



Safeguarding and Child Protection Policy

Document Review:	HT/SLT
Responsibility for Policy:	FGB
Approved:	September 2026 (17/09/2026)
Review due:	September 2027

For the purpose of this policy Guildford Nursery School and Family Centre will be referred to as GNSFC. When we say “parent” we mean “parents and carers”. When this policy says mobile phones, laptops or mobile devices, we mean all electronic devices with imaging and sharing capabilities.

GNSFC is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

Contact Details

Surrey Children’s SPA (single point of access):

0300 470 9100
cspa@surreycc.gov.uk

Emergency Duty team (EDT)

Out of hours (5pm-9am - Mon – Fri, Sat/Sun and Bank Holidays)
Tel **01483 517898**

Local Authority designated officer (LADO)

0300 123 1650 option 3
Secure email address lado@surreycc.gov.uk

Early Years and Childcare Service Local Authority Named Person

01372 833826

Ofsted

Piccadilly Gate, Store Street, Manchester, M1 2WD,

General Helpline:

0300 123 1231

Allegations against a member of staff/volunteer:

0300 123 4666

Governor Lead:	Sue Heath
Nominated Lead Member of Staff:	Charlotte Bate

Contents

Introduction and policy aims	5
Definitions.....	5
Key personnel.....	6
Children's services.....	7
Children's Single Point of Access (C-SPA)	7
Emergency Duty Team (EDT).....	7
Local authority designated officer (LADO).....	7
The Law (legislation and statutory guidance)	8
Roles and responsibilities	9
All staff:.....	9
The headteacher:.....	10
The Designated Safeguarding Lead:.....	10
The Designated Safeguarding Lead.....	10
The Deputy Designated Safeguarding Lead(s):	11
The governing body	11
The safeguarding link governor.....	12
What to do if you have concerns about a child's welfare	13
If a child is in immediate danger, or is suffering or likely to suffer significant harm	13
Disclosures	13
Handling a disclosure.....	13
After a child has made a disclosure	14
Recording a disclosure or safeguarding concern	14
Concerns about a baby or child who is not in immediate danger, or is suffering or likely to suffer significant harm	14
How children can report concerns.....	14
Early help.....	14
Referral to children's services	15
If a child has experienced or is at risk of female genital mutilation	15
Teachers.....	15
Other members of staff	16
Concerns about nudes or semi-nudes	16
Viewing the imagery.....	17
Deletion of images	17
Child-on-child abuse (including harassment and violence).....	17
Responding to allegations of child-on-child abuse	17
Responding to allegations of sexual harassment and sexual violence	18
Unsubstantiated, unfounded, false or malicious reports	18
If a child who has experienced sexual violence or sexual harassment asks GNSFC not to make a referral	19
Concerns about mental health	19
Concerns about extremism and radicalisation.....	19

Confidentiality, sharing and withholding information	20
Notifying parents	20
Record keeping	21
Concerns or allegations made about adults in GNSFC	21
Low-level concerns	22
Whistleblowing	22
Online safety and the use of smart devices	23
The 4Cs	23
Mobile phones and smart technology (including smart watches and glasses)	24
Media recordings, audio, image and video (including digital files)	24
Filtering and monitoring	24
Remote education	24
Information security and access systems	25
Children potentially at greater risk of harm	25
Children who have a social worker	25
Children looked after and previously looked after	25
Young carers	26
Children with special educational needs, disabilities and health issues	26
Safeguarding children with medical conditions	27
Children who are lesbian, gay or bisexual	27
Children who are questioning their gender	27
Identified areas of risk for GNSFC	27
Lettings and off-site arrangements	27
Extended school and off-site arrangements	28
Training	28
Designated safeguarding lead	28
Governors	29
All staff	29
The designated teacher for children who are looked after (CLA)	30
Teaching and learning	30
Linked policies	30
Appendix 1: Types of abuse and specific safeguarding concerns	32
Indicators of abuse	33
Specific safeguarding concerns	33
Children absent from education	33
Anti-bullying	33
Physical intervention	34
Contextual safeguarding	34
Child sexual exploitation (CSE) and child criminal exploitation (CCE)	34
Child sexual exploitation (CSE)	35
Child criminal exploitation (CCE)	35

Serious violence	36
Children who run away or go missing from education, home or care	37
Mental health	37
Domestic abuse	37
Homelessness	38
Child-on-child abuse (including harassment and violence).....	38
Child-on-child sexual harassment and sexual violence	39
Harmful sexual behaviour (HSB).....	40
Upskirting.....	40
Sharing nudes and semi-nudes.....	41
So-called 'honour'-based abuse, including FGM and forced marriage.....	41
Female genital mutilation (FGM)	41
Forced marriage.....	42
One chance rule	42
Modern slavery	42
Private fostering.....	43
Preventing radicalisation and extremism.....	43
Child abuse linked to faith or belief	44
Fabricated or induced illnesses.....	45
Appendix 2: Indicators of abuse.....	46
Appendix 3: Flowchart of actions to take.....	53
Appendix 4: Children who may need additional safeguarding support	54
Appendix 5: Brook Sexual Behaviours Traffic Light Tool.....	55

Introduction and policy aims

GNSFC has a duty to keep children safe. This includes how we protect children from experiencing harm and how we should respond when we suspect or confirm that a child is being harmed.

Children are at the centre of everything we do at GNSFC. We are committed to providing our children with a sense of belonging and an environment that is welcoming, safe, valuable and respectful. Adults at GNSFC know that keeping babies and children safe is everybody's responsibility and that all children, regardless of age, gender, culture, language, race, ability, sexual identity, religion or lack of religion have equal rights to protection and opportunities.

We aim to make sure that:

- The welfare of the child is paramount.
- All staff maintain an attitude of "It could happen here".
- We will always act in the best interests of the baby or child and ensure that our decisions around safeguarding take a child-centred and coordinated approach.
- GNSFC has a clear process in place, that is shared with and followed by all members of the GNSFC community, when there is a safeguarding concern.
- Our staff are well trained to recognise the signs of abuse, neglect and exploitation, such that they understand what their responsibilities are and how they should respond when they identify a concern.
- We keep track of children known or thought to be at risk of harm.
- We communicate well with all those involved when there is a concern about a child, including parents, other children, staff and agencies. This includes sharing information quickly and appropriately with external agencies, such as the police and children's services, to get children the support and help they need in good time.

Definitions

KCSIE defines Safeguarding as the process for protecting children from harm and abuse, whether that is within or outside the home, as well as online. This includes:

- Providing help and support to meet the needs of children as soon as problems emerge.
- Protecting children from maltreatment, whether that is within or outside the home, including online.
- Preventing the impairment of children's mental and physical health or development.
- Making sure that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

Child Protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Child(ren) includes everyone under the age of 18.

Child looked after (CLA) used internally in Surrey County Council rather than looked after child (used in statutory guidance).

C-SPA refers to the Children's Single Point of Access.

DSL where appropriate also refers to Deputy Designated Safeguarding Lead (DDSL).

Early help is support for children of all ages that improves a family's resilience and outcomes or reduces the chance of a problem getting worse.

The local safeguarding partnership has three partners:

1. Chief Executive of Surrey County Council (Children's Services)
2. Chief Executives of Surrey Heartlands and Frimley Integrated Care Boards, and
3. The Chief Constable of Surrey Police

MAP refers to the Surrey Multi-Agency Partnership.

Parent refers to birth parents and other adults who are in a parenting role, for example stepparents, foster carers and adoptive parents.

School Unless otherwise specified, 'school' means all schools, whether maintained, non-maintained or independent schools, including maintained nursery schools, academies and free schools, non-maintained special schools, maintained special schools and alternative provision, including pupil referral units.

