



# **Hardmoor Nursery & Early Years Centre Child Protection & Safeguarding Policy**

Policy Statement and Guidelines  
September 2024

## ***Mission Statement:***

*To provide a happy, secure and stimulating environment in which everyone is included, respected and valued, so that they may grow in self-esteem and develop to their full potential.*

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## Hardmoor Nursery & Early Centre Safeguarding Policy

### **Scope**

The policy relates to all staff, volunteers and governors of Hardmoor, and provides them with the framework they need in order to keep children safe and secure in our centre and to inform parents and guardians how we will safeguard their children whilst they are in our care.

This is in line with new KCSIE document September 2023

## Definitions/Glossary

“**Should**” and “**Must**” are used throughout KCSIE 2023 – “**must**” is used when a person is legally required to do something, “**should**” is used when advice set out should be followed unless there is a good reason not to. The guidance **should** be read alongside:

Statutory guidance Working Together to Safeguard Children

<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

Departmental advice What to do if you are worried a child is being abused – Advice for Practitioners

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419604/What\\_to\\_do\\_if\\_you\\_re\\_worried\\_a\\_child\\_is\\_being\\_abused.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

**Safeguarding**’ is defined in KCSIE 2023 as “protecting children from maltreatment; preventing impairment of children’s health and development; ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and taking action to enable all children to have the best outcomes”. Our safeguarding practice applies to every child.

The term **Staff** applies to all those working for or on behalf of the centre, full time or part time, in either a paid or voluntary capacity. This also includes parents and governors. **Child** refers to all young people who have not yet reached their 18th birthday. On the whole, this will apply to pupils of our centre; however the policy will extend to visiting children and students from other establishments. **Parent** refers to birth parents and other adults in a parenting role for example adoptive parents, guardians, step parents and foster carers.

**Abuse:** a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. They may be abused by an adult or adults or by another child or children. **Physical abuse:** a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

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

**Sexual abuse:** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of,

sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education (see paragraph 50).

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

**The Trigger Trio:** The term 'Trigger Trio' has been used to describe the issues of domestic violence, mental ill-health and substance misuse which have been identified as common features of families where harm to women and children has occurred. They are viewed as indicators of increased risk of harm to children and young people. In a review of Serious Cases Reviews undertaken by Ofsted in 2011, they found that in nearly 75% of these cases two or more of the issues were present.

### **Victims and alleged perpetrator(s)**

KCSIE 2023 uses, in places, the term '**victim**'. It is a widely recognised and understood term. It is important that centres and colleges recognise that not everyone who has been subjected to abuse considers themselves a victim or would want to be described in this way. Ultimately, centres and colleges should be conscious of this when managing any incident and be prepared to use any term with which the individual child is most comfortable.

KCSIE uses, in places, the term '**alleged perpetrator(s)**' and where appropriate '**perpetrator(s)**'. These are widely used and recognised terms and the most appropriate to aid effective drafting of guidance. However, centres and colleges should think very carefully about terminology, especially when speaking in front of children, not least because in some cases the abusive behaviour will have been harmful to the perpetrator as well. As above, the use of appropriate terminology will be for centres and colleges to determine, as appropriate, on a case-by-case basis.

## Policy statement

□ **Safeguarding** is taken to mean “All agencies working with children and their families take all reasonable measures to ensure that the risk of harm to children’s welfare are minimised” and “where there are concerns about children and young people’s welfare, all agencies take all appropriate actions to address those concerns, working to agreed local policies and procedures in full partnership with other agencies”.

□ Our Aims are to:

To provide an environment in which children feel safe, secure, valued and respected, and feel confident to approach adults if they are in difficulties.

To plan an effective EYFS PSED curriculum that encompasses age and developmentally appropriate content enabling pupils to build skills and confidence to help them to manage the challenges of growing up in today’s society including knowing how to keep themselves and others safe and where to get help from if they, or others need it.

Ensure that where required, action is taken in line with the best interests of the child, having taken into account the child’s wishes.

To raise the awareness of all leaders, teaching and non-teaching staff and volunteers of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse. This responsibility does not rest solely with Designated Safeguarding Leads.

To develop a structured procedure within the centre that will be followed by all members of the centre community in cases of suspected abuse.

To provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, the centre, contribute to assessments of need and support plans for those children through timely Early Help referral, contact and working with external partners and children’s social care team.

To refer to early help services so children, and their wider families can be supported by professionals before referral to children’s social care services is required. <http://southamptonlscb.co.uk/prevention-and-early-help-services/>

To ensure that all adults within our centre who have access to children have been checked as to their suitability. This includes appropriate raising of awareness for out of hours community users of our facilities and checks and training for governors in line with centre policy.

The protection of children is of the highest priority for our centre. Children have a right to feel secure and cannot learn effectively unless they do so. All children regardless of age, gender, ethnicity, ability, sexuality, religion, culture, language and beliefs have a right to be protected from harm. All staff have a key role in prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a child is at risk of harm in accordance with the guidance. We acknowledge that working in partnership with other agencies protects children and reduces risk and so we will engage in partnership working throughout the child protection process to safeguard children. Whilst the centre will work openly with parents as far as possible, the centre reserves the right to contact Southampton’s Multi-agency Safeguarding Hub (in line with current safeguarding procedures) and Local Safeguarding Children’s Board Child and Family Early Intervention.



Model and Threshold Document or the Police, without notifying parents if this is in the child's best interests taking into account the child's wishes as set out in KCSIE 2023.

Safeguarding processes are intended to put in place measures that minimise harm to children. There may be situations where gaps or deficiencies in the policies and processes we have in place will be highlighted. In these situations urgent review will be carried out by the DSL and governors in order to identify learning and inform the policy, practice and culture of the centre. This review may involve the Local Authority or other agencies.

Some areas, such as Health and Safety, are a specialist area of safeguarding and a separate lead for this area is in place in the centre and there is a named governor/committee with responsibility for health and safety.

All pupils in our centre are able to communicate in a developmentally appropriate way / talk to any member of staff to share concerns or talk about situations which are giving them worries. The staff will listen to the pupil, take their worries seriously and share the information with the safeguarding lead.

In addition, we provide pupils with information of who they can talk to outside of centre both within the community and with local or national organisations who can provide support or help appropriate to their age and development.

As a centre, we review this policy at least annually so as to be in- line with the child protection policy annual review as well as in line with DfE, LSCB, SCC and any other relevant guidance and update mid -review where key changes are made to national safeguarding policy or procedure.

**Date Approved by Governing Body: September 2023**

**Date to be reviewed: September 2024**

## Policy Guidelines - The child's wishes

Where there is a safeguarding concern, governing bodies, proprietors and centre or college leaders should ensure the child's wishes and feelings are taken into account when determining what action to take and what services to provide. Systems should be in place for children to express their views and give feedback. Ultimately, all systems and processes should operate with the **best** interests of the child at their heart.

At Hardmoor we believe that the child's view is central. Systems we have to ensure the child's wishes are taken into account include:

- A culture of openness and honesty.
- Trusted Adult
- Opportunities for children to express their views and wishes as part of the information gathering process.

## Safeguarding issues

### Health and Safety

<https://www.gov.uk/government/publications/health-and-safety-advice-for-schools>

The site, the equipment and the activities carried out as part of the curriculum are all required to comply with the Health and Safety at Work act 1974 and regulations made under the Act.

All risks are required to be assessed and recorded plans of how to manage the risk are in place. The plans should always take a common sense and proportionate approach to allow activities to be safe rather than preventing them from taking place. The centre has a Health and Safety policy which details the actions that we take in more detail

### Site Security

[www.gov.uk/government/publications/school-security](http://www.gov.uk/government/publications/school-security)

We aim to provide a secure site, but recognise that the site is only as secure as the people who use it. Therefore all people on the site have to adhere to the rules which govern it.

These are:

- All gates are locked except at the start and end of the centre day.
- Doors are kept closed to prevent intrusion
- Visitors and volunteers all have full DBS and enter at the reception and must sign in.
- Visitors and volunteers are identified by showing centre staff their identification.
- All children leaving or returning during the centre day have to sign out and in.
- Empty classrooms have windows closed

### First Aid

[www.gov.uk/government/publications/first-aid-in-school](http://www.gov.uk/government/publications/first-aid-in-school)

## Physical Intervention (use of reasonable force)

<https://www.gov.uk/government/publications/use-of-reasonable-force-in-schools-2013>.

