



KISIMUL GROUP

Operational and Educational Policy and Procedure

Child Protection and Adult at Risk Safeguarding Policy

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Summary

This policy provides details of the core principles that underpin the organisations approach to managing safeguarding within children's services, schools and colleges.

It is the policy of Kisimul Group to ensure that a safe and caring environment is provided at all times for the children/young people entrusted to its care, and to protect them from significant harm. The Group is committed to ensuring that all children/young people attending services are kept safe and that any concerns about a child/young person are followed up in the right way, and to ensure that everyone including; parents/carers, staff, consultants/visiting professionals and children/young people know what should happen and what is expected of them.

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1. Introduction

Kisimul Group are committed to practice which promotes the wellbeing of children and young people and helps keep them safe from harm. Staff and volunteers recognise and accept our responsibility to develop awareness of the issues that cause children and young people harm.

This policy has been developed in accordance with the principles established in the Children Act 1989 and 2004 and related guidance. This includes:

- Keeping Children Safe in Education 2020 (KCSIE)
- Working Together to Safeguard Children July 2018
- Children's Homes Regulations 2015
- Lincolnshire's Raising Concerns about a Vulnerable Child or Adult at Risk Joint Protocol for Children's Services and Adult Care
- Lincolnshire Safeguarding Children Board Procedures Policy and Procedures Manual.
- Surrey Safeguarding Children Board Procedures.
- Nottinghamshire Safeguarding Children Board (NSCB) and Nottingham City Safeguarding Children Board (NCSCB).
- Nottinghamshire Adults MASH (multi-agency safeguarding hub).
- Peterborough and Cambridgeshire Safeguarding Children Board Procedures.

Definition of Safeguarding

Safeguarding and promoting the welfare of children/young people is defined in this policy as:

- protecting children/young people from maltreatment
- preventing impairment of children/young people's health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care

- taking action to enable all children/young people to have the best outcomes.

2. Kisimul Policies on Related Safeguarding Issues

We are aware that child protection and safeguarding are fundamental to the welfare of all children/young people in our care. This policy, therefore, should be read in conjunction with the wider safeguarding policies as listed below:

- Managing Allegations Policy
- GDPR Policies
- Safer Recruitment Policy
- Whistleblowing Policy
- Online Safety Policy
- Children Missing from Care Policy
- Anti-Bullying Policy
- Behaviour Policy
- Behaviour – Sanctions Policy
- Personal Intimate Care Policy
- First Aid Policy
- Safe Handling and Administration of Medication
- Restrictive Intervention Reduction Guidance in Children’s Services Policy
- As Required Medication Protocol Policy
- Code of Conduct
- Health and Safety Policy
- Attendance Policy
- Physical Contact Policy

3. Ethos

Kisimul Group believe that all those directly connected (staff, directors, parents, carers, families and young people) have an essential role to play in making our children’s homes, schools and colleges safe and secure. We welcome suggestions and comments that will contribute to this process.

“Schools and colleges and their staff form part of the wider safeguarding system for children” (KCSIE September 2020). It is imperative that all staff working within Kisimul schools, colleges and Children’s Homes are fully aware of their responsibility to report any concerns they have to the Designated Safeguarding Lead (DSL).

Safeguarding and promoting the welfare of children/young people is everyone's responsibility. Everyone who comes in to contact with children/young people has a role to play in safeguarding them. In order to fulfil this responsibility effectively, all professionals should make sure their approach is person centred. This means they should consider at all times what is in the best interests of the individual. No single professional can have a full picture of an individual's needs and circumstance. If children/young people and families are to receive the right help at the right time, everyone who comes in to contact with them has a role to play in identifying concerns, sharing information and taking prompt action.

Part of the role of the Designated Safeguard Lead is to coordinate information given to them by staff and to decide on the best course of action and this is why it is important that staff pass on all concerns. Initially a concern may appear minor but in the context of a number of minor concerns being highlighted there may appear a significant pattern developing. It is essential that all staff maintain an attitude of '**it could happen here**'.

Kisimul Group recognise the importance of providing an ethos and environment that will help children/young people to feel safe, secure and respected; encourage them to talk openly; and enable them to feel confident that they will be listened to. We also recognise that children/young people who are abused or witness violence are likely to have low self-esteem and may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation and some sense of blame. The children's home/school/college environment may be the only stable, secure and predictable element in their lives. Therefore, Kisimul Group will endeavour to support the welfare and safety of all children/young people through:

- Ensuring that child protection is included in the curriculum to help children/young people stay safe, recognise when they don't feel safe and identify who they might / can talk to, and are taught about safeguarding, including online safety.
- Providing suitable support and guidance so that children/young people have a range of appropriate adults to approach if they are in difficulties.
- Promoting a positive, supportive, neutral and secure environment where children/young people can develop a sense of identity and child/young person voice is actively encouraged.
- Ensuring all steps are taken to maintain site security and children/young people's physical safety.
- Working with parents and carers to build an understanding of Kisimul Group's responsibility to ensure the welfare of all children/young people including the need for referral to other agencies in some situations.
- Ensuring all staff are able to recognise the signs and symptoms of abuse and are aware of procedures and how to report concerns.

- Monitoring children and young people who have been identified as having welfare or protection concerns; keeping confidential records that are stored securely and shared appropriately with other professionals.

4.Responsibilities

In order to meet our responsibilities effectively, all staff will consider, at all times, what is in the best interests of the child/young person.

