



## Stormont School

### **SAFEGUARDING CHILDREN (CHILD PROTECTION) POLICY**

**This policy applies to all children in the school from the EYFS (Reception) to Form 6**

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**This policy is reviewed in full by the Board of Governors no less than annually  
Last reviewed and agreed by the Board of Governors on 16<sup>th</sup> November 2017.  
Due for review by the Board of Governors on 13<sup>th</sup> November 2018**

**The policy will be published on the website for current and prospective parents, governors and volunteers. It is available on the Central Resources Library for Staff.  
Hard copies are available from the School Office.**

## Stormont School - Safeguarding Children (Child Protection)

### **POLICY FOR SAFEGUARDING CHILDREN (CHILD PROTECTION)** **This policy covers all pupils in the school, including those in the EYFS**

#### **Important contact information:**

The Designated Safeguarding Lead (DSL) in this school is:  
Mrs Sharon Martin (Head)  
Stormont School, The Causeway Potters Bar, Hertfordshire EN6 5HA  
Telephone: 01707 654037  
Email: [smartin@stormontschool.org](mailto:smartin@stormontschool.org)

The Deputy DSL (also the DSL for EYFS and Looked After Children) in this school is:  
Miss Clare Stephens (Head of Learning Support)  
Stormont School, The Causeway Potters Bar, Hertfordshire EN6 5HA  
Telephone: 01707 654037  
Email: [cstephens@stormontschool.org](mailto:cstephens@stormontschool.org)

During term time the Designated Safeguarding Lead and/or the deputy will always be available (during school hours) for staff in the school to discuss any safeguarding concerns. Individual arrangements for out of hours/out of term activities: staff should contact the DSL (or if s/he is not available a Deputy) by telephone (home or mobile). All staff are given out of hours contact numbers for the DSL, the DDSL and other members of the SLT. If they need to speak to someone and are not able to contact the DSL or DDSL, they should contact Children's Services.

The **nominated Governor** for Child Protection issues is: **DR ALISON RITCHIE**

**Hertfordshire CPSLO consultation team** are available for professionals to give advice on all queries when a child does not meet the threshold for a referral. They can be contacted during term time and school holidays (Monday-Thursday 9.00am-5.30pm, Friday 9.00am-4.00pm) on **01438 737511**.

The **Hertfordshire Targeted Advice Service** can also advise on all queries when a child is not at immediate risk of significant harm. **Call them direct if you are not sure whether the concerns meet the threshold for safeguarding on 01438 737511.**

**Hertfordshire MASH team** can be contacted on **0300 123 4043** to make a referral; you can use this number after 5.30pm and at weekends as well as during the school day.

**Hertfordshire LADO** (Local Authority Designated Officer)

**Barnet MASH team** can be contacted on **020 8359 4066** to make a referral; you can use this number Monday-Thursday 9.00am-5.15pm and Friday 9.00am-5.00pm. Outside these hours concerns about children who need an immediate response should be reported to the **Emergency Duty Team** on **020 8359 2000**.

#### **PREVENT**

Where risks of vulnerability to being drawn into terrorism are suspected or confirmed, the member of staff should make a referral to the PREVENT team at [prevent@herts.pnn.police.uk](mailto:prevent@herts.pnn.police.uk), using the referral form that is attached. See the **Channel Referral Form** at Appendix D, and the contact details below.

**Anti-terrorist Hotline: 0800 789321**

**Police 999; Local police force: 101 (the non-emergency police number)**

<https://www.police.uk/hertfordshire/J03/>

**DfE dedicated telephone helpline and mailbox for non-emergency advice for staff and governors: 020 7340 7264 and [counter-extremism@education.gsi.gov.uk](mailto:counter-extremism@education.gsi.gov.uk).**

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### FEMALE GENITAL MUTILATION

Any information or concern that a child is at immediate risk of, or has undergone, female genital mutilation (FGM) should result in a child protection referral to Children's Services in line with the **Referrals Procedure**.

#### Mandatory Reporting Duty

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) will place a statutory duty upon **teachers, along with social workers and healthcare professionals, to report to the police** where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18 (see contact information for the police above). Those failing to report such cases will face disciplinary sanctions. It will be rare for staff to see visual evidence, and they should not be examining pupils, but the same definition of what is meant by 'to discover that an act of FGM appears to have been carried out' is used for all professionals to whom this mandatory reporting duty applies.

#### Allegations Against Staff

All allegations against staff should be reported to the LADO immediately, and within one working day at the latest. (Hertfordshire LADO: Frazer Smith 0300 123 4043). In serious cases and if a crime has been committed, the police must be informed.

The Head should, as soon as possible, **following briefing** from the LADO and the Chairman of Governors, inform the subject of the allegation.

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

- **Children's Services 0300 123 4043**
- **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**

If the concerns are about the Head, then the Chairman of Governors should be informed immediately without notifying the Head first. The Chairman of Governors in this school is:

Name: **Mr Andrew Newland** Contact Number: **01707 654037**

In the absence of the Chairman of Governors, the Governor named below should be contacted.

Name: **Dr Alison Ritchie** Contact Number: **01707 654037**

The DBS will be notified as soon as possible and within 14 days if the School dispenses with the services of a member of staff or volunteer because of their unsuitability to work with children, or would have done so if that person had not resigned. **The Disclosure and Barring Service can be contacted by**

**Telephone: 01325 953795 or Email [dbsdispatch@dbs.gsi.gov.uk](mailto:dbsdispatch@dbs.gsi.gov.uk)**

**Their address is:** DBS, PO Box 181, Darlington, DL1 9FA

Consideration will also be given to making a referral to the Teaching Regulation Authority (TRA) where a teacher has been dismissed (or would have been dismissed had he or she not resigned) and a prohibition order may be appropriate, because of unacceptable professional conduct or conduct that may bring the profession into disrepute or a conviction at any time for a relevant offence.