Social Care refers to Children's Services in the area in which the child is resident, unless a child is a Child Looked After then this will be the Children's Services in their home authority.

Staff refers to all those working for or on behalf of GNSFC, full or part time, temporary or permanent, in either a paid or voluntary capacity. This includes, but is not limited to, employed staff, contractors, volunteers, governors/trustees, supply staff and self-employed staff.

Statutory means what has been decided or is controlled by the law. **Statutory guidance** tells us what schools and local authorities must do to follow the law.

We will publish our safeguarding and child protection policy on our website and hard copies will be available on request from reception.

Key personnel

The Designated Safeguarding Lead (DSL) is:	Contact details:
Charlotte Bate , Service Manager for Families First Guildford	charlotte.bate@guildfordscc.surrey.sch.uk Telephone: 01483 510 570

The deputy DSL(s) are:	Contact details:
Sally Cave , Headteacher Tess Dean , Deputy Headteacher	dsl@guildfordscc.surrey.sch.uk 01483 566 589

The nominated child protection and safeguarding governor is:	Contact details:
Sue Heath	sue.heath@guildfordscc.surrey.sch.uk Telephone: 01483 566589

The Headteacher is:	Contact details:
Sally Cave	head@guildfordscc.surrey.sch.uk Telephone: 01483 566 589

The Chair of Governors is:	Contact details:
Andy Bagwell	chairofgovernors@guildfordscc.surrey.sch.uk Telephone: 01483 566 589

The special educational needs and disabilities coordinator (SENCo) is:	Contact details:
Tessa Allison	mailto:Tessa.Allison@guildfordscc.surrey.sch.uk Telephone: 01483 566 589

The designated teacher for children looked after is:	Contact details:
Tess Dean	Tessa.Dean@guildfordnscs.surrey.sch.uk Telephone: 01483 566 589

The Designated teacher for young carers (not statutory but good practice) is:	Contact details:
Tess Dean	Tessa.Dean@guildfordnscs.surrey.sch.uk Telephone: 01483 566 589

Children's services

Children's Single Point of Access (C-SPA)

Anyone can contact the C-SPA about a child, young person or parent who needs support in Surrey. This could be a concern about how the baby or child is developing, issues that the parent is experiencing, or you suspect a baby or child is being neglected or subjected to physical, sexual, or emotional abuse.

Surrey's Child Protection Consultation Line for advice and support (0300 470 9100 option 3).

If a baby or child is in **immediate danger**, the police should be contacted on 999.

If it is not an emergency, but there is a concern that a baby or child is at risk, C-SPA should be contacted by phone on 0300 470 9100 or 03311 435554.

Requests for support should be sent securely by email to cspa@surreycc.gov.uk using the [Request for Support Form](#).

This government website helps identify which local council to report child abuse to and their contact details: [Report child abuse to a local council - GOV.UK](#).

Emergency Duty Team (EDT)

Emergency Duty Team (EDT) provides an emergency social care service for urgent situations which are out of normal office hours. If your call is not answered, please do leave a message and your contact details for someone to get back to you.

EDT is available **5pm-9am, Monday – Friday, Weekends 24 hours a day**.

Phone: 01483 517898

Email: edt.ssd@surreycc.gov.uk

Local authority designated officer (LADO)

Every local authority has a legal responsibility to appoint a LADO who is responsible for organising the response to concerns/allegations that an adult who works with children may have caused them or could cause them harm. They will be informed within one working day of any allegations that come to our attention. The LADO will give advice and guidance to employers, such as the headteacher and the chair of governors, to make sure that any allegation is dealt with fairly and quickly, ensuring that the child is protected effectively.

The LADO can be contacted by:

Email: LADO@surreycc.gov.uk

Telephone: 0300123 1650 option 3

Online: [LADO Referral Form](#)

The Law (legislation and statutory guidance)

In addition to Surrey Safeguarding Children Partnership's (SSCP) [arrangements](#), GNSFC also follows the laws and statutory guidance below:

- [Working Together to Safeguard Children 2023](#) which sets out the multi-agency working arrangements to safeguard and promote the welfare of children and young people and protect them from harm; in addition, it sets out the statutory roles and responsibilities of schools.
- [‘What to do if you are Worried a Child is Being Abused’ 2015 - Advice for Practitioners](#)
- [Keeping Children Safe in Education \(KCSIE, 2026\)](#) is statutory guidance issued by the Department for Education (DfE) which all schools and colleges must have regard to when carrying out their duties to safeguard and promote the welfare of children.
- [The Children's Wellbeing and Schools Act 2026](#) strengthens multi-agency safeguarding arrangements, introduces unique identifiers for children to improve information sharing, expands the role of virtual school heads, introduces stricter rules around home education for children subject to child protection processes, and places a new duty on schools to support pupils with allergies from September 2026.
- [Early years foundation stage \(EYFS\) statutory framework](#) is statutory guidance which sets standards that school and childcare providers must meet for the learning, development, and care of children from birth to 5 years in Ofsted registered settings.
- [Relationships and sex education \(RSE\) and health education - GOV.UK](#). This is statutory guidance from the Department for Education issued under Section 80A of the Education Act 2002 and section 403 of the Education Act 1996
- [Education Act 2002](#), section 175 places a duty on maintained schools and local authorities to keep children safe and promote their welfare.
- The [Children Act 1989](#) is the main source of child safety law for England and Wales. The Act gives the basis for most of children's services' duties and responsibilities towards children and their families. It also provides the legal framework for the child protection system. The [2004](#) amendment is used alongside the Act.
- The [Children Act 1989 Care Planning, Placement and Case Review](#) sets out what responsibilities education settings have for children looked after by the local authority.
- [The Human Rights Act 1998](#) sets out the core rights and freedoms that everyone in the UK is entitled to and contains the Articles and protocols of the [European Convention on Human Rights](#) (the Convention) that apply in the UK. Experiencing harassment, violence and/or abuse, including that of a sexual nature, may breach any or all of these rights.
- [The Equality Act 2010](#) states that schools and colleges must not unlawfully discriminate against children because of their sex, race, disability, religion or belief, gender reassignment, pregnancy and maternity, or sexual orientation (called protected characteristics). Therefore, we can take positive action to deal with disadvantages affecting our children with protected characteristics to make sure their needs are met. The [Equality Act 2010: advice for schools](#) advises us further.
- [The Public Sector Equality Duty \(PSED\)](#) states that we have to be mindful of the need to eliminate unlawful discrimination, harassment and victimisation. Some children may be more at risk of harm from specific issues such as sexual violence, homophobic, biphobic or transphobic bullying, or racial discrimination. It is important to make sure we foster good relations between those who share a protected characteristic and those who do not, and work to make sure children have equal opportunities. We give specific attention to this duty when we write our policies or make any decisions about how GNSFC is run.

- [Childcare \(Disqualification\) and Childcare \(Early Years Provision Free of Charge\) \(Extended Entitlement\) \(Amendment\) Regulations 2018](#) and the [Childcare Act 2006](#) set out who is disqualified from working with children.

More legislation is covered throughout this policy in their relevant sections. Some government guidance is not statutory - instead it supports practitioners, like GNSFC staff, in the decisions we make to keep children safe. Where possible, links to non-statutory guidance have been included in the relevant sections.

Roles and responsibilities

Everybody in GNSFC has a responsibility for safeguarding.

This policy applies to all staff, volunteers and governors in GNSFC. Our policy and procedures also apply to extended school and off-site activities.

GNSFC plays a crucial role in preventative education. This is in the context of a whole-school approach to preparing children for life in modern Britain, and a culture of zero tolerance of sexism, racism, misogyny/misandry, homophobia, biphobia, sexual violence/harassment, derogatory behaviour or other forms of physical violence and conflict.