Organisational Responsibilities

The overall responsibility of adhering to safeguarding children regulations and procedures, as well as their implementation, rests with Amanda Collins, the Responsible Individual who champions this cause within the organisation and maintains the links with relevant outside agencies (Section 11 Standards for the Safeguarding and Promotion of Child Welfare).

The term 'children' refers to those aged 0-18 years of age.

The term 'adult at risk' refers to an adult aged 18 years or over who is or may be in need of care services by reason of mental health, age or illness, and who is or may be unable to take care of themselves, or protect themselves against significant harm or exploitation.

All staff directly involved with working with the children/young people and adults are made aware of the Kisimul Group Safeguarding Children and Adult at Risk Procedures, by means of appropriate training. Everybody in the group has access to these policies and all relevant members of staff have a duty to maintain their awareness and to conform to the procedures.

Good outcomes are achieved and risk is reduced through timely, effective interagency collaboration and flexible joint working across services and interfaces. Joint working needs to take place in all cases where there are both children and adults at risk.

The role of the group in situations where there are safeguarding concerns is NOT to investigate but to recognise and refer.

In order to protect confidentiality, safeguarding information about individuals is shared on a need to know basis only and thus, what may seem to be a minor issue to one staff member, may be highly significant to the bigger picture of risk.

The Assistant Director of Education/Headteacher/Head of College and Head of Care/Registered Manager/Deputy Head of Care fulfil the role of Designated Safeguarding Lead (DSL) on site.

The DSL can be contacted at any time for staff to raise or discuss any safeguarding concerns. The DSL will accept out of hours contact via mobile phone, there is an on-call rota system in place to facilitate this 24-hours a day.

Designated Safeguarding Lead

The Designated Safeguarding Leads (DSLs) are fully trained for the demands of this role in child protection and inter-agency working in accordance with the locally agreed procedures and as set out in Annex B of Keeping Children Safe in Education September 2020. They are members of the senior leadership team.

DSLs undergo training at least every two years in order to provide them with the knowledge and skills to carry out their role. They also attend annual refresher updates to ensure that they remain conversant with best practice and to keep up with developments relevant to their role.

Focused training supports learning and understanding of the ever-changing landscape of safeguarding, which is underpinned by legislation and guidance, and which includes issues such as radicalisation.

Prevent awareness training enables them to provide advice and support to staff on protecting children/young people from the risk of radicalisation. The DSL's focus is to support children/young people in need through seeking early help and/or inter agency working.

The DSL will make prompt contact with children's/adult's social care where there are concerns that an individual may be in need of help or is at risk of harm.

The DSL will also make prompt contact with the Local Authority Designated Officer ("LADO") in relation to allegations against someone working at the site and/or the police if a criminal offence is suspected.

The DSL will liaise with the local authority when necessary and work with other agencies in line with Working Together to Safeguard Children 2018 and attend strategy meetings.

The DSL will work with partner agencies to seek advice, support, and guidance, drawing on multi agency expertise, knowledge, and experience to support children/young people at risk of harm including emotional and intellectual harm via social media and use of the internet.

Staff Responsibilities

All staff members are advised to maintain an attitude of 'it could happen here' where safeguarding is concerned. It is essential that they support children/young people and work collaboratively to provide stability in the lives of individuals who may be at risk of harm. They have a responsibility to:

- Provide a safe environment in which children/young people can learn.
- To be aware of the types of abuse and neglect so that they are able to identify cases of children/young people who may be in need of help or protection.
- Be aware of the early help process, and understand their role in it (As care staff support in schools).
- To take appropriate action, working with services as needed.

- Be alert to the signs of vulnerability and/or susceptibilities to any extremist indoctrination.
- The process for reporting and recording of potential safeguarding concerns and how to escalate this if they are not satisfied with action taken or outcome.
- Know what to do if a child/young person tells them he/she is being abused or neglected and how to share information appropriately.

If staff members are unsure, they should always speak to the designated safeguarding lead. If the DSL is not available, staff should speak to a member of the senior leadership team and/or take advice from local children's social care (KCSIE 2020).

All staff have a responsibility to identify children/young people who may be in need of extra help or who are suffering, or are likely to suffer, significant harm. All staff then have a responsibility to take appropriate action, working with other services as needed. The welfare and safety of children/young people however are the responsibility of all staff and ANY concern for an individual's welfare MUST be reported to the DSL immediately.

5. Safeguarding and Child Protection Procedures

No one who is involved in any way with the care of children/young people and adults at risk can escape responsibility for identifying the signs of abuse and having done so, for taking appropriate action as detailed in this procedure.

All staff have a duty to conform to this procedure and to be conversant with the LSCP Policy and Procedures Manual and Kisimul Group's Code of Conduct.

Failure to follow the Child Protection and Safeguarding children/young people and adults at risk procedure is serious and may result in disciplinary action being taken.

Kisimul Group adheres to the LSCP Safeguarding Children Procedures. All staff have been provided with a copy of Part one of the DfE guidance "Keeping Children Safe in Education September 2020" that covers Safeguarding information.

It is the responsibility of the DSL to receive and collate information regarding individual children/young people, to make immediate and on-going assessments of potential risk and to decide actions necessary (with parents/carers in most cases). This includes the need to make referrals to partner agencies and services. To help with these decisions the DSL may choose to consult with Duty Social Workers who offers opportunities for consultation as part of the Child in Need/Child Protection process.

