

THE CHILDREN'S HOSPITAL SCHOOL



Safeguarding and Child Protection Policy & Procedures at
The Children's Hospital School at GOSH & UCLH

The Children's Hospital School at Great Ormond Street & UCLH		
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Part A: Core Operational and Policies

1 Purpose of policy

This policy sets out how the school will meet its statutory duty under section 175 of the Education Act 2002 to safeguard and promote the welfare of children and help them to achieve good outcomes. The school will achieve this by providing a safe learning environment and ensuring school staff have the skills and knowledge to take action where children are in need of help or protection. The school/college takes a holistic approach to safeguarding, and children's safety and welfare will be the key focus when developing policies so that the school/college environment and culture is one where:

- pupils know how to raise concerns, feel safe to raise concerns and are confident that their concerns will be taken seriously;
- staff are equipped to deal sensitively and effectively with concerns and disclosures;
- inclusive and anti-discriminatory behaviour is an expectation for staff and pupils;
- all forms of bullying, harassment and discrimination, or inappropriate, sexualised or offensive language and behaviour are not tolerated;
- the wishes and feelings of pupils are taken into account at all times.

The staff at The Children's Hospital School should not investigate concerns themselves, but have a key role in referring them to GOSH Social Work Dept.

Staff should read carefully Appendix 4 of this document and ensure that they comply with childcare legislation requiring self-disclosure of certain criminal offences for those working in a regulated activity.

Linked policies

This policy should be read in conjunction with the schools' other internal policies relevant to safeguarding and child protection - see below.

- Online Safety Policy (*Online Safety Lead – William Lau -Assistant Head*)
- Safer Recruitment Policy
- Whistleblowing Policy
- Dealing with Allegations against Staff
- Missing Child Policy – to be renamed at review to 'Children Missing or Absent from School Policy'
- Uncollected Child Procedure
- The Positive Touch Policy
- Health & Safety Policy
- Looked After Children Policy
- Relationships policy (anti-bullying)
- Relationships and Sex Education policy (currently in draft)

School staff should also read the GOSH and UCLH Safeguarding Children and Young People policies and guidance

2 Roles and Responsibilities

The Children's Hospital School operates on two sites: Great Ormond Street Hospital (GOSH) and University College Hospital (UCLH). Staff, Governors and Volunteers working on either site will therefore follow and adhere at all times to the guidance, child protection policy and procedures issued by the GOSH NHS Trust or UCLH NHS Foundation Trust as appropriate.

The Children's Hospital School pays due regard to the child protection policy and practices and guidance of Camden LA.

2.1 Governing Body

The governing body will ensure that the school meets its statutory duties with regard to safeguarding and protecting pupils and that processes are in place to enable staff to understand the nature of safeguarding children in education and their role and responsibilities in doing so. In particular, the governing body will ensure the following:

- The school has the following policies in place and that these are regularly monitored, reviewed and updated where necessary;
- - safeguarding and child protection policies and procedures that are consistent with Camden Safeguarding Children Board procedures and Camden's internal policies, early help, online safety, extra-familial harm and child on child abuse
 - a staff handbook that includes: the staff code of conduct, staff/pupil relationships, dealing with low level concerns and allegations, whistleblowing, communications and staff use of social media (this is also covered in the Acceptable Use Policy)
 - a behaviour policy (known as Relationships Policy at GOSH/UCH) that includes measures for bullying and harassment, including prejudice based and discriminatory bullying
- The school is able to work jointly with other professionals in the hospital and other agencies in order to ensure pupils can access help and support from early help services and statutory social work services and that children's plans are implemented and monitored.
- There is a nominated governor with responsibility for liaising with Camden Safeguarding Partners for safeguarding and child protection matters and who links with the LADO in the event of an allegation against the head teacher.

- A senior member of staff is appointed the designated safeguarding lead with responsibility for carrying out the statutory duties as set out in this policy, the individual is given sufficient time and resources to carry out their responsibilities and that another member of staff is appointed to deputise in their absence.
- There is a designated teacher nominated to promote the educational achievement of looked after children and previously looked after children and that this person has received appropriate training for the role.
- Staff receive a thorough induction on joining and are given copies of all relevant safeguarding and child protection policies and the staff code of conduct.
- Staff are confident that they can raise issues with leaders where there are concerns about safeguarding practice at the school/college and there are robust whistleblowing procedures in place.
- Steps are taken to ensure parents and pupils are aware of the school's safeguarding and child protection policies and procedures.
- Governors take steps to ensure children are given opportunities within the curriculum to learn how to keep themselves safe, including on-line safety.
- The school has appropriate written procedures in place to ensure safe recruitment practices, to deal with allegations against staff or volunteers and to report matters to the Disclosure and Barring Service as required, and that these policies are consistent with statutory guidance and reviewed on an annual basis.
- At least 1 member of the governing body has undertaken safer recruitment training.
- All staff receive safeguarding and child protection training at least every 2 years and receive regular updates from the designated safeguarding lead to ensure they remain up to date with new legislation.
- The school has procedures in place to deal with allegations made against other pupils
- Children's wishes and feelings are taken into account when deciding on what action to take or services to provide to protect individual children and there is a robust system in place for gaining feedback from pupils.

2.2 The Head Teacher and Senior Leadership team

The Head Teacher and the Senior Leadership team will ensure that the school meets its statutory safeguarding duty by ensuring the following:

- All staff are aware of their role and responsibilities for safeguarding under Part 1 of the guidance *Keeping children safe in education (2023)*.
- Staff are inducted thoroughly so that they are fully aware of the school safeguarding and child protection policies and the relationships policy and are able to fully implement these.
- All staff are able to identify those children who need extra help and can make appropriate referrals to early help services.
- All staff are vigilant to harm and abuse, are able to identify those children for whom there are safeguarding and child protection concerns and know how to make appropriate referrals to the social work team.
- Staff are able to work in partnership with other agencies to safeguard children, including contributing to assessments and the implementation of the child's plan, attending network meetings and case conferences, monitoring children's progress and liaising with social workers.
- Safer recruitment practice is followed when recruiting to posts and appropriate action is taken whenever an allegation is made against a member of staff.
- The school offers a safe environment for staff and pupils to learn.
- Safeguarding issues are brought to the attention of the Governing Body.

