUSING TO SEND	<input type="checkbox"/>	ATTACH ATTENDANCE RECORD

Other relevant information (please include details of any concerns about child's safety / welfare)

<p>Referrer: Position: Date: I will update the EWO, TYW or CME officer with any new information concerning the family.</p>	<p>Return form by USO-FX or secure e-mail to ewt@barnet.gov.uk London Borough Of Barnet, North London Business Park Oakleigh Road South, London N11 1NP Tel: 020 8359 7892</p>
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APPENDIX 10: Off Roll Notification Form

Please complete when deleting a compulsory school-age child from the school roll and send to: ewt@barnet.gov.uk via **USO-FX** or **secure e-mail**.

You must give ONE reason for removal from roll from the list on page 2.

DATE OFF ROLL		SCHOOL		CTF ISSUED?	Y <input type="checkbox"/> N <input type="checkbox"/>
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DETAILS OF PUPIL

Surname		Forename	
Gender	M <input type="checkbox"/> F <input type="checkbox"/>	Year Group	
		DOB	
Parents			
Home address			
telephone		Borough of residence	
Other parent/carers			
New or alternative address			
telephone		Borough of residence	
Any other information			

Referrer	
Position	
Date	

Address/e-mail	
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If you have any queries concerning the process of removing a child from the school roll, please contact ewt@barnet.gov.uk

REASON FOR DELETION (*please tick as applicable*)

LA changing provision via School Attendance Order	a	<input type="checkbox"/>	School / provision named		
Registered at another school	b,c	<input type="checkbox"/>	Name of school		Start date
Elective Home Education	d	<input type="checkbox"/>	LA notified by school (see note 1 below)	Y <input type="checkbox"/> N <input type="checkbox"/>	Date
Elective Home Education, supplementary information to Mary Helmore, EHE Advisor	d	<input type="checkbox"/>	<i>Attendance - past three full academic terms</i> <i>Fixed term exclusions – past three full academic terms</i> <i>Permanent exclusions – any history</i> <i>Attainment / progress – last two academic years (end of year attainment)</i> SEN information		
Home – school distance deemed unreasonable	e	<input type="checkbox"/>	New Address provided	Y <input type="checkbox"/> N <input type="checkbox"/>	
Failure to return from leave of absence	f	<input type="checkbox"/>	Date of original CMS referral		
Medically unfit to pursue education	g	<input type="checkbox"/>	Must be certified by School Medical officer		
Continually absent for 20 days or more	h	<input type="checkbox"/>	Date of original CMS referral		
In custody for four months or more; on final order	i	<input type="checkbox"/>	To be agreed with LA		
Death of child	j	<input type="checkbox"/>			
Child above statutory school age	k	<input type="checkbox"/>			
Leaving Independent School	l	<input type="checkbox"/>	Give reason		

Permanent Exclusion	m	<input type="checkbox"/>				
Not moving to Reception from Nursery	n	<input type="checkbox"/>	<i>Name of school</i>		<i>Start date</i>	

APPENDIX 11: PRIVATE FOSTERING

While there is general widespread knowledge about mainstream fostering, private fostering is much lower profile with little public knowledge about what it is and what it involves.

Local authorities have a duty to raise awareness of private fostering so that organisations involved in working with children as well as members of the public are aware that the local authority needs to be notified when private fostering arrangements are identified. Once notified, the LA will send a social worker to visit the child to check that the arrangements are suitable and that the child's needs are being met.

This support can also include:

- Advice on claiming benefits and possible funding for essential items.
- Parenting support and advice
- Help in bringing families in crisis back together

The bullet points below provide a summary on private fostering.

- Private fostering is when a child under the age of 16 (under 18 if disabled) is looked after, by someone other than a person with parental responsibility or a close relative, for 28 days or more.
- Close relatives are defined as step-parents, grandparents, brothers, sisters, uncles or aunts (whether of full-blood, half-blood or marriage).
- Children can end up being privately fostered for a variety of reasons including family breakdown, parents having physical or mental health problems and parents working overseas.
- Parents of children being privately fostered or private foster carers are required by law to notify their local authority as soon as they become aware the arrangement will be in place for more than 28 days. It is a legal requirement as children in such situations may be vulnerable and the local authority has legal duties to assess and promote the welfare of privately fostered children.
- The local authority also has a duty to make enquiries about the suitability of carers before children are placed with them (where prior notification has been given) and appoint a private fostering officer to monitor compliance with the notification system.
- Once aware of a private fostering arrangement, the local authority will:
 - Notify all agencies working with the child about the arrangement
 - Assess the child's needs and whether the private fostering arrangement is in the best interest of the child
 - Support private foster carers, parents and child, where appropriate to draw up an agreement to meet the child's needs
 - Ensure the child is visited every six weeks in the first year and every three months thereafter.