Issues discussed during consultations may include the urgency and gravity of the concerns for a child or young person and the extent to which parents/carers are made aware of these.

When a child / young person or adult at risk is from a Local Authority outside the area where the service is based, both the Local Authority to the service and the Placing Authority must be informed. If the concern relates to a member of Kisimul Group staff then the Managing Allegations Policy must be

followed. If a senior manager at Kisimul Group is associated in any way with the concerns raised then the responsible individual, Amanda Collins (Group operations Manager) must be contacted.

The Local Authority will advise staff and managers if the concerns constitute sufficient grounds for the initiation of action under this procedure, having regard to the Managing Allegations Policy. (If this is not clearly identified from the safeguarding thresholds provided within the Local Authority's policy). Children's / Adult Social Care Services or the Police Public Protection Unit (PPU) may be consulted for advice.

All reports that are referred through to the Adults safeguarding Team (18+) must be additionally reported through to LADO for them to screen and vice versa if there is a transferable risk to children/young people in the following circumstances whereby an alleged perpetrator has:

- Behaved in a way that has harmed a child/adult at risk, or may have harmed a child/adult at risk;
- Possibly committed a criminal offence against or related to a child/adult at risk;
- Behaved towards a child /adult at risk in a way that indicates that he or she may pose a risk of harm to children/adult at risk;

If the PPU consider it necessary to interview staff members it is the expectation of the group that staff will comply with this request and complete a formal statement in relation to any information they may have. Failure to do so may be considered as a failure to safeguard and could result in disciplinary action being taken.

Any member of staff who believes that allegations or suspicions, which have been reported to designated staff, have not been passed onto the relevant Local Authority properly has a responsibility to report it to a higher level in the organisation.

Staff are reminded to be aware of any indications such as distress at the onset of a holiday period or signs of abuse on return from holiday, or in the case of day pupils, distress at transitions from home to school, which could indicate that a child/young person or adult at risk may be subject to abuse while at home or during respite care breaks. Staff should be vigilant regarding bruises and injuries and any such concerns should be recorded and brought to the attention of the DSL. The Anti-Bullying policy sits alongside this policy and if there is a serious case of bullying which meets the threshold for safeguarding, it will then be passed onto the local authority as a referral.

The procedures to be followed are set out below:-

- Any suspicion of abuse **must** be reported **immediately** to the DSL.
- If any child/young person or adult at risk appears to be in need of immediate medical treatment they should be taken to the local Accident and Emergency Department in accordance with the procedure for Emergency Medical Treatment. If in the judgement of the DSL there are indications that the cause of the problem may be related to abuse then the relevant local authority must be immediately informed in order

to give direction to the process to be followed. If the injuries are potentially non-accidental and the local authority direct the service to have the child/young person medically assessed then the Accident and Emergency Department must be informed.

- Staff must complete a report with the guidance of the DSL they reported to and this will be kept for future reference. Please note: if the incident concerns a particular member of staff, then the appropriate manager should ensure that the member of staff in question is temporarily removed from the area while the DSL is contacted.
- Staff will be guided by the DSL, and if any relevant information is volunteered by a parent, guardian or any other individual it should be recorded and passed on to the DSL for action.
- Any case of suspected abuse or disclosure / allegation of abuse, even in the absence of physical evidence, must be brought to the immediate attention of the relevant Local Authority by the DSL and their advice obtained. This is particularly relevant where the abuse is alleged or suspected to have been perpetrated by an outside caregiver and therefore the children/young people or adult at risk is particularly vulnerable to further abuse.
- Any allegations about past abuse or neglect must be referred to the local safeguarding children's or adult's team and, if different, the local authority in whose area the alleged abuse or neglect occurred.
- Should a member of staff feel that a young person is at an immediate and serious risk of harm then the emergency services should be contacted, if in the opinion of that member of staff that is immediately necessary. However, in all but the most urgent and serious of circumstances the DSL should be consulted prior to this happening. In any event, the DSL should be consulted without unnecessary delay.
- Should any incident occur out of hours the DSL will give consideration to informing the relevant Local Authority out of hours' team.
- In line with the Quality Standards for Children's Homes 2015 the registered manager has a duty to inform Ofsted about any referral involving children/young people in their care under the Safeguarding Children Procedure, and/or a serious incident alleged or otherwise, as a notifiable event if it is deemed to be a Section 47 enquiry (Regulation 40).
- The DSL may contact the appropriate children/adult social care authority in order to ascertain previously recorded and/or ongoing issues.
- The DSL must keep records of all observations and actions taken, timed, dated and signed. These records are to include any signs of abuse, neglect or injury where appropriate and must also include records of any communication with the relevant Local Authority and/or

Police. All documentation is stored securely in a locked cabinet or is saved electronically and password protected.