2.3 Role of the Designated Safeguarding Lead

The role of the Designated Safeguarding Leads is to:

- Liaise with and manage referrals to relevant agencies such as Children's Safeguarding and Social Work (CSSW) the LADO, the Channel Panel, the Disclosure and Barring Service (DBS) and the hospital social work team.
- Keep the head teacher, senior leadership team and the Governing Body informed of on-going safeguarding and child protection issues and enquiries.
- Provide advice and guidance to staff on safeguarding and child protection issues and making referrals and support them through the referral process;
- Ensure the school's safeguarding and child protection policies are up to date and consistent with Camden's Safeguarding Partners' policies and that policies are reviewed annually.

- Ensure all staff, including temporary staff, are aware of and understand the policies and procedures and are able to implement them through robust induction processes;
- Attend regular training, including Prevent awareness training and designated teachers' meetings in order to keep up to date with new policy, emerging issues and local early help, safeguarding and child protection procedures and working practices.
- provide regular updates received from Camden to all staff members and governors on any changes in safeguarding or child protection legislation (updated information will be provided by Camden at the designated teachers meeting; they may decide to hold workshops or discuss in staff meetings)
- Have an awareness of those children who may be more vulnerable to poor educational outcomes due to safeguarding and other issues such as children in need, children with child protection plans, children with mental health issues, young carers and children who have special educational needs;
- Liaise with the SENCO when considering any safeguarding action for a child with special needs;
- Liaise with the Senior Leadership team), colleagues in the hospital as appropriate where there safeguarding concerns linked to mental health issues;
- Ensure staff understand the higher risk of vulnerability for children with SEN and disabilities in terms of bullying, peer group isolation and how their behaviour, mood and injury may relate to abuse and not just their SEN and disability.
- Liaise with the designated teacher for LAC and Virtual Head teachers whenever there are safeguarding concerns relating to a looked after child or previously looked after child;
- Oversee child protection systems within the school, including the management of records, ensuring confidentiality, standards of recording concerns and referral processes.
- Provide a link between the school and other professionals in the hospital and external agencies, particularly, CSSW and the Camden Safeguarding Partners
- Ensure staff, including temporary staff, receive appropriate safeguarding and child protection training every 2 years. This will include training on online safety, and on recognizing the early signs of child-on-child abuse including sexual violence and sexual harassment;

- Encourage a culture where children are listened to, their views taken into account and where they are encouraged to participate in keeping themselves safe;
- Ensure parents are fully aware of the school policies and procedures and that they are kept informed and involved.
- Ensure relevant records are passed on appropriately when children transfer to other schools.

2.4 Working with parents and carers

The school recognises the importance of working in partnership with parents and carers to ensure the welfare and safety of pupils.

The school will:

- Make parents aware of the school's statutory role in safeguarding and promoting the welfare of pupils, including the duty to refer pupils on where necessary, by making all school policies available on the school website or on request
- Provide opportunities for parents and carers to discuss any problems with teachers and other relevant staff
- Consult with and involve parents and carers in the development of school policies to ensure their views are taken into account
- Ensure a robust complaints system is in place to deal with issues raised by parents and carers
- Provide advice and signpost parents and carers to other services and resources where pupils need extra support.
- Complete a risk assessment with the parents and carers, and the medical team on the ward, prior to pupils attending the schoolroom or prior to a school trip.

2.5 Multi-agency working

The school will work in partnership with relevant agencies in order to meet its obligations under section 11 of the Children Act 2004 and Working together to Safeguard Children 2018, Keeping Children Safe in Education 2020 and Information Sharing 2018.

The school recognises its vital role in safeguarding children up to age of 18 and will co-operate with local Safeguarding Partners to ensure joint working with partner agencies in order to improve outcomes for all children.

Weekly Multi-Disciplinary Team (MDT), and Psychosocial meetings are attended by a member of the school safeguarding team or the Extended Leadership team. Cases of individual families are discussed and any observations or concerns from school or medical professionals are shared. A member of the hospital social work team is always in attendance. Any concerns from other professionals may be added to our database and shared with school staff as appropriate.

2.6 Contacting the Police

In the event that a criminal offence takes place on the school/college premises or police assistance is needed to deal with incidents, the school/college will follow the guidance set out in the NSPCC guidance *When to call the police*.

[when-to-call-the-police--guidance-for-schools-and-colleges.pdf \(npcc.police.uk\)](https://www.npscc.police.uk/when-to-call-the-police--guidance-for-schools-and-colleges.pdf)

3 Safeguarding children

The school will carry out its duty to safeguard pupils which is:

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

To achieve these aims, the school will:

- Identify children who need extra help at an early stage and make appropriate hospital referrals for an early help service to prevent concerns escalating. See Appendix for list of groups of children whose circumstances mean they will require early help.
- Monitor and review any early help provision to ensure outcomes for the child are improving. If it is believed that this is not the case, consideration should be given to making a referral for a statutory social work service
- Identify children who may be suffering from significant harm and make a child protection referral to the hospital social work department, Camden Safeguarding Partners, CSSW or FSSW as appropriate.

- Seek parental consent for referral but a referral will be made regardless of consent being given in cases there are safeguarding concerns about the child and making a referral is a proportionate response to those concerns.
- Share information and work in an integrated way to ensure a coordinated response from agencies to support families and meet the child's needs. At UCH this will be through morning handover briefings.
- Ensure good communication between School and GOSH Social Work staff. GOSH Social Work staff have a responsibility to alert the School if there is a patient or sibling of a patient subject to child protection or safeguarding concerns.

