

# **SAFEGUARDING AND CHILD PROTECTION POLICY**

## Designated Service Officers, School Year 2023-2024

### External Safeguarding Supervisor

**Abigail Clay**

### Designated Safeguarding Lead (Early Years)

**Sarah Larner** – Head of Early Years

### Designated Safeguarding Lead (Outreach)

**David Anthony** – Director of Research, Learning and New Business

### Designated Safeguarding Leads

**Seth Bolderow** – Director of Education

**Elizabeth Robinson** – Head of Post-19

**Nathalie Johansson** – Pastoral Support Lead, Post-19

**Emma Price** – Head of Tram House, School

**Michelle Frangos** – Head of Pastoral, Tram House School

**Catrin Bail** – Head of Pastoral, Park House School

**Elizabeth Robinson** – Head of Post-19

### Deputy Designated Safeguarding Leads

**Russell Irving** – Deputy Head – Post-19

**Sofia Rey** – Consultant Behaviour Analyst – Post-19

**Stacey Gent** – Consultant Behaviour Analyst – Tram House

**Karen Talty** – Consultant Behaviour Analyst – Park House

**Jordana Smallwood** – Head of Sixth Form, Tram House School

**Matt Le Blanc** – Head of School, Park House School

## Designated Safeguarding Persons

**Patrycja Marcinkowska** – Park House School

**Aaliyah Adeniji** – Park House School

**Sharon Mo** – Park House School

**Chelsee Maloney**- Tram House School

**Francesca Moore** – Tram House School

**Rachel Hodgson** – Tram House School

**Marta Martin Perteguer** – Early Years

## Scope

BeyondAutism is the proprietor of BeyondAutism Schools, under which we have two independent special schools for autistic children and related developmental disorders: Park House School (Reception – Year 6) and Tram House School (Year 7 - 6<sup>th</sup> Form). The organisation also runs a Post-19 Service, an Early Years' Service, where parents attend with their child, and an Outreach and Fast Reponder service supporting other schools and establishments.

Safeguarding and child protection is everyone's responsibility. This policy applies to all staff, volunteers and Trustees of BeyondAutism and is consistent with the procedures of the local safeguarding board. Our policy and procedures also apply to extended school and off-site activities.

## Legislation and regulation

- This policy is based on the Department for Education's statutory guidance, Keeping Children Safe in Education 2023 and Working Together to Safeguard Children (2018), and the Governance Handbook.
- We comply with this guidance and the procedures set out by our local safeguarding children board
- This policy complies with our funding agreement and articles of association.
- This policy meets requirements relating to safeguarding and welfare in the statutory framework for the Early Years Foundation Stage.

This policy is also based on the following legislation:

- Section 175 of the Education Act 2002, which places a duty on schools and local authorities to safeguard and promote the welfare of pupils
- The School Staffing (England) Regulations 2009, which set out what must be recorded on the single central record and the requirement for at least one person on a school interview/appointment panel to be trained in safer recruitment techniques

- Part 3 of the schedule to the Education (Independent School Standards) Regulations 2014, which places a duty on academies and independent schools to safeguard and promote the welfare of pupils at the school
- Education and Training (Welfare of Children) Act 2021 would extend the safeguarding and promotion of child welfare duties that currently apply to schools and colleges to cover all providers of publicly funded post-16 education and training.
- The Children Act 1989 (and 2004 amendment), which provides a framework for the care and protection of children
- Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the Serious Crime Act 2015, which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18
- Statutory guidance on FGM, which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM
- The Rehabilitation of Offenders Act 1974, which outlines when people with criminal convictions can work with children
- Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, which defines what 'regulated activity' is in relation to children
- Statutory guidance on the Prevent duty, which explains schools' duties under the Counterterrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- Statutory guidance, introduced in 2019, that specifically focuses on the criminal acts of Upskirting and Serious Violence.
- London Child Protection Procedures 2017
- Sexual Violence and Sexual Harassment Between Children in Schools and Colleges 2021
- Domestic Abuse Act 2021  
This policy is to be read in conjunction with the Safeguarding Adults at Risk policy.

## A. Safeguarding

At BeyondAutism, we are committed to doing all we can to safeguard and promote the welfare of children. We aim to provide a safe, secure and supportive environment for all members of our school community but especially our children. Our aim is to create a culture of vigilance in safeguarding matters.

***Keeping Children Safe in Education, September 2023*** defines safeguarding and promoting the welfare of children as: protecting children from maltreatment; preventing impairment of children's mental and physical health or 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.

Child protection is part of safeguarding and promoting the welfare of children. Child protection refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm (***Working Together to Safeguard Children 2019, Appendix A***). Child Abuse is defined in ***Keeping Children Safe in Education, September 2021*** and states that: *abuse, neglect and safeguarding issues are*

rarely standalone events that can be covered by one definition or one label alone. In most cases multiple issues will overlap with one another. The designated safeguarding lead (and DSPs) are most likely to have a complete safeguarding picture and to be the most appropriate person to advise on the response to safeguarding concerns.

From KCSIE September 2019 and following through into KCSIE 2023, specific regard to guidance that focuses on three safeguarding partners (the local authority; Integrated Care Boards (previously known as clinical commissioning group) for an area within the local authority; and the chief officer of police for an area any part of which falls within the local authority area) who will make arrangements to work together to safeguard and promote the welfare of local children, including identifying and responding to their needs.

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or failing 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 online or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

There are a number of categories of child abuse:

- **Physical abuse** – which may involve the hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
- **Emotional abuse** – the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child’s developmental capability as well as overprotection and limitation of exploration and learning or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.
- **Sexual abuse** – involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

- **Neglect** – which is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may include a parent or carer failing to: provide adequate food, clothing and shelter; protect a child from physical and emotional harm or danger; ensure adequate supervision; or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

### **Safeguarding issues**

All staff should have an awareness of safeguarding issues that can put children at risk of harm. Behaviours linked to issues such as drug taking and or alcohol misuse, absence from or deliberately missing education, serious violence (including that linked to county lines), radicalisation and consensual and non-consensual sharing of nudes and semi-nudes images and/or videos can be signs that children are at risk. Other safeguarding issues all staff should be aware of include:

### **Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE)**

Both CSE and CCE are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation.

### **Child Criminal Exploitation (CCE)**

Some specific forms of CCE can include children being forced or manipulated into transporting drugs or money through county lines, working in cannabis factories, shoplifting or pickpocketing. They can also be forced or manipulated into committing vehicle crime or threatening/committing serious violence to others.

Children can become trapped by this type of exploitation as perpetrators can threaten victims (and their families) with violence or entrap and coerce them into debt. They may be coerced into carrying weapons such as knives or begin to carry a knife for a sense of protection from harm from others. As children involved in criminal exploitation often commit crimes themselves, their vulnerability as victims is not always recognised by adults and professionals, (particularly older children), and they are not treated as victims despite the harm they have experienced. They may still have been criminally exploited even if the activity appears to be something they have agreed or consented to.

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

### **Child Sexual Exploitation (CSE)**

CSE is a form of child sexual abuse. Sexual abuse may involve physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing, and touching outside clothing. It may include non - contact activities, such as involving children in the production of sexual images, forcing children to



look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse including via the internet.

CSE can occur over time or be a one-off occurrence and may happen without the child's immediate knowledge e.g., through others sharing videos or images of them on social media.

CSE can affect any child, who has been coerced into engaging in sexual activities. This includes 16- and 17-year-olds who can legally consent to have sex. Some children may not realise they are being exploited e.g., they believe they are in a genuine romantic relationship.

### **Online Safety**

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

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

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

Through communications with parents and carers, the importance of children and young adults being safe online is to be reinforced. Parents and carers are also made aware of what the students are being asked to do, including the sites they will be asked to access.