- When a referral is made to a statutory protective agency such as Social Care, the DSL should ensure that there is no misunderstanding regarding:
 1. The reasons for making the referral
 2. Any special needs of the child/young person or adult at risk including any linguistic, cultural, religious, physical or psychological factors (and where appropriate the child/person's family)
 3. Their expectations of the agency to which the referral has been made.
- The DSL must confirm all verbal communication in writing within 24 hours repeating all relevant information and agreed actions.
- Following an investigation, if the DSL still has concerns about the safety of the child/young person, this will be discussed with the placing authority.
- At each stage of a referral there will be a review of the child's / young person's risk assessment to ensure safeguarding measures are adhered to. There will be a clear risk reduction plan post incident subsequent to the outcome of a referral. Both the risk assessment and the placement plan (Care plan) is updated to reflect this (See the Risk Assessment policy).
- A summary of what to do if you suspect abuse is seen in the flowchart below.
- In cases of significant unexplained injuries staff are to follow the flowchart (appendix 2)
- Post incident support, clinical support and advocacy to be considered to enable young people who struggle to express their voice or are non-verbal after any significant incident's to be completed in line with individual care plans.
- If a member of staff has concerns or receives concerns from a third party about the DSL then this needs to be reported to the Responsible Individual, Amanda Collins (Group Operations Manager) without delay. The whistle blowing hotline may be used in this event (contact numbers may be found within the appendices).
- In cases where a girl may be at risk of Female Genital Mutilation (FGM) this must be reported to the DSL, who will report the concern to the Police. If a teacher, in the course of their work in the profession, discovers that an act of FGM appears to have been carried out on a girl under the age of 18, the teacher must report this to the police.

All referrals must be reported through to Ofsted and social workers. If a young person placed within the service does not have a social worker, a referral must be made to the multi-disciplinary safeguarding hub (MASH) of the placing authority as well as LADO.

The Responsible Individual, in terms of Child Protection and Safeguarding across the Kisimul Group is Amanda Collins, Responsible Individual. She has responsibility to ensure that appropriate measures and processes are in place to effectively manage any issues of a safeguarding nature. This includes ensuring that staff are trained to identify and effectively respond to any safeguarding concerns. Amanda Collins will report any safeguarding and child protection matters to the Board. .

6.Recognition and Categories of Abuse

All staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases multiple issues will overlap with one another. The definition of 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/young people may be abused in a family or in an institutional or community setting by those known to them or, more rarely by others (e.g. via the internet). They may be abused by an adult, adults or another child or children”

All staff should be aware of the definitions and signs and symptoms of abuse some of which are listed below. Staff should also be aware of the possibility of peer on peer abuse. This is most likely to include, but not limited to bullying (including cyber bullying), gender-based violence/sexual assaults and sexting. Staff should be clear as to procedures regarding peer on peer abuse.

Definitions of Abuse

Abuse is a form of maltreatment of a child/young person. Somebody may abuse or neglect a child/young person by inflicting harm or failing to act to prevent harm. Children/young people may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children/ young people may be abused by an adult or adults or by another child or children/young person. (Keeping Children Safe in Education, 2020).

Neglect:

Neglect is a form of significant harm that involves the persistent failure to meet a child/young person's basic physical and/or psychological needs, likely to result in the serious impairment of the child/young person's health or development.

Neglect may occur during pregnancy because of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate; food and clothing, shelter, including exclusion from home or abandonment, failing to protect a child/young person from physical and emotional harm or danger, failure to ensure adequate supervision including

the use of inadequate care-takers, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child/young person's basic emotional needs.

Physical Abuse:

Physical Abuse is a form of significant harm that may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child/young person. Physical harm may also be caused when a parent fabricates the symptoms of, or deliberately induces illness in a child.

Sexual Abuse:

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child/young person 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/young people in looking at, or in the production of sexual images, watching sexual activities, encouraging children/young people 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/young people. The sexual abuse of children/young people by other children/young people is a specific safeguarding issue.

Emotional Abuse:

Emotional abuse is a form of significant harm that involves the persistent emotional maltreatment of a child/young person such as to cause severe and persistent adverse effects on the child's emotional development.

It may involve conveying to children/young people or adults at risk 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 individual 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/young people.

These may include interactions that are beyond the child/young person's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the individual participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including Cyberbullying) causing individuals to frequently feel frightened or in danger, or the exploitation or corruption of children/young people and adults at risk.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Significant Harm:

The Children Act 2014 refers to significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children.

There are no absolute criteria on which to rely when judging what constitutes significant harm but consideration should be given to the following:

- The severity of ill-treatment which may include the degree and extent of physical harm including, for example, impairment suffered from seeing or hearing the ill-treatment of another;
- The duration and frequency of abuse and neglect;
- The extent of premeditation.

Staff need to remember that welfare concerns may arise in many different contexts, and can vary greatly in terms of their nature and seriousness. Children/young people may be abused in a family or in an institutional or community setting, by those known to them or by a stranger, including, via the internet. In the case of female genital mutilation, children/young people may be taken out of the country to be abused. They may be abused by an adult or adults, or another child/young person or children. An abused child/young person will often experience more than one type of abuse, as well as other difficulties in their lives. Abuse and neglect can happen over a period of time, but can also be a one-off event. Abuse and neglect can have major long-term impacts on all aspects of a child's/ young person's health, development and well-being.

The warning signs and symptoms of abuse and neglect can vary from individual to individual. Disabled children/young people may be especially vulnerable to abuse, including because they may have an impaired capacity to resist or avoid abuse. They may have speech, language and communication needs which may make it difficult to tell others what is happening. Children/young people also develop and mature at different rates so what appears to be worrying for a younger child might be normal behaviour for an older child. Parental behaviours may also indicate child abuse or neglect, so staff should also be alert to parent child interactions which are concerning and other parental behaviours. This could include parents who are under the influence of drugs or alcohol or if there is a sudden change in their mental health. By understanding the warning signs, we can respond to problems as early as possible and provide the right support and services for the child/young person and their family. It is important to recognise that a warning sign doesn't automatically mean a child/young person is being abused.