As a centre we have a detailed behaviour policy which includes guidance on how physical intervention could be used.

## Taking and the use and storage of images

<https://ico.org.uk/for-the-public/schools/photos>

Phones are locked away and not in use in centre. As a centre we will seek consent from the parent of a pupil and from teachers and other adults before taking and publishing photographs or videos that contain images that are sufficiently detailed to identify the individual in centre publications, printed media or on electronic publications. We will not seek consent for photos where you would not be able to identify the individual. Our centre seeks to ensure it is compliant with GDPR regarding processing of images.

Photographs will only be taken on centre owned equipment and stored on the centre network. No images of pupils will be taken or stored on privately owned equipment by staff members.

## Transporting pupils

[Home-to-school travel and transport - GOV.UK](#)

[http://www.southampton.gov.uk/Images/home-school-transport-policy\\_tcm63-393077.pdf](http://www.southampton.gov.uk/Images/home-school-transport-policy_tcm63-393077.pdf)

The centre will give consideration to the transport needs of our pupils including in an emergency situation and out of hours. Safeguarding the needs of our pupils when travelling in centre owned / private hire minibus or coaches / taxis with staff or parents as drivers in cars.

On occasions parents and volunteers support with the task of transporting children to visits and off-site activities arranged by the centre. In managing these arrangements, the centre follows guidance from the Local Authority.

### **(See Annex 1)**

Where parents'/volunteers/staff cars are used on centre activities the centre will notify parents/volunteers/ staff of their responsibilities for the safety of pupils, to maintain suitable insurance cover and to ensure their vehicle is roadworthy. A record will be kept in centre of insurance, evidence of roadworthiness and clarity of responsibilities.

## Behaviour and Safety

The centre has a behaviour policy in place that meets the relevant requirements this policy forms part of all staff induction.

We have a Staff Handbook that is a part of all staff induction.

## Curriculum

Details of our centre curriculum for all subjects can be found on our centre website. This information includes details of regular PSED learning planned to support pupils in age appropriate safeguarding issues as well as how we teach on-line / e-safety and the content of this. We welcome discussion with parents regarding the content of the curriculum to support our safeguarding aims and also ensure that where appropriate pupils are able to input and determine the effectiveness of such provision.

## Missing, Exploited and Trafficked Children (MET)

MET action plan 2018

<https://www.safe4me.co.uk/wp-content/uploads/2018/10/4LSCB-MET-Information-Guide-2017-FINAL-June-18.pdf>

<http://southamptonlscb.co.uk/wp-content/uploads/2018/05/MET-Plan-final-Apr-2016-updated-May-18-1.pdf>

Within the local area, the acronym MET is used to identify all children who are missing; believed to be at risk of or being sexually exploited; or who are at risk of or are being trafficked. Given the close links between all of these issues, there has been a considered response to join all three issues so that cross over of risk is not missed. At our centre the procedures for MET are to report any concerns to CME, CRS and/or the police as appropriate. All staff have been trained to recognise children who may be vulnerable and signs of Sexual Exploitation and Trafficking.

The centre will view absence as both a safeguarding issue as well as an educational outcomes issue. The centre may take steps that could result in legal action for attendance, or a referral to children's social care, or both.

#### Trafficked Children

Practice to safeguard children who may have been trafficked

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/177033/DFE-00084-2011.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/177033/DFE-00084-2011.pdf)

[Safeguarding unaccompanied asylum seeking and refugee children -](#)

[GOV.UK](#)

[https://www.barnardos.org.uk/what\\_we\\_do/our\\_work/trafficked\\_children.htm](https://www.barnardos.org.uk/what_we_do/our_work/trafficked_children.htm)

Human trafficking is defined by the UNHCR in respect of children as a process that is a combination of:

- Movement (including within the UK); For the purpose of exploitation
- Any child transported for exploitative reasons is considered to be a trafficking victim.

For any child where exploitation is suspected or known, and there are indicators of movement which is facilitated, arranged or controlled by individuals who may be exploiting or intending to exploit them, trafficking should be considered.

External (or international) trafficking describes trafficking which occurs from one country to another. Internationally trafficked children may first come to the attention of the local authority as Unaccompanied Children

## Multi-agency Public Protection Arrangements

Where the centre is made aware of a parent or person who will visit the centre who has a conviction that is subject to MAPPA the centre will proactively seek a confidential discussion with the individual or agencies to ensure that any necessary adjustments can be put into place with immediate effect so as to ensure safety of all.

## Preventing Radicalisation and Extremism

[www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty](http://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty) <http://southamptonlscb.co.uk/key-documents/prevent-guidance/>  
<http://www.hampshire.police.uk/internet/advice-and-information/safe4me/Safe4me+Prevent>

The people to contact in our centre regarding Prevent are: Gerida Montague, Sarah Hendricks and Jo McNicholas.

The prevent duty requires that all staff are aware of the signs that a child maybe vulnerable to radicalisation. The risks will need to be considered for political; environmental; animal rights; or faith based extremism that may lead to a child becoming radicalised. All staff have received or have undertaken Prevent e-learning/received awareness training as part of induction in order that they can identify the signs of children being radicalised. This is recorded as a part of the centres monitoring of the reading and understanding of policies and attendance at training.

As part of the preventative process resilience to radicalisation will be built through the regular promotion of fundamental British values through the curriculum.

Any child who is considered vulnerable to radicalisation will be referred by the DSL to Southampton children's social care front door, where the concerns will be considered within the Prevent process. If the police Prevent officer considers the information to be indicating a level of risk a "channel panel" will be convened and the centre will attend and support this process.

We also ensure and record that any hirer has appropriate awareness of safeguarding issues and how to contact the Multi-agency safeguarding hub or Police with any concerns, including regarding radicalisation and extremist views or material. There is a record of this awareness.

## Gender based violence / Violence against women and girls

<https://www.gov.uk/government/policies/violence-against-women-and-girls>

The government have a strategy looking at specific issues that women and girls face. Within the context of this safeguarding policy the following sections are how we respond to violence against girls. Female genital mutilation, forced marriage, so-called honour based violence and teenage relationship abuse all fall under this strategy record of factual information made as soon after the disclosure as possible. The same procedures should be followed as set out in the child protection policy.

## Female Genital Mutilation (FGM)

[www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-](http://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information)

[procedural-information](http://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information)

<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies.

The age at which girls undergo FGM varies enormously according to the community.

**The procedure may be carried out when the girl is new-born, during childhood or adolescence, just before marriage or during the first pregnancy.** However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at a higher risk.

FGM is illegal in the UK. On the 31 October 2015, it became **mandatory for teachers** to report known cases of FGM directly to the police. In these situations, the DSL and/or head must be informed that the member of teaching staff has called the police to report information that they believe indicates that FGM has happened. Advice can be sought from the DSL if required. If the information is gained by a non-teacher they must report to the DSL without delay.

#### **At no time will staff examine pupils to confirm FGM concerns**

For cases where it is believed that a girl may be vulnerable to FGM or there is a concern that she may be about to be genitally mutilated the staff will inform the DSL who will report it as with any other child protection concern. If the female is 18 or over teachers should follow local safeguarding procedures and contact the DSL, who in turn will contact MASH.

#### Domestic Abuse

<https://www.gov.uk/guidance/domestic-violence-and-abuse#domestic-abuse-and-young-people>  
[https://www.nspcc.org.uk/what-you-can-do/events/-abuse/research-and-resources/research/findings/understandingthelinks\\_wda48278.html](https://www.nspcc.org.uk/what-you-can-do/events/-abuse/research-and-resources/research/findings/understandingthelinks_wda48278.html)

Domestic abuse is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- a. Psychological
- b. Physical
- c. Sexual
- d. Financial
- e. Emotional

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

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

Research indicates that living within a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, wellbeing and understanding of what a normal relationship is.