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**1. INTRODUCTION**

**Stormont School is committed to the safeguarding of all children.** Safeguarding is **everyone's** responsibility. **Everyone** who comes into contact with children and their families and carers has a role to play in safeguarding children. In order to fulfil this responsibility effectively, all professionals

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should make sure their approach is child-centred. This means that they should consider, at all times, what is in the **best interests** of the child. No single professional or individual can have a full picture of a child's needs and circumstances. If children and families are to receive the right help at the right time, **everyone** who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.

Safeguarding is defined as protecting children from maltreatment, preventing impairment of children's health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and taking action to enable all children to have the best outcomes. (Working Together to Safeguard Children, DfE, 2018, pg.6)

This Safeguarding Children (Child Protection) Policy is one of a number of documents and policies which relate to the safeguarding responsibilities of the school.

In particular this policy should be read in conjunction with the Safer Recruitment Policy, the Staff Induction Programme, the Behaviour Policy, the Anti-Bullying Policy, the Staff Code of Conduct (which includes the safe use of mobile devices), the Whistleblowing Policy and the ICT Acceptable Use Policy. The role of the Designated Safeguarding Lead (including the identity of the designated safeguarding lead and any deputies) should also be clear (included in this policy at Section 3).

With regard to e-safety, the School has filtering systems in place to keep the pupils safe when using the Internet at School, and has an additional system in place to flag and allow the reporting of inappropriate use of ICT by staff and pupils. This is overseen by the ICT Network Manager and the Deputy Head in line with the School's e-safety policy. In addition, pupils are taught about online safety in PSHEE and Computing lessons, as well as in other areas of the curriculum.

**This policy applies to all children in the school from the EYFS - Reception Form to Form 6.**

<b>Purpose of a Safeguarding Children (Child Protection) Policy</b>	To ensure that a child-centred approach is always adopted. To inform staff, parents, volunteers and the Board of Governors about the school's responsibilities for safeguarding children. To enable everyone to have a clear understanding of how these responsibilities should be carried out.
<b>Hertfordshire Safeguarding Children Board Inter Agency Child Protection Procedures</b>	The school follows the procedures established by the Hertfordshire Safeguarding Children Board: a guide to procedure and practice for all agencies in Hertfordshire working with children and their families. <a href="http://hertsscb.proceduresonline.com/index.htm">http://hertsscb.proceduresonline.com/index.htm</a>
<b>School Staff &amp; Volunteers</b>	All school staff have a responsibility to provide a safe environment in which children can learn.  School staff and volunteers are particularly well placed to observe outward signs of abuse, changes in behaviour and failure to develop because they have daily contact with children.  All school staff will receive appropriate safeguarding children training (which is updated regularly . Hertfordshire Safeguarding Children Board advises every three years), so that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse or neglect and of the appropriate procedures to follow. In addition all staff members should receive safeguarding and child protection updates (for example, via email, e-bulletins and staff meetings), as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. Temporary staff and volunteers will be made aware of the safeguarding policies and procedures by the Designated

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Safeguarding Lead, including the Child Protection Policy and staff behaviour policy (code of conduct).

### Mission Statement

Establish and maintain an ethos and culture where children feel secure, are encouraged to talk, are listened and responded to when they have a worry or concern and are taken seriously.

Establish and maintain an ethos and culture where school staff and volunteers are vigilant, feel safe, are encouraged to talk and are listened and responded to when they have concerns about the safety and well-being of a child.

Ensure children know that there are adults in the school whom they can approach if they are worried.

Ensure that children, who have additional/unmet needs are supported appropriately. This could include referral to early help services or specialist services if they are a child in need or have been / are at risk of being abused and neglected.

Consider how children may be taught about safeguarding, including online, through teaching and learning opportunities, as part of a broad and balanced curriculum. Include opportunities in the curriculum for children to develop the skills they need to recognise and stay safe from abuse.

Staff members working with children are advised to maintain an attitude of *it could happen here* and *it could be happening to this child* where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.

### Implementation, Monitoring and Review of the Child Protection Policy

The policy will be reviewed at least annually by the Board of Governors. It will be implemented through the school's induction and training programme, and as part of day to day practice. Compliance with the policy will be monitored by the Designated Safeguarding Lead.

## 2. STATUTORY FRAMEWORK

In order to safeguard and promote the welfare of children, the school will act in accordance with the following legislation and guidance:

- *The Children Act 1989*
- *The Children Act 2004*
- *Children and Social Work Act 2017*
- *Education Act (2002), section 175/157 (Outlines that Local Authorities and School Governing Bodies have a responsibility to "ensure that their functions relating to the conduct of school are exercised with a view to safeguarding and promoting the welfare of children who are its pupils".*
- *Hertfordshire Safeguarding Children Board Inter-agency Child Protection and Safeguarding Children Procedures (Electronic)*
- *Keeping Children Safe in Education (DFE 2018)*
- *Keeping Children Safe in Education: Part One- information for all school and college staff (DfE, September 2018) . APPENDIX 1*
- *Working Together to Safeguard Children (DfE 2018)*
- *The Education (Pupil Information) (England) Regulations 2005*
- *Sexual Offences Act (2003)*
- *Counter Terrorism and Security Act 2015 (Section 26)*
- *Female Genital Mutilation Act 2003 (Section 74) Serious Crime Act 2015)*

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- Anti-social Behaviour, Crime and Policing Act 2014 (makes it a criminal offence to force someone to marry. Includes taking someone overseas to force them to marry (whether or not the forced marriage takes place).