7. Induction and Training

All staff and volunteers will be recruited under the guidance of the Safer Recruitment Policy and will have a Criminal Records Check (DBS /PVG) that is deemed appropriate for the role.

All staff and volunteers will receive safeguarding training that is relevant to their role. For those working directly with children/young people, safeguarding training will be refreshed on an annual basis via on-line safeguarding and child protection and adult at risk training or from the relevant Local Authority / LSCP or specialist organisation. In addition, all staff members / volunteers

should receive safeguarding and child protection updates (for example, via email, e-bulletins and staff meetings), as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children/young people effectively.

The training will cover child protection procedures including:

- prevention and recognition of abuse
- dealing with disclosures and suspicions of abuse
- information sharing
- whistleblowing
- maintaining confidentiality.

All staff and volunteers must read, understand and become knowledgeable about child protection and adult at risk procedures during induction and must undertake refresher training on an annual basis. Failure by a member of staff to report actual or reasonably suspected physical, sexual or emotional abuse or neglect of a child/young person will be treated as a disciplinary offence. All staff in schools and children's/adult's services will receive Prevent Training in-line with government guidance. Those recruiting staff will receive Safer Recruitment Training.

8.Record Keeping

Staff must record any welfare concern that they have about a child/young person on an incident form with a body map where injuries have been observed and pass this without delay to the DSL. Records must be completed as soon as possible after the incident/event and must be signed and dated. Safeguarding records are kept separate from all other records. They are retained centrally and securely by the DSL and are shared on a 'need to know' basis only.

All safeguarding records will be forwarded to a child's subsequent school under confidential and separate cover to the DSL / Principal/Headteacher

9.Allegations against Members of Staff, Agency Workers and Volunteers

Kisimul Group recognises that it is possible for staff and volunteers to behave in a way that might cause harm to children/young people and takes seriously any allegation received. Such allegations should be referred immediately to the DSL and the Responsible Individual who will first contact the Local Authority Designated Officer (LADO) to agree further action to be taken in respect of the child and staff member. Should staff have concerns about the DSL they should refer direct to the Responsible Individual, Amanda Collins.

All staff need to be aware of the 'Whistle-blowing procedure' and that it is a disciplinary offence not to report concerns about the conduct of a colleague that could place a child/young person at risk. When in doubt – consult with a DSL.

10.Whistleblowing

Where there are concerns about the way that safeguarding is carried out, staff should refer to the Whistle-blowing Policy.

A whistleblowing disclosure must be about something that affects the general public such as:

- a criminal offence has been committed, is being committed or is likely to be committed
- a legal obligation has been breached
- there has been a miscarriage of justice
- the health or safety of any individual has been endangered
- information about any of the above has been concealed.

11. Working with Other Agencies

Kisimul Group recognises and is committed to its responsibility to work with other professionals and agencies both to ensure children/young people's needs are met and to protect them from harm. We will endeavour to identify those children/young people and families who may benefit from the intervention and support of external professionals and will seek to enable referrals, in discussion with parents/carers as appropriate.

Kisimul Group are not the investigating agency when there are child protection/adult at risk concerns and the service will therefore pass all relevant cases to the statutory agencies. We will however contribute to the investigation and assessment processes as required and recognise a crucial part of this may be in supporting the individual while these take place.

Kisimul Group recognises the importance of multi-agency working and will ensure that staff are enabled to attend relevant safeguarding meetings, including Child Protection Conferences, Core Groups, Strategy Meetings, Child in Need meetings and Early Help Teams around the Child / Family. The DSL will work to establish strong and co-operative relationships with relevant professionals in other agencies.

An allocated person will complete weekly welfare calls to family/key people to keep them informed of the process whether or not there is any further information to share.

12. Confidentiality and Information Sharing

We recognise that all matters relating to child protection are confidential. The DSL will disclose any information about a child/young person to other members of staff on a need to know basis. All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children/young people. All staff must be aware that they cannot promise an individual to keep secrets which might compromise the child/young person's safety or wellbeing. Further advice on dealing with disclosures can be found in the document "DfE Guidance on Information Sharing" (July 2018).

13. Curriculum and Staying Safe

Kisimul Group recognise that we play an essential role in helping children/young people to understand and identify the parameters of what is appropriate child and adult behaviour; what is 'safe'; to recognise when

they and others close to them are not safe; and how to seek advice and support when they are concerned.

The curriculum will provide opportunities for increasing self-awareness, self-esteem, social and emotional understanding, assertiveness and decision making so that children/young people have a range of contacts and strategies to ensure their own protection and understand the importance of protecting others.

Children/young people will be listened to and heard and their concerns will be taken seriously and acted upon as appropriate.

14. Online Safety

It is recognised that the use of new technologies presents challenges and risks to children/young people. Kisimul Group will ensure a comprehensive curriculum response to enable all children/young people to learn about and manage the associated risks effectively. We will support parents, children and young people and staff to become aware and alert to the needs of keeping children/young people safe online.

15. Supervision and Support

All care staff working directly with children/adults at risk will have supervision with a suitably experienced person on a regular basis, during which safeguarding concerns and processes will be discussed. We recognise that staff working in a school or service who have become involved with a child/young person who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting. We will support such staff by providing an opportunity to talk through their anxieties with the relevant Designated Safeguarding Lead and to seek further support such as counselling or regular supervision, as appropriate. Employees also have access to a confidential helpline.

In order to reduce the risk of allegations being made against staff, and ensure that staff are competent, confident and safe to work with children/young people, they will be made aware of safer working practice guidance and will be given opportunities in training to develop their understanding of what constitutes safe and unsafe behaviour.