### **Filtering and Monitoring**

BeyondAutism, as part of its responsibility to safeguard and promote the welfare of children and provide them with a safe environment in which to learn, does all it can reasonably do to limit children's exposure to risks from our IT system. A filtering and monitoring system is in place and regular reports are provided to the DSLs. The system is managed by our IT service provider and is able to block potentially harmful content as well as report on the sites accessed. Staff can request for sites to be blocked or unblocked (if they are sure that they are suitable and appropriate for teaching). The provider has technical responsibility for

maintaining and monitoring the system, providing reports and acting on the results of any concerns or checks to the system. The DSL in each service, with the Head of Service, is responsible for overseeing and acting on filtering and monitoring reports and any safeguarding concerns they raise. The DSL should also oversee regular checks on the system.

As so many of the children and young adults in our care use tablets and other devices to support their learning, staff working closely with them should be vigilant when they are online, ensure the content they are viewing is appropriate (remembering the 4 Cs: content, contact, conduct, commerce), challenge anything that is not appropriate and report to the DSL any inappropriate sites that the children and young adults can access so the IT service provider can block them.

**Children Who Go Missing from Home or Care** are particularly vulnerable and may be at significant risk at times. The immediate risks associated with going missing include:

- No means of support or legitimate income – leading to high-risk activities
- Involvement in criminal activities
- Victim of Abuse
- Victim of crime, for example through sexual assault and exploitation
- Alcohol/substance misuse
- Deterioration of physical and mental health
- Missing out on schooling and education
- Increased vulnerability

Longer-term risks include:

- Long-term drug dependency/alcohol dependency
- Crime
- Homelessness
- Disengagement from education
- Child sexual exploitation
- Poor physical and/or mental health.

### **Children Absent or Missing from Education**

All children, regardless of their circumstances, are entitled to a full-time education which is suitable to their age, ability and aptitude and any special educational needs they may have. A child being absent from school or college, particularly if repeatedly and/or for prolonged periods, and going missing from education is a vital warning sign of a range of abuse or neglect. We will follow the required procedures for unauthorised absence and for dealing with children who go missing from education, including appropriate notification to the Local Authority. We will also ensure staff are aware of the unauthorised absence procedures and children missing education procedures, are alert to the potential risks of very low or non-attendance and cessation of attendance, including the signs to look out for and triggers to be aware of when considering the risks of potential concerns such as mental health problems, child criminal exploitation, **travelling to conflict zones, FGM, so called honour based abuse and risk of forced marriage. In the event that attendance is not reported by parents, we will contact the emergency contacts for the pupil.**



### **Serious Violence**

All staff should be aware of indicators, which may signal that children are at risk from, or are involved in, serious violent crime; they should also be aware of the associated risks and understand the measures in place to manage these. These may include: increased absence from school; a change in friendships or relationships with older individuals or groups; a significant decline in performance; signs of self-harm or a significant change in wellbeing; or signs of assault or unexplained injuries; unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with individuals associated with criminal networks or gangs and may be at risk of criminal exploitation. All staff should be aware of the range of risk factors which increase the likelihood of involvement in serious violence, such as being male, having been frequently absent or permanently excluded from school, having experienced child maltreatment and having been involved in offending, such as theft or robbery.

Advice is provided in the Home Office's Preventing youth violence and gang involvement and its Criminal exploitation of children and vulnerable adults: county lines guidance.

### **Child-on-Child abuse**

All staff should be aware that children can abuse other children (often referred to as child-on-child abuse) and that it can happen both inside and outside of school or college and online. It is important that all staff recognise the indicators and signs of child-on-child abuse and know how to identify it and respond to reports. All staff should understand, that even if there are no reports in their schools or colleges it does not mean it is not happening, it may be the case that it is just not being reported. As such it is important if staff have any concerns regarding child-on-child abuse they should speak to their designated safeguarding person, lead or deputy.

It is essential that all staff understand the importance of challenging inappropriate behaviours between peers, many of which are listed below, that are actually abusive in nature. Downplaying certain behaviours, for example dismissing sexual harassment as "just banter", "just having a laugh", "part of growing up" or "boys being boys" can lead to a culture of unacceptable behaviours, an unsafe environment for children and in worst case scenarios a culture that normalises abuse leading to children accepting it as normal and not coming forward to report it.

Child-on-child abuse is most likely to include, but may not be limited to:

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

- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party;
- consensual and non-consensual sharing of nudes and semi nudes images and or videos<sup>13</sup> (also known as sexting or youth produced sexual imagery);
- upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm; and
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

This places a responsibility of all staff to know what to look for in the early identification of child on child abuse and preventing it from escalating. Behaviour management practices across the services are design to work to prevent all forms of bullying, and include the expectation upon staff to staff challenge inappropriate behaviours between pupils.

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

The fact that a child or a young person may be LGBT is not in itself an inherent risk factor for harm. However, children who are LGBT can be targeted by other children. In some cases, a child who is perceived by other children to be LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT.

Risks can be compounded where children who are LGBT lack a trusted adult with whom they can be open. It is therefore vital that staff endeavour to reduce the additional barriers faced and provide a safe space for them to speak out or share their concerns with members of staff.

LGBT inclusion is part of the statutory Relationships Education, Relationship and Sex Education and Health Education curriculum and there is a range of support available to help schools counter homophobic, biphobic and transphobic bullying and abuse.

### **Female Genital Mutilation**

Female Genital Mutilation (FGM) is a collective term for procedures which include the removal of part or all of the external female genitalia for cultural or other non-therapeutic reasons. The procedure is typically performed on girls aged between 4 and 13, but in some cases, it is performed on young women before marriage or pregnancy. FGM has been a criminal offence in the UK since the Prohibition of Female Circumcision Act (1985) was passed. The Female Genital Mutilation Act (2003) replaced this Act and makes it an offence for UK nationals or permanent UK residents to carry out FGM abroad, or to aid, abet, counsel or procure the carrying out of FGM abroad, even in countries where the practice is legal. We recognise that the multi-cultural make-up of the services means that some BeyondAutism students may be at risk of FGM practice. Staff should be aware of risk factors and must respond to the statutory duty placed upon them in Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) to report personally to the police if they have reason to believe FGM has been carried out on a girl under the age of 18 either in this country or abroad. Staff who fail to report such cases will face disciplinary sanctions. Staff should still consider and discuss any such cases with the DSL and involve children's social care as appropriate (KCSiE, 2023).

### **Forced Marriage**

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent. Nevertheless, some perpetrators use perceived cultural practices to coerce a person into marriage.

The Forced Marriage Unit (FMU) has created [The right to choose: government guidance on forced marriage](#). Staff can contact the Forced Marriage Unit if they need advice or information: Contact: 020 7008 0151 or email [fmu@fcdo.gov.uk](mailto:fmu@fcdo.gov.uk).

In addition, since February 2023 it has also been a crime to carry out any conduct whose purpose is to cause a child to marry before their eighteenth birthday, even if violence, threats or another form of coercion are not used. As with the existing forced marriage law, this applies to non-binding, unofficial 'marriages' as well as legal marriages.

### **Upskirting**

This is a criminal offence in England and Wales with offenders facing up to two years in prison for taking an image or video under somebody's clothing. It is usually performed in a public place, such as on public transport or among crowds of people, making it harder to spot people taking the photos and there have also been instances of the practice taking place in schools. Staff need to be extra vigilant when pupils are using iPads, 'phones with camera, and other recording devices in and around the school. Similarly, when supporting pupils outside of school, staff should maintain a conscious awareness of potential perpetrators.

### **Mental Health**

Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Education staff, however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. Staff and pupils can complete a 'request for support form' if they identify that pupils may need further help/ strategies deploying for their mental health needs.

Pupil request for support form.docx ([sharepoint.com](#))  
[Staff to staff request for support form.docx \(sharepoint.com\)](#)

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that staff are aware of how these children's experiences, can impact on their mental health, behaviour and education.