Some members of GNSFC have specific safeguarding responsibilities.

All staff:

Sign to say they have read and understood Part 1 of statutory guidance KCSIE (2026) annually. Those working directly with children will also read Annex B.

Have a responsibility to provide a safe environment in which babies and children can develop and learn.

Have a responsibility to establish and maintain an environment where babies and children feel secure, are encouraged to talk and are listened to.

Will follow GNSFC's procedures for identifying and reporting any concerns and issues about GNSFC's online filtering and monitoring systems.

Will follow GNSFC's safeguarding and child protection processes and procedures, sharing information quickly when they have a concern about a child's safety and wellbeing, even when they are unsure.

Will, whenever necessary, refer safeguarding or child protection concerns to external agencies, such as the police, children's services and the LADO.

Attend safeguarding training appropriate to their role and are familiar with key policies, including this policy and the staff behaviour policy (code of conduct).

Create a culture where children who identify as lesbian, gay, bisexual, or are questioning their gender feel safe, can speak out and share concerns.

Will be aware that children may experience prejudice-based harm including racism, faith-based prejudice and other forms of discrimination and that these experiences may affect a child's welfare, wellbeing, mental health and ability to seek help.

Will be aware of indicators of abuse, neglect, exploitation and modern slavery (see below) understanding that babies and children can be at risk of harm inside and outside of GNSFC, inside and outside of home and online. Exercising professional curiosity and knowing what to look for is vital for the early identification of abuse, neglect and exploitation so that staff are able to identify cases of children who may be in need of help or protection.

What staff need to know is covered in the training section of this policy.

The headteacher:

This policy and other safeguarding related policies and procedures (such as the staff behaviour policy, whistle blowing procedures) are shared at induction, understood by all staff, including temporary staff and volunteers, and are being followed at all times.

Staff receive safeguarding training that is updated regularly.

Parents are aware of this policy and where they can access a copy.

The DSL is given the additional time, funding, training, resources, and support needed to carry out the role effectively and there is cover by an equivalently trained deputy if the DSL is absent.

Visitors are appropriately supervised or escorted, where necessary.

Systems are in place for children to express their views and give feedback, which are used to inform the whole school approach to safeguarding.

They become the 'case manager' when an allegation is raised about a member of staff and make the final decision regarding all low-level concerns.

There are enough staff per child (staff ratios), where relevant and applicable.

Each child in the Early Years Foundation Stage is assigned a key person.

Appropriate arrangements are put in place for the supervision of staff who have contact with babies and children and families.

The Designated Safeguarding Lead:

The Designated Safeguarding Lead has the lead responsibility for safeguarding and child protection (including online safety and understanding the filtering and monitoring systems and processes in place). The DSL is a senior member of staff from GNSFC's leadership team. GNSFC has deputy DSLs to support the DSL in their role. While the DSL may hand over some activities to a deputy, the DSL will always have the ultimate responsibility for keeping children safe.

The full responsibilities of the DSL and the deputy DSL(s) are listed in their job descriptions. The DSL's responsibilities include, but are not limited to:

Reading and following KCSIE.

Always being available during term time (during school hours) for staff to discuss any safeguarding concerns. Appropriate and adequate cover arrangements will be arranged by the DSL and the leadership team for any out of hours/out of term activities.

Ensuring there are cover arrangements in place when the DSL is unavailable due to illness, leave, or other circumstances. This will include any Deputy DSLs accessing a shared mailbox or equivalent system to ensure that safeguarding concerns are received, monitored and acted upon without delay.

Working together with all staff to understand the whole picture when there are safeguarding concerns, providing them with advice, support and expertise.

Contributing to the assessment of babies and children, including taking part and/or supporting staff to take part in [strategy discussions](#), [child protection conferences](#) and meetings between multiple agencies.

Working together with and supporting parents and families who may be facing challenging circumstances and, when there are safeguarding concerns, making parents aware of GNSFC's role in making referrals about suspected abuse, neglect and exploitation.

Understanding the importance of sharing information, including making appropriate referrals to relevant agencies (for example, children's services, the police, the Channel Programme and/or the Disclosure and Barring Service (DBS)) and supporting staff who make referrals directly.

Understanding and following Surrey Safeguarding Children Partnership (SSCP) safeguarding procedures

Have a secure working knowledge of SSCP procedures and understand the assessment process for providing early help and statutory intervention, in line with Surrey's [Continuum of Support Indicators](#).

Keeping the headteacher up to date with safeguarding issues.

Having the lead responsibility for online safety, including oversight and checking the effectiveness of GNSFC's filtering and monitoring systems and their reports.

Being aware of the requirement for children to have an Appropriate Adult, as described in [PACE Code C 2019](#).

Making sure child protection files are up to date and kept as per [record keeping](#) section.

Making sure that all staff have access to this policy (and the wider safeguarding procedures), the policy is available publicly and reviewed annually.

Making sure that all adults who work in or for GNSFC have an adequate and appropriate safeguarding induction, regularly updated safeguarding training and annually sign to say they have read the relevant part of KCSIE.

Working alongside the governing body and headteacher to review and update procedures and how they are being implemented, including jointly completing and submitting the biennial (s157 s175) Statutory Audit for Safeguarding Arrangements and Termly Safeguarding Data Collections via PHEW to Surrey County Council.

Promoting the educational outcomes of children who have or had a social worker, by sharing appropriate child protection information with the teacher, key person and leaders.

Encouraging a culture of listening to children, taking into account their wishes and feelings when any plans are put in place to protect them.

The Deputy Designated Safeguarding Lead(s):

Will be trained to the same standard as the DSL and the role is explicit in their job description.

Will take on the designated safeguarding lead's responsibilities if they are unavailable. If the designated safeguarding lead is long-term absent, a deputy will temporarily take over as the designated safeguarding lead.

Further responsibilities of the DSL are listed elsewhere in this policy. For a detailed explanation of the DSL's responsibilities, see Annex C of KCSIE.

The governing body

The non-statutory [Maintained schools governance guide](#) sets out the roles, responsibilities and legal duties for governing bodies.

All members of the governing body understand and fulfil their responsibilities to ensure that:

Safeguarding, and the child's best interests, wishes and feelings, are considered in everything GNSFC does. Everyone at GNSFC is involved in the whole school approach to safeguarding and online safety is a theme throughout.

GNSFC's policies, procedures and training follow the local safeguarding partnership arrangements and the law, including GNSFC's duties under the Human Rights Act 1998, Data Protection Act 2018 and Equality Act 2010.

GNSFC's leadership team are held to account for GNSFC's safeguarding arrangements.

Safeguarding is a standing item on the agenda for governing body meetings.

The appointed designated safeguarding lead (DSL) is given the additional time, funding, training, resources and support needed to carry out the role effectively.

An experienced governor takes leadership responsibility for GNSFC's safeguarding arrangements.

There is an appointed designated teacher for looked after children who is appropriately trained.

The governing body takes into account babies and children who are more at risk of harm and any barriers that can make it difficult to recognise abuse and/or neglect, for example children with special educational needs and disabilities (SEND).

Safeguarding and child protection files are maintained as set out in Annex C of KCSIE.

GNSFC adds to multi-agency working and shares information appropriately and in a timely manner. All staff receive regular safeguarding information, updates and in-depth training.

Staff sign to say they have read the appropriate part of KCSIE. Governors sign to say they have read and understood KCSIE and this policy.

Children are taught about keeping safe, including when online.

The governing body does all that they reasonably can to limit children's exposure to online risks from GNSFC's online IT systems and assign a member of the senior leadership team and a governor to ensure standards are met.

Appropriate safer recruitment processes and procedures are in place.