Any member of staff affected by issues arising from concerns for an individual's welfare or safety can seek support from the DSL.

Safeguarding is a standing agenda item in all supervisions.

16. Safe Working Practice

All staff are required to work within clear guidelines on safe working practice and the Staff Code of Conduct.

Children/young people may make allegations against staff in situations where they feel vulnerable or where they perceive there to be a possible risk to their welfare. As such, all staff should take care not to place themselves in a vulnerable position regarding child protection or potential allegations. For example, it is always advisable for interviews or work with individual children/young people or parents to be conducted in view of other adults. Staff

should be particularly aware of the professional risks associated with the use of electronic communication (e-mail; mobile phones; texting; social network sites) and should familiarise themselves with advice and professional expectations outlined in the Staff Code of Conduct and the Online Safety Policy.

17. Safer Recruitment

It is good practice to have three people on a recruitment panel. Where this is not possible, the interview panel must include the recruiting line manager and at least one other panel member. At least one member of the recruitment panel should have completed Safer Recruitment training. The Safer Recruitment training can either be arranged locally or can be accessed through NSPCC website.

As part of the recruitment process, candidates are asked for written information about full previous employment history including gaps in employment and HR and Recruiting Manager should check that the information is not contradictory or incomplete. A “full employment history” means a career history from the age of first employment. This information may be in the form of a CV/application form/ gap in employment form. Information may be held electronically and must outline all periods of employment or self-employment (whether or not related to health or social care), showing beginning and end dates, (actual or approximated month and year), together with an explanation of periods of non-employment. Individual placements within a continuous period of employment need not be listed.

References will always be taken up before successful appointment, so that any discrepancies can be probed prior to working directly with the children/young people. Referees will normally include the current or most recent employer or employers covering the last 5 years of employment. If the two references do not cover the last 5 years of employment, the candidates will be asked to provide the details of the third reference. Additional references will also be requested from **all** previous care/education employers. References will be sought directly from the referee. References or testimonials provided by the candidate will not be accepted.

Where possible, referees are contacted in order to clarify any anomalies or discrepancies. A detailed written note is kept of such exchanges. Referees will always be asked specific questions about:

- the candidate’s suitability for working with children and young people;
- any disciplinary warnings, including time-expired warnings, that relate to the safeguarding of children/young people;
- the candidate’s suitability for this post;
- reasons for leaving.

All successful applicants are required:

- to provide proof of photographic identity and proof of address;
- to complete an enhanced DBS disclosure application and receive satisfactory clearance. A referral to the disclosure and barring service will be made when both of the following conditions have been met:

Condition 1

We withdraw permission for a person to engage in regulated activity with children and/or adults at risk. Or move the person to another area of work that isn't regulated activity. This includes situations when we would have taken the above action, but the person was re-deployed, resigned, retired, or left. For example, a teacher resigns when an allegation of harm to a student is first made.

Condition 2

We think the person has carried out 1 of the following:

- engaged in relevant conduct in relation to children and/or adults. An action or inaction has harmed a child or adult at risk or put them at risk or harm or;
- satisfied the harm test in relation to children and / or adults at risk. e.g. there has been no relevant conduct but a risk of harm to a child or adult at risk still exists or
- been cautioned or convicted of a relevant (automatic barring either with or without the right to make representations) offence.

SINGLE CENTRAL REGISTER (SCR)

Schools and colleges must keep and maintain a Single Central Register, the register should include:-

- all staff, including supply staff and RSW's providing support, who work at the school;
- all others who work in regular contact with children/young people, including volunteers
- Independent schools, including academies and free schools, all members of the proprietary body.

All staff who work with or associate with children/young people under the age of eight years are required to complete a suitable person self-declaration form in compliance with The Childcare Act 2006 and supporting The Childcare (Disqualification) Regulations 2009 – Disqualification by association.

18. Security

All staff have a responsibility for maintaining awareness of buildings and grounds security and for reporting concerns that may come to light. We operate within a community ethos and welcome comments from stakeholders about areas that may need improvement as well as what we are doing well.

Appropriate checks will be undertaken in respect of visitors and volunteers coming into service as outlined within guidance. Visitors will be expected to sign in and out via the visitors log and to display a visitor's badge whilst on site. Any individual who is not known or identifiable should be challenged for clarification and reassurance. Kisimul Group will not accept the behaviour of

any individual (parent or other) that threatens security or leads others (child or adult) to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse access for that individual to the site.

19. Other Safeguarding Issues

Every setting in which children/young people and adults at risk live away from home should provide the same basic safeguards against abuse, founded on an approach that promotes their general welfare, protects them from harm of all kinds and treats them with dignity and respect. All children young people and adults at risk have an individual risk assessment to ensure that all reasonable action has been taken to ensure their safety. As part of the risk assessment, and providing a safe environment for our young people, we use positive behaviour support and agreed process for restraint. From time to time we will need to keep children safe when they have lost control and display extreme challenging behaviour, either towards themselves, others and/or property. Hence, staff will use physical restraint in line with their training and guidelines (BILD Code of Practice 2015). Details of this process are found in both the Behaviour policy and the Physical Restraint policy.

Child Exploitation

The exploitation of children and young people are a form of Abuse.

The exploitation of children/young people is described in the government guidance document as “involving exploitative situations, contexts and relationships where young people (or a third person or persons) receive ‘something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of their performing, and/or another or others performing on them, sexual activities.