Professionals can access a range of advice from external agencies to help to identify children in need of extra mental health support. Public Health England has produced a [range of resources](#) to support secondary school teachers to positive health, wellbeing and resilience among children.

If we have a mental health concern about a child that is also a safeguarding concern, immediate action will be taken in line with our policy.

### **Child criminal exploitation: county lines**

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

- can affect any child (male or female) under the age of 18 years;
- can affect any vulnerable adult over the age of 18 years;
- can still be exploitation even if the activity appears consensual;
- can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence;
- can be perpetrated by individuals or groups, males or females, and children or adults; and
- is typified by some form of power imbalance in favour of those perpetrating the exploitation.

Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.

### **Domestic abuse**

It is important to recognise that many children will be living (or may have lived) in families where domestic abuse is a factor, and that these situations have a harmful impact on children emotionally, as well as placing them at risk of physical harm. The definition of domestic 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 harm. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse). Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children, having a detrimental effect on their well-being, development and ability to learn. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

### **Honour Based Abuse (HBA)**

Encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk

factors when deciding what form of safeguarding action to take. All forms of HBA are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBA, or already having suffered HBA.

### **Prevent**

All schools must have due regard to the need to prevent pupils from being drawn into extremism, terrorism or being radicalised. We will ensure that staff are provided with appropriate training and information to enable them to assess the risk of children being drawn into extremist ideas that are part of terrorist ideology and identify any child who may be at risk and how to support them. We will also ensure that children are safe from terrorist and extremist material when accessing the internet in school. Concerns will be discussed with the child's parents whenever possible and with the Local Authority Prevent co-ordinator and referrals made to the Channel programme when appropriate. We understand our responsibilities as set out in the Prevent Duty and legislation and will ensure these are adhered to.

### **Specific safeguarding issues**

**All** staff should have an awareness of safeguarding issues – some of which are listed below. Staff should be aware that behaviours linked to the likes of drug taking, alcohol abuse, truanting and sexting put children in danger.

- bullying including cyberbullying
- children missing education
- child missing from home or care
- child sexual exploitation (CSE)
- criminal exploitation: county lines
- domestic violence
- drugs
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM)
- forced marriage
- gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- hate
- mental health
- missing children and adults strategy
- private fostering
- preventing radicalisation
- relationship abuse
- sexting trafficking
- Upskirting
- Serious violence



- Child-on-child abuse

**All** staff should be aware safeguarding issues can manifest themselves via child-on-child abuse. This is most likely to include, but not limited to: bullying (including cyber bullying), gender-based violence/sexual assaults, physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm, sexting and initiation/ hazing type violence and rituals.

Should staff members have any concerns about child-on-child abuse, they can raise concerns through the online reporting system: CPOMS. If any concerns regarding child-on-child abuse is reported via CPOMS, both the victim and the perpetrator will be supported to understand what has occurred and the implications that it has for each individual.

The PSHE curriculum teaches pupils how to positively interact with their peers, which includes how to be kind to one another. From September 2020 schools that operate under the DFE will be required to teach PSHE subjects and have regard to the statutory guidance. PSHE subjects should be taught following the principles of keeping children safe and prepare children for the world they are growing up in. The content should always be age appropriate.

Our pupils may not always possess the communication skills that enable many children to discuss or disclose incidents that upset or frighten them. It is of the utmost importance therefore that we create a sensitive, proactive environment in which children; parents and staff members are secure and confident in the agreed procedures that put children's safety first. We will also ensure that our pupils are taught the skills and are given the means to communicate effectively. Through the PSHE curriculum and working collaboratively with the NSPCC we aim to teach pupils how to recognise when they are at risk and how to get help when they need it.

Child abuse occurs in all groups within society, across all cultural, ethnic and religious communities and all socio-economic groups.

Safeguarding incidents and/or behaviours can be associated with factors outside the school or college and/or can occur between children outside the school or college. All staff, but especially the designated safeguarding lead should be considering the context within which such incidents and/or behaviours occur. This is known as contextual safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare. Children's social care assessments should consider such factors so it is important that as a school we are able to provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and the full context of any abuse. We understand that extra-familial harms take a variety of forms and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation and serious youth violence.

We recognise that children with disabilities or additional needs may be more vulnerable to abuse as additional barriers can exist when recognising abuse and neglect. This can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- Children with SEN and disabilities can be disproportionately impacted by things like bullying – without outwardly showing any signs;
- Communication barriers and difficulties in overcoming these barriers;
- Being more prone to peer group isolation than other children.

Our staff and volunteers form part of the wider safeguarding system for children. Safeguarding and promoting the welfare of children is **everyone's** responsibility (see Duty of Care).

Staff need to use the pupils' preferred method of communication in order to elicit as much information from the pupils' as possible, using the 'tell me' approach. Staff need to be aware that disclosures may or may not be verbal and need to be vigilant to any change in behaviour patterns, verbal or otherwise. If staff do not feel confident in eliciting information from pupils, they should immediately seek the support and guidance from more senior members of staff.

***The Children Act 2004, Section 11*** contains arrangements required to safeguard and promote the welfare of children including:

- A clear statement of the agency's responsibilities towards children available to all staff;
- Staff training on safeguarding and promoting the welfare of children for all staff working with or in contact with children and families;.
- Safer recruitment procedures in place;.
- Effective inter-agency working to safeguard and promote the welfare of children;.
- Effective information sharing.

## Information sharing

Information sharing is vital in identifying and tackling all forms of abuse. Whilst, among other obligations, the Data Protection Act 2018 places duties on organisations and individuals to process personal information fairly and lawfully and to keep the information they hold safe and secure, this is **not** a barrier to sharing information where the failure to do so would result in a child being placed at risk of harm. Fears about sharing information **cannot** be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

We will request a minimum of two emergency contact numbers for each child, preferably three, as we acknowledge that this is a protective measure for children to enable swift contact with families when necessary.

All staff are aware of the relevant data protection principles (under DPA 2018 and the GDPR), but are also clear that where there is the need to safeguard or promote the welfare of a child, relevant and proportionate information must be shared. ***Working Together to***

**Safeguard Children 2018** is statutory guidance for interagency working to safeguard and promote the welfare of children.

**Keeping Children Safe in Education, September 2023** sets out the statutory duties of schools, staff and governing bodies / proprietors to safeguard and promote the welfare of children.

## Duty of Care

Duty of Care means that everyone is required to take reasonable care in any situation in which harm to someone else could be foreseen.

A Higher Duty of Care which is the standard of care expected from someone with increased experience and specialist expertise where, through training or experience, one may be expected to visualise more clearly the results of one's actions in one's area/s of specialism. This applies specifically, but not exclusively, to Designated Safeguarding Leads.

## Negligence and Duty of Care

Acts or omissions by someone with a duty of care in which this is breached by falling below the standard of care required in the circumstances to protect others from the unreasonable risk of harm.

## B. A safe school culture

### 1. Recruitment & working with external providers

When BeyondAutism appoints new staff there are several checks made which aim to prevent unsuitable people from working with our children. These include:

- We ask to see proof of identity by looking at an original birth certificate, driving licence or passport.
- A copy of the CV is only accepted alongside **a completed application form**
- Where relevant, we seek proof of professional qualifications by asking to see the original certificate or diploma.
- References are taken up before interview; we require the names of two referees that we contact. We obtain two written references one of which must be from the current or most recent employer.
- Online searches are done on all shortlisted candidates (the candidates are informed of this).
- In principle, no member of staff (whether paid or unpaid) in regulated activity at BeyondAutism Schools or in BeyondAutism will be permitted to start work until an enhanced DBS check has been undertaken. We accept that it is legally permissible for staff to commence work whilst waiting for an enhanced DBS to be completed so long as a Barred List check has been and will in exceptional circumstances permit this to happen with a full risk assessment agreed with the employee.