Keeping Children Safe in Education (DfE 2018) states that governing bodies and proprietors should ensure that the school contributes to multi-agency working in line with statutory guidance Working together to safeguard children.

Furthermore it also states that governing bodies and proprietors of all schools should ensure that their safeguarding arrangements take into account the procedures and practice of the local authority as part of inter-agency safeguarding procedures set up by the LSCB

### **3. THE DESIGNATED SAFEGUARDING LEAD**

(Keeping Children Safe in Education, DfE 2018 refers to this role as Designated Safeguarding Lead or DSL, and so the same term is also used at Stormont)

Governing bodies and proprietors should ensure an appropriate senior member of staff, from the school leadership team, is appointed to the role of Designated Safeguarding Lead.

During term time the designated safeguarding lead and/or the deputy will always be available (during school hours) for staff in the school to discuss any safeguarding concerns and individual arrangements for out of hours/out of term activities are as follows:

All staff are given contact telephone numbers of both the DSL and the DDSL, as well as of other members of the SLT. This is so that they can contact them at any time outside school hours.

The Designated Safeguarding Lead for Child Protection in this school is Mrs Sharon Martin (Head)

The Deputy Designated Safeguarding Lead for Child Protection (also designated for EYFS) in this school is Miss Clare Stephens (Head of Learning Support)

**The broad areas of responsibility for the Designated Safeguarding Lead are:**

#### **Managing referrals and cases**

- Refer all cases of suspected abuse or neglect to the Local Authority Children's Services (Safeguarding and Specialist Services) , Police (cases where a crime may have been committed) and to the Channel programme where there is a radicalisation concern
- Liaise with the Head Teacher or Principal to inform him/ her of issues- especially ongoing enquiries under Section 47 of the Children Act 1989 and police investigations
- Act as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies
- Support staff who make referrals
- Share information with appropriate staff in relation to a child's looked after (CLA) legal status (whether they are looked after under voluntary arrangements with consent of parents or on an Interim Care Order or Care Order) and contact arrangements with birth parents or those with parental responsibility.
- Ensure they have details of the CLA's social worker and the name of the virtual school Head Teacher in the authority that looks after the child.

#### **Training**

The Designated Safeguarding Lead should undergo formal training every two years. The DSP should also undertake Prevent awareness training In addition to this training, their knowledge and skills should be refreshed (for example via e-bulletins, meeting other DSPs, or taking time to read and digest safeguarding developments) at least annually to:

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- Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments
- Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so
- Ensure each member of staff has access to and understands the school's safeguarding and child protection policy and procedures, especially new and part time staff or volunteers
- Be alert to the specific needs of children in need, those with special educational needs and young carers
- Understand, and support the school with regards to, the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation
- Ensure that all staff know about e-safety; at Stormont annual training is put in place.
- Be able to keep detailed, accurate, secure written records of concerns and referrals
- Obtain access to resources and attend any relevant or refresher training courses
- Encourage a culture of listening and responding to children and taking account of their wishes and feelings, among all staff, in any measures the school may put in place to protect them

### Raising Awareness

The designated safeguarding person should:

- In conjunction with the SLT, ensure the school's policies (as given in Section 1, together with the procedures for checking visitors to the school), are known, understood and used appropriately.
- Ensure the school's safeguarding and child protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this.
- Ensure the safeguarding and child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school in this.
- Link with the Local Safeguarding Children's Board (LSCB) to make sure staff are aware of training opportunities and the latest local policies on safeguarding.
- Where children leave the school, ensure the file for safeguarding and any child protection information is sent to any new school as soon as possible but transferred separately from the main pupil file.
- Schools should obtain proof that the new school/education setting has received the safeguarding file for any child transferring and then destroy any information held on the child in line with data protection guidelines (see Record keeping Guidance on Hertfordshire Grid for Learning for further information).
- Ensure that all pupils are taught about keeping themselves safe and about online safety and online bullying, not only via the PSHEE / Computing curriculum but in all areas of learning (see also Annex C of KCSIE).
- Ensure that, as DSL, they can recognise the additional risks faced by children with SEN and disabilities online (for example online bullying, grooming, radicalisation) and be confident that they are capable of supporting these pupils.

#### 4. THE GOVERNING BODY

Governing bodies and proprietors must ensure that they comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and training in their school are effective and comply with the law at all times.

Governing bodies and proprietors have a senior board level lead to take leadership responsibility for the school's safeguarding arrangements.

The **nominated governor** for child protection at Stormont School is **Dr Alison Ritchie**.