4 Child protection procedures

4.1 Role of school

The school will work to the following policy documents in order to support the protection of pupils who are at risk of significant harm.

- Working together to safeguard children (*DfE 2018*)

[Working together to safeguard children: a guide to inter-agency working to safeguard and promote the welfare of children - About the Department](#)

- What to do if you're worried a child is being abused (*DCSF 2015*)

<https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2>

- The London Safeguarding Children Board procedures

[The London Safeguarding Children Board child protection procedures](#)

- Keeping children safe in education (*DFE 2023*)

[Keeping children safe in education 2023 \(publishing.service.gov.uk\)](#)

In line with these policies and procedures, the school will:

- Identify those pupils where there are child protection concerns and make a referral to the Social work team or CSSW
- Attend child protection case conferences in order to share effectively information about risk and harm
- Contribute to the development and monitoring of child protection plans as a member of the core group

- Carry out the school's role in implementing the child protection plan, continually monitoring the child's wellbeing and liaising with the allocated social worker as required.
- Offer a curriculum with opportunities for pupils to learn how to keep themselves safe, including online, and offer guidance on healthy relationships in line with the new statutory duty to provide relationships and sex education.

4.2 Recognition

- Staff have a responsibility to identify those children who are suffering from abuse or neglect and to ensure that any concerns about the welfare of a pupil are reported to the designated safeguarding lead.
- Staff should refer to Appendix 1 for a full definition of significant harm and the specific indicators that may suggest a pupil may be at risk of suffering significant harm.
- Any concerns held by staff should be discussed in the first instance with the designated safeguarding lead or their deputy and advice sought on what action should be taken. See flow chart '**Safeguarding Response if you have a safeguarding concern of any kind**' Appendix 5
- Concerns may be monitored over time and recorded on the school's Database (Safeguarding entry) shown at Appendix 2. Details of any concerning incidents should also be recorded on this form and may also be logged on EPIC by a member of the DSL team.

4.3 Dealing with disclosures

Staff should bear in mind that children may not find it easy to disclose abuse and may need time before they feel ready to do so; in some cases, for example child exploitation, they may not recognise that what they are experiencing is abusive. Disclosure is more likely where there is a trusting relationship with the staff member and the pupil feels safe to share information.

It is important that where staff have reason to believe a pupil is at risk of harm but there is no disclosure, they persevere, giving the pupil time and space to disclose when they feel comfortable to do so. Any concerns should be shared with the designated safeguarding lead so that advice and support can be offered on how to support the pupil to engage. Consideration should also be given to addressing any communications difficulties that may be a barrier to disclosure.

If a pupil discloses to a member of staff that they are being abused, the member of staff should;

- Listen to what is said without displaying shock or disbelief and accept what the child is saying;
- Allow the child to talk freely;
- Provide pauses to allow the child time to think

- Reassure the child but not make promises that it may not be possible to keep, or promise confidentiality, as a referral may have to be made to the MASH or the hospital social work teams;
- Reassure the child that what has happened is not their fault and that they were right to tell someone;
- Not ask direct questions but allow the child to tell their story;
- Echo/ repeat back what the child has said to help them hear what they have said
- Not criticise the alleged perpetrator;
- Explain what will happen next and who has to be told;
- Make a record ready to share with the designated teacher or deputy designated teacher.

4.4 Referral

- A decision on whether or not to refer a pupil to the social work department should be made by the designated safeguarding lead or one of their deputies following a discussion with the member of staff who has raised concerns.
- Referrals should be in writing using the EPIC. It should be completed by the teacher raising concerns in collaboration with the designated teacher. Urgent child protection referrals will be accepted by telephone but must be confirmed in writing within 48 hours.
- Where there is any doubt about whether the concerns raised meet the thresholds for a child protection referral, the designated safeguarding lead may discuss the case on a “no names” basis with the social work team to obtain advice on how to proceed.
- If there is a concern about risk of harm to a child or additional support is needed a referral will be made to social work. It is best practice however to seek parental consent except for certain circumstance’s when it may further jeopardise the child’s safety (e.g., sexual abuse, FII).
- If the child already has an allocated a social worker, the referral should be made directly to them. If the child lives outside Camden, a referral should be made to their home local authority via hospital social work team.
- The 2003 Female Genital Mutilation Act introduced a mandatory reporting duty which requires teachers to report to the police ‘known’ cases of FGM in under 18s which they identify in the course of their professional work.
- Therefore, if you are a teacher and in the course of your teaching duties you are **informed** by a girl under 18 that an act of FGM has been carried out on her, you must report the matter to the police as soon as possible, usually by the close of the next working day. You should also report the matter to the School’s DSL. If you suspect that FGM may have taken place you should seek advice immediately from the School’s DSL.

- If in the course of your teaching duties you **suspect** a pupil is at risk of FGM or suspect that FGM has been carried out or discover that a pupil **aged 18 or over** appears to be a victim of FGM you must speak to the DSL and follow our safeguarding procedures.
- Although support staff do not have the same statutory duty as teachers, they should report immediately any instance of known or suspected FGM to the School DSL who will ensure that any known instance is reported to the police.
See government guidance for further information:
<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

4.5 Attendance at case conferences and core groups

- The designated safeguarding lead will liaise with the Social work dept. to ensure that all relevant information held by the school is provided to CSSW during the course of any child protection investigation.
- The designated safeguarding lead will ensure that the school is represented at child protection case conferences and core group meetings.
- Where possible, a member of staff who knows the child best, such as their teacher will be nominated to attend.
- Failing that, the designated safeguarding lead or one of their deputies will attend.
- If no-one from the school can attend, the designated safeguarding lead will ensure that a report is made available to the conference or meeting.