- Newly appointed qualified teachers will not be permitted to commence in post until we have checked that they are not prohibited from teaching by the NCTL. This includes staff who were previously working as qualified teachers.
- All staff of BeyondAutism undertake regulated activity. This means that the barred list is automatically checked as part of the Enhanced DBS check and any directions under s.128 of the Education and Skills Act 2008 barring individuals from taking part in the management of an independent school will also be disclosed via this route.
- Staff working in early years (children in nursery or Reception) or providing wrap-around care to under-8s are required to declare that they are not disqualified, or disqualified by association, from working with children in Early Years or Childcare settings. Because staff could be asked to work across all age groups within the school we check everyone for barring by association
- Enhanced DBS checks are obtained for all Trustees and Governors of BeyondAutism, the proprietor of BeyondAutism Schools as they are deemed to be in regulated activity. This means that the barred list is automatically checked as part of the Enhanced DBS check and any directions under s.128 of the Education and Skills Act 2008 barring individuals from taking part in the management of an independent school will also be disclosed via this route. People who are the subject of a Section 128 order are disqualified from being governors.
- Additional checks are carried out on the Chair of Trustees in accordance with regulation 20 of The Education (Independent School Standards) Regulations 2014.
- We also have a legal duty to make a referral to the DBS under specific circumstances, and we believe a person has caused harm or poses a future risk of harm to vulnerable groups, including children.

### External Providers

When activities or services are provided separately by another organisation, the BeyondAutism Services should seek assurance that the provider concerned has appropriate safeguarding and child protection policies and procedures in place (including inspecting these as needed) and ensure that there are arrangements in place for the provider to liaise with the service on these matters where appropriate. The guidance on [Keeping children safe in out-of-school settings](#) details the safeguarding arrangements that schools and colleges should expect these providers to have in place.

## 2. Training of staff

All members of staff (including teaching and non-teaching) receive training on safeguarding and child protection, including the arrangements in the school and the London multi-agency procedures. The training includes basic concepts of child protection, recognition and handling a disclosure, which may or may not be verbal. Training will also include the school's behaviour policy and procedures for children absent from or missing education as well as the staff code of conduct and this Child Protection/safeguarding policy.

Safeguarding and Child Protection Awareness Training is delivered as part of the induction programme and as a refresher every year to **all staff, including DSLs and DSPs** (this includes identifying the DSPs and DSLs). The training will include online safety and an understanding of the expectations and responsibilities in relation to filtering and monitoring.

Additional training sessions are delivered by an external consultant to cover specific safeguarding topics annually. These topics can include but are not limited to:

- Adult Safeguarding and Mental Capacity Act
- Prevent Duty, FGM and Ethnic Diversity
- Key Changes to 'Keeping Children Safe in Education'
- Online safety
- Sexual Harassment and Sexual Violence
- Serious crime and Serious violence

The DSP's and DSLs attend Level 3 training every 2 years. DSL training is accessed through Child Protection Training UK and Wandsworth Children Safeguarding Board.

All staff members are required to read the Intimate Care Policy as part of induction training. Each child's individual care plan is incorporated in their behaviour plan and pupil profile sheets along with individual risk assessments.

### 3. Training Objectives

- To ensure that school team members observe and monitor pupils' routine behaviour on a regular basis.
- To ensure staff across the organisation understand their responsibility to raise concerns and how they can raise concerns.
- To support staff members in recording of observations so that any confidential information pertaining to a child is precise, objective and professionally documented.
- To handle information in a sensitive and confidential way and on a "need to know" basis referring to the latest Government Guidance Information Sharing 2018, as necessary.
- To ensure that referrals are handled correctly and consistently.
- To serve as a reminder to staff members to remain alert and aware of child protection issues.
- To identify the safeguarding and child protection leads across the organisation
- The safeguarding and protection leads have full training in child protection, safeguarding and multi-agency working which is refreshed at least every two years.
- All other staff receive annual training in child protection and/or safeguarding.

Refresher training for all staff is also delivered throughout the academic year. In addition, all staff are required to read ***Keeping children safe in education: information for school & college staff, September 2023*** and ***What to do if you're worried a child is being abused, March 2015*** and to discuss with one of the designated staff if they have any queries.

- Annual staff training will also include information on child-on-child abuse, Honour Based Violence, Female Genital Mutilation and Preventing Radicalisation. (see section 11 for further information)



## 4. Roles and responsibilities

### Designated Safeguarding Lead (DSL)

The designated safeguarding lead is expected to:

- The Designated Safeguarding Leads (DSL) will have their role explicitly stated in their job descriptions and will be released to attend the necessary enhanced training courses to enable them to carry out their role effectively.
- Designated leads will also ensure that all staff are provided with Part One of Keeping Children Safe in Education 2023 guidance and assisted to understand and discharge their roles and responsibilities as set out in this guidance.
- Refer cases of suspected abuse to the local authority children's social care as required;
- Support staff who make referrals to local authority children's social care;
- Refer cases to the Channel programme where there is a radicalisation concern as required;
- Support staff who make referrals to the Channel programme;
- Refer cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required; and
- Refer cases where a crime may have been committed to the Police as required.
- Liaise with the Heads of Service to inform them of issues especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
- As required, liaise with the "case manager" and the designated officer(s) at the local authority for child protection concerns (all cases which concern a staff member); and
- Liaise with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies. Act as a source of support, advice and expertise for staff.
- Ensure the child protection policies are known, understood and used appropriately;
- Ensure the child protection policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this;
- Ensure the child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the organization in this; and
- Link with the local LSCB to make sure staff are aware of training opportunities and the latest local policies on safeguarding.
- To lead on termly internal safeguarding supervision
- To lead on filtering and monitoring, checking and acting on the monthly reports and also liaising with the IT service provider as required to block/unblock websites and to investigate if there are concerns about a particular student's online activity.
- Take responsibility for the filtering and monitoring of internet use in their school or service.

## Deputy Designated Safeguarding Lead (DDSL)

The designated deputy safeguarding lead is expected to:

- Deputise for a Designated Safeguarding Lead and undertake directed tasks as warranted by the DSL. The Deputy Designated Safeguarding Leads (DDSL) will have their role explicitly stated in their job descriptions and will be released to attend the necessary enhanced training courses to enable them to carry out their role effectively.
- Deputy Designated leads will also assist in ensuring that all staff are provided with Part One of Keeping Children Safe in Education 2018 guidance and assisted to understand and discharge their roles and responsibilities as set out in this guidance.
- Refer cases of suspected abuse to the local authority children's social care as required;
- Support staff who make referrals to local authority children's social care;
- Refer cases to the Channel programme where there is a radicalisation concern as required;
- Support staff who make referrals to the Channel programme;
- Refer cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required; and
- Refer cases where a crime may have been committed to the Police as required.
- Liaise with the Heads of Service (as they apply) (This are Designated Safeguarding Leads) to inform them of issues especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
- As required, liaise with the "case manager" and the designated officer(s) at the local authority for child protection concerns (all cases which concern a staff member); and
- Liaise with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies. Act as a source of support, advice and expertise for staff.
- Ensure the child protection policies are known, understood and used appropriately;
- Ensure the child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the organization in this; and
- To engage with termly internal safeguarding supervision

The DSL and DDSL will undergo training to provide them with the knowledge and skills required to carry out the role, updated at least every two years and will include Prevent awareness training.

## Designated Safeguarding Person (DSP)

The designated safeguarding person works with the DSL to ensure the effective management and response to concerns raised within the organisation. The DSP is a key point of contact, ensuring that records are accurate; and that actions are taken and reported to the DSL. Should the DSLs be unavailable, the DSPs would deputise on their behalf.

## 5. Observation and Monitoring

It is the responsibility of **all** staff members to report any disclosures, changes in behaviour and/or observations of marks or bruises using CPOMS (<https://beyondautism.cpoms.net>) and to 'alert' the DSP and DSL to any concerns that arise verbally. Safeguarding concerns could be as a result of the action or inaction of Staff, Parents, Visitors, Transport Providers or others in contact with the pupil. It is the DSP's responsibility to follow up reports including asking parents. If the explanation is not satisfactory, the DSP should discuss the issue with the DSL. The DSL can support the DSP to ask parents if needed.