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The responsibilities placed on governing bodies and proprietors include:

- their contribution to inter-agency working, which includes providing a coordinated offer of early help when additional needs of children are identified
- ensuring that an effective child protection policy is in place, together with a staff behaviour policy (Staff Code of Conduct)
- ensuring staff are provided with Part One of Keeping Children Safe in Education (DfE 2018) . Appendix 1 and are aware of specific safeguarding issues (see Appendix B)
- ensuring that staff induction and training is in place with regards to child protection and safeguarding, including action required regarding children missing from education and peer on peer abuse
- appointing an appropriate senior member of staff to act as the Designated Safeguarding Lead. It is a matter for individual schools as to whether they choose to have one or more Deputy Designated Safeguarding Lead; governors should ensure that a suitable person is also appointed to the role of DDSL.
- ensuring that all of the Designated Safeguarding Leads (including deputies) should undergo formal child protection training every two years (in line with LCSB guidance) and receive regular (annual) safeguarding refreshers (for example via e-bulletins, meeting other DSLs, or taking time to read and digest safeguarding developments)
- prioritising the welfare of children and young people and creating a culture where staff are confident to challenge senior leaders over any safeguarding concerns
- should ensure that children are taught about safeguarding, including online safety. Schools should consider this as part of providing a broad and balanced curriculum.
- ensuring appropriate filters and appropriate monitoring systems are in place to safeguard children from potentially harmful and inappropriate online material. Additional information to support governing bodies and proprietors is provided in Annex C of **Keeping Children Safe in Education (DFE 2018)**.
- Having a senior board level lead to take leadership responsibility for the organisation's safeguarding arrangements

### 5. WHEN TO BE CONCERNED

If staff have any concerns about a child's welfare, they should act on them immediately. If staff have a concern, they should follow this policy and speak to the Designated Safeguarding Lead/DSL (or deputy). The designated safeguarding lead (and any deputies) are most likely to have a complete safeguarding picture and be the most appropriate person to advise on the response to safeguarding concerns.

Any staff member should be able to make a safeguarding referral to Children's Services if necessary (see contact information at the front of this policy)

All staff should be aware of the process for making referrals to Children's Services and for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm - from abuse or neglect) that may follow a referral, along with the role they might be expected to play in such assessments.

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.

**Options will then include:**

- managing any support for the child internally via the school's own pastoral support processes;
- an early help assessment; or
- a referral for statutory services, for example as the child might be in need, is in need or suffering or likely to suffer significant harm from abuse or neglect.

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### Contextual Safeguarding

Safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside the school. All staff, but especially the designated safeguarding lead (or deputy) should be considering the context within which such incidents and/or behaviours occur. This is known as contextual safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare.

### A child centred and coordinated approach to safeguarding

Safeguarding and promoting the welfare of children is **everyone's responsibility**. In order to fulfil this responsibility effectively, each professional should make sure their approach is **child centred**. This means that they should consider, at all times, what is in the best interests of the child.

Schools and their staff form part of the wider safeguarding system for children. This system is based on the principle of providing help for families to stay together where it is safe for the children to do so, and looking at alternatives where it is not, whilst acting in the **best interests** of the child at all times.

### Children who may require early help (known as Families First in Hertfordshire – see contact information at the front of this policy)

Families First is Hertfordshire's programme of early help services for families. A directory of early help services is available at [www.hertfordshire.gov.uk/familiesfirst](http://www.hertfordshire.gov.uk/familiesfirst) and will help practitioners and families find information and support to prevent escalation of needs and crisis.

All staff should be aware of the **early help process**, and understand their role in identifying emerging problems, sharing information with other professionals to support early identification and assessment of a child's needs. It is important for children to receive the right help at the right time to address risks and prevent issues escalating. This also includes staff monitoring the situation and feeding back to the Designated Safeguarding Lead any ongoing/escalating concerns so that consideration can be given to a referral to Children's Services (Safeguarding and Specialist Services) if the child's situation doesn't appear to be improving.

If early help is appropriate, the designated safeguarding lead (or deputy) will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate.

### **Any child may benefit from early help, but all school staff should be particularly alert to the potential need for early help for a child who:**

- ~ is disabled and has specific additional needs;
- ~ has special educational needs (whether or not they have a statutory education, health and care plan);
- ~ is a young carer;
- ~ is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
- ~ is frequently missing/goes missing from care or from home;
- ~ is misusing drugs or alcohol themselves;
- ~ is at risk of modern slavery, trafficking or exploitation;
- ~ is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse;
- ~ has returned home to their family from care;
- ~ is showing early signs of abuse and/or neglect;
- ~ is at risk of being radicalised or exploited;
- ~ is a privately fostered child.

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School staff members should be aware of the main categories of maltreatment: **physical abuse, emotional abuse, sexual abuse and neglect**. They should also be aware of the indicators of maltreatment and **specific safeguarding issues** so that they are able to identify cases of children who may be in need of help or protection.

See Appendix A for information on indicators of abuse and Appendix B for specific safeguarding issues.

### Children with special educational needs and disabilities

Additional barriers can exist when recognising abuse and neglect in this group of children. This can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's impairment without further exploration;
- Assumptions that children with SEN and disabilities can be disproportionately impacted by things like bullying- without outwardly showing any signs;
- Communication barriers and difficulties
- Reluctance to challenge carers , (professionals may over empathise with carers because of the perceived stress of caring for a disabled child)
- Disabled children often rely on a wide network of carers to meet their basic needs and therefore the potential risk of exposure to abusive behaviour can be increased.
- A disabled child's understanding of abuse.
- Lack of choice/participation
- Isolation

### Peer on peer abuse

Education settings are an important part of the inter-agency framework not only in terms of identifying, evaluating and referring concerns to Children's Services and the Police, but also in the assessment and management of risk that the child or young person may pose to themselves and others in the education setting.

If one child or young person causes harm to another, this should not necessarily be dealt with as abuse. When considering whether behaviour is abusive, it is important to consider:

- Whether there is a large difference in power (for example age, size, ability, development) between the young people concerned; or
- Whether the perpetrator has repeatedly tried to harm one or more other children; or
- Whether there are concerns about the intention of the alleged perpetrator.

**All** staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to:

- ~ bullying (including cyberbullying);
- ~ physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- ~ sexual violence and sexual harassment;
- ~ sexting (also known as youth produced sexual imagery); and
- ~ initiation/hazing type violence and rituals.