Procedures are in place to identify and address children absent from education, including persistent absence, and when safeguarding concerns coincide.

There are procedures for reporting and managing safeguarding concerns about adults who work for GNSFC. The chair of governors will manage any allegations against the headteacher.

There are effective safeguarding arrangements for when the site is being hired/let.

All members of the governing body receive safeguarding training at induction, which is regularly updated.

The SSCP is informed in line with local requirements about the discharge of duties via the Biennial (s 157 s 175) Statutory Audit for Safeguarding Arrangements and Termly Safeguarding Data Collections via [PHEW](#) to Surrey County Council.

The safeguarding link governor

They meet with the DSL and visit GNSFC regularly asking questions that allow them to monitor how GNSFC's safeguarding policies and procedures are being put into practice.

Each year, they are part of the biennial safeguarding audit, led by the DSL and headteacher, and make sure it is submitted via PheW.

They are the governing body's safeguarding specialist, feeding back their findings following visits and meetings with the DSL.

They attend appropriate training that guides them in how to monitor and progress any areas of weakness in GNSFC's safeguarding arrangements.

They keep up to date with the SSCP's safeguarding arrangements and guidance.

What to do if you have concerns about a child's welfare

If staff have concerns about a baby's or a child's welfare, they must act on them immediately by following the procedures below. Our staff can use the [What to do if you're worried a child is being abused](#) guidance with GNSFC's procedures. We work hard to make sure our staff and safeguarding team are approachable and available, such that anyone can speak to them about any concern quickly, no matter how small or whether there is evidence.

We recognise the significant emotional impact being involved with or aware of safeguarding incidents can have. **Approach our safeguarding team if you need any support during or following a safeguarding incident.** The names of the DSL and deputy are clearly advertised around GNSFC.

If a child is in immediate danger, or is suffering or likely to suffer significant harm

Call the police on **999** if a baby or child is in immediate danger. **Anyone** can make a referral to children's services if a child is suffering or likely to suffer significant harm. Usually, the DSL or deputy makes the referral. For children's services' contact details, [click here](#). If you make a direct referral, you will update the DSL or a deputy as soon as is practically possible.

Disclosures

We recognise that it takes a lot of courage for a child to disclose they are being harmed. Staff know that:

- Children may not feel ready or know how to tell someone they are being harmed.
- The child may not realise what is happening to them is harmful.
- They may feel embarrassed, humiliated or are being threatened. This could be due to their vulnerability, disability, sexual orientation and/or language barriers.

Our staff know they must show professional curiosity, i.e. explore and try to understand what is happening for a child, rather than take what is being said on face value or making assumptions. We encourage staff to ask the child if they are OK or if they can help in any way. A child who makes a disclosure may have to tell their story more than once, such as to the police and social workers. At GNSFC, we know how important it is that a child's first experience of talking to a trusted adult about a worry is a positive one.

Handling a disclosure

- Listen to them carefully and believe in what they are saying. Do not be afraid of silent moments.
- Be careful not to express your own views or feelings and stay calm.
- Do not investigate. Only ask enough questions to work out if you need to share this matter with the DSL or a deputy. Only ask open questions, such as: How? When? Who? Where? and open statements, such as "Tell me", "Describe" and "Explain". Otherwise, you may invalidate your and the child's evidence in any later court proceedings.
- If there are injuries or marks on the child, do not examine the child intimately or take pictures.
- Reassure them that they have done the right thing by telling you. Do not say to the child that you wish they had told you sooner.
- Do not automatically offer physical touch to comfort the child. Consider what may be comforting for the child, rather than how you prefer to be comforted.
- Tell the child it is not their fault, and you are taking them seriously.
- Explain what you will do next. Tell the child that you cannot keep what they have told you a secret and that you will pass this information onto someone who can help.

After a child has made a disclosure

- Write up the conversation as soon as possible.
- Make sure the DSL or a deputy is aware of the disclosure. If appropriate, contact children's services and/or the police directly and tell the DSL as soon as possible.
- Do not share the disclosure with anyone else unless children's services, the police or another relevant agency involved in the safeguarding process tells you to.
- Get support for yourself if you need it.

Recording a disclosure or safeguarding concern

- Record the date, time, place and persons present on our online safeguarding system.
- Use the child's own words, verbatim where possible, and stick to the facts. Avoid making assumptions and do not put your own judgement on it.
- Record any noticeable non-verbal behaviour. Detail any visible marks or injuries and record them on a body map.
- Keep any original notes you have made on file.
- If some/all staff are using a paper form, add in that staff should sign and date the write-up.
- Do not ask children to make written statements themselves or sign records.

Concerns about a baby or child who is not in immediate danger, or is suffering or likely to suffer significant harm

First, speak to the DSL or a deputy. If in exceptional circumstances, the DSL or a deputy are not available, this will not delay you from taking appropriate action. Instead, you will speak to a member of the senior leadership team or take advice from children's services, if necessary.

How children can report concerns

In GNSFC, it is essential that children can tell us how they are feeling and know we will take it seriously. We aim to create an environment full of 'reachable moments' which encourages children to feel safe enough to open up about their concerns.

We know babies and children try to get their voice heard not just through what they say but how they behave, as pointed out in the NSPCC's [voice of the child briefing](#). When there are behavioural issues or changes in a child's behaviour, demeanour, appearance we take a safeguarding first approach, including considering if the child is communicating an unmet need and/or abuse. For children who are pre-verbal or non-verbal, observing behaviour and presentation is even more important for understanding the baby's or child's lived experience.

Early help

Early help is support for babies and children of all ages that improves a family's resilience and outcomes or reduces the chance of a problem getting worse. At GNSFC, we are keen to provide support to families as soon as a problem becomes visible. If an early help assessment is appropriate, the DSL or a deputy will lead on working together with other agencies and set up an inter-agency assessment, as appropriate. Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner.

Our DSL and/or deputy use the [Helping families early - Surrey County Council](#) information to explore emerging needs and – with consent from the child or family, complete an Early Help Assessment to ensure all identified needs are supported by the appropriate agencies. The partnership's [Early-Help-Strategy-2024-2027](#) sets out their aims for how professionals work effectively together to provide early help.

If early help support is appropriate, it will be kept under constant review. A referral to children's services may be required if the child's situation doesn't appear to be improving. The DSL is aware of the local escalation policy and procedures.

We are aware any child may benefit from support before statutory intervention, including from universal services and community-based Early Help, or the targeted early help level of Family Help. Staff who work

directly with children will be particularly alert to the potential need for early help for children listed under Part 1, paragraph 17 of KCSIE.

Referral to children's services

Concerns about a baby or child or a disclosure should be discussed with the DSL who will help decide whether a referral to children's services is appropriate. The DSL and deputy are aware of [the Continuum of Support for Children and Families in Surrey](#) and [Continuum of Support Indicators](#) which will be used to inform their response to any safeguarding concern. If a referral is needed, then the DSL should make it. However, anyone, including children, can make a referral and, if for any reason a staff member thinks a referral is appropriate and one hasn't been made, they can and should consider making a referral themselves. Where referrals are not made by the DSL, the DSL should be informed as soon as possible.

GNSFC should try to discuss any concerns about a child's welfare with the parent and, where possible, obtain their consent before making a referral to the C-SPA. However, GNSFC should not discuss concerns with parents when:

- it would place the child at increased risk
- or sexual/organised abuse is suspected
- or the fabrication of an illness is suspected
- or it could impede a Police investigation or Social Work enquiry

Where there are doubts or reservations about involving the child's family, the DSL should clarify with the C-SPA or the Police whether the parents should be told about the referral and, if so, when and by whom. This is important in cases where the Police may need to conduct a criminal investigation. The child's views should also be considered.