DSP's should update incidents/injuries in the relevant category on CPOMS. Similarly, the reason given for the incident/injury should be recorded and witnessed. The record should show times and dates of any such observations and conversations with parents/carers. This account should be written up promptly. A chronology for each child is automatically generated for a pupil on CPOMS after the first incident and is only accessible to DSPs and DSLs.

Observation and monitoring is particularly important for children with learning and/or communication challenges as they may not be able to verbally disclose an experience of abuse and it is more likely to be as a result of a member of staff being vigilant and noticing unusual behaviour or marks or bruises.

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

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

In addition to monitoring and recording signs or indicators of abuse, all staff have a responsibility to pass on ANY concerns at the earliest opportunity, in order that **early help** can be offered to the child and/or their family to reduce the risk of problems escalating.

The Department of Education has provided advice [What to do if you are worried a child is being abused March 2015](#) for practitioners.

Staff may be required to support other agencies and professionals in an **early help** assessment, in some cases acting as the lead professional. Any such cases should be kept under constant review and consideration given to a referral to children's social care for assessment for statutory services if the child's situation does not appear to be improving or is getting worse.

## 6. Procedures for reporting

If any member of staff has concerns about suspected child abuse the initial point of contact would be the DSPs. **All concerns should be reported immediately to a DSP and recorded on CPOMS**

(The DSP can refer to the "Life and Journey of a Cause for Concern Form" flowchart to aid decision making- see Appendices 2 and 5)

Allegations against staff are to be dealt with in accordance with section 7 below.

Issues to report are any concerns regarding the safeguarding or welfare of children. Concerns will include any incident that could have a bearing on the welfare of a child as well as signs or indicators of abuse, disclosures from children or their parents/carers or concerns about the interaction of any person in contact with a child. Any information is handled in a sensitive and confidential manner on a "need to know" basis.

If a child discloses **physical abuse, neglect or emotional abuse** and/or if a member of staff observes signs that are consistent with such abuse, the member of staff should immediately inform the DSP and record it on CPOMS. The DSP may ask for an explanation from the child's parents/carers. **Unless** the explanations given are totally plausible and consistent with a non-abusive event the DSP at BeyondAutism Schools should then inform the Social Services team for the pupil's home local authority in line with their referral procedures.

If the child discloses **sexual abuse** and/or if a member of staff observes signs that are consistent with such abuse, that disclosure should **not** usually be shared with the parent/carer at that point, in case the parent or carer may be the perpetrator. The staff member should inform the DSP or DSL who will inform Child Social Services immediately and a record will be made on CPOMS.

If a child makes an allegation against another child, we will follow the Wandsworth Safeguarding Children's Board Procedures.

So-called 'honour-based' violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubts staff should speak to the designated safeguarding lead. If it is discovered that a pupil has been a victim of FGM, it is the discovering staff's duty to report it to the police.

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

Knowing what to look for is vital to the early identification of abuse and neglect. If staff are unsure, they should **always** speak to the designated safeguarding lead (or the DSP for their class).

## 7. Allegations against staff or volunteers

If an allegation is made against any member of staff or volunteer (including agency staff), the relevant Head of Service should be informed immediately. The Head of Service will then discuss the allegation with the LADO (Local Authority Designated Officer) the same day before discussing the allegation with the member of staff or taking any decision regarding action including whether the staff member should be suspended. The LADO will advise whether a multi-agency meeting is to be convened.

If an allegation is made against either a Head of Service or the Director of Education, the Chair of Governors should be informed and it is their responsibility to notify the LADO.

The criteria for making a referral to the LADO is that an individual may have:

- behaved in a way that has, or may have, harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children
- behaved or may have behaved in a way that indicates they may not be suitable to work with children

In the absence of the Chair of Governors, the Vice-Chair of Governors should be informed. Allegations against non-teaching staff or volunteers will be dealt with in accordance with this policy. If an allegation is made against the CEO, the Chair of Governors will be informed and it is the Chair’s responsibility to notify the LADO. If an allegation is made against the proprietor, then it is reported directly to the LADO.

The Chair of Governors will be informed if a staff member is suspended pending an investigation. It will be the Director of Education’s responsibility to notify the LADO before making any decision regarding suspension or other action.

Allegations against staff must be managed in accordance with Part Four of Keeping Children Safe in Education, 2023.

## 8. Staff making allegations against other staff

Such allegations must be made to the relevant Head of Service not the DSL or DSP (unless the Head of Service is the DSL). It is essential for staff to appreciate the importance of reporting allegations against other staff to the relevant Head of Service. This is to protect



staff. There are two exceptions to this. Firstly, if the allegation is about the Head of Service section 7 applies. Secondly, if the allegation has been reported to the relevant Head of Service and no action has been taken, staff need to report their concerns to the Director of Education. If having done this the staff member still has concerns about another member of staff and they still consider children to be at risk, they must take their concerns to the LADO.

## 9. Low-Level Concerns

Where staff feel that the behaviour of an adult working in the school does not follow our staff code of conduct, including inappropriate conduct outside of work, but the behaviour does not meet the “harm” threshold, a low-level concern should be raised. All low-level concerns should be reporting in writing by completing a CPOMS should the concern relate to conduct with a pupil. Should the concern relate to general staff conduct either inside or outside of work, the whistleblowing policy should be followed and the concern should be detailed in writing. Concerns will be saved in staff files in order to track and identify any repeated incidents.

Should the low-level concern relate to a member of agency staff, their employers should be notified so that any potential patterns of inappropriate behaviour can be identified.

If staff members are in any doubt as to whether the information shared about a member of staff as a low-level concern in fact meets the harm threshold, they should consult with their LADO.

## 10. Effective Reporting

An incident report on CPOMS (<https://beyondautism.cpoms.net>) is completed whenever there is a concern regarding the safeguarding or welfare of children no matter how small and even if no further action is required. This electronic system is available to all staff who work for BeyondAutism and can be accessed via any computer in the charity. In the event that a visitor would like to raise a concern, they can use a Cause for Concern form (Appendix A) which can be found at reception. In the event that staff want to report a Health and Safety Concern, they can complete a Health and Safety Concern form via Schoolpod, which will then be actioned by the relevant Head of Service. Incident reports when used to report a concern are confidential and CPOMS ensures that only DSPs and DSLs have access to confidential information. **Incident reports must be written as soon as possible after an incident, but definitely before the end of the day in which the concern is raised, and a DSP/ DSL notified at a minimum, via CPOMS.** Historic Cause for Concern forms (prior to academic year 2017/2018) are kept in locked files, which only the safeguarding team have access to.

Careful records must be kept of all action taken concerning an incident, for example time, date, and name of Duty Social Worker, when reporting suspected child abuse. **These records must be kept confidential.**

Referral reports, using the relevant Local Authority’s own referral form are written by the DSP/ DSL and it is their responsibility to ensure that a copy of this report is kept in the Child Protection server on the school’s computer system. The relevant referral form for each borough is generally available on the borough’s website, alternatively the duty social worker

will direct the DSP/ DSL to the referral form that they need to complete and the email address that the referral forms are sent to.

Only DSP's and the DSL have access to the Child Protection drive on the school's computer systems.

## 11. Referral

BeyondAutism Services have a duty to report suspected child abuse to our statutory partner agencies.

Any member of staff who has reason to suspect possible abuse, or to be concerned about whether a child is likely to suffer significant harm has a responsibility for raising the issue with the DSP – and by completing an incident report on CPOMS (<https://beyondautism.cpoms.net>). It is the DSP's responsibility to advise staff and where necessary telephone social services for further advice.