**All staff should be aware that abuse is abuse and peer on peer abuse will never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up". Furthermore they should recognise the gendered nature of peer on peer abuse (i.e. that it is more likely that girls will be victims and boys perpetrators), but that all peer on peer abuse is unacceptable and will be taken seriously.**

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Hertfordshire County Council recommends that education settings use The Sexual Behaviours Traffic Light Tool by the Brook Advisory Service to help professionals; assess and respond appropriately to sexualised behaviour. The traffic light tool can be found at <https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool>

Guidance on responding to and managing sexting incidents can be found at: [http://www.thegrid.org.uk/info/welfare/child\\_protection/reference/index.shtml#sex](http://www.thegrid.org.uk/info/welfare/child_protection/reference/index.shtml#sex)

Staff should recognise that children are capable of abusing their peers and should not be tolerated or passed off as banter+or part of growing up+

In order to minimise the risk of peer on peer abuse the school:

- Provides a developmentally appropriate PSHEE curriculum which develops students understanding of acceptable behaviour and keeping themselves safe (for example the school's behaviour policy, anti-bullying policy, learning about cyberbullying, online safety, Impero/Confide, stranger danger, NSPCC underpants / good touch, bad touchrules)
- Has systems in place for any student to raise concerns with staff, knowing that they will be listened to, believed and valued (anti-bullying policy, mentoring, form teachers, regular assemblies)
- Ensures victims, perpetrators and any other child affected by peer on peer abuse will be supported (for example, the anti-bullying policy stipulates support should be given to both bully and victim, and work should be done with other affected pupils to follow up afterwards; in the case of sexual abuse, specialist support would be sought)
- Develops robust risk assessments where appropriate (e.g. Using the Risk Assessment Management Plan and Safety and Support Plan tools).
- Has relevant policies in place (e.g. behaviour policy, safeguarding policy).
- **Where there is an allegation or concern that a child has abused others Section 4.4 of the Hertfordshire Safeguarding Children Board Procedures Manual (Electronic), 'Children Who Abuse Others', will be followed:**  
[http://hertsscb.proceduresonline.com/chapters/p\\_chil\\_abuse.html](http://hertsscb.proceduresonline.com/chapters/p_chil_abuse.html)

Staff should also refer to Part 5 of Keeping Children Safe in Education (DfE 2018) – 'Child on child sexual violence and sexual harassment':

<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

### 6. DEALING WITH A DISCLOSURE

If a child discloses that he or she has been abused in some way, the member of staff / volunteer 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
- Never promise a child that they will not tell anyone - as this may ultimately not be in the best interests of the child.
- Reassure him or her that what has happened is not his or her fault
- Stress that it was the right thing to tell
- Listen, only asking questions when necessary to clarify
- Not criticise the alleged perpetrator
- Explain what has to be done next and who has to be told
- Make a written record (see Record Keeping . next section)

## Stormont School - Safeguarding Children (Child Protection)

- Pass the information to the Designated Safeguarding Lead without delay

### Support

Dealing with a disclosure from a child, and safeguarding issues can be stressful. The member of staff/volunteer should, therefore, consider seeking support for him/herself and discuss this with the Designated Safeguarding Lead.

**If a school staff member receives a disclosure about potential harm caused by another staff member, they should see section 11 of this policy– *Allegations involving school staff/volunteers.***

## 7. RECORDKEEPING

All practitioners should be confident of the processing conditions under the Data Protection Act 2018 and the GDPR which allow them to store and share information for safeguarding purposes, including information which is sensitive and personal, and should be treated as special category personal data

All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing. If in doubt about recording requirements staff should discuss with the designated safeguarding lead.

When a child has made a disclosure, the member of staff/volunteer should:

- Record as soon as possible after the conversation. Use the school record of concern sheet wherever possible. (see Appendix C)
- 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 injuries
- Record statements and observations rather than interpretations or assumptions
- Do not destroy the original records in case they are needed by a court

All records need to be given to the Designated Safeguarding Lead promptly. No copies should be retained by the member of staff or volunteer.

The Designated Safeguarding Lead will ensure that all safeguarding records are managed in accordance with the Education (Pupil Information) (England) Regulations 2005.

Where children leave the school, the Designated Safeguarding Lead should ensure their child protection file is transferred to the new school as soon as possible, ensuring secure transit, and confirmation of receipt should be obtained. For schools, this should be transferred separately from the main pupil file. Receiving schools should ensure key staff such as Designated Safeguarding Leads and SENCOs are aware as required. If the child has an allocated social worker, they will also inform them of the change of school.

In addition to the child protection file, the Designated Safeguarding Lead should also consider if it would be appropriate to share any information with the new school in advance of a child leaving. For example, information that would allow the new school to continue supporting victims of abuse and have that support in place for when the child arrives.

## 8. CONFIDENTIALITY

Safeguarding children raises issues of confidentiality that must be clearly understood by all staff/volunteers in schools.

## Stormont School - Safeguarding Children (Child Protection)

- All staff in schools, both teaching and non-teaching staff, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (Children's Services: Safeguarding and Specialist Services and the Police).
- If a child confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality. Instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe. This will ultimately be in the best interests of the child.
- Staff/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

### 9. SCHOOL PROCEDURES

*Please see Appendix E: What to do if you are worried a child is being abused: flowchart.*

If any member of staff is concerned about a child he or she must inform the Designated Safeguarding Lead. The Designated Safeguarding Lead will decide whether the concerns should be referred to Children's Services: Safeguarding and Specialist Services. If it is decided to make a referral to Children's Services: Safeguarding and Specialist Services this will be discussed with the parents, unless to do so would place the child at further risk of harm.