4.6 Monitoring

Where a pupil is the subject of a child protection plan and the school has been asked to monitor their attendance and welfare as part of this plan;

- Monitoring will be carried out by the relevant staff member in conjunction with the designated safeguarding lead
- The completed monitoring form will be kept on the safeguarding tab on the pupil's record on the database and copies made available to all conferences and core group meetings
- The designated safeguarding lead will notify the social work team CSSW if the child is removed from the school roll, excluded for any period of time or goes missing.

4.7 Records

- Child protection records relating to pupils are highly confidential and will be kept on the safeguarding tab on the school's database access to which is limited to authorised staff only. These records will be securely held within the school.
- The designated safeguarding lead is responsible for ensuring that records are accurate, up to date and that recording is of a high standard.
- All information should be recorded on the safeguarding-Incident form (see Appendix 2). Records should show:
 - What the concerns were
 - What action was taken to refer on concerns or manage risk within the school
 - Whether any follow-up action was taken
 - How and why decisions were made
- Any incidents, disclosures or signs of neglect or abuse should be fully recorded with dates, times and locations. Records should also include a note of what action was taken. These will be stored on the safeguarding tab on the database by those authorised to do so.
- Whenever concerns arise or there is a serious incident **or** where a child is being monitored, prior to a case conference or core group meeting
- Child protection files must be accessed and information shared by members of staff on a "need to know" basis only.
- Where a child who is subject to a protection plan transfer to another school, the designated safeguarding lead is responsible for ensuring that copies of all relevant records are passed to the designated safeguarding lead at the new school within 5 days.
- The designated safeguarding lead may also consider contacting the new school to share relevant information in order to ensure the child receives the support they need as soon as they transfer.
- Child protection records will be kept in line with the school's data retention procedures.

4.8 Confidentiality and information sharing

- All information obtained by school staff about a pupil will be kept confidential and will only be shared with other professionals and agencies with the family's consent unless there are safeguarding concerns that need to be shared with CSSW and parents refuse consent or seeking consent would place the child at further risk.

- If the child is under 12, consent to share information about them must be obtained from their parents or carers. Young people aged 12 to 15 may give their own consent to information sharing if they have sufficient understanding of the issues. Young people aged 16 and over are able to give their own consent if they are thought to have the capacity to do so under the Mental Capacity Act 2005; otherwise, consent should be sought from parents.
- Where a child is at risk of suffering significant harm, schools have a legal duty to share this information with CSSW and the social work team make appropriate referrals. Equally, where a child is subject to a child protection investigation, schools must share any information about the child requested by CSSW and the social work team
- Schools have a lawful basis for sharing information without parental consent where there are safeguarding risks. Parental consent to making a referral should be sought but if withheld, the referral must still be made and parents should be made aware of this.
- Parents should be informed of any referral unless this would cause further harm to the child, interfere with a criminal investigation or cause undue delay in taking action to safeguard the child.
- Only relevant information should be disclosed, and only to those professionals who need to know. Staff should consider the purpose of the disclosure, and remind recipients that the information is confidential and only to be used for the stated purpose.
- In the event that a child makes a disclosure of neglect or abuse, staff cannot guarantee them confidentiality, but must explain why they have to pass the information on, to whom and what will happen as a result. Parents should also be made aware of the school's duty to share information.
- Staff should discuss any concerns or difficulties around confidentiality or information sharing with the designated safeguarding lead or seek advice from the social work team

5 Staff Practice and conduct

5.1 Induction and training

- The head teacher will ensure that all staff are fully inducted, are made aware of the school's safeguarding and child protection policy and procedures, behaviour principles, relationships policy, staff code of conduct and Children Missing from Education policy and that staff are fully aware of their role in implementing these.
- The designated safeguarding lead will ensure that all staff are fully inducted with regard to the school child protection procedures and that they receive safeguarding and child

protection training on a two-yearly basis. The lead will also ensure all staff have read KCSIE (2021) (Part One, Part 5 and Annex B) and that regular visiting staff have read Annex A

- The head teacher will keep a central record of all statutory and other training undertaken by staff members, governors and volunteers.
- School staff and governors will receive multi-agency safeguarding training provided by Camden Safeguarding Children Board at the relevant level.
- As well as basic safeguarding training, the designated safeguarding lead and their deputy will receive specific training on their role and other relevant multi-agency training courses provided by Camden SCB.

5.2 Lone Working

HSE Definition - People who work by themselves without close or direct supervision

It is the responsibility of staff:

- to ensure they do not take unnecessary risks
- to care for their own health and safety
- to follow all health and safety policies,
- to report any incidents

Staff should carry their GOSH/UCH identification badges at all times.

It is recognised that teaching staff are vulnerable to allegations being made against them because they often work with children alone and the activity can involve some physical contact with a child. (Please see The Positive Touch policy)

The school assesses whether rooms/spaces used for teaching are adequately safe and open locations that can be easily observed by others.

As far as possible school staff should ensure they can be seen by ward staff, for example, work with curtains partially rather than fully closed.

Working out of hours

If you are working late and are alone, please ensure you inform security. A member of the leadership team should also be informed.

5.3 Conduct and safe teaching practice

- The school expects staff and volunteers to set a good example to pupils through their own conduct and behaviour and aims to protect them from the risk of allegations being made against them by ensuring they maintain high standards of professionalism and appropriate boundaries. **See Dealing with Allegations against Staff policy**
- The head teacher will ensure that there is a written code of conduct in place and that each member of staff, including volunteers, signs a code of conduct agreement on appointment that sets out the school expectations with regards to standards of professional behaviour and that all staff receive copies of relevant policies.

All staff and volunteers are expected to comply with hospital safeguarding policies and procedures. Safeguarding training is provided by the school and the hospital.