Children witnessing domestic abuse is recognised as 'significant harm' in law. These children may become aggressive; display anti-social behaviours; suffer from depression or anxiety; or fail to reach their educational potential. Indicators that a child is living within a relationship with domestic abuse include:

- a. withdrawn
- b. suddenly behaves differently
- c. anxious
- d. clingy
- e. depressed
- f. aggressive
- g. problems sleeping
- h. eating disorders
- i. wets the bed
- j. soils clothes

- k. takes risks
- l. attendance
- m. changes in eating habits
- n. obsessive behaviour
- o. nightmares
- p. drugs
- q. alcohol
- r. self-harm
- s. thoughts about suicide

These behaviours themselves do not indicate that a child is living with domestic abuse, but should be considered as indicators that this may be the case. If staff believe that a child is living with domestic abuse, this will be reported to the designated safeguarding lead for referral to be considered to children's social care.

### Bullying

<https://www.gov.uk/government/publications/preventing-and-tackling-bullying>  
<http://www3.hants.gov.uk/childrens-services/childrenandyoungpeople/bullying.htm>

The centre works to a separate bullying policy that can be found on our website

### Prejudice based abuse

Prejudice based abuse or hate crime is any criminal offence which is perceived by the victim or any other person to be motivated by a hostility or prejudice based on a person's real or

perceived:

Disability Race Religion  
 Gender identity  
 Sexual Orientation

Although this sort of crime is collectively known as 'Hate Crime' the offender doesn't have to go as far as being motivated by 'hate', they only have to exhibit 'hostility'. This can be evidenced

by:

- threatened or actual physical assault
- derogatory name calling, insults, for example racist jokes or homophobic language
- hate graffiti (e.g. on centre furniture, walls or books)
- provocative behaviour e.g. wearing of badges or symbols belonging to known right wing, or extremist organisation distributing literature that may be offensive in relation to a protected characteristic verbal abuse
- inciting hatred or bullying against pupils who share a protected characteristic prejudiced or hostile comments in the course of discussions within lessons
- teasing in relation to any protected characteristic e.g. sexuality, language, religion or cultural background
- refusal to co-operate with others because of their protected characteristic, whether real or perceived
- expressions of prejudice calculated to offend or influence the behaviour of others attempts to recruit other pupils to organisations and groups that sanction violence,
- terrorism or hatred.

As a centre we will respond by:

- clearly identifying prejudice based incidents and hate crimes and monitor the frequency and nature of them within the centre
- taking preventative action to reduce the likelihood of such incidents occurring recognising the wider implications of such incidents for the centre and local community
- providing regular reports of these incidents to the Governing Body
- ensuring that staff are familiar with formal procedures for recording and dealing with prejudice based incidents and hate crimes dealing with perpetrators of prejudice based abuse effectively supporting victims of prejudice based incidents and hate crimes

## Faith Abuse

<https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief>

[http://www.proceduresonline.com/4lscb/southampton/p\\_faith\\_belief.html?zoom\\_highlight=faith+abuse](http://www.proceduresonline.com/4lscb/southampton/p_faith_belief.html?zoom_highlight=faith+abuse)

The number of known cases of child abuse linked to accusations of “possession” or “witchcraft” is small, but children involved can suffer damage to their physical and mental health, their capacity to learn, their ability to form relationships and to their self-esteem. Such abuse generally occurs when a carer views a child as being “different”, attributes this difference to the child being “possessed” or involved in “witchcraft” and attempts to exorcise him or her.

A child could be viewed as “different” for a variety of reasons such as, disobedience; independence; bed-wetting; nightmares; illness; or disability. There is often a weak bond of attachment between the carer and the child. There are various social reasons that make a child more vulnerable to an accusation of “possession” or “witchcraft”. These include family stress and/or a change in the family structure. The attempt to “exorcise” may involve severe beating, burning, starvation, cutting or stabbing and isolation, and usually occurs in the household where the child lives.

If the centre become aware of a child who is being abused in this context, the DSL will follow the normal referral route in to children’s social care

## Hate Crime

These are incidents or offences which are motivated by hostility, prejudice or hatred towards someone's actual or perceived:

colour of skin, race, ethnicity, nationality and/or national origin disability sexual orientation faith, religion or belief gender or gender identity age

## Internet / e-safety/ on-line safety

<http://www.saferinternet.org.uk/professionals-online-safety-helpline> <https://www.thinkuknow.co.uk/Teachers/>  
<http://www.saferinternet.org.uk/>

Technological hardware and software is developing continuously with an increase in functionality of devices that people use. The majority of children use online tools to communicate with others locally, nationally and internationally. Access to the Internet and other tools that technology provides is an invaluable way of finding, sharing and communicating information. While technology itself is not harmful, it can be used by others to make children vulnerable and to abuse them.

With the current speed of on-line change, some parents and carers have only a limited understanding of online risks and issues. Parents may underestimate how often their children come across potentially harmful and inappropriate material on the internet and may be unsure about how to respond. Some of the risks could be:



- unwanted contact
- grooming
- online bullying including
- sexting digital footprint

The centre will therefore seek to provide information and awareness to both pupils and their parents through:

- Information included in letters, newsletters, web site evenings / sessions
- Building awareness around information that is held on relevant web sites and or publications
- Ensuring the safeguards in place for the centre electronic systems are effective and monitored for any threats to safety
- Social media policy for pupils, parents and staff

#### Social media

<http://southamptonlscb.co.uk/professionals/policies-and-guidance/>  
<https://www.thinkuknow.co.uk/Teachers/Resources/>

<https://360safe.org.uk/>

<http://www.childnet.com/search-results/?keywords=social%20networking>

<http://www.kidsmart.org.uk/socialnetworking/>  
[https://www.lgfl.net/SearchResults.aspx?find=social media](https://www.lgfl.net/SearchResults.aspx?find=social%20media)

#### Gaming

<http://www.saferinternet.org.uk/advice-centre/teachers-and-professionals>

<http://www.childnet.com/search-results/?keywords=gaming>

<http://www.kidsmart.org.uk/games/>

<http://www.lgfl.net/esafety/Pages/Primary-resource-matrix.aspx>

110. Online gaming is an activity that the majority of children and many adults get involved in. The centre will raise awareness:

- By talking to parents and carers about the games their children play and help them identify whether they are appropriate.
- By support parents in identifying the most effective way of safeguarding their children by using parental controls and child safety mode.
- By talking to parents about setting boundaries and time limits when games are played.
- By highlighting relevant resources.

#### Online reputation

<http://www.childnet.com/resources/online-reputation-checklist>  
<http://www.saferinternet.org.uk/advice-centre/teachers-and-professionals/professional-reputation> <http://www.kidsmart.org.uk/digitalfootprints/>

Online reputation is the opinion others get of a person when they encounter them online. It is formed by posts, photos that have been uploaded and comments made by others on people's profiles. It is important that children and staff are aware that anything that is posted could influence their future professional reputation. The majority of organizations and work establishments now check digital footprint before considering applications for positions or places on courses.

## Grooming

<http://www.saferinternet.org.uk/search/node/grooming>  
<http://www.childnet.com/search-results/?keywords=grooming>  
<http://www.internetmatters.org/issues/online-grooming/>

Online grooming is the process by which one person with an inappropriate sexual interest in children will approach a child online, with the intention of developing a relationship with that child, to be able to meet them in person and intentionally cause harm.

The centre will build awareness amongst children and parents about ensuring that the child: only has friends online that they know in real life is aware that if they communicate with somebody that they have met online, that relationship should stay online

That parents should:

- recognise the signs of grooming
- have regular conversations with their children about online activity and how to stay safe online

The centre will raise awareness by:

- Include awareness around grooming as part of their curriculum
- Identifying with both parents and children how they can be safeguarded against grooming

## Substance misuse including alcohol and drugs

[http://4lscb.proceduresonline.com/southampton/p\\_ch\\_par\\_misuse\\_subs.html](http://4lscb.proceduresonline.com/southampton/p_ch_par_misuse_subs.html)  
<https://www.gov.uk/government/publications/drugs-advice-for-schools>  
<http://www3.hants.gov.uk/education/hias/drug-and-alcohol/resources-for-schools.htm>

Substance misuse applies to the misuse of alcohol as well as 'problem drug use', defined by the Advisory Council on the Misuse of Drugs as drug use which has: 'serious negative consequences of a physical, psychological, social and interpersonal, financial or legal nature for users and those around them.

The centre works to a separate drug policy that can be found on our website.