While it is the DSPs role to make referrals, any staff member can make a referral to Children's Services. If a child is in immediate danger or is at risk of harm (e.g. concern that a family might have plans to carry out FGM), a referral should be made to Children's Services and/or the Police immediately (see contact information at the front of this policy). Where referrals are not made by the DSP, the DSP should be informed as soon as possible.

If a **teacher** (persons employed or engaged to carry out teaching work at schools and other institutions in England), in the course of their work in the profession, discovers that an act of Female Genital Mutilation (FGM) appears to have been carried out on a girl under the age of 18 the **teacher** must report this to the police. **This is a mandatory reporting duty.** See Appendix 1- Keeping Children Safe in Education (DfE 2018): Annex A for further information. (see also contact information at the front of this policy).

If the allegations raised are against other children, the school should follow section 4.4 of the Hertfordshire Safeguarding Children Board Procedures Manual. Children Who Abuse Others. Please see the school's anti-bullying policy for more details on procedures to minimise the risk of peer on peer abuse.

The member of staff must record information regarding the concerns on the same day. The recording must be a clear, precise, factual account of the observations. (see Appendix C)

Particular attention will be paid to the attendance and development of any child about whom the school has concerns, or who has been identified as being the subject of a child protection plan and a written record will be kept.

If a pupil who is/or has been the subject of a child protection plan changes school, the Designated Safeguarding Lead will inform the social worker responsible for the case and transfer the appropriate records to the Designated Safeguarding Lead at the receiving school, in a secure manner, and separate from the child's academic file.

The Designated Safeguarding Lead is responsible for making the senior leadership team aware of trends in behaviour that may affect pupil welfare. If necessary, training will be arranged.



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reported directly to the Local Authority Designated Officer (LADO). (see contact information) Staff may consider discussing any concerns with the Designated Safeguarding Lead if appropriate make any referral via them but can also report directly. (See Keeping Children Safe in Education: Part Four, DfE 2018, for further information).

The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification; it is important not to make assumptions. Confidentiality should not be promised and the person should be advised that the concern will be shared on a need to know basis only.

Actions to be taken include making an immediate written record of the allegation using the informant's words . including time, date and place where the alleged incident took place, brief details of what happened, what was said and who was present. This record should be signed, dated and immediately passed on to the Head.

The recipient of an allegation must **not** unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.

The Head / Chair of Governors will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Local Authority Designated Officer:

Children's Services . 03001234043

SOOHS (Out of Hours Service-Children's Services) . 03001234043

If the allegation meets any of the three criteria set out at the start of this section, contact should always be made with the Local Authority Designated Officer without delay.

If it is decided that the allegation requires a child protection strategy meeting or joint evaluation meeting, this will take place in accordance with section 4.1 of the Hertfordshire Safeguarding Children Board Inter-agency Child Protection and Safeguarding Children Procedures.

If it is decided it does not require a child protection strategy meeting or joint evaluation meeting, the LADO will provide the employer with advice and support on how the allegations should be managed.

The Head should, as soon as possible, **following briefing** from the Local Authority Designated Officer, inform the subject of the allegation.

### **For further information see:**

HSCB Inter-agency Child Protection and Safeguarding Children Procedures (Electronic)  
Section 4.1 Managing Allegations Against Adults who work with Children and Young People

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

- Children's Services 0300 123 4043
- 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](mailto:help@nspcc.org.uk)

### **Safer working practice**

Allegations against staff may, after investigation, be found to be substantiated, malicious, false, unsubstantiated or unfounded. To reduce the risk of allegations, all staff should be aware of safer

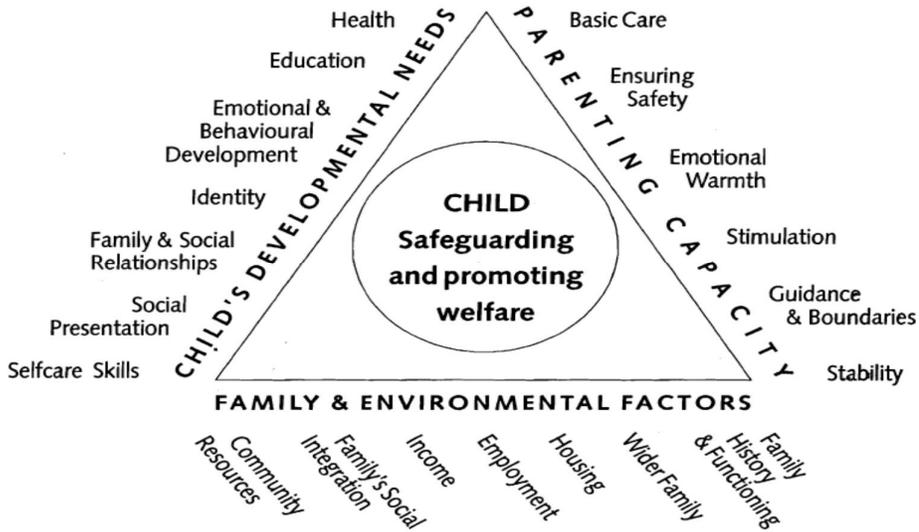
## Stormont School - Safeguarding Children (Child Protection)

working practice and should be familiar with the guidance contained in the staff handbook/ school code of conduct / staff behaviour policy and Safer Recruitment Consortium document ***Guidance for safer working practice for those working with children and young people in education settings (September 2015)*** available at [http://www.thegrid.org.uk/info/welfare/child\\_protection/allegations/safe.shtml](http://www.thegrid.org.uk/info/welfare/child_protection/allegations/safe.shtml)

The document seeks to ensure that the responsibilities of school leaders towards children and staff are discharged by raising awareness of illegal, unsafe, unprofessional and unwise behaviour. This includes guidelines for staff on positive behaviour management in line with the ban on corporal punishment (School Standards and Framework Act 1998). Please see the school's behaviour policy for more information.