Where the suspected abuse relates to an event at BeyondAutism, the referral is to Wandsworth. If the protection concern relates to events elsewhere, specifically the pupil's home, then the reporting route is to that home authority.

It is also our duty to inform Child Social Services of possible abuse. DSP's have specific training in child protection, safeguarding and referral procedures. However, if any member of staff believes that their concerns are not being taken seriously and that steps are not being taken to protect a child, the member of staff with the concern **MUST** escalate this to one of the other DSP's, the DSL, or the CEO/nominated Trustee for safeguarding. If necessary, any member of staff can make a referral to Social Services in line with ***Keeping Children Safe in Education September 2023*** but they should inform the relevant Head of Service/ DSL as soon as possible that a referral has been made. **If in doubt, ask.**

We also expect staff to be vigilant against female genital mutilation (FGM), particularly for female pupils from communities which are known to be most at risk. In the event of any indications that a pupil may be at risk of FGM, staff have a mandatory duty to report it. Staff must personally report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the staff member has a good reason not to, they should also still consider and discuss any such case with the designated safeguarding lead and involve children's social care as appropriate. Further information about FGM is available within *Keeping Children Safe in Education 2023 in Annex B* from page 154.

Whilst it is less likely to be relevant to our cohort of pupils, compared with those of a mainstream school, we have a duty to prevent the radicalisation of pupils under the Counter-Terrorism and Security Act. This is often referred to as the 'Prevent duty'.

Further information is found at page 149\* onwards of ***Keeping Children Safe in Education 2023*** which includes information on when referrals to the Channel programme may be required. *\*May change subject to final publication*

Staff should also, be aware, for the cohort of children at the school, of the potential for faith abuse and fabricated or induced illness to occur. In respect of the latter staff may wish to refer to our Medical Policy which deals with situations pertaining to the administering of

prescribed medicines and requests to administer other substances including but not limited to food supplements.

The school has a mandatory duty to report any instances or suspected instances of 'private fostering' to the relevant local authority. A private fostering arrangement is one which has been made privately (without the involvement of the local authority) for the care of a child under the age of 16 years (under 18, if disabled) a parent or close relative, in their own home, with the intention that it should last for 28 days or more. Close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins. If it is deemed that a private fostering arrangement is in place, the school should then notify the local authority to allow the local authority to check the arrangement is suitable and safe for the child.

In an acute emergency when the child's life and health seem seriously at risk, dial 999 and call for an ambulance. The Metropolitan Police Child Protection Team should be contacted, as well as Wandsworth Social Services.

**For further information about the referral procedure please refer to [Wandsworth Safeguarding Children Partnership](#) procedures and [Wandsworth Children's Services Family Information Service](#).**

## 12. Other related policies

This policy has clear links to other policies in our school, in particular to any policies concerned with the protection of all children in the school from various kinds of harm. These policies are listed below:

- Anti-bullying
- Online Safety
- Behaviour
- Positive handling and physical intervention
- Equality and Diversity Policy
- Health and Safety
- Absconding and Lost Child Procedure
- Data Protection
- Pupil information (DfE guidance)
- Safer recruitment
- Intimate care
- Whistleblowing Policy
- Safeguarding Adults at Risk Policy and Procedure

## 13. Changing Schools

Joiners: Although it is the duty of the previous school to transfer the data as soon as possible to the new school, occasionally this may not occur, perhaps if parents have not shared the name of the new school. When BeyondAutism Schools admit new pupils, it will ensure that the previous school is contacted in writing (even if there has been a gap

between school placements) to ask for written confirmation whether there are any child protection records or not and asking for any such records to be transferred.

Leavers: In the event that a pupil of BeyondAutism Schools transfers to another school, BeyondAutism Schools will ensure that all relevant records are transferred to the new school (to the extent that it is made aware of that school) and will seek a confirmation of safe receipt of those records from the new school.

In line with government legislation, we also inform Wandsworth Borough of any leavers or starters to BeyondAutism Schools on a weekly basis.

## C. Resources

### [London Safeguarding Children Procedures March 2023](#)

Available as hard copy in each school, also available electronically via [Wandsworth Safeguarding Children Partnership](#) and [London Safeguarding Children Partnership](#) –. These are updated every six months. The next update will be 30<sup>th</sup> September 2023.

### [Inspecting Safeguarding in Early Years, Education and Skills \(September 2019\)](#)

### [Keeping children safe in education 2023](#)

### [Childcare Act 2006](#)

### [Working Together to Safeguard Children 2018](#)

### [What to do if you're worried a child is being abused, 2015](#)

### [Information sharing - Advice for practitioners providing safeguarding services to children, parents and carers, 2018](#)

### [Use of reasonable force: advice for HTs, staff and governing bodies, 2013 \)](#)

### [Safeguarding Disabled Children, Practice Guidance, July 2009](#)

### [Sharing nudes and semi-nudes: advice for education settings working with children and young people](#)

### [Upskirting \(VOYEURISM \(OFFENCES\) ACT 2019\)](#)

### **Domestic Abuse Act**

<https://www.legislation.gov.uk/ukpga/2021/17/contents/enacted>

## D. Important Information

All relevant telephone numbers are displayed in the following places both at Park House (PH) and at Tram House (TH):

- Reception
- Staff Room
- Upstairs Office
- SLT Offices
- All Classrooms

The DSLs with the CEO will undertake an annual review of the Safeguarding and CP policy.

The Board of Governors will undertake a bi-annual audit of Safeguarding and Child Protection procedures at BeyondAutism Schools.



## E. Child Protection – Contact Details

### Designated Safeguarding Lead (DSL):

Seth Bolderow	07548 163248
Sarah Lerner	020 3031 9703/07743297144
David Anthony	07841010738
Matthew Wicks	07552 151277
Hannah Smith	07526188128
Emma Price	0203 031 9707
Catrin Bail	0203 031 9700
Elizabeth Robinson	020 3031 9701
Russell Irving	020 3031 9701
Michelle Frangos	0203 031 9707

### Deputy Safeguarding Lead (DDSL):

Matt Le Blanc	0203 031 9700
Karen Talty	0203 031 9700
Stacey Gent	0203 031 9707
Jordana Smallwood	07389 795991

### Designated Safeguarding Persons (DSP):

Sharon Mo	0203 031 9700
Patrycja Marcinkowska	0203 031 9700
Aaliyah Adeniji	0203 031 9700
Francesca Moore	0203 031 9707
Rachel Hodgson	0203 031 9707
Chelsee Maloney	0203 031 9707
Marta Martin Perteguer	0203 031 9703

**CEO:** Tracie Coultas-Pitman [traciecoultaspitman@beyondautism.org.uk](mailto:traciecoultaspitman@beyondautism.org.uk)

**Chair of Trustees and  
Trustee lead  
for Safeguarding:** Audrey Pantelis [audreypantelis@beyondautism.org.uk](mailto:audreypantelis@beyondautism.org.uk)

If there are significant concerns, or in the absence of all of the above please ring at least one of the contacts listed below.

### During working hours:

#### 1. LADO (Local Authority Designated Officer)

London Borough of Wandsworth

Anita Gibbons

[Anita.Gibbons@richmondandwandsworth.gov.uk](mailto:Anita.Gibbons@richmondandwandsworth.gov.uk)

2. Principal EWO (Education Welfare Officer/Safeguarding lead for schools, London Borough of Wandsworth

Sophie Allen

[sophie.allen@richmondandwandsworth.gov.uk](mailto:sophie.allen@richmondandwandsworth.gov.uk)

3. Safeguarding Standards Service, London Borough of Wandsworth

Service Manager: Lisa Tingle

[lisa.tingle@richmondandwandsworth.gov.uk](mailto:lisa.tingle@richmondandwandsworth.gov.uk)

020 8871 5846

4. Metropolitan Police Child Protection Team,

Wandsworth, Merton & Kingston

020 8247 7840

5. Wandsworth Social Services Department

0208 871 6622

Referral and Assessment Service (duty SW)

Monday to Friday 9am-5pm

6. The NSPCC Whistle Blowing Helpline

0800 028 0285

#### Out of hours:

1. Wandsworth Social Services Department

020 8871 8999

2. Metropolitan Police Child Protection Team,

020 8247 7840

In an acute emergency when the child's life and health seem seriously at risk, call 999 for an ambulance.