## Parental substance misuse

Parental substance misuse of drugs or alcohol becomes relevant to child protection when substance misuse and personal circumstances indicate that their parenting capacity is likely to be seriously impaired or that undue caring responsibilities are likely to be falling on a child in the family.

For children the impact of parental substance misuse can include:

- a. Inadequate food, heat and clothing for children (family finances used to fund adult's dependency)
- b. Lack of engagement or interest from parents in their development, education or wellbeing

- c. Behavioural difficulties- inappropriate display of sexual and/or aggressive behaviour
- d. Bullying (including due to poor physical appearance)
- e. Isolation – finding it hard to socialise, make friends or invite them home
- f. Tiredness or lack of concentration
- g. Child talking of or bringing into centre drugs or related paraphernalia
- h. Injuries /accidents (due to inadequate adult supervision)
- i. Taking on a caring role
- j. Continued poor academic performance
- k. Poor attendance or late arrival

These behaviours themselves do not indicate that a child's parent is misusing substances, but should be considered as indicators that this may be the case. If staff believe that a child is living with parental substance misuse, this will be reported to the designated safeguarding lead for referral to be considered for children's social care.

Pupils with medical conditions (in centre) including emergency evacuation.

[www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3](http://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3)

As a centre we will make sure that sufficient staff are trained to support any pupil with a medical condition. All relevant staff will be made aware of the condition to support the child and be aware of medical needs and risks to the child.

An individual healthcare plan will be put in place to support the child and their medical needs. Additional, specific Healthcare plans are utilised during offsite visits.

Pupils with medical conditions (out of centre)

[www3.hants.gov.uk/education/parents-info/inclusion-service.htm](http://www3.hants.gov.uk/education/parents-info/inclusion-service.htm)

There will be occasions when children are temporarily unable to attend our centre on a full time basis because of their medical needs. These children and young people are likely to be:

- children and young people suffering from long-term illnesses
- children and young people with long-term post-operative or post-injury recovery periods
- children and young people with long-term mental health problems (emotionally vulnerable)

Intimate care

[http://www.proceduresonline.com/4lscb/southampton/p\\_intimate\\_disabilities.html?zoom\\_highlight=intimate+care+personal+care](http://www.proceduresonline.com/4lscb/southampton/p_intimate_disabilities.html?zoom_highlight=intimate+care+personal+care)

The Intimate Care Policy and Guidelines Regarding Children have been developed to safeguard children and staff.

They apply to everyone involved in the intimate care of children. Disabled children can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs and follow any agreed care plan.

Intimate care may be defined as any activity required to meet the personal care needs of each individual child. Parents have a responsibility to advise staff of the intimate care needs of their child,

and staff have a responsibility to work in partnership with children and parents. This advice should be recorded, as should whenever staff have had to carry out those activities.

Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing/undressing Toileting
- Supervision of a child involved in intimate self-care

Fabricated or induced illness

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/277314/Safeguarding\\_Children\\_in\\_whom\\_illness\\_is\\_fabricated\\_or\\_induced.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/277314/Safeguarding_Children_in_whom_illness_is_fabricated_or_induced.pdf)

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/508847/Mental\\_Health\\_and\\_Behaviour\\_-\\_advice\\_for\\_Schools\\_160316.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/Mental_Health_and_Behaviour_-_advice_for_Schools_160316.pdf) <http://www.youngminds.org.uk/>

<https://www.gov.uk/government/publications/the-mental-health-strategy-for-england>

There are three main ways that a carer could fabricate or induce illness in a child. These are not mutually exclusive and include:

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

If we are concerned that a child may be suffering from fabricated or induced illness we will follow the established procedures of the Hampshire Safeguarding Children Board.

Mental Health

<https://www.gov.uk/government/publications/the-mental-health-strategy-for-england> <https://www.time-to-change.org.uk/about-us>

The term "mental ill health" is used to cover a wide range of conditions, from eating disorders, mild depression and anxiety to psychotic illnesses such as schizophrenia or bipolar disorder. Parental mental illness does not necessarily have an adverse impact on a child's developmental needs, but it is essential to always assess its implications for each child in the family. It is essential that the diagnosis of a parent/carer's mental health is not seen as defining the level of risk. Similarly, the absence of a diagnosis does not equate to there being little or no risk.

For children the impact of parental mental health can include:

- The parent / carer's needs or illnesses taking precedence over the child's needs
- Child's physical and emotional needs neglected
- A child acting as a young carer for a parent or a sibling
- Child having restricted social and recreational activities
- Child finds it difficult to concentrate- impacting on educational achievement
- A child missing centre regularly as (s) he is being kept home as a companion for a parent / carer

- Adopt paranoid or suspicious behaviour as they believe their parent's delusions. Witnessing self-harming behaviour and suicide attempts (including attempts that involve the child)
- Obsessional compulsive behaviours involving the child

Base Leaders see their pupils day in, day out. They know them well and are well placed to spot changes in behaviour that might indicate an emerging problem with the mental health and emotional wellbeing of pupils.

The balance between the risk and protective factors are most likely to be disrupted when difficult events happen in pupils' lives. These include:

- **loss or separation** – resulting from death, parental separation, divorce, hospitalisation, loss of friendships (especially in adolescence), family conflict or breakdown that results in the child having to live elsewhere, being taken into care or adopted;
- **life changes** – such as the birth of a sibling, moving house or changing centres or during transition from primary to secondary centre, or secondary centre to sixth form; and
- **traumatic events** such as abuse, domestic violence, bullying, violence, accidents, injuries or natural disaster.

If staff become aware of any of the above indicators, or others that suggest a child is suffering due to parental mental health, the information will be shared with the DSL to consider a referral to children's social care.

When concerns are identified, centre staff will provide opportunities for the child to talk or receive support within the centre environment. Parents will be informed of the concerns and a shared way to support the child will be discussed.

Where the needs require additional professional support referrals will be made to the appropriate team or service with the parent's agreement (or child's if they are competent as per Fraser guidelines).

### Children Looked After

All staff have a responsibility to keep all children safe. Staff need to be aware of the child's care arrangements including the levels of authority delegated to the carer by the authority looking after him or her. The Designated Safeguarding Lead will have all details of the child's social worker, the name of the Virtual Centre Head Teacher in the authority that looks after the child.

The Designated Teacher in our centre has received training to undertake their role. The role is clearly set out in their job description and they have been appointed into role. The designated teacher will ensure that they liaise with the relevant Virtual Centre and ensure that a personal education plan (PEP) is in place and regularly reviewed. Appropriate staff will have the information they need in relation to a child's looked after legal status and contact arrangements in place for the child.

**The Designated Teacher for our centre is: Melanie Jackson**

**The name of the Virtual Head Teacher in Southampton is Maria Anderson. Contact details: maria.anderson@southampton.gov.uk**

### Private fostering

[http://www.proceduresonline.com/4lscb/southampton/p\\_ch\\_living\\_away.html?zoom\\_highlight=private+fostering](http://www.proceduresonline.com/4lscb/southampton/p_ch_living_away.html?zoom_highlight=private+fostering)

Private fostering is an arrangement by a child's parents for their child (under 16 or 18 if disabled) to be cared for by another adult who is not closely related and is not a legal guardian with parental responsibility for 28 days or more.

It is not private fostering if the carer is a close relative to the child such as grandparent, brother, sister, uncle or aunt.

The law requires that the carer/s and parents must notify the children's services department of any private fostering arrangement. If the centre becomes aware that a pupil is being privately fostered we will inform the children's services department and inform both the parents and carers that we have done so.

## Parenting

All parents will struggle with the behaviour of their child(ren) at some point. This does not make them poor parents or generate safeguarding concerns. Rather it makes them human and provides them with opportunities to learn and develop new skills and approaches to deal with their child(ren).

Some children have medical conditions and/or needs e.g. Tourette's, some autistic linked conditions, ADHD; that have a direct impact on behaviour and can cause challenges for parents in dealing with behaviours. This does not highlight poor parenting either.

Parenting becomes a safeguarding concern when the repeated lack of supervision, boundaries, basic care or medical treatment places the child(ren) in situations of risk or harm.

In situations where parents struggle with tasks such as setting boundaries and providing appropriate supervision, timely interventions can make drastic changes to the wellbeing and life experiences of the child(ren) without the requirement for a social work assessment or plan being in place.