If it is suspected that a child is suffering, or is likely to suffer, harm or abuse the DSL must contact the C-SPA. If the DSL feels unsure about whether a referral is necessary, they can phone the C-SPA consultation line to discuss concerns.

When a child needs urgent medical attention and there is suspicion of abuse the DSL should take the child to the accident and emergency unit at the nearest hospital, having first notified the C-SPA. The DSL should seek advice about what action the C-SPA will take and about informing the parents, remembering that parents should normally be informed that a child requires urgent hospital attention.

If you have not had any feedback from children's services within 72 hours of making the referral, this must be followed up. If after a referral, the referrer is dissatisfied with the response from children's services and/or the child's situation does not appear to be improving, the DSL (or whoever made the referral) should press for re-consideration to ensure their concerns have been addressed and, most importantly, the child's situation improves. The [local escalation policy \(Finding a Solution Together \(FaST\) resolving professional differences procedure](#) will be used, where necessary.

If a child has experienced or is at risk of female genital mutilation

Female genital mutilation (FGM) is illegal in England. It involves removal, part removal or injury to the female genital internal or external organs for non-medical reasons. It is sometimes known as 'cutting' or female 'circumcision'.

Teachers

For this section only, teachers means qualified teachers or persons who are employed or engaged to carry out teaching work in schools and other institutions. All staff should speak to the DSL (or a deputy) when a concern about female genital mutilation (FGM) arises. If a teacher suspects that FGM has been carried out on a child or believes that the child is at risk of FGM, they will follow their internal safeguarding procedures.

Teachers who come to know, in the course of their work, that FGM has been carried out on a child **must directly** report this to the police. Failure to do so will result in disciplinary sanctions. The teacher should tell

the DSL or a deputy who will support them in making a direct report to the police. The teacher may need to support a referral to children's services. Staff will never examine children.

Other members of staff

Other members of staff who establish that an act of FGM appears to have been carried out on a child or suspect a child is at risk of FGM, will follow the same procedures as with any other concern, i.e. will speak to the DSL or a deputy and follow local safeguarding procedures.

Useful links:

[Mandatory reporting of female genital mutilation: procedural information](#)

Concerns about nudes or semi-nudes

Responding to any incident that comes to your attention:

- **Report** it to our designated safeguarding lead (DSL) or equivalent immediately, using GNSFC's reporting procedures set out in this policy.
- **Never** view, copy, print, share, store or save the imagery yourself, or ask a child to share or download – this is illegal.
- **If you have already viewed the imagery** by accident (e.g. if a young person has shown it to you before you could ask them not to), report this to the DSL (or equivalent) and seek support.
- **Do not delete** the imagery or ask the young person to delete it.
- **Do not** ask the child/children or young person(s) who are involved in the incident to disclose information regarding the imagery. This is the responsibility of the DSL or a deputy.
- **Do not** share information about the incident with other members of staff, the young person(s) it involves or their, or other, parents.
- **Do not** say or do anything to blame or shame any young people involved.
- **Do** explain to them that you need to report it and reassure them that they will receive support and help from the DSL or a deputy.

Staff reserve the right to confiscate a device in the possession of a child if they have concerns about sharing nudes or semi-nudes in relation to the device. This is consistent with the [Searching, screening and confiscation: advice for schools](#) guidance.

The DSL will follow the government's [Sharing nudes and semi-nudes: advice for education settings working with children and young people](#) guidance. Once they are aware of an incident, the DSL will hold an initial review meeting with appropriate staff. This may include the staff member(s) who heard the disclosure and the safeguarding or leadership team who deal with safeguarding concerns.

The initial review meeting will consider the initial evidence and aim to establish:

- Whether there is an immediate risk to any child or young person.
- If a referral should be made to the police and/or children's social care.
- If it is necessary to view the image(s) in order to safeguard the child or young person – in most cases, images or videos should not be viewed.
- What further information is required to decide on the best response.
- Whether the image(s) has been shared widely and via what services and/or platforms. This may be unknown.
- Whether immediate action should be taken to delete or remove images or videos from devices or online services.
- Any relevant facts about the children or young people involved that would influence risk assessment.
- If there is a need to contact another education school or individual.
- Whether to contact parents of the children or young people involved – in most cases they should be involved.

The DSL will make an immediate referral to the police and/or children's services if:

- The incident involves an adult.
- There is reason to believe that a child or young person has been coerced, blackmailed or groomed, or there are concerns about their capacity to consent (for example, owing to special educational needs).
- What they know about the images or videos suggests the content depicts sexual acts that are unusual for the young person's developmental stage or are violent.
- The images involve sexual acts and any child in the images or videos is under 13.
- They have reason to believe a child or young person is at immediate risk of harm owing to the sharing of nudes and semi-nudes, for example if they are presenting as suicidal or self-harming.
- They become aware of the making or sharing of nudes or semi-nudes.

If none of the above applies, we can decide to respond to the incident without involving the police or children's services. We may escalate the incident at any time if further information/concerns are disclosed at a later date. First, the DSL will be confident that they have enough information to assess the risks to any child involved and the risks can be managed within GNSFC's pastoral support, behaviour procedures and, if appropriate, the local network of support.

The DSL or a deputy will contact children's services if any child or young person involved is already known to them. If, because of the investigation, the DSL (or equivalent) believes there are wider issues that meet the threshold for children's services' involvement, they will make a referral in line with this policy and local safeguarding procedures.

Viewing the imagery

The decision to view any imagery will be based on the professional judgement of the DSL or a deputy and will comply with this policy. Imagery will never be viewed if the act of viewing will cause significant distress or harm to a child. If a decision is made to view imagery, the DSL will be satisfied that viewing:

- Is the only way to make a decision about whether to involve other agencies because it is not possible to establish the facts from any child or young person involved.
- Is necessary to report it to a website, app or suitable reporting agency (such as the IWF) to have it taken down or support the child or parent in making a report.
- Is unavoidable because a child or young person has presented it directly to a staff member or nudes or semi-nudes have been found on a school device or network.

Deletion of images

If GNSFC has decided that other agencies do not need to be involved, then consideration will be given to deleting imagery from devices and online to limit any further sharing. This decision will be based on the DSL's or a deputy's judgement in line with the guidance. There is further information in the **Sharing nudes and semi-nudes** section of this policy.

Child-on-child abuse (including harassment and violence)

Responding to allegations of child-on-child abuse

- Follow the 'handling a disclosure' procedure set out above. You must make a record of the allegation and inform the DSL or a deputy.
- If the DSL and a deputy are not available due to emergency circumstances, the staff member will speak to a member of the senior leadership team and/or contact the relevant children's services.

The DSL or a deputy will make a decision from the following options depending on the level of risk or harm:

1. Manage the concern internally providing pastoral support to all those involved.
2. Complete an early help assessment.
3. Make a referral to children's services and/or, where necessary, the police. The DSL may choose to consult children's services to assist them with making a decision.
4. The police will still be informed of any criminal offences. If the child is aged under the criminal age of responsibility, the police will take a welfare approach.

The DSL or a deputy will contact the parents of the children involved at the earliest opportunity and where appropriate. Records will be kept of all concerns, discussions had, decisions made and any outcomes reached. If a criminal offence has been committed or is being investigated, the DSL will work closely with the police to avoid impacting the criminal process while protecting children or following disciplinary procedures.

Where the DSL, children's services or the police decide the concern should be handled by GNSFC internally, we will thoroughly investigate the concern using our behaviour policy and processes. A risk assessment and prevention plan will be completed when a safeguarding risk has been identified. The plan will be monitored and a date set for a follow-up evaluation with everyone concerned. We will support all children involved in the incident, including the child/ren who displayed the behaviour and the children who experienced it.