- Staff and volunteers should be aware of current guidance on safe teaching practice contained in the DCSF *“Guidance for safer working practice for adults working with children & young people” (2015)*
- Staff sign an Acceptable Use of the Internet and school devices form to confirm their compliance with the school’s policy on online safety and the use of social media, particularly in relation to professional standards and relationships with pupils.

6 Behaviour management, physical Intervention and restraint

Our school has a Relationship policy which covers how we manage behaviour, physical intervention and restraint. This is in line with government guidance and GOSH/UCL Hospital Policies.

Physical intervention and restraint for our pupils who are particularly vulnerable should only be used as a last resort, when de-escalation strategies have failed, and when there is a clear risk of serious harm to the pupil or others or serious damage to property.

Decisions on when to use physical intervention are a matter of professional judgement, and any intervention or restraint should be proportionate, reasonable and necessary to the perceived risk and should continue only for as long as the risk remains. Should such an intervention be required details would be recorded on EPIC/DATIX and the parent/carer contacted on the same day to explain the circumstances involved.

Risk assessments will be written by the team of professional working with a pupil, both those within our school and those in the child’s hospital team, to support a pupil accessing learning when their behaviour can be violent or following a serious incident.

Part B Additional safeguarding policies and procedures

7 Child on child abuse

Our school ensures that all staff are aware of child-on-child abuse and know what action to take when a pupil's behaviour is likely to cause harm to other pupils. Child on child abuse may take the form of:

- bullying and cyberbullying
- physical violence
- sexual violence and sexual harassment
- up skirting – this is a criminal offence under the Voyeurism Offences Act 2019
- sexting/nude image sharing
- initiation rites (hazing)

All incidents of child-on-child abuse will be dealt with under the *Child on child and sexual violence and harassment guidance for schools and colleges*

available at: <https://cscp.org.uk/professionals/schools-and-nurseries-safeguarding-policies/>

8 Harmful sexual behaviour, sexual violence and harassment

We promote positive relationships (See Relationships Policy) and teach pupils about healthy and unhealthy relationships as part of PSHE. Sexual violence and sexual harassment are not acceptable and will not be tolerated. They will not be viewed as 'having a laugh' or 'banter and part of growing up'. We promote an environment where victims feel empowered to raise concerns and report incidents.

Where a pupil's behaviour causes significant harm to other pupils, for example through violent or sexually abusive behaviour, we will make an immediate need and risk assessment and refer the pupil to the social work team in the hospital. For siblings, we would also contact Camden and their local social work team where appropriate.

We will look at what level of harm the child poses to any victim and other pupils and take appropriate action to reduce this risk. The needs and wishes of any victim will be considered, particularly with regard to sharing classes with the perpetrator, and appropriate measures will be adopted to help keep them apart while incidents are being investigated.

Where necessary and appropriate we will consider the support needs of the alleged perpetrator and will make referrals to relevant agencies for support on their behalf.

We will ensure that there is a robust response to all incidents and will follow the procedures set out in the statutory guidance: *Child on child and sexual violence and harassment guidance for schools and*

colleges guidance and the *Harmful sexual behaviour* protocol. [CSCP-harmful-sexual-behaviour-protocol.pdf](#)

9 Children who are missing from education or home educated

The Children's Hospital School at GOSH & UCH are aware that some children may be persistently absent or missing school and that this may be an indicator of welfare concerns.

Our attendance policy states clearly who needs to be notified and what action should be taken and any relevant timescales. Parents are asked to provide contact details for at least 2 people who can be contacted in the event that a child does not attend school. We refer to the following policies:

Camden's "Children missing from education" policy

[Children-missing-or-absent-from-education-policy.pdf \(cscp.org.uk\)](#)

CSCP missing children protocol:

[Draft CSCB missing protocol \(cscp.org.uk\)](#)

Where a parent notifies the school that they are removing the child so they can be educated at home, the following notifications should be made:

- The Pupil Attendance Service must be notified of all decisions.
- If the child is already known to CSSW, their allocated social worker should be notified immediately.
- If the child is not known to CSSW, but the school has concerns about their welfare, the designated safeguarding lead should make a referral to CSSW.

10 Mandatory Reporting of Female Genital Mutilation (FGM)

We will follow the multi-agency statutory guidance on FGM in order to safeguard girls who are at risk of FGM. [Multi-agency statutory guidance on female genital mutilation](#)

Where a pupil makes a disclosure of FGM, we will follow the mandatory reporting rules and make appropriate referrals to the police as set out in the CSCP guidance available at:

[FGM mandatory reporting guide](#)

All concerns around FGM, including any disclosure made by a pupil, will be discussed with the designated safeguarding lead before any action is taken.

11 Safeguarding vulnerable groups

We recognise that some children are living in circumstances that may make them more vulnerable to abuse, neglect or poor outcomes. Some may need help or intervention from CSSW or other

agencies in order to overcome problems or keep them safe. We are aware that expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues and access these via the websites below. In addition, we organise training and updates for staff covering these areas so that we are able to respond to the needs of these vulnerable groups.

Children who have a Social Worker

Our school recognises that children who are receiving a social work service from CSSW and who are subject to child in need or child protection plans are likely to have experienced abuse, neglect and trauma and that this could have a negative effect on their behaviour and learning.

CSSW social workers will inform schools whenever a child is receiving a service and the designated safeguarding lead will keep a record of all pupils who have an allocated social worker.

Our school will work in partnership with social workers to implement the child's plan in order to support their education and safeguard and promote their welfare. A representative of our school who knows the pupil well will become part of the professional network and will share information about safeguarding risks and attend planning meetings. In their absence, a suitable colleague will deputise for the member of staff or a written report will be provided for meetings.

Looked After and Previously Looked After children and care leavers

Looked after and previously looked after children and care leavers are particularly vulnerable due to their status and pre-care experiences.