As a centre we will support parents in understanding the parenting role and provide them with strategies to make a difference by:

- a. providing details of community based parenting courses
- b. linking to web based parenting resources ( <http://www.familylives.org.uk/>)
- c. referring to the centre parenting worker/home centre link worker (where available)
- d. discussing the issue with the parent and supporting them in making their own plans of how to respond differently (using evidence based parenting programmes)
- e. Considering appropriate early help services

### Children and the court system

Children are sometime required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. There are two age appropriate guides to support children 5-11-year olds ([Young witness booklet for 5 to 11 year olds - GOV.UK](#)) and 12-17 year olds ([Young witness booklet for 12 to 17 year olds - GOV.UK](#)).

They explain each step of the process and support and special measures that are available. There are diagrams illustrating the courtroom structure and the use of video links is explained.

Making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. The Ministry of Justice has launched an online child arrangements information tool with clear and concise information on the dispute resolution service. This may be useful for some parents and carers.

If this situation arises for a child at Hardmoor we will work with the relevant agencies and families to ensure that the child feels supported through the process and after through assessment on a case by case basis.

### Children with family members in prison

#### [NICCO](#)

Approximately 200,000 children have a parent sent to prison each year. These children are at risk of poor outcomes including poverty, stigma, isolation and poor mental health. NICCO provides information designed to support professionals working with offenders and their children, to help mitigate negative consequences for those children. If this occurs at Hardmoor we will work together with the relevant agencies including NICCO to ensure that the child is fully supported and actions can be taken to aim to mitigate the circumstances ensuring that all communication and access to information is fully adhered to.

### Domestic abuse

154. The cross-government definition of domestic violence and abuse is:

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

- psychological;
- physical;
- sexual;
- financial; and

- emotional

Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life. We will ensure that our PSHE curriculum has planned learning for pupils to enable them to recognise and build healthy relationships, and understand where they can get help from if they, or someone they know needs help or advice.

Advice on identifying children who are affected by domestic abuse and how they can be helped is available at:

NSPCC- UK domestic-abuse signs symptoms effects <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/domestic-abuse/signs-symptoms-effects/>

Refuge what is domestic violence/effects of domestic violence on children <http://www.refuge.org.uk/get-help-now/support-for-women/what-about-my-children/>

Safe lives: young people and domestic abuse <http://www.safelives.org.uk/knowledge-hub/spotlights/spotlight-3-young-people-and-domestic-abuse>

### Reporting and recording

Any member of staff who has concerns about the welfare of a child must share this information with the DSL. Staff will make a brief, accurate and verbatim record of the concerns including the child's own words (if a disclosure / allegation) or the evidence that has led to the concerns. This report is given to the DSL who will analyse risk and refer onwards as necessary and appropriate.

Referrals where urgent action is required should never be delayed in order for a full record to be written. CP records will be stored securely and away from the main pupil records.

### Confidentiality

- We maintain that all matters relating to child protection are to be treated as confidential and only shared as per the 'working together' guidance.
- Information will only be shared with agencies who we have a statutory duty to share with or individuals within the centre who 'need to know'.
- All staff are aware that they cannot promise a child that they will keep a secret
- Disciplinary action will be considered for any breach of confidentiality.

### Reporting

- Staff will notify DSL of any child on a Child Protection Plan where there is an unexplained absence, who in turn will inform the allocated Social Worker.
- Staff will report to DSL any additional concerns, disclosures or observations after the initial referral, not assuming that a referral in itself will protect children.

### Referral

- The DSL will assess the information and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm, or risk of significant harm has been reached; or they are not clear if the threshold is met, then the DSL will contact MASH for further advice.



- h. Generally the DSL will inform the parents prior to making a referral however there are situations where this may not be possible or appropriate.

A DSL will ensure that a report is always sent to every meeting. They or another appropriately informed member of staff may also attend case conferences or other planning meetings, contributing to the assessment process alongside the report.

#### Staff and recruitment

##### Safer Recruitment

<https://www.gov.uk/government/publications/staffing-and-employment-advice-for-schools>

(February 2017)

[www.gov.uk/government/publications/keeping-children-safe-in-education--2](http://www.saferrecruitmentconsortium.org/GSWP%20Oct%202015.pdf)  
<http://www.saferrecruitmentconsortium.org/GSWP%20Oct%202015.pdf>

The centre follows Southampton City Councils safer recruitment process as part of the centre's Recruitment Policy

On all recruitment panels there is at least one member who has undertaken safer recruitment training. This training is undertaken every 2 years.

**The process checks the identity, criminal record (enhanced DBS), mental and physical capacity, right to work in the U.K., professional qualification and seeks confirmation of the applicant's experience and history through references (last historical employer is always sought) It must include barred list checks and prohibition checks for teachers. A Disqualification under the childcare act declaration where appropriate.**

##### Single Central Register

<https://www.gov.uk/government/publications/inspecting-safeguarding-in-early-years-education-and-skills-from-september-2015#history>

The Single Central Register is fully compliant with current guidance as of

September 2018 in line with Ofsted's guidance, "Inspecting Safeguarding in early years, education and skills" August 2016, and KCSIE 2023.

##### Disqualification under the Childcare Act

<https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006>

The Childcare Act of 2006 was put in place to prevent adults who have been cautioned or convicted of a number of specific offences from working within childcare.

Staff (meaning individuals employed by the centre or local authority, those undertaking training in centres (both salaried and unsalaried), casual workers and volunteers) are covered by this legislation in the following circumstances:

- a. They are employed and/or provide early years childcare (this covers the age range from birth until 1 September following a child's fifth birthday, i.e. up to and including reception age). This includes education in nursery and reception classes (e.g. teachers and support staff in a reception class) and/or any supervised activity (such as breakfast clubs, lunchtime supervision and after centre care provided by the centre) both during and outside of centre hours for children in the early years age range; and

- b. They work in childcare provided by the centre outside of centre hours for children who are above reception age but who have not attained the age of 8. This includes before centre settings, such as breakfast clubs, after centre provision and holiday Clubs. It does NOT include education or supervised activity for children above reception age during centre hours including extended centre hours for co-curricular learning activities, such as the centre's choir or sports teams.

The legislation also applies to any staff directly concerned in the management of such early or later years' provision. In 2009 additional regulations were made to include those living in the same household as another person who is (or would be) disqualified under the Act.

As a centre we require all staff who may be impacted by this piece of legislation to complete a self-declaration form and to inform the head teacher immediately if they become aware of any changes to their circumstances that would require us to be aware.

If a member of staff is impacted by the disqualification by association provisions we will ask them to apply for a waiver from Ofsted and put in place appropriate risk management plans while the waiver is being processed. If a waiver is not granted we will seek advice from our HR provider and/or the LADO as to how risk is most effectively managed.

### Teacher Status Checks

This includes prohibition from teaching checks. These are carried out via the DfE secure access portal <https://sa.education.gov.uk/idp/Authn/UserPassword>. This information must be recorded and dated on the Centres Single Central Register. We check all qualified teachers that are appointed to positions in our centre.

### Staff Induction

The DSL or their deputy will provide all new staff with training to enable them to both fulfil their role and also to understand the child protection policy, the safeguarding policy, the staff behaviour policy/code of conduct, part one (and annex A) of Keeping Children Safe in Education, September 2018.

This induction may be covered within the annual training if this falls at the same time; otherwise it will be carried out separately during the initial starting period. A record of training undertaken as well as clarification of understanding will be kept up to date in centre.

### Staff Code of Conduct

All staff (paid and voluntary) are expected to adhere to a code of conduct in respect of their contact with pupils and their families. This can be found in the staff handbook and forms a part of induction process for all staff, including expectations for volunteers.

### Training

All staff in Education should be aware of the signs and symptoms of abuse and be able to respond appropriately. Training is provided to the whole centre every year with separate training to all new staff on appointment if this falls at a different point in the year. The DSL will attend initial training for their role and then refresh this specific training for DSL's every two years in addition to having regular updates.

Any update in national or local guidance will be shared with all staff in briefings and then captured in the next whole centre training. A record will be kept and policy updated.