It can occur through the use of technology without the child/young person’s immediate recognition; e.g. being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.

Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child/young person’s limited availability of choice resulting from their social/economic and/or emotional vulnerability.

What marks out exploitation is an imbalance of power within the relationship. The perpetrator always holds some kind of power over the victim, increasing the dependence of the victim as the exploitative relationship develops.

Children/young people involved in any form of exploitation should be treated as the victims of abuse and their needs carefully assessed. The aim should be to protect them from further harm and they should not be treated as criminals. The law enforcement response should be directed at perpetrators who groom children/young people for sexual exploitation. If any member of staff has concerns that young person is potentially the victim of CE then this should be reported to the DSL without delay.

Child trafficking

Trafficked children experience many types of abuse and neglect. Traffickers use physical, sexual and emotional abuse as a form of control. Children and young people are also likely to be physically and emotionally neglected and may be sexually exploited.

Trafficking is where children and young people tricked, forced or persuaded to leave their homes and are moved or transported and then exploited, forced to work or sold. Children are trafficked for:

- sexual exploitation
- benefit fraud
- forced marriage
- domestic slavery like cleaning, cooking and childcare
- forced labour in factories or agriculture
- committing crimes, like begging, theft, working on cannabis farms or moving drugs

Peer on Peer Abuse

Peer on peer abuse is behaviour by an individual or group, which results in physical, sexual or emotional hurt to others. Peer on peer abuse can occur on any site even with the most robust policies and support processes. It is important to develop appropriate strategies to proactively prevent this type of behaviour. Peer on peer abuse will never be tolerated or passed off as 'banter'.

When considering the needs of our young people within Kisimul services for young people with severe learning difficulties, such behaviour is extremely rare. Young People with severe learning difficulties rarely engage in such activity, and when peer on peer conflict does occur it is typically unplanned and a consequence of an inability to self-regulate appropriately. Nevertheless, all staff must take any incidents of peer on peer conflict seriously. Kisimul Group's QA team regularly monitor peer on peer incidents for trends.

Occasionally, allegations may be made of a safeguarding nature against children/adults at risk by other children/adults at risk. Staff will follow the same protocol within the Managing Allegations Policy and report the concern to the Designated Safeguarding Lead who will escalate accordingly (Managing Allegations Policy OPED59, 3.1.1)

All staff should be aware of Kisimul's Anti-bullying Policy (OPED 06).

Safeguarding issues from peer abuse could include:

- Bullying (including cyber bullying and sexting)
- Gender based violence

- Sexually harmful behaviour
- Sexual violence or harassment
- Physical abuse
- Prejudiced abuse

Once the outcome of any incident(s) has been established it is necessary to ensure future incidents do not occur again and consider the support and intervention required for those involved.

With all abuse and harmful behaviour it is necessary to consider:

- What abuse is and what it looks like
- Who is being targeted and what are the apparent triggers
- What appropriate support and intervention can be put in place to meet the needs of all individuals involved in any incident, which will include the perpetrator as well as the victim
- What preventative strategies may be put in place to reduce further risk of harm
- Where actions and outcomes are recorded and how are they reviewed/shared
- If a lessons learned exercise required/helpful.

At all times staff should use their professional curiosity, and points to consider may be:

- What is the age of the young people involved?
- Where did the incident take place?
- Was the incident in an open, visible place to others? If so was it observed? If not, is more supervision required within this particular area?
- What was the explanation by all young people involved of what occurred? Can each of the young people give the same explanation of the incident and also what is the effect on the young people involved? Is the incident seen to be bullying for example, in which case is it regular and repetitive?
- What is each of the children's/young person's own understanding of what occurred?
- Do the young people know/understand what they are doing? E.g., do they have knowledge of body parts, of privacy and that it is inappropriate to touch?
- Is the young person's explanation in relation to something they may have heard or been learning about that has prompted the behaviour?
- Is the behaviour deliberate and contrived?
- Does the young person have understanding of the impact of their behaviour on the other person?

Sexual Violence and Sexual Harassment

This must always be referred immediately to the Designated Safeguarding Lead. The DSL will follow the DfE Guidance: Sexual violence and sexual

harassment between children in schools and colleges 2018
<https://www.gov.uk/government/publications/sexual-violence-and-sexual-harassment-between-children-in-schools-and-colleges> with consideration of

- Managing internally 65.1, page 27
- Early Help 65.2, page 28
- MASH referral 65.3. page 28
- Reporting to the police 64.4, Page 29

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

Sexually harmful behaviour from young people is not always contrived or with the intent to harm others. There may be many reasons why a young person engages in sexually harmful behaviour and it may be just as distressing to the young person who instigates it as to the young person it is intended towards.

Sexually harmful behaviour may include:

- Inappropriate sexual language
- Inappropriate role play
- Sexual touching
- Sexual assault/abuse.

Staff should be aware of the importance of:

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

Female Genital Mutilation

Female Genital Mutilation (FGM) is a collective term for procedures, which include the partial or total removal of the external female genital organs for cultural or other non-therapeutic reasons. It is an extremely harmful practice that violates the most basic human rights

Female circumcision, excision or infibulation was made illegal in this country by the Prohibition of Female Circumcision Act 1985, except on specific physical and mental health grounds. The Female Genital Mutilation Act 2003 strengthens and amends the 1985 legislation. It makes it an offence for the first time 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.