We will ensure that appropriate staff have relevant information about children's looked after status, contact arrangements with birth parents or those with parental responsibility and care arrangements.

The designated safeguarding leads will consult with the designated teacher for LAC to seek advice whenever there are concerns about the welfare of a looked after or previously looked after child or care leaver (children age 16-17 who were but are no longer looked after). The Designated teacher for LAC will have detail of the children's social workers and relevant virtual school heads.

Children with special education needs or disabilities (SEND)

We are aware that children with special education needs or disabilities may be more vulnerable to harm and abuse and may be more likely to experience bullying. They may also have difficulty in reporting harm and abuse due to communication difficulties and professionals may miss vital indicators. Our school policies reflect these issues and recognise that staff need to be able to help this group to overcome barriers to seeking help. Our specialist SEN teachers support and train staff developing their skills and expertise in communication including the use of Makaton for pupils that use this communication system.

Children at risk of forced marriage

<https://www.gov.uk/forced-marriage>

Young people living with domestic or sexual violence

Staff are aware of the nature of domestic abuse and recognise the harm it may cause to children who witness incidents. More details are found in the CSCP guidance on domestic abuse.

<https://cscp.org.uk/wp-content/uploads/2019/06/CSCB-domestic-abuse-guidance.pdf>

The definition of domestic abuse now includes victims aged 16 and 17 years old. These victims should be referred for a service in their own right.

Camden Safety Net on **020 7974 1864** for advice and support.

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/domestic-abuse/>

Privately fostered children

Schools have a legal duty to notify the pupils Local Authority of any pupil they know to be privately fostered. The Pupil's home school will be contacted in the first instance. For pupils in Camden Schools the Fostering team can be contacted on **020 7974 7974**.

Young carers

If school has a concern about a pupil, they believe to be a young carer, they can contact Family Action on **020 7272 6933** for advice and can refer the pupil on for services and support. Further details can be found on the website.

www.family-action.org.uk

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

The school recognises that LGBT pupils, or pupils who are perceived to be LGBT, may be more vulnerable to bullying, harassment and victimisation and may find it difficult to disclose to staff due to a lack of trust in adults. The school will provide safe spaces and opportunities for LGBT pupils to raise concerns and will ensure that LGBT inclusion is part of the sex and relationships curriculum.

Extra-familial harm and exploitation

Our school is aware that as young people grow more independent, they may face more risk from safeguarding threats from outside of the home, either from within the community, at school/college or from their own peer group rather than from within the family (extra-familial harm).

Whenever staff are made aware of any safeguarding incident or concerning behaviour that has taken place out of the home and that has put a young person at risk, staff will discuss the matter with the designated safeguarding lead and consider the level and nature of the risk before making decisions on referrals.

Young people experience physical, cognitive and emotional changes during adolescence and will grow more independent, spending more time away from home. They may pursue risky behaviours and as a result, they may face heightened risk from safeguarding threats outside of the home.

These threats may be from within the community, from other pupils at school/college or from their own peer group rather than from within the family and there may be no concerns about parenting other than concerns about supervision. Sources of harm and exploitation can include:

- child sexual exploitation
- child criminal exploitation including county lines
- modern slavery and trafficking
- gang activity and youth violence
- radicalisation.

Exploitation is a form of abuse involving an imbalance of power within a relationship that allows one party to use this power to manipulate another to carry out an act. The victim may believe that they are acting on their own accord but in fact their consent has been obtained through deception, duress or force and threats of violence.

Factors such as substance misuse and periods of going missing from home or school can also add to young people's vulnerability to extra-familial harm and are often indications that exploitation may be taking place.

The school/college will adhere to the CSCP guidance *Extra-familial harm and child exploitation* whenever there are concerns that young people are at risk from extra-familial harm or exploitation: [CSCP-extra-familial-harm-and-child-exploitation-guidance.pdf](#)

Criminal exploitation occurs where a person or a group of people takes advantage of their contact with and influence over a young person to coerce or manipulate them into carrying out a criminal act. Examples of criminal exploitation are:

- county lines
- benefit fraud
- forced theft
- forced begging
- cannabis cultivation
- money mule (where the young person's bank account is used by others for money laundering).

County lines is the most common form of criminal exploitation in Camden and describes when gangs and organised crime groups exploit young people to transport and sell drugs, sometimes across county boundaries but also locally and within the borough. The young people have dedicated mobile phone 'lines' for taking orders for drugs and are used as they are less likely to be stopped by police, allowing adult dealers to avoid the risk of arrest.

Indicators include unexplained money, having several mobile phones, frequent calls, being in trouble with the police for possession of drugs, being found in an area to which they have no connection.

Young people at risk from gang activity or serious violence

The schools are aware of the indicators that a young person may be involved in violent crime or may be being criminally exploited and as such at risk from becoming a victim of violence. Indicators include absenteeism, changes in friendship groups, declining academic performance, changes in emotional welfare and signs of physical assault.

Camden has a comprehensive strategy for reducing the risks posed by gang activity, and schools can refer young people to the Young Person's Advocate based in the Youth Offending Service on **020 7974 6174** for advice.

Children who run away/go missing

<https://cscp.org.uk/resources/missing-children-from-home-and-care/>

The school know that many of these forms of risk and exploitation are linked and that going missing from home or from education can be an indicator that young people are involved in child sexual exploitation, gang activity, modern slavery, criminal exploitation and trafficking.

12 Children and young people experiencing mental health issues

The school recognises that some pupils may experience mental health issues that can negatively affect their behaviour and their ability to participate fully in education.

The school is party to the multi-agency protocol on children and young people's mental health and will carry out its responsibilities under that protocol where there are concerns about a pupil's mental and emotional wellbeing.