Information for visitors should be clear so as they can raise any concerns whilst in centre. It should include the names of DSL/s and how to contact them. It should also set out any expectations regarding for example use of mobile phones.

## Staff Responsibilities

Staff have a key role to play in identifying concerns early and provide help for children.

### **Listening and responding**

All staff receive training in how to listen and respond to children. They will allow the child to speak and only ask open questions to aid clarification.

### **Record keeping**

Any member of staff who has concerns about the welfare of a child must share this information with the DSL.

Staff will make a brief, accurate and verbatim record of the concerns including the child's own words (if a disclosure / allegation) or the evidence that has led to the concerns. This report is given to the DSL who will analyse risk and refer onwards as necessary and appropriate, requesting advice from Children's Services if necessary. Referrals where urgent action is required should never be delayed in order for a full record to be written within 48 hours. CP records will be stored securely and away from the main pupil records.

### **Confidentiality**

We maintain that all matters relating to child protection are to be treated as confidential

and only shared as per the 'working together' guidance.

Information will only be shared with agencies who we have a statutory duty to share with or individuals within the centre who 'need to know'.

All staff are aware that they cannot promise a child that they will keep a secret. Disciplinary action will be considered for any breach of confidentiality.

### **Reporting**

Staff will notify DSL of any child on a Child Protection Plan where there is an unexplained absence, who in turn will inform the allocated Social Worker or Child Protection Chair. Staff will report to DSL any additional concerns, disclosures or observations after the initial referral, not assuming that a referral in itself will protect children.

Further information and procedures can be found in Southampton City Council Child Protection policy.

## How to escalate

[http://www.proceduresonline.com/4lscb/southampton/p\\_conflict\\_res.html?zoom\\_high\\_light=conflict+resolution](http://www.proceduresonline.com/4lscb/southampton/p_conflict_res.html?zoom_high_light=conflict+resolution)

At no time will professional dissent detract from ensuring that any child is safeguarded. If professionals are unable to resolve differences, this will then be addressed by the line manager in conjunction with the DSL.

Allegations against Staff

**Southampton City Council's Designated Officer is: Jemma Swann**

**02380915535/Mobile: [07500952037/lado@southampton.gov.uk](mailto:07500952037/lado@southampton.gov.uk)**

Hardmoor has clear procedures for dealing with allegations against staff. Which are clear that all allegations should be reported straight away, normally to the Head Teacher unless the allegation involves the Head Teacher. The procedures also identify the person, the Chair of governors, to whom reports should be made in the absence of the Head Teacher or in cases where they themselves are the subject of the allegation or concern. Procedures should also include contact details for the local authority designated officer (LADO) responsible for providing advice and monitoring cases.

Whistleblowing policy – all staff are made aware of the Whistleblowing policy and how to use it.

## Management

### Leadership

It is the responsibility of the Designated Safeguarding Leads to maintain an overview of new developments, and they will attend the local Authority Network Meetings in order to do this updating staff and policy as necessary. In line with KCSIE 2023 staff training must be carried out annually with updates as required, records of training and updates, will be kept identifying that staff have attended, read and understood the information shared.

### Leadership and Management

We recognise that all staff and Governors have a full and active part to play in protecting our pupils from harm, and that the child's welfare is our paramount concern. We recognise that staff anxiety around child protection can undermine good practice and so have established clear lines of accountability, training and advice to support the process and individual staff within that process.

In this centre any individual can contact the Designated Safeguarding Lead (DSL) if they have concerns about a young person. The centre have an appointed Designated Safeguarding Lead known as the DSL who is a member of the Senior Leadership Team and has undertaken appropriate training specific or the role, as recommended by the LA/and approved by the LSCB that is renewed every two years. Our DSL will attend Network Meetings arranged by Southampton City Council on a monthly basis to update them on current issues nationally/ within the Local Authority so as to provide updates as needed to staff and leaders.

## DSLs are

Gerida Montague  
Caroline Firman  
Sarah Hendricks  
Jo McNicholas  
Mel Jackson

There is also a nominated Safeguarding Governor who will lead the monitoring of safeguarding and ensure the centre meets its statutory duties effectively. The Chair of Governors/Safeguarding Governor

has been identified to receive reports of allegations against the Head Teacher and act on the behalf of the Governing Body and has received training for this role.

**The Chair of Governors is:  
Sarah Williams**

**The safeguarding governor/s is/are: Sarah Williams** and can be contacted through the school, or through details on the school website

## **Governance**

### **Key personnel**

The Designated Safeguarding Leads for the school are:

**Gerida Montague  
Sarah Hendricks  
Jo McNicholas  
Mel Jackson  
Mary Davis  
Janis Larkman  
Natasha Clements**

The Designated Teacher for Looked After Children is: **Melanie Jackson**

The Person to contact for Prevent is: **See DSL list above.**

The Safeguarding Governor/s is/are: **Sarah Williams**

The Local Authority Designated Officer is: **Jemma Swann 02380915535/Mobile:  
07500952037/lado@southampton.gov.uk**

Southampton City Council's Strategic Lead Officer for Safeguarding in Education is: **Alison Philpott – alison.philpott@southampton.gov.uk**

## **Appendix 1: Transporting of Pupils by Parents**

### **Draft letter:**

Dear Parent / Volunteer

On occasions parents and volunteers are kind enough to help with the task of transporting children to visits and off-site activities arranged by the centre. (This is in addition to any informal arrangements made directly between parents for after centre clubs etc.) The centre is very grateful for this help. In managing these arrangements the centre would like to put in place sensible measures to ensure the safety and welfare of young people carried in parents and volunteers cars. This is based on guidance from the local authority and follows similar procedures for centre staff using their cars on centre business.

Where parents/volunteers cars are used on centre activities the Head should notify parents/volunteers of their responsibilities for the safety of pupils, to maintain suitable insurance cover and to ensure their vehicle is roadworthy.

The Head or Party Leader will need to consider the suitability of parents or volunteers to carry young people in their car and whether vetting is necessary. It is advisable that parents or volunteers are not put in a position where they are alone with a young person.

All parents are therefore asked to produce current MPT, current car insurance and current driving licence to the centre before they offer use of their car.

Many thanks, once again, to all parents and volunteers who have been able to help with the provision of transport. Naturally our primary concern is the safety and welfare of pupils. However, we also want to maintain a wide range of opportunities for young people to participate in off-site activities and visits.

Signed

Head Teacher

## **DECLARATION FORM**

### **Safeguarding statement**

At this centre, we strongly recognise the need for vigilant awareness of safeguarding issues. It is important that all staff have appropriate training and induction so that they understand their roles and responsibilities and are confident about carrying them out. Staff, pupils, parents and governors should feel secure that they could raise any issues or concerns about the safety or welfare of children and know that they will be listened to and taken seriously. This will be achieved by maintaining an ethos of safeguarding and promoting the welfare of children and young people and protecting staff. This is supported by clear behaviour, anti-bullying and child protection policies, appropriate induction and training, briefing and discussion of relevant issues and relevant learning in line with current legislation and guidelines.

The centre may require parents or volunteers who have regular unsupervised access to young people to be checked through arrangements with the Disclosure and Barring Service.

### **All drivers must:**

- Hold a valid driving licence for the type of vehicle being driven
- Be fit to drive
- Have no medical condition which affects their ability to drive Have a valid MOT for any vehicle older than 3 years old
- Ensure that any vehicle is roadworthy, including brakes, lights, tyres, bodywork, wipers, mirrors etc.
- Ensure that any vehicle used has current road tax
- Ensure that they adhere to the appropriate speed limit
- Ensure that all seat belts are working and worn by everybody in the vehicle
- Maintain valid insurance, as a minimum, for third part liability
- Check with their insurance company and inform them that the driver occasionally conveys children on centre activities. (This is unlikely to affect the cost of your insurance premium.)

### **Safety:**

- Be familiar with, and drive in accordance with, the Highway Code at all times Drive safely and observe the speed limit
- Before driving not to consume alcohol or drugs which may impair driving
- Ensure that all passengers wear seat belts as appropriate
- Use child proof locks on rear doors where necessary
- Child seats such as booster seats are to be used at all times according to the height and age of each child in the vehicle
- I have read and understood the above requirements and agree to comply with them.
- I agree to inform the centre if circumstances change and I can no longer comply with these arrangements.