FGM involves the use of instruments to circumcise, mutilate or alter female genitalia, without reference to medical or surgical procedures, and with or without the supervision of a registered medical practitioner.

This practice is not required by any major religion.

The practice is illegal and medical evidence indicates that FGM causes harm to those who are subjected to it.

Girls may be circumcised or genitally mutilated illegally by doctors or traditional health workers in the UK, or sent abroad for the operation.

A child may be considered to be at risk if it is known that older girls in the family have been subject to the procedure. FGM is typically performed on girls aged between 4 and 13, although in some cases it is performed on new born babies or young women prior to marriage or pregnancy

Prepubescent girls of seven to ten are the main subjects, though the practice has been reported amongst babies.

If any agency is informed that a girl has been or may be subject to these practices, a referral must be made to Children's/Adults Services and the matter must be reported to the Police.

Safeguarding Children and Adults at Risk with Disabilities

Disabled children/young people/adults at risk may be especially vulnerable to abuse for a number of reasons. Some disabled children/young people/adults at risk may:

- Have fewer outside contacts than other children/young people.
- Receive intimate personal care, possibly from a number of carers, which may both increase the risk of exposure to abusive behaviour and make it more difficult to set and maintain physical boundaries.
- Have an impaired capacity to resist or avoid abuse.
- Have communication difficulties that may make it difficult to tell others what is happening.
- Be inhibited about complaining because of a fear of losing services.
- Be especially vulnerable to bullying and intimidation and/or more vulnerable than other children/young people/adults at risk to abuse by their peers.

Staff at Kisimul Group are particularly well placed to observe the children/young people/adults at risk in their care and to report instances where they have cause for concern about colleagues, other children/young people or external care providers.

Preventing Radicalisation: The Prevent Duty

The Counter-Terrorism and Security Act (February 2015) places a duty on Kisimul as a provider of care and education, in the exercise of its functions, to have due regard to the need to prevent people from being drawn into terrorism ("the Prevent Duty") and other expressions of radicalisation. Kisimul also recognises its duty to ensure that members of staff identify where

young people are vulnerable to being drawn into terrorism, and the senior management team understands that it has a role to play in working with the police and local authorities to provide support to these individuals. With regard to 'Keeping Children Safe in Education 2020' Kisimul recognises its duty to take part in Channel panels where required.

With regard to the Independent Schools Regulations (2019), Kisimul recognises its duty to actively promote British values, and this duty is appropriately reflected in the 24-hour curriculum and operational policies.

Staff Training in Prevent

Staff will be trained to identify children, young people and adults at risk of being drawn into terrorism, and to challenge extremist ideas.

Online Safety and Prevent

It is recognised that children, young people and adults at risk can be drawn into acts of terrorism through the use of IT. Kisimul have therefore reduced the risk by ensure children/young people are safe from terrorist and extremist material when accessing the internet by establishing appropriate levels of filtering and by monitoring the use of websites by the young people.

The Curriculum and Prevent

Where relevant, Kisimul creates opportunities for debating issues connected to extremism within a safe and controlled setting. Any activities will be age and ability-appropriate.

Risk Assessments

Managers are responsible for assessing whether any children/young people are at risk of being drawn into terrorism. Assessments will vary from service to service and should be based on local factors. They should also include some consideration of whether children/young people are likely to be exposed to terrorist ideology, including extremist ideas, outside school.

Staff can access the DfE counter-extremism hotline for schools (open Monday to Friday excluding bank holidays). The contact details are counter.extremism@education.gsi.gov.uk and 020 7340 7264, and services should not hesitate to seek advice in the event that they have any questions or concerns.

Child Missing from Education (CME)

Local authorities have a duty to identify children of compulsory school age who are missing education in their area. Kisimul Group and its staff recognise their duty to co-operate with local authorities in this regard. A child missing from education is a potential indicator of abuse or neglect. The school has in place appropriate safeguarding policies and procedures for children who go missing from education, particularly on repeat occasions. Kisimul staff are alert to signs to look out for of potential safeguarding concerns, such as travelling to conflict zones, FGM and forced marriage. Kisimul staff maintain an admissions and attendance register for this purpose. Kisimul recognises its duty to inform the local authorities of any child/young person who is going to be deleted from the admissions register, for the reasons stated in KCSIE September 2020, or for any other reason.

Access to Information on other types or contexts of abuse

There are other forms of abuse and members of staff are encouraged to be familiar with contexts of abuse as described on the TES, NSPCC and GOV.UK websites. These may include:

Self-injurious behaviour

Bullying and cyberbullying

Domestic violence

Drug use and abuse

Fabricated or induced illness

Forced marriage

Gangs and youth violence

Gender-based violence / violence against women and girls (VAWG)

Mental health

Private fostering

Sexting

Teenage relationship abuse

Trafficking

This policy will be reviewed on an annual basis or after the publication of revised statutory legislation.

20. Monitoring and Evaluation

Our Child Protection and Adult at Risk Safeguarding Policy and Procedures are monitored and evaluated by:

- Senior Leadership Team meetings, 'drop ins' and discussions with children/young people and staff.
- Surveys and questionnaires.
- Scrutiny of data through the Quality Assurance Group.
- Scrutiny of a range of risk assessments.
- Logs of bullying/racist/behaviour incidents for SLT and QA to monitor.
- Review of parental concerns and parent questionnaires.
- Feedback from staff training.

Links to Local Adult and Multi-Agency procedures are included as Appendix 1 for each site.