Details of the support we offer can be found in our promoting positive behaviour policy.

Responding to allegations of sexual harassment and sexual violence

Using the DSL's or a deputy's professional judgement, GNSFC will make decisions about and address the incident based on the Brook Tool. We will request the support of other agencies, such as children's services and the police, if necessary.

The Brook Traffic Light Tool uses a traffic light system to categorise the sexual behaviours of children; it can be used to help professionals:

- Make decisions about safeguarding babies and children and young people.
- Assess and respond appropriately to sexual behaviour in babies and children and young people.
- Understand healthy sexual development and distinguish it from harmful behaviour.

See Appendix 5 for more about this tool.

GNSFC recognises that it is vital that professionals agree on how behaviours should be categorised regardless of culture, faith, beliefs, and their own experiences or values.

We follow the local safeguarding arrangements below when an allegation of sexual violence and/or sexual harassment has been made.

The management of children with sexually harmful behaviour is complex. GNSFC will work with other relevant agencies to maintain the safety of the whole GNSFC community. Where appropriate, immediate measures will be put in place to support and protect the person impacted by the behaviours, any witnesses and the alleged instigator of the behaviours. A written record will be made and next steps discussed, taking into account the views of those impacted by the behaviour.

A risk and needs assessment will be completed for all reports of sexual violence and on a case-by-case basis for reports of sexual harassment. The assessment, which will be kept under review, will consider:

- Whether there may have been other people impacted by the behaviour.
- The person known to be impacted by the behaviour, especially their protection and support.
- The alleged instigator of the behaviour.
- All children (and, if appropriate, staff) at GNSFC, especially any actions that are appropriate to protect them from the alleged instigator or future harm.
- The time and location of the incident and any action that can make GNSFC safer.

Unsubstantiated, unfounded, false or malicious reports

If a report is found to be unsubstantiated, unfounded, false or malicious, the DSL will consider whether the child and/or the person who has made the allegation is in need of help, or may have been abused by someone else and this is a cry for help. In such circumstances, a referral to children's services may be appropriate. If a report is shown to be deliberately invented or malicious, we will consider whether any disciplinary action is appropriate according to our behaviour policy.

If a child who has experienced sexual violence or sexual harassment asks GNSFC not to make a referral

If the child does not give consent to share information, the DSL or a deputy will balance the victim's wishes against their duty to protect them and other children on a case-by-case basis. If a child is at risk of harm, is in immediate danger or has been harmed, a referral should be made to children's services, and as assault by penetration (for example rape or penetration with an object) are crimes, reports should be referred to the police. As stated above, a police referral will still be made for children under the age of criminal responsibility.

We will do all we reasonably can to protect the anonymity of any children involved in any report, including weighing up what staff need to know and any support that will be put in place. Further, we will take into account the potential impact of social media in facilitating the spreading of rumours and exposing the child's identity.

Where an allegation of sexual violence or sexual harassment is progressing through the criminal justice system, our DSL and a deputy will be aware of anonymity, witness support, and the criminal process in general so they can offer support and act appropriately. They will be guided by the [CPS: Safeguarding Children as Victims and Witnesses](#) advice.

Concerns about mental health

If you have a mental health concern about a child that is also a safeguarding concern, you will speak to the DSL or a deputy immediately, unless the child is in immediate danger, in which case you will call the police first.

Although you may be 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, only appropriately trained professionals should attempt to diagnose a mental health illness. Where necessary, the DSL or a deputy will make a referral to Children's Single Point of Access (CSPA)

Useful links:

[Mindworks Surrey](#)
[Surrey Young Suicide Prevention Toolkit](#)
[The Surrey Self-Harm Protocol](#)
[Install - R;pple Suicide Prevention](#)

Concerns about extremism and radicalisation

Extremism is the vocal or active opposition to our fundamental British values. Radicalisation is the process of a person legitimising support for, or use of, terrorist violence. See radicalisation and extremism in Appendix 1 for more information.

If you have a concern that a child may be at risk of radicalisation or involvement in terrorism and they are in **immediate danger**, contact the police on 999. If the child is not in immediate danger, speak with the DSL or a deputy as a first point of call.

The DSL may decide to discuss their concerns with children's services and will make referrals to the police Prevent team and/or the Channel programme, where necessary. The DSL will need to seek the individual's consent when referring to the Channel programme.

Prevent referral form to refer cases by e-mail to preventreferrals@surrey.pnn.police.uk.
(email address solely for prevent referrals and not general enquires).

In cases where further advice from the Police is sought dial 101 or 07795 043842 or 01865 555618 and ask to speak to the Prevent Supervisor for Surrey.

Prevent leads

Claire McDonald, Prevent Supervisor, Surrey Police:
claire.mcdonald@surrey.police.uk - 07795 043842

Lara Bowden, Project Officer, Surrey County Council:
lara.bowden@surreycc.gov.uk

Helene Morris – Department for Education (DfE) Regional Prevent Co-ordinator for Southeast - Counter-Extremism. Department for Education Prevent Coordinator for South-East
Prevent.SouthEast@service.education.gov.uk

[National Prevent referral form \(healthysurrey.org.uk\)](https://healthysurrey.org.uk)

Staff and governors can also raise concerns by emailing counter.extremism@education.gsi.gov.uk, but this is not to be used in emergency situations. If you believe you have information relating to terrorism, you can call the anti-terrorist hotline on 0800 789 321. To report extremism in education, including allegations against staff and institutions, use [this link](#).

Confidentiality, sharing and withholding information

We take our responsibility to protect and look after the data (information) we hold about children and our families seriously. The Data Protection Act (DPA) 2018, the UK General Data Protection Regulation (UK GDPR) and the Data (Use and Access) Act 2025 guide us in how to do so. Under the DPA 2018, we will share information without consent if 'the safeguarding of children and individuals at risk' is our reason for doing so, and

- it is not possible to gain consent
- it cannot be reasonably expected that a practitioner (for example, teacher) gains consent, or
- to gain consent would place a child at risk

The government's [information sharing advice for safeguarding practitioners](#) supports staff who have to make decisions about sharing information. Staff are aware they can look at the [data protection in schools toolkit](#) or speak to a member of the safeguarding team if they are unsure about sharing information. Government guidance emphasises that: "The Data Protection Act 2018, UK GDPR and the Data (Use and Access) Act 2025 do not prevent, or limit, the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children." Please refer to our Data Protection Policy for further details.

To keep children safe, we will share information in a timely manner including sharing information with agencies and professionals in line with the Working Together to Safeguard Children 2023 guidance. We respect that safeguarding matters are personal to families, so the DSL, deputy and headteacher will only share information about a child to members of staff and professionals on a need-to-know basis.

All staff are aware that they cannot make a promise to a child to keep secrets that might impact on the child's safety or wellbeing. Instead, staff should tell the child that they may need to pass information on to others who can help and protect them.

Notifying parents

At GNSFC, working alongside and supporting families is a key priority. This involves being open and transparent with parents when we have concerns about their child's welfare, and/or we need to request support from other services to make sure the child's situation improves. If we believe notifying parents could increase the risk to the child or cause further harm, we will seek advice from children's services about how and when parents should be updated. It is legitimate to share concerns without a parent's consent when there is good reason to do so and that sharing the information would improve the safeguarding of the child in a timely manner.

Useful links:

[Information Sharing](#)

[For organisations | ICO](#)

[Sharing information to safeguard children and young people in the education sector in the UK | ICO](#)

Record keeping

Each child has an online safeguarding file where all safeguarding concerns and referrals are stored (CPOMS). The designated safeguarding lead is responsible for keeping written records of all concerns, discussions and decisions, including the rationale for those decisions. Records reflect the reason why referrals are or are not made to another agency, such as children's services or the Prevent programme. Safeguarding files will be stored securely, and access will be limited to those who need it.