Signature:

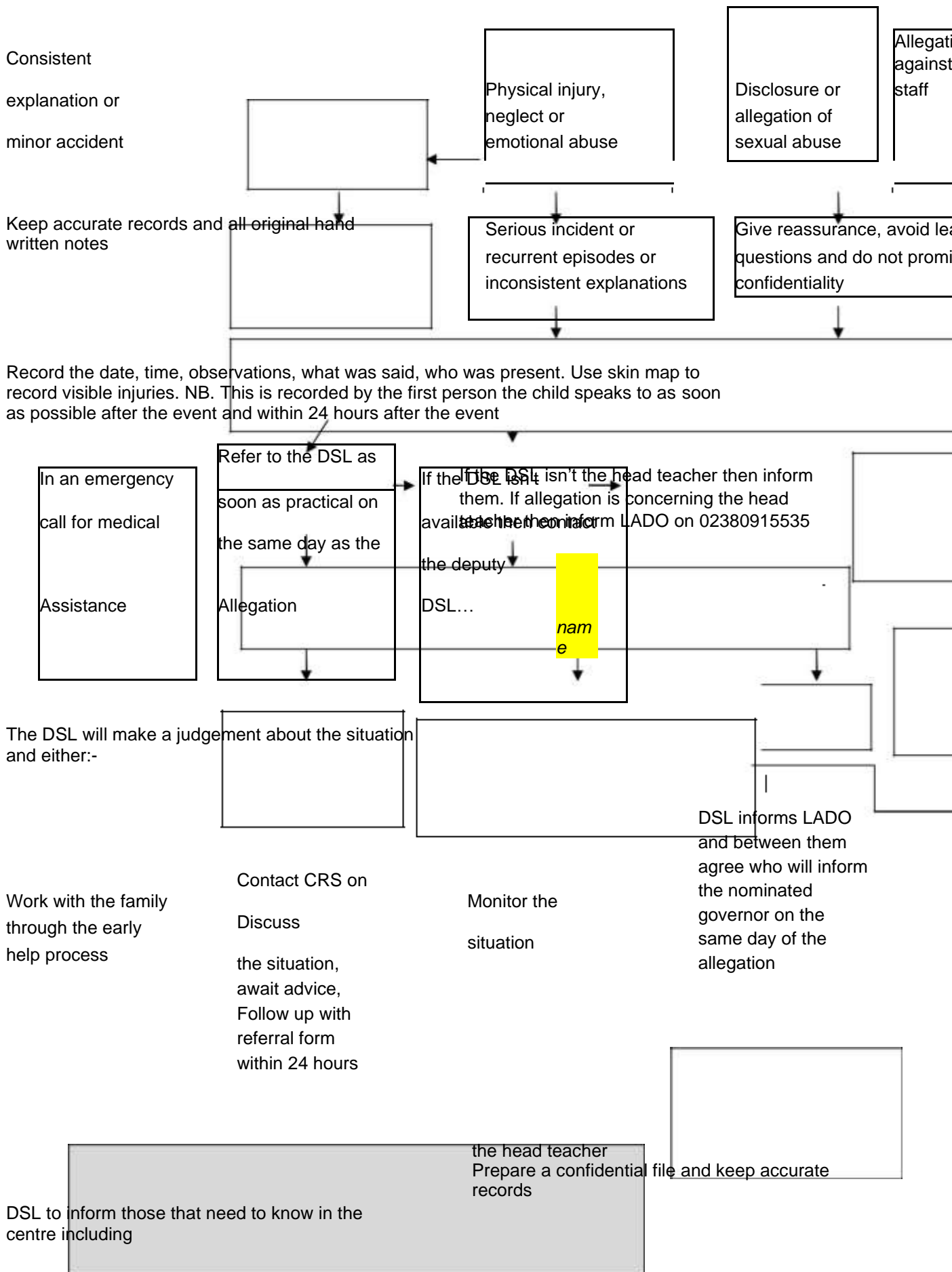
Date:

Name (Please print)

Number of seats in vehicle:



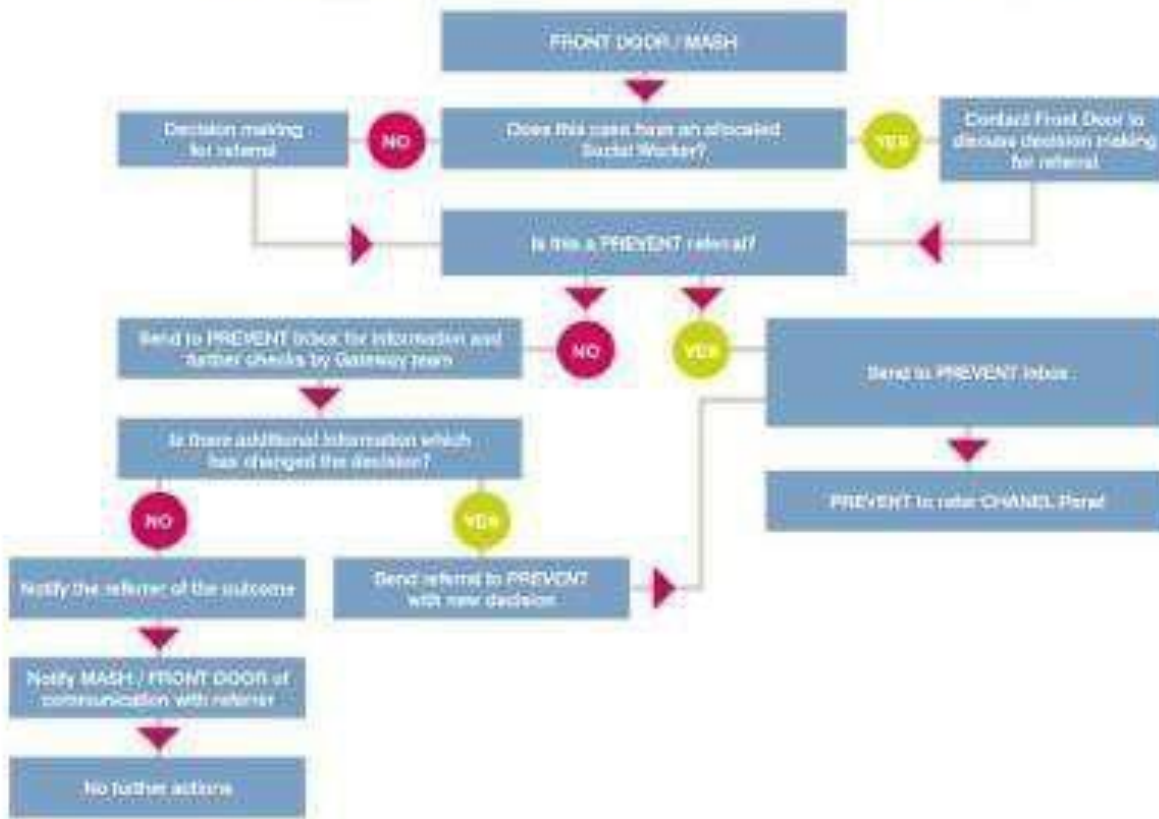
**Appendix 2 Flowchart for child protection procedures**