**INDICATORS OF ABUSE AND NEGLECT**  
 (Appendix 4 of Hertfordshire Model Child Protection Policy)

The framework for understanding children’s needs:



**Working Together to Safeguard Children (DFE, 2015)**

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.	
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 injurie	Fabricated or induced illness -
Parent	
Parent with injuries	Family/environment
Evasive or aggressive towards child or others	History of mental health, alcohol or drug misuse or domestic violence.
Explanation inconsistent with injury	Past history in the family of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
	Marginalised or isolated by the community.

## Stormont School - Safeguarding Children (Child Protection)

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>The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as over protection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.</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 loneqFrozen 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.

Neglect
<p>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</p>

## Stormont School - Safeguarding Children (Child Protection)

<p>pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:</p> <ul style="list-style-type: none"> <li>~ provide adequate food, clothing and shelter (including exclusion from home or abandonment);</li> <li>~ protect a child from physical and emotional harm or danger;</li> <li>~ ensure adequate supervision (including the use of inadequate care-givers); or</li> <li>~ ensure access to appropriate medical care or treatment.</li> </ul> <p>It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.</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	Abnormal voracious appetite at school or nursery
Untreated medical problems	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	

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

## Stormont School - Safeguarding Children (Child Protection)

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.

**Hertfordshire CPSLO Service**

**KEEPING CHILDREN SAFE IN EDUCATION (DfE September 2018)**

**Part One: Information for all school and college staff**

**Annex A: Further information**

On publication of this Child Protection Policy (July 2018), the CPSLO Service have therefore decided to provide the hyperlink only to Keeping Children Safe in Education in this policy rather than the document in its entirety, due to the potential for updates to the content.

**All** staff should have access and have read Part 1 and Annex A (which provides further information specific forms of abuse and safeguarding issues). of this statutory guidance. They should also have the opportunity to seek clarity from designated staff for any content.

This is to assist staff to understand and discharge their role and responsibilities as set out in this guidance.

We highly recommend that staff are asked to sign to say they have read these sections (please see Appendix 2) and should subsequently be re-directed to these documents again should any changes occur.

**Link to Keeping Children Safe in Education (DfE, 2018):**

<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

**Record of Concern**

**APPENDIX C**

Guidance for the completion of this form can be found:

[http://www.thegrid.org.uk/info/welfare/child\\_protection/proformas/index.shtml](http://www.thegrid.org.uk/info/welfare/child_protection/proformas/index.shtml)

<b>Name of Child / young person:</b>		<b>Date of birth and age:</b>	
<b>Male/female :</b>	<b>Ethnic Origin :</b>	<b>Disability Y/N :</b>	<b>Religion :</b>
<b>Day &amp; date</b>	<b>Month</b>	<b>Year</b>	<b>Time recorded / reported</b>
<p><b>Initial report of the concern / s:</b> <i>In factual terms; and use of open ended questions to clarify e.g. Who, what, when and how What did the CYP say? How are they feeling? How is their behaviour? Are there any signs of injuries or pain? ( if so illustrate on body map) Are any other children or adults involved?</i></p>			
<p><b>Additional information:</b> <i>Your views on what you know about the CYP e.g. Any previous concerns? How are they doing in school? Any comments on their presentation, their personal circumstances (such as health, development and whether they have any additional needs), their identity, race, religion and/or if known, their social relationships with their family, friends and wider networks?</i></p>			
<p><b>Your response and actions to the concern:</b> <i>What you have done / said to CYP or agreed to do?</i></p>			
<p><b>Your name :</b>  <b>Your role or position:</b>  <b>Your signature :</b>  <i>If not an employee of the school, please ensure you provide your contact details, should the DSP need to contact you regarding your concern.</i></p>			
<p><b>Headteacher/ DSP's immediate response and actions taken:</b> <i>Include sharing and gathering information, speaking to CYP, parents or carers and gauging their response. This may also include undertaking a professional consultation. Has any immediate risk assessment been carried out if so what?</i></p>			
<p><b>Information shared with Parents / carers?</b> <i>Are they aware of schools concerns / actions carried out to support / safeguard CYP? Do you have consent for this? If not rationale for not sharing information?</i></p>			
<p><b>Information shared with other staff/ agencies?</b> <i>Who, what, how and your rationale for this?</i></p>			
<p><b>Outcome for the CYP:</b> <i>What level of intervention is required to safeguard and promote the CYP welfare? i.e. where does this level of need sit on the <b>Continuum of Need document</b></i>  <a href="http://www.thegrid.org.uk/info/welfare/child_protection/referral/index.shtml#need">www.thegrid.org.uk/info/welfare/child_protection/referral/index.shtml#need</a>  <i>- Universal, Targeted, Intensive Support or Specialist/Safeguarding?</i></p>			
<p><b>Feedback given to member of staff reporting concern:</b> <i>This is to be an overview omitting any confidential information, consider 'need to know'</i></p>			
<b>Your name :</b>		<b>Your signature :</b>	
<b>Your role or position:</b>			
<b>Date, day and time of this recording :</b>			