Revised: August 2023 based on changes to KCSIE 2023

Last review: September 2023

Date of next review: August 2024

Review group: Trustees

## Appendix 1: guidance regarding potential signs of abuse from London SCB procedures

### Recognising Physical Abuse

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents / carers are uninterested or undisturbed by an accident or an injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a 'cry for help' and if ignored could lead to a more serious injury).
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries

### Bruising

Children can have accidental bruising, but the following must be considered as non-accidental unless there is evidence or an adequate explanation provided:

- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

### Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shape. Those over 3 cm in diameter are more likely to have been caused by an adult or an older child.

A medical opinion should be sought where there is any doubt over the origin of the bite.

## Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water of its own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns / scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

## Fractures

Fractures may cause pain, swelling and discoloration over a bone or a joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

## Scars

A large number of scars or scars of different sizes or ages, or on different parts of body, may suggest abuse.

## Behavioural Indications

Some children may behave in ways that alert you to the possibility of physical injury, for example

- Withdrawal from physical contact
- Fear of returning home
- Self-destructive tendencies
- Aggression towards others

## Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent / carer e.g., anxious, indiscriminate or no attachment
- Aggressive behaviour towards others
- Scape-goated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a 'loner' – difficulty relating to others
- Over-reaction to mistakes
- Fear of new situations
- Inappropriate responses to painful situations
- Neurotic behaviours
- Self-harming
- Running away
- Depression, anxiety
- The effects of poisoning (e.g., vomiting, drowsiness and/or seizures)
- Eating disorders

## Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g., adequate food, clothes, warmth, hygiene and medical care
- A child seen to be listless, apathetic and unresponsive with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from or late for school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods
- Compulsive stealing or scavenging
- Persistently smelly or dirty
- Tooth decay, untreated medical conditions or injuries



- Tiredness
- Parents or carers failing to administer medication or seek medical help when needed
- Changes in behaviour

## Recognising Sexual Abuse

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and / or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional / behavioural.

### Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate for the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder, self-mutilation and suicide attempts)
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes for e.g. sports events (but this may be related to cultural norms or physical difficulties)
- Concerning changes in behaviour or general presentation
- Regressive behaviour
- Distrust of a particular adult
- Unexplained gifts of money
- Sleep disturbances or nightmares
- Phobias or panic attacks
- Depression, anxiety, post traumatic
- Eating disorders, self – harm
- Difficulty concentrating and learning

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Marks or bruises
- Pregnancy in a younger girl where the identity of the father is disclosed
- Physical symptoms such as injuries to the genital or anal areas, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen in vagina, anus, external genitalia or clothing
- Wetting or soiling
- Repeated urinary tract infections

## Appendix 2: Cause for Concern Form

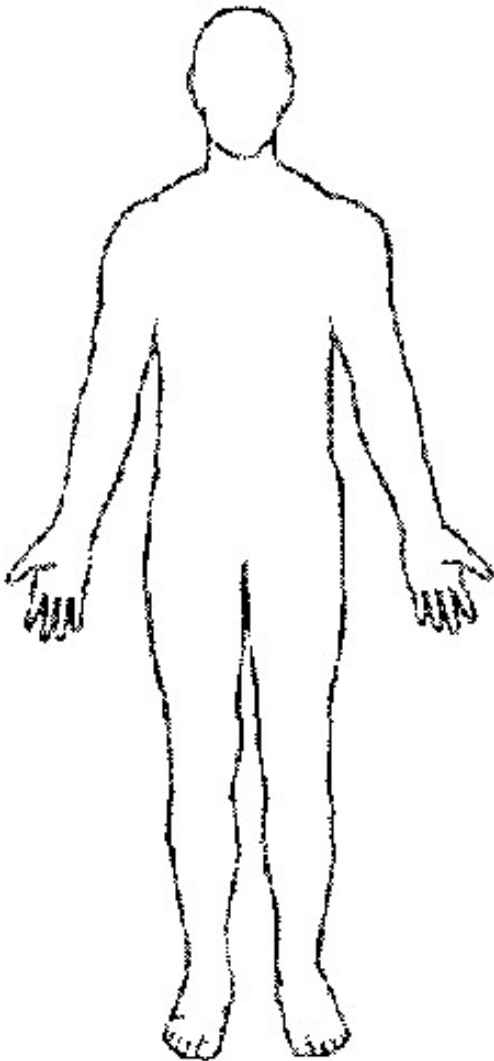
**Procedure:** This form is to be completed on **ALL** occasions when concerns are being raised by someone who does not have a CPOMS login, when there is **any** cause for concern in relation to the welfare or safety of a child. It can be filled in by anyone and **must** be handed to a Designated Safeguarding Person or the Designated Safeguarding Lead.

<b>Student's Full Name:</b>		<b>Class:</b>	
<b>Concern initiated by: (Full name)</b>	<b>Signed:</b>	<b>Role:</b>	
<b>Date:</b>		<b>Time:</b>	
<b>Nature of concern:</b>			
<b>Details of any witnesses:</b>			
<b>Time referred to Designated Safeguarding Person:</b>			

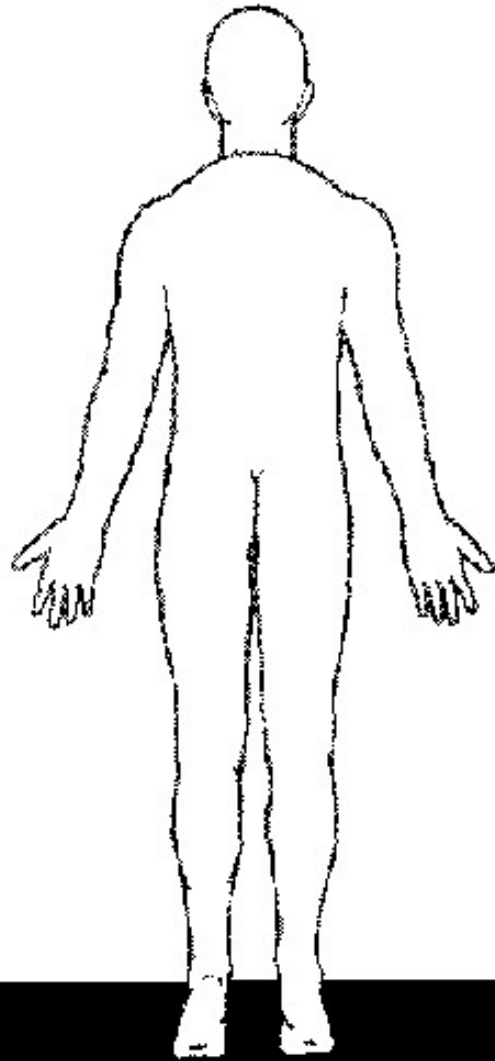
<b>To be completed by DSP or DSL:</b>			
<b>DSP Print and sign</b>		<b>DSL Print and sign</b>	
<b>Action taken/Referral made:</b>			
<p><b>If the concern is a Health and Safety matter, it should be reported to one of the following: Health and Safety Officer / CEO / Site Manager (circle if relevant)</b></p>			
<b>Also recorded in the following places: (tick if relevant)</b>			

School Pod / Injury letter		Team Teach book		Home/School Book	
Phone call home		Chronology CP		Email home	