APPENDIX 12:

Barnet Safeguarding Partnership Resolution Policy

If a child is in immediate danger please call 999

Introduction

- Effective working together depends on an open approach and honest relationships between agencies. Problem resolution is an integral part of professional co-operation and joint working to safeguard children.
- Problem resolution is across all partner agencies
- Occasionally situations arise when workers within one agency feel that the actions, inaction or decisions of another agency do not adequately safeguard a child. This inter-agency policy defines the process for resolving such professional difference and should be read alongside the London Child Protection Procedures and relevant internal policies on escalating matters of concern.

1.3 Disagreements can arise in a number of areas, but are most likely to arise around:

- **Levels of need**
- **Roles and responsibilities**
- **The need for action**
- **Progressing plans and communication.**

1.4 Where professionals consider that the practice of other professionals is placing children at risk of harm, they must be assertive, act swiftly and ensure that they challenge the relevant professionals in line with this policy.

The safety of individual children is the paramount consideration in any professional activity.

- Resolution should be sought within the shortest timescale possible to ensure the child is protected.
- As a guide, professionals should attempt to resolve differences through discussion within one working week or a timescale that protects the child from harm (whichever is shortest).
- Disagreements should be resolved at the lowest possible stage

1.5 Any worker who feels that a decision is not safe or is inappropriate can initially consult their supervisor/manager to clarify their thinking if required. They should be able to evidence the nature and source of the concerns and should to keep a record of all discussions.

2. Stages of Resolution

2.1 Stage One: Discuss with the other worker

2.2 The people who disagree have a discussion to resolve the problem. This discussion must take place as soon as possible and could be a telephone conversation or a face to face meeting. It should be recognised that differences in status and/or experience may affect the confidence of some workers to pursue this unsupported.

2.3 Stage Two: Escalate

Please refer to the following for how to escalate an issue in the case of:

- Barnet Children's Services
- Barnet Police

- Barnet Health agencies
- Barnet Schools

Barnet Police:

First line of escalation

“Duty officer” An Inspector or on duty in charge of the uniform response shift (24/7). For a specialist unit this may be the “Detective Inspector (DI)” but they have less coverage. In their absence it would default to the Duty Officer. If the police team dealing is not Barnet the Duty Officer would be expected to deal with this on their behalf. The contact details for them will be available from the officer dealing with the case / incident.

Second line of escalation

Between 0700hrs and 2100hrs the on duty / on call member of the “Senior Leadership Team” for Barnet. Their contact details will be available via the Duty officer. This may within office hours go to the Safeguarding lead.

Between 2100hrs and 0700hrs the Night Duty Superintendent who will be covering all of North London. The contact details will be available via the Duty Officer

Third line of escalation

The Borough Commander for Barnet police.

Barnet Schools

Where there it is believed that the response from a school does not meet the safeguarding requirements for a child, the appropriate person to escalate to is, in the first instance, the Headteacher. In schools where the Headteacher is also the Designated Safeguarding Lead, complaints should be directed to the Safeguarding Governor or Chair of Governors. If concerns have still not been resolved the school complaints/escalation procedure should be utilised. In cases where the matter is urgent or if the school is not responding in accordance with its policy contact either the Barnet Cambridge Education School Safeguarding Officer or the school’s Learning Network Inspector.

Barnet Family Services

For children accessing early help services, professionals should raise concerns at Team Around the Child meetings or other Safeguarding Partner meetings. For children subject to Child in Need, Child Protection or Child in Care Plans, concerns can be shared at the child’s Safeguarding Partner review meetings or via the Independent Reviewing Officer or Conference Reviewing Officer. Professionals should always consider the impact of professional disagreements on families attending meetings.