When a child leaves GNSFC, the DSL will make sure that their safeguarding file is transferred to the new education setting or school or college within 5 days of an in-year transfer or within 5 days of the start of a new term. This will be securely transferred via CPOMS or printed from CPOMS and securely emailed separately from their main file and a confirmation of receipt will be requested and kept. Where appropriate, the DSL will share information in advance of the child transferring particularly where the information would support an assessment of risk to others in GNSFC as well as the individual child, so support can be put in place ready for when the child starts. When a child starts at GNSFC, we will make sure key staff are aware of any safeguarding information as soon as possible.

Concerns or allegations made about adults in GNSFC

If you have a low-level concern or have an allegation to make about a member of staff (see the definition for staff on page 9) presenting a risk to children, speak to the headteacher as soon as practically possible. This includes any concerns in nursery, out of nursery, online and/or offline.

GNSFC has a separate procedure for dealing with allegations against members of staff and low-level concerns. Please refer to this policy for further details.

[Surrey's LADO procedure](#) will be followed where it is alleged that anyone working in GNSFC that provides education for babies and children under 18 years of age, including supply staff, trainee teachers, volunteers and contractors or another adult who works with children has:

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

The last bullet point above includes behaviour that may have happened outside of GNSFC, that might make an individual unsuitable to work with babies and children, this is known as transferable risk.

Where the allegation is in relation to a member of supply staff or trainee teacher, GNSFC will inform the agency/teacher training provider of the process for managing allegations and ensure they are fully involved in enquiries.

GNSFC may also receive an allegation relating to an incident that happened when an individual or organisation was using their school premises for the purposes of running activities for children (for example community groups, sports associations, or service providers that run extra-curricular activities).

In dealing with allegations or concerns against an adult, staff must without delay:

- Report any concerns to the Headteacher immediately, who will consider whether an onward referral to the LADO is required. If an allegation is made against the Headteacher, the concerns need to be raised with the Chair of governors as soon as possible. If the Chair of governors is not available, then the LADO should be contacted directly.

There may be situations when the Headteacher/Chair of governors will want to involve the Police immediately if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

- Once an allegation has been received by the Headteacher/Chair of governors they will contact the LADO (as part of their mandatory duty) on 0300123 1650 option 3 LADO or Email: LADO@surreycc.gov.uk immediately and before taking any action or investigation.
- Following consultation with the LADO, inform the parents of the allegation unless there is a good reason not to.
- In liaison with the LADO, GNSFC will determine how to proceed and if necessary, the LADO will refer the matter to Social Care and/or the Police.
- If the matter is investigated internally, the LADO will advise GNSFC to seek guidance in following procedures set out in part 4 of KCSIE (2026) and the SSCP procedures.

Low-level concerns

The term low-level concern does not mean that it is insignificant. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a ‘nagging doubt’ - that an adult working in or on behalf of GNSFC may have acted in a way that:

- is inconsistent with the staff code of conduct, including inappropriate conduct outside of work and
- does not meet the harm threshold or is otherwise not serious enough to consider a referral to the LADO.

The purpose of reporting low-level concerns is to create and embed a culture of openness, trust and transparency in which GNSFC’s values and expected behaviour set out in the staff code of conduct are lived, monitored and reinforced constantly by all staff.

GNSFC creates an environment where staff are encouraged and feel confident to self-refer where they have found themselves in a situation.

Reports should be made to the Headteacher or DSL in a timely manner. If the Headteacher or DSL has any doubt as to whether the information which has been shared about the individual as a low-level concern in fact meets the harm threshold, they will consult with the LADO.

Useful links:

[Surrey Safeguarding Children Partnership Procedures Manual Allegations Against Staff or Volunteers](#)
[Surrey Safeguarding Children Partnership Procedures Manual Non-recent Abuse Policy](#)

Whistleblowing

A whistleblower is a worker who reports certain types of wrongdoing. All staff have a duty to do so. We aim to create an environment where staff feel able to raise concerns about poor or unsafe practice and potential failures in how we manage safeguarding. Any concerns should be raised with the senior leadership team and will be taken seriously. GNSFC has a separate whistleblowing policy, which lists the procedures for raising concerns. This policy is saved on the shared drive and a hard copy may be requested from reception.

Whistleblowing regarding the Headteacher should be made to the Chair of governors whose contact details is available to staff.

If it becomes necessary to consult outside GNSFC, they should speak in the first instance, to the Area Schools Officer or LADO in accordance with the Whistleblowing Policy.

Staff are encouraged to use an external, independent and confidential service provided by Navex Global, who can be contacted on their freephone helpline number 0800 069 8180 and through the [Navex Global web pages](#).

Where staff feel unable to raise a concern with our senior leadership team or feel that their genuine safeguarding concerns are not being addressed, there are other options available to them, such as the NSPCC whistleblowing advice line. Staff can call 0800 028 0285 from 8am-8pm or email: help@nspcc.org.uk.

Online safety and the use of smart devices

This section summarises GNSFC's whole school approach to online safety and the use of smart devices (e.g. mobile phones, smart watches, tablets etc). Our detailed approach is covered in our ICT and Internet Acceptable Use Policy. GNSFC understands the significant and essential role that we have in making sure children are protected from potentially harmful and inappropriate online material. We consider online safety in every aspect of GNSFC life.

Our aim is to:

- Have in place online safety processes that protect our babies, children, families and staff including how we identify, intervene in and escalate online concerns, where appropriate.
- Make sure technology is used responsibly and safely through education.
- Set clear expectations for the use of mobile phones and smart technology.

We fulfil our aims by:

- Ensuring appropriate filtering and monitoring systems are in place on GNSFC's network and devices.
- Educating children in developmentally appropriate ways to keep themselves safe when online.
- Engaging with parents about what online safety looks like.
- Making sure our whole school approach is reflected in all relevant policies.
- Regularly training staff on online safeguarding risks and how to be online safely.
- Making sure children, staff, parents, governors and volunteers sign an understandable acceptable use agreement that covers how they should use GNSFC's IT systems and their mobile and smart technology.
- Making parents, families, children and staff aware that staff can search an electronic device they have confiscated. See [Searching, Screening and Confiscation](#).

Due to the constant changes to online technology and the related harms, we will carry out an annual review and risk assessment of our online safety policies, procedures and systems.

The breadth of issues classified within online safety is considerable and ever evolving, but can be categorised into four areas of risk, content, contact, conduct and commerce.

The 4Cs

Being online can be a great source of fun, entertainment, communication and education. Some people's online behaviour places others at risk. The number of issues covered under online safety is large and constantly growing. They are categorised into these four areas of risk:

Content: being exposed to illegal, inappropriate or harmful content, for example: pornography, racism, misogyny, self-harm, suicide, antisemitism, radicalisation, extremism, extreme sexual or physical violence, misinformation, disinformation (including fake news) and conspiracy theories.

Contact: being subjected to harmful online interaction with other users or generative AI applications that simulate this; 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: online behaviour that increases the likelihood of, or causes, harm; for example: making, sending and receiving explicit images including those generated using AI and online bullying.

Commerce: risks such as online gambling, inappropriate advertising, phishing and/or financial scams. If children or members of staff report any issues, we will report it to the Anti-Phishing Working Group (<https://apwg.org/>).