**Checklist for DSP (to be printed on back of record of concern form)**

- ✓ Child clearly identified?
- ✓ Name, designation and signature of the person completing the record populated?
- ✓ Date, day and time of any incidents or when a concern was observed?
- ✓ Date, day and time of written record?
- ✓ If a third party has raised concerns, are details of this person included (name, relationship to the child and their contact details if relevant)?
- ✓ Distinguish between fact, opinion and hearsay
- ✓ Concern described in sufficient detail, i.e. no further clarification necessary?
- ✓ Child’s own words used? (Swear words, insults, or intimate vocabulary should be written down verbatim.)
- ✓ Are the names of all parties who were involved in the incident, including any witnesses to an event included? Is it clear what their relationship is to the child?
- ✓ Record free of jargon?
- ✓ Written in a professional manner without stereotyping or discrimination?
- ✓ What did the member of staff say or do in response to the concern?
- ✓ Record of concern completed in a timely manner?
- ✓ Record of concern passed to DSP in a timely manner?
- ✓ The record includes an attached completed body map (if relevant) to show any visible injuries (body map available at [www.thegrid.org.uk/info/welfare/child\\_protection/proformas/index.shtml](http://www.thegrid.org.uk/info/welfare/child_protection/proformas/index.shtml) )
- ✓ Is any additional paperwork, e.g. handwritten notes of conversation with parents attached securely to this record?
- ✓ Has DSP completed their sections in full- including action taken and outcome, feedback to staff and information sharing?
- ✓ If the concerns have not been referred to Children’s Services/Police, are the reasons clearly recorded by the DSP?

<b>Audit date:</b>		<b>Audited completed by:</b>	
<b>Overall RAG rating (see key below)</b>			
<b>Action needed</b>	<b>Timescale</b>	<b>Name and position of person responsible</b>	<b>Date action completed</b>

<b>RED</b>	<b>Indicates that information from the checklist is lacking and deficiencies need to be addressed as a matter of urgency</b>
<b>AMBER</b>	<b>Indicates that key information is included but recording could be further improved</b>
<b>GREEN</b>	<b>Indicates that the recording meets the above required standards</b>

*If you intend to give a copy of the above action plan to the member of staff, please ensure they are not given page 1, i.e. the actual record of concern form which contains confidential details.*

Please forward completed forms to the PREVENT team at [prevent@herts.pnn.police.uk](mailto:prevent@herts.pnn.police.uk)

NOT PROTECTIVELY MARKED when incomplete

**CHANNEL REFERRAL FORM**

Name of Subject:		DOB:
Guardian:		Relationship:
Ethnicity:	Place of Birth:	Religion:
Address		Referral Date
Telephone number		
Author		Organisation
Contact Details		
<p>This form is to help you refer concerns to CHANNEL, regarding an individual who may be vulnerable to being drawn into terrorism. On the reverse are questions which may assist in helping you quantify and structure your concerns in order to better record them below. They are intended as a guide to help communicate your professional judgement about what has led you to make this referral. Completed forms should be sent to the Channel team.</p>		
<p>What is the behaviour / occurrence that has led you to make this referral</p>		
<b>Assessment</b>	<b>Comment / Evidence</b>	
Faith / Ideology		
Personal / emotional & Social		
Risk / Protective factors		
Desire for change		

## **From what you know of the referral:**

### **Faith / Ideology**

Are they new to a particular faith / faith strand? What was the context of their conversion?

Do they seem to have naïve, narrow or limited religious / political knowledge?

Are there concerns about a highly inconsistent vocalisation / practicing of their faith?

Have there been sudden changes in their observance, behaviour, interaction or attendance at their place of worship / organised meeting?

Have there been specific examples or is there an undertone of ~~them~~ and ~~Us~~ language or violent rhetoric being used or behaviour occurring?

Is there evidence of increasing association with a closed tight knit group of individuals / known recruiters / extremists / restricted events?

Are there particular grievances either personal or global that appear to be unresolved / festering?

Has there been an increase in unusual or sudden travel abroad without satisfactory explanation?

### **Personal / Emotional / Social Issues**

Are there concerns over conflict with their families regarding religious beliefs / lifestyle choices?

Is there evidence of cultural anxiety and / or isolation linked to insularity / lack of integration?

Is there evidence of increasing isolation from family, friends or groups towards a smaller group of individuals or a known location?

Is there history in petty criminality and / or unusual hedonistic behaviour (alcohol/drug use, casual sexual relationships, and addictive behaviours)?

Have they got / had extremist propaganda materials (DVDs, CDs, leaflets etc.) in their possession?

Do they associate with negative / criminal peers or known groups of concern?

Are there concerns regarding their emotional stability and or mental health?

Is there evidence of participation in survivalist / combat simulation activities, e.g. paint balling?

### **Risk / Protective Factors**

What are the specific factors which are contributing towards making the referral more vulnerable to radicalisation by others or moving towards violent extremism? E.g; mental health, language barriers, cultural anxiety, impressionability, criminality, specific grievance etc.

Is there any evidence of others targeting or exploiting these vulnerabilities or risks?

What factors are there already in place or could be developed to firm up support for the referral or help them increase their resilience to negative influences? E.g. positive family ties, employment, mentor / agency input etc.

### **Desire for Change**

Do they have the ability to change with / without support? Why / Why not?

How motivated are they to make steps towards changing their attitudes and behaviour?

How sustainable do you think their motivation / desire is?

What to do if you are worried a child is being abused: **advice for practitioners (DFE 2015)**  
Flowchart