The following stages of resolution and escalation should be followed for children referred to, or open to Barnet Family Services

Initial resolution

Open Cases: by contacting the allocated social worker or lead professional

New Referrals: by contacting the MASH Social Worker

Out of Hours: by contacting the Emergency Duty Team (5pm – 9am Monday to Friday, weekends and Bank Holidays)

First line of escalation

Open Cases: by contacting the allocated social worker's or lead professional's Team Manager

New Referrals: by contacting the MASH Team Manager

Out of Hours: by contacting the Head of Service on Duty (5pm – 9am Monday to Friday, weekends and Bank Holidays)

Second line of escalation

Open Cases: by contacting the service area Head of Service

New Referrals: by contacting the MASH Head of Service

Third line of escalation

Open Cases or New Referrals: by contacting the relevant Family Services Operational Director

Barnet Health

Where there it is believed that the response from a health agency does not meet the safeguarding requirements for a child, the appropriate person to escalate to is in the first instance the Head of Safeguarding for the Provider organisation concerned and the Designated Nurse and Doctor NHS Barnet CCG.

If an acute safeguarding situation occurs Out of Hours which requires an immediate health assessment the Duty Paediatric team at the Hospital local to the child should be contacted.

For Barnet Hospital, the Duty Paediatric Team can be contacted through the hospital switchboard on 0208 216 4600.

2.4 Stage Three: Resolution by Senior Leaders

2.5 Escalate at the time until the matter is resolved satisfactorily or it becomes impossible to escalate further. If it cannot be resolved satisfactorily or there is a need to escalate to the Director of Children's Services, Borough Commander or Chief Operating Officer for the CCG, also notify the safeguarding chair via: BarnetSCB@barnet.gov.uk

2.6 The independent chair can be called upon to mediate on behalf of any of the partners where senior leaders are unable to resolve a situation.

2.7 There is a requirement for the record of any escalation to be placed on a child's record.

3. Additional Notes

3.1 The Independent Chair will send out a summary of the issues monthly to all heads of units. At the safeguarding Executive Group the trends and patterns and responses are considered

3.2 The Safeguarding Chair will provide an annual thematic review of issues and action taken to resolve these in order to ensure that children are kept safe.

3.3 Where issues are raised with partners from other authorities, including other local authorities, please follow the procedures as identified across stage 1. If you are unable to resolve the issue the Independent Chair can be approached to liaise with the relevant senior leaders in the other authority.

APPENDIX 13 – MODERN SLAVERY

Slavery did not end with abolition in the 19th century. Instead, it changed its forms and continues to harm people in every country in the world.

Whether they are women forced into prostitution, men forced to work in agriculture or construction, children in sweatshops or girls forced to marry older men, their lives are controlled by their exploiters, they no longer have a free choice and they have to do as they're told. They are in slavery.

Today slavery is less about people literally owning other people – although that still exists – but more about being exploited and completely controlled by someone else, without being able to leave.

Someone is in slavery if they are:

- forced to work – through coercion, or mental or physical threat;
- owned or controlled by an 'employer', through mental or physical abuse or the threat of abuse;
- dehumanised, treated as a commodity or bought and sold as 'property';
- physically constrained or have restrictions placed on their freedom of movement.

Forms of modern slavery:

- Forced labour – any work or services which people are forced to do against their will under the threat of some form of punishment.
- Debt bondage or bonded labour – the world's most widespread form of slavery, when people borrow money they cannot repay and are required to work to pay off the debt, then losing control over the conditions of both their employment and the debt.
- Human trafficking– involves transporting, recruiting or harbouring people for the purpose of exploitation, using violence, threats or coercion.
- Descent-based slavery – where people are born into slavery because their ancestors were captured and enslaved; they remain in slavery by descent.
- Child slavery – many people often confuse child slavery with child labour, but it is much worse. Whilst child labour is harmful for children and hinders their education and development, child slavery occurs when a child is exploited for someone else's gain. It can include child trafficking, child soldiers, child marriage and child domestic slavery.
- Forced and early marriage – when someone is married against their will and cannot leave the marriage. Most child marriages can be considered slavery.

For further information go to <https://www.antislavery.org/slavery-today/modern-slavery/>