<https://cscp.org.uk/wp-content/uploads/2021/05/Interim-multi-agency-protocol-on-children-and-young-people%E2%80%99s-mental-health-2021.pdf>

Where there are safeguarding concerns arising from a pupil's mental health issues, staff will discuss concerns with the designated safeguarding lead to agree any actions to be taken.

The school will ensure that staff have an understanding of trauma informed practice and its link with mental health and are able to recognise pupils who are experiencing mental health issues and help them to access the most appropriate help.

The school will ensure that staff are teaching about mental wellbeing (as part of the statutory Health Education) to help reduce the stigma attached to mental and emotional problems and ensure pupils know how to keep themselves mentally healthy and know how to seek support.

The school will also ensure early identification of pupils who have mental health needs and put in place appropriate support and interventions, including specialist services, where needed.

The school will take account of the government guidance *Mental health and behaviour in schools*.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/755135/Mental_health_and_behaviour_in_schools_.pdf

The school works collaboratively with the multi-disciplinary teams within the hospitals (for example: psychologist, chaplaincy, mental health nurses) as well as a pupil's home school to discuss specific

intervention and provision for those pupils who are experiencing difficulties with mental health or emotional wellbeing.

Appendix 1: Child Protection definitions, Vulnerable Groups and indicators

Definitions

Child protection is part of the safeguarding agenda that focuses on preventing maltreatment and protecting children at risk of neglect or abuse. Under the Children Act 1989, CSSW have a legal duty to investigate and take any action to protect children where there are concerns that they are at risk of suffering **significant harm**, which is defined as:

Neglect: failure to provide basic care to meet the child’s physical needs, such as not providing adequate food, clothing or shelter; failure to protect the child from harm or ensure access to medical care and treatment.

Physical abuse: causing physical harm or injury to a child.

Sexual abuse: involving children in sexual activity, or forcing them to witness sexual activity, which includes involving children in looking at or the production of pornography.

Emotional abuse: failure to provide love and warmth that affects the child’s emotional development; psychological ill treatment of a child through bullying, intimidation or threats.

Possible indicators of abuse and neglect:

Neglect	<ul style="list-style-type: none"> • Inadequate or inappropriate clothing • Appears underweight and unwell and seems constantly hungry • Failure to thrive physically and appears tired and listless • Dirty or unhygienic appearance • Frequent unexplained absences from school • Lack of parental supervision
Physical abuse	<ul style="list-style-type: none"> • Any injury such as bruising, bite marks, burns or fractures where the explanation given is inconsistent with the injury • Injuries in unexpected places or that are not typical of normal childhood injuries or accidents • High frequency of injuries • Parents seem unconcerned or fail to seek adequate medical treatment
Sexual abuse	<ul style="list-style-type: none"> • Sexual knowledge or behaviour that is unusually explicit or inappropriate for the child’s age/stage of development

	<ul style="list-style-type: none"> • Sexual risk-taking behaviour including involvement in sexual exploitation/older boyfriend • Continual, inappropriate or excessive masturbation • Physical symptoms such as injuries to genital or anal area or bruising, sexually transmitted infections, pregnancy • Unwillingness to undress for sports
Emotional abuse	<ul style="list-style-type: none"> • Developmental delay • Attachment difficulties with parents and others • Withdrawal and low self-esteem
Indirect indicators of abuse and neglect	<ul style="list-style-type: none"> • Sudden changes in behaviour • Withdrawal and low self-esteem • Eating disorders • Aggressive behaviour towards others • Sudden unexplained absences from school • Drug/alcohol misuse • Running away/going missing
Parental attributes	<ul style="list-style-type: none"> • Misusing drugs and/or alcohol • Physical/mental health or learning difficulties • Domestic violence • Avoiding contact with school and other professionals

Vulnerable Groups of children requiring Early Help:

- children with disabilities and additional needs, including those with special educational needs
- children with mental health needs
- young carers
- children showing early signs of being drawn into anti-social or criminal behaviour, including gangs and organised crime or county lines;
- children who frequently go missing from home, school or care;
- children who are misusing drugs or alcohol;
- children at risk of exploitation through modern slavery and trafficking;
- children whose home circumstances are negatively affected by adult substance misuse or mental ill health or domestic abuse;
- children who have returned home from care;
- children who show early signs of abuse or neglect;
- children at risk of radicalisation;
- children at risk from honour-based abuse i.e.: FGM, forced marriage
- children who have a parent in prison or who are affected by parental offending;
- privately fostered children;
- children who are persistently absent from school including for part of the school day.