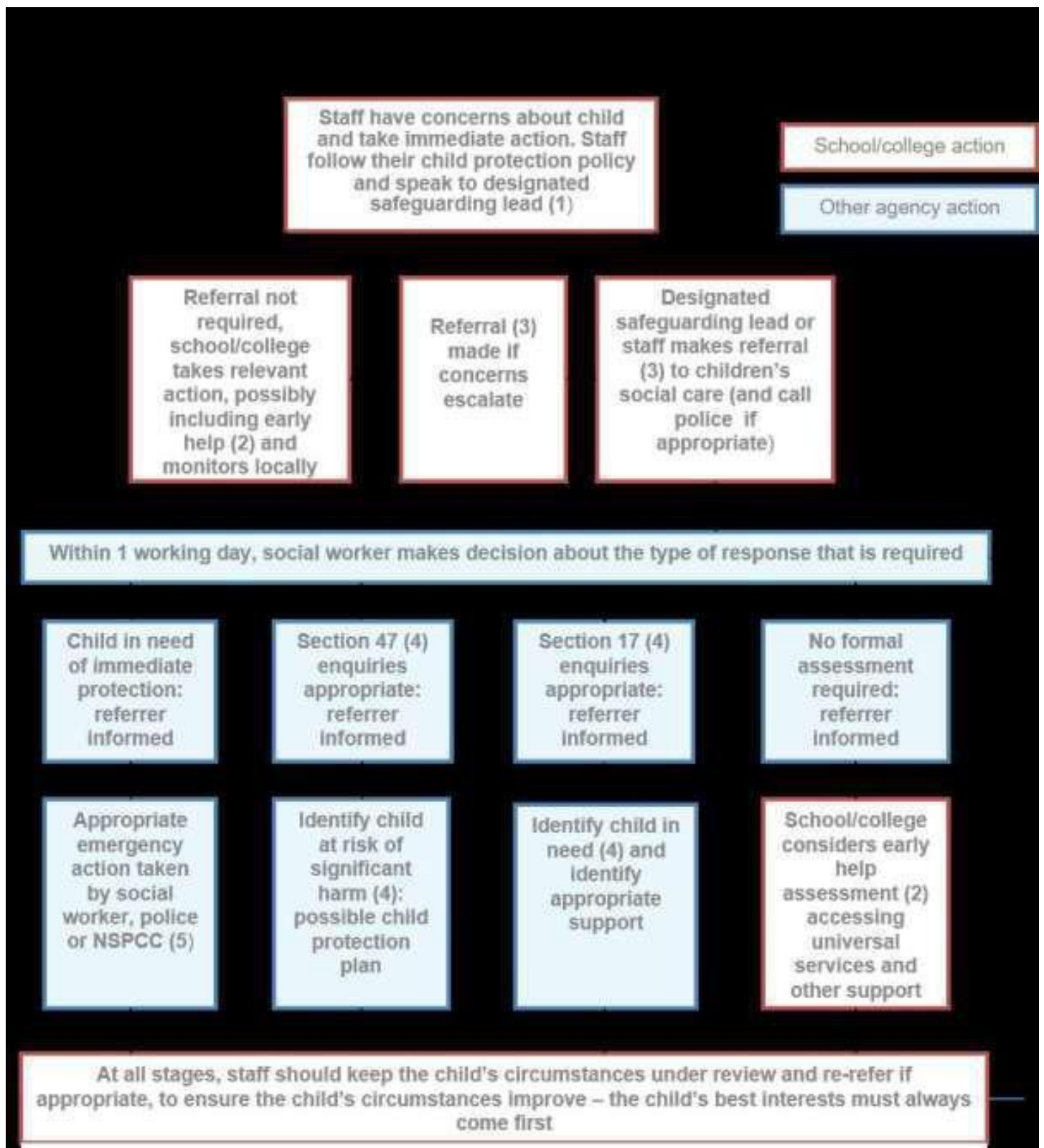
Receive feedback from CRS and work with the social worker if the case is allocated for assessment.

CRS will follow their process and communicate with the centre.

## PREVENT Flow Chart for Children's Services



Appendix 4 Flowchart. What to do if there are concerns about a child?



**CHILD PROTECTION/SAFEGUARDING RECORD OF CONCERN**

Date:  
 Child's Name:  
 Staff Member Name:

What is your concern?


Continue overleaf if needed....

	Poor	Adequate	Good		Poor	Adequate	Good
Appearance				Parental Engagement			
Attendance				Social Skills/Friendships			
Attainment & Progress				Behaviour			

Current/Historical social care status

LAC		Child Protection Plan		Child in Need Plan		Early Help		None	
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DSL Action

MASH Referral		MASH Consultation		ELSA		UHA/Early Help	
Monitor		Parent Discussion		Inclusion Social Worker		Other	

DSL notes e.g. Advice from MASH/follow up info:

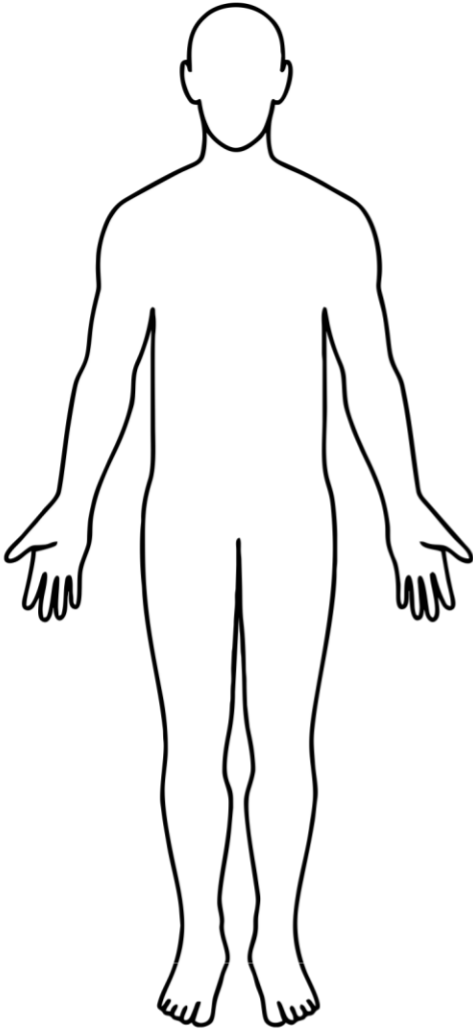

DSL Name: \_\_\_\_\_ DSL Signature: \_\_\_\_\_ DSL Date: \_\_\_\_\_

# BODY MAP

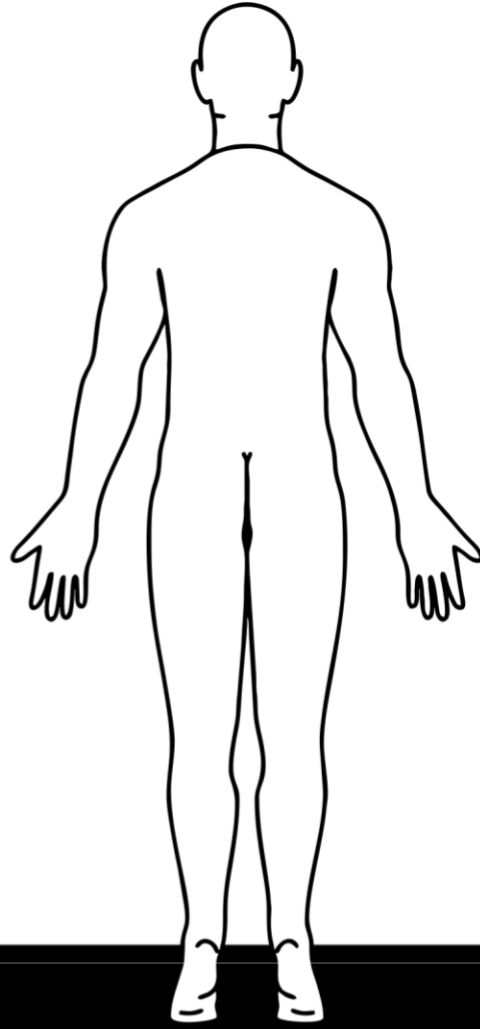
Date:

Child's Name:

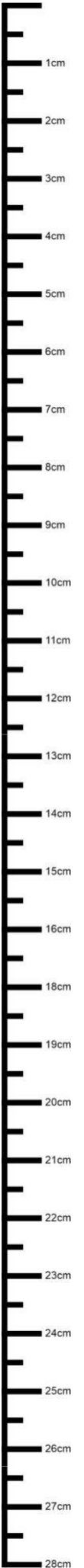
Reporting Adult's Name:



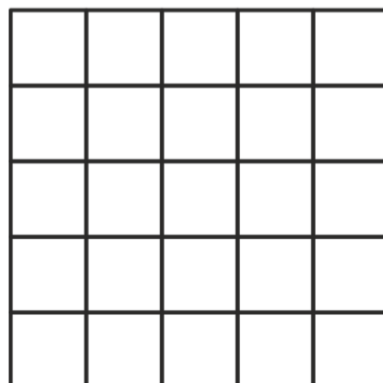
**Front**




**Back**




50 mm




**KEY:**

Bruise –  (Include colour description)

Scratch – 

Bite - 

Burn - 

Used as a guide.