**Body map of injuries**

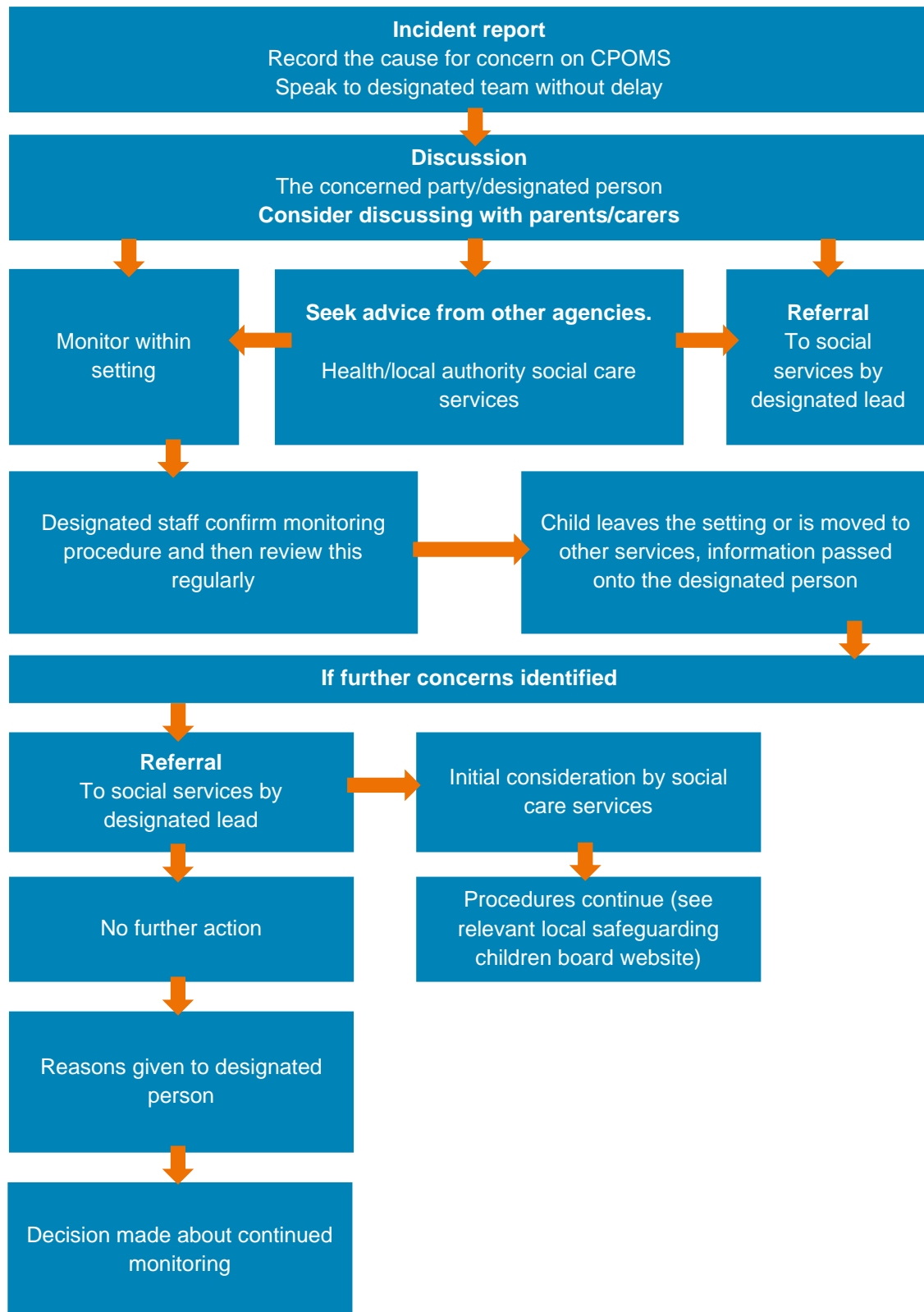


**Front**



**Back**

## Appendix 3: The Life of a Concern



## Appendix 4: The Thread throughout our Organisation

It is important that there is an organisation-wide environment that is vigilant and responds to the safeguarding priorities of the different services. Attendees at all meetings are to be reminded that **“Safeguarding is the umbrella term used to ensure children and adults at risk are protected from harm. The discussions, issues and solutions raised throughout this meeting must drive our safeguarding practice and culture”**. Safeguarding may be a standing agenda item for some meetings but all meetings must include safeguarding as part of discussions and factor it in to any decisions. This does not replace raising and recording concerns. Below are the areas in which safeguarding may be covered at the different meetings but the list is not meant to be exhaustive.

### Trustee meeting

- Organisational risk related to safeguarding
- Review of data – safeguarding concerns and referrals
- Training needs
- Monitoring and review of policy and procedures
- Any concerns as a result of interaction with the services

### BA Senior Management Team meeting

- Risk related to safeguarding, organisational and per service
- Review of data – safeguarding concerns and referrals
- Monitoring and review of policy and procedures
- Any concerns as a result of interaction with the services

### BeyondAutism Schools' Senior Leadership Team meeting

- Risks related to safeguarding
- Review of data – safeguarding concerns and referrals
- Any concerns as a result of interaction with the staff, pupils and parents
- Training needs
- How the curriculum safeguards our pupils

### BeyondAutism Schools'/Post-19 Behaviour Analyst's meeting

- Risks related to safeguarding
- Any concerns as a result of interaction with the staff, pupils and parents
- Training needs

### BeyondAutism Schools' ASP's meeting

- Risks related to safeguarding
- Any concerns as a result of interaction with the staff, pupils and parents
- How the curriculum safeguards our pupils

### Whole School meeting

- Safeguarding awareness
- Weekly safeguarding questions
- Any general concerns as a result of interaction with the staff, pupils and parents

### BeyondAutism Schools' Class meeting



- Risks related to safeguarding
- Any class related concerns as a result of interaction with the staff, pupils and parents
- Ensuring the curriculum safeguards our pupils

#### BeyondAutism Services' HR meeting

- Monitoring safer recruitment practice
- Any concerns as a result of interaction with the school

#### BeyondAutism Finance & Fundraising meeting

- Risks related to safeguarding
- Any concerns as a result of interaction with the services
- Monitoring financial procedures

#### BeyondAutism Marketing & Communications meeting

- Risks related to safeguarding
- Any concerns as a result of interaction with the services
- Monitoring social media
- Monitoring permissions

#### BeyondAutism Health & Safety meeting

- Risks related to safeguarding
- Any concerns as a result of interaction with the services

#### BeyondAutism Office Team meeting

- Any concerns as a result of interaction with the services
- Monitoring procedures for visitors, phone calls

#### All staff 1-to-1 supervision meetings

- Any safeguarding concerns
- Training needs

## Appendix 5: Safeguarding Structure at BeyondAutism Schools

### Park House School

DSL – Catrin Bail(2118)		
DDSL – Karen Talty (2105)		Matt LeBlanc(2102)
DSP – Aaliyah Adeniji	DSP – Sharon Mo	DSP – Pat Marcinkowska
Red Orange	Yellow Green Blue	Indigo Rainbow

#### CPOM's management

DSL/DDSL manage the actions for and consult with DSP's for specific classes – to ensure there is clear lines of responsibility and accountability.

All CPOMS are sent to DSL and DDSL, the management of the CPOMS to be overseen for specific classes. This ensures quality of response and actions as well as being the point for advice/support/consultation of DSP's.

### Tram House School

DSL – Emma Price (2227)		Michelle Frangos (2226)	
DDSL – Stacey Gent (2226)		Jordana Smallwood (0738979599)	
Francesca Moore (2216)		DSP – Chelsee Maloney (2203)	DSP – Rachel Hodgson (0738979599)
TH1 – TH3 TH3 – TH4		TH4 – TH5	C 1 – 3

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### Park House School and Tram House School: Safeguarding advice and consultation

All DSL/DDSL's are available at all times, when on site. There will always be a DSL or DDSL on site.

### Appendix 5: The life and journey of a "Cause for Concern" Form