Appendix 2: Incident Report Form (Database) and Paper copy

Add Safeguarding

Details

Date 13/09/2023 Time 10:23:01

Entry inputted by --Not Set--

Reason for entry

If safeguarding concern, category

Type of contact --Not Set--

Details
 B U **A**

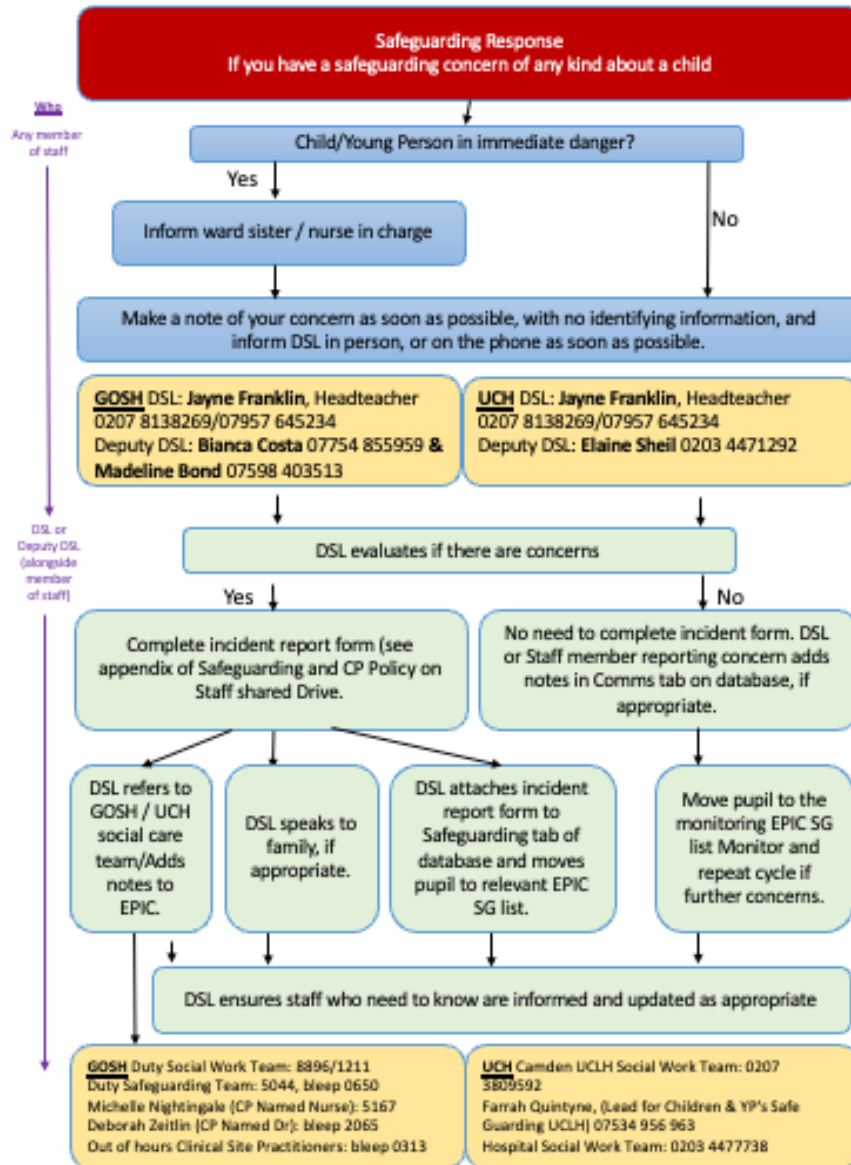
Action taken

People/Agencies informed

Linked document/s

Actions completed by 13/09/2023

Appendix 3 Safeguarding Response Flowchart



Appendix 4: Self-Disclosure by Staff employed in a regulated Activity

Statutory guidance from the Department for Education explains that, under the Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendment) Regulations 2018, some individuals are disqualified from providing childcare or being “directly concerned” in the management of childcare provision if they have committed certain criminal offences.

Within the scope of the legislation relevant to our school are:

- Staff working in school nursery and reception classes
- Staff directly concerned in the day-to-day management of the above

If you fall into any of the above categories (please speak to your line manager if you are not sure whether you do) you must make a declaration to the Head Teacher or Designated Safeguarding Lead immediately if:

- You are included on the *DBS Children’s Barred List*;
- You are found to have committed certain criminal offences (a list is available at pages 13 to 41 of the DfE’s statutory guidance, which may be found by clicking on the following link <https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006>);
- certain orders relating to children have been made against them (a list of relevant orders is available at pages 42 to 45 of the DfE’s statutory guidance)
- You have had a registration in relation to childcare or children’s homes refused or cancelled, or has been prohibited from private fostering;

Once a declaration is made a meeting will be arranged to discuss, among other things:

- the process of applying to Ofsted for a waiver; and
- your work pending issue of the waiver.

Affected staff may be accompanied at the meeting by a trade union representative or work colleague.

Appendix 5: Legal duties

Human Rights Act 1998

The Human Rights Act 1998 sets out an individual's rights and freedoms under the European Convention and public organisations such as schools must ensure that these rights and freedoms are protected whenever decisions are being made about an individual pupil. The relevant rights are:

- Right to an education (Article 2)
- Right to freedom from inhuman and degrading treatment (Article 3); this is an absolute right that cannot be limited in any way
- Right to respect for privacy and family life (Article 8); this is a qualified right which must be balanced against the rights of others.

Any form of (sexual) harassment, violence or abuse may be a breach of these rights.

Equality Act 2010

The Equality Act states that public organisations such as schools must not unlawfully discriminate against pupils because of their sex, race, disability, religion or belief, gender reassignment, pregnancy or maternity, or sexual orientation. This means schools must consider whether they are affording the same level of safeguarding to pupils with these protected characteristics as all other pupils.

Schools must be able to demonstrate that they have taken proportionate positive action and/or made reasonable adjustments in order to deal with the disadvantages faced by these groups. For more guidance see:

[Equality Act 2010: advice for schools - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Equality Duty

Under the Equality Act, public organisations such as schools have a duty to eliminate unlawful discrimination, harassment and victimisation and ensure equality of opportunity for all pupils. When making decisions, schools must be aware of this duty and ensure that decisions do not unlawfully discriminate against groups of pupils who are protected under the Act. For example, schools should be aware that some groups of pupils, for examples girls or LGBTQ pupils may be more vulnerable to sexual violence or harassment.

For more information please see: [Technical Guidance on the Public Sector Equality Duty: England | Equality and Human Rights Commission \(equalityhumanrights.com\)](http://equalityhumanrights.com)

Glossary

CAF	Common Assessment Framework
CSCP	Camden Safeguarding Children Partnership
CSSW	Children's Safeguarding and Social Work
DBS	Disclosure and Barring Service
DCSF	Department for Children School and Families
DfE	Department for Education
FII	Fabricated Induced Illness
GOSH	Great Ormond Street Hospital
HSE	Health and Safety Executive
LADO	Local Authority Designated Officer
MASH	Multi-Agency Safeguarding Hub
PSHE	Personal Social and Health Education
SEN	Special Educational Needs
UCH	University College Hospital
UCLH	University College London Hospitals