Mobile phones and smart technology (including smart watches and glasses)

Many children have unlimited and unrestricted access to the internet via mobile phone networks; therefore, children could be harmed or harm others online when at GNSFC. This may include sexually harassing, bullying and the making or sharing of nudes or semi-nudes (often via large chat groups). To protect children from these risks while they are at GNSFC, our approach to mobile and smart technology (including watches and 'Meta' glasses) is:

- To permit staff to only use work internet-enabled devices whilst working with babies, children, young people and families.
- To expect parents not to use electronic devices in the nursery and during family centre sessions.
- To allow parents to use electronic devices to film and take photos during an organised performance but always with the request to not share these on social media without the express permission of each child's parents.
- Engaging with parents about what online safety looks like.

Please refer to our ICT and Internet Acceptable Use Policy and our Use of AI Policy for details on how mobile phones, cameras and other electronic devices with imaging and sharing capabilities are used in GNSFC.

This guidance provides further information: [Safeguarding children and protecting professionals in early years settings: online safety considerations](#)

Media recordings, audio, image and video (including digital files)

When we make media recordings of babies and children, such as taking videos or photos, we will get the parents' consent, make sure the child is appropriately dressed and encourage the child to tell us if they are worried about any media that has been taken of them. See our staff code of conduct and ICT and Internet Acceptable Use Policy, which cover GNSFC's expectations for staff making media recordings.

Filtering and monitoring

To limit children's exposure to online risks from GNSFC's IT systems, we have strong and effective filtering and monitoring systems, following the government's [Meeting digital and technology standards in schools and colleges](#) guidance. We will also follow the government's [Plan technology for your school](#) guidance to self-assess against the filtering and monitoring standards and receive personalised recommendations on how to meet them. We will make sure that:

- Specific staff have assigned roles and responsibilities to manage systems.
- Staff know about the systems in place and how to escalate concerns.
- There are annual reviews of the systems, or more frequently if there is a significant change or issue.
- Our governing body reviews the systems with the DSL, IT staff and service providers, to find out what more can be done to keep children safe.
- The systems are effective for the age range of children and consider children potentially at greater risk of harm.
- When we block online content, it does not impact teaching and learning.
- Filtering works across all devices including mobile devices and smart technology

Remote education

When our children are being taught remotely e.g. at home, we will be in regular contact with parents. We will make sure parents are aware of:

- What their child/ren are being asked to do online, including the sites they will be accessing and who from GNSFC will interact with their child/ren.

- The importance of children being safe online and offering advice on how to do so.
- What systems GNSFC uses to filter and monitor online use.

Information security and access systems

We have procedures in place to protect our IT systems and staff and learners from cybercrime, i.e. when criminals seek to exploit human or security vulnerabilities online to steal passwords, data or money directly. We will follow the government's [Cyber security standards for schools and colleges guidance](#) which were developed to help us improve our resilience against cyber-attacks. Our procedures and systems are reviewed regularly to keep up with the constant changes to cyber-crime technologies.

Children are taught about online safety throughout the curriculum, and all staff receive online safety training which is regularly updated. GNSFC's online safety co-ordinators are the DSL and DDSs.

GNSFC will follow the guidance around [harmful online challenges and online hoaxes](#) when supporting children and sharing information with parents.

Children with particular skill and interest in computing and technology may inadvertently or deliberately stray into cyber-dependent crime. If there are concerns about a child in this area, the DSL will consider a referral into the [Cyber Choices](#) programme.

This programme aims to intervene where young people are at risk of committing, or being drawn into, low level cyber-dependent offences and divert them to a more positive use of their skills and interests.

Useful links:

[Childnet International](#)

[Safer Internet Centre webpages](#)

[Generative AI: product safety expectations](#)

[Generative artificial intelligence \(AI\) in education - GOV.UK](#)

[Using AI in education settings: support materials - GOV.UK](#)

Children potentially at greater risk of harm

At GNSFC, we know that all children need to be protected from harm. In addition, we recognise that some groups of children are potentially at greater risk of harm. The information below highlights some of the groups of children this applies to, however there are several other groups not listed. Also see Appendix 4 for further guidance relating to Children Who May Need Additional Safeguarding Support.

Children who have a social worker

Children may need a social worker due to safeguarding or welfare needs. Children may need help due to abuse, neglect and/or complex family circumstances. GNSFC recognises that a child's difficult experiences and trauma can leave them vulnerable to further harm, as well as disadvantaging them educationally.

Children's services share with us which children have a social worker. Once we are aware of this information, we will use it to make decisions in the child's best interest, i.e. their safety, welfare and educational outcomes. When a child has a social worker, safeguarding is at the heart of every decision we make, such as how we react to unauthorised absence or children missing education, which themselves carry additional risks. When necessary, we offer extra in-school support to our children who have a social worker, such as: additional opportunities for visits, enrichment experiences.

The Virtual School is a statutory service that exists to provide advice and support for children who have a social worker, children placed in care and previously looked after, such that they have the opportunity to meet their full educational potential. Where needed, GNSFC works with the Virtual School to support these children.

Children looked after and previously looked after

These children are particularly vulnerable. The most common reasons for children becoming looked after is as a result of abuse and/or neglect. Staff will have the skills and knowledge to keep children looked after and previously looked after safe. Appropriate staff will have the information they need in relation to a looked-after child's legal status. For example, who has parental responsibility, who is not permitted to have contact and who is not permitted to know where the child is being educated, and the level of decision-making power the local authority has given the carer. The designated teacher for children looked after is Tess Dean. The designated governor for children looked after is Amanda Burton Smith.

The statutory guidance [Designated teacher for looked-after and previously looked after children](#) contains further information on the role and responsibilities of the designated teacher. The designated teacher ensures that GNSFC has the up-to-date details of the allocated social worker and the Virtual School headteacher in the local authority that looks after the child. The Virtual School has an additional role of managing extra funding which is used to support children looked after. The designated teacher will work with the Virtual School Head to discuss how the funding can be used to best support the child.

Useful links:

[Surrey Children's Services Procedure Manual Supporting the Education and Promoting the Achievement of Children with a Social Worker, Looked After and Previously Looked After Children](#)
[Promoting the education of children with a social worker and children in kinship care arrangements: virtual school head role extension](#)

Young carers

At GNSFC, we are alert to the needs of young carers and recognise that caring responsibilities can impact on their attendance, attainment, behaviour and wellbeing. Early identification of these children is essential. We will liaise with appropriate services including additional support from external partners or the local authority and health services, to ensure young carers receive the right support at the right time.

Children with special educational needs, disabilities and health issues

Our Special Educational Needs Co-ordinator and DSL work closely together to safeguard and support children who have special educational needs and disabilities (SEND), in particular when there are any reports of abuse. Our safeguarding curriculum, i.e. the ways we teach children to keep themselves and others safe, is adapted to meet the individual support needs of children with SEND such as the use of visuals.

GNSFC is aware that children with SEND or certain medical or physical health conditions can face additional safeguarding challenges both online and offline, such as:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration.
- These children being more prone to peer group isolation or bullying (including prejudice-based bullying), than other children.
- The potential for children with SEND or certain medical conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs, and the communication differences in managing or reporting these challenges.
- The need for intimate care or that these children are isolated from others and are more likely to be dependent on adults for care
- Cognitive understanding – being unable to understand the difference between fact and fiction in online content and then repeating the content/behaviours in schools, or the consequences of doing so.

We offer additional pastoral support for children with SEND, including:

- Whole family support from the SENCo.
- Opportunity for parents to do the Early Bird parenting course.

Useful links:

[Surrey Safeguarding Children Partnership Procedures Manual Children with Disabilities/Complex Needs](#)

Safeguarding children with medical conditions

Incidents relating to the management of a child's medical condition (including allergies) will not normally require a safeguarding referral. However, GNSFC will consider a referral where concerns indicate that a child may be at risk of neglect, abuse, or exploitation because of their medical condition. This may include situations where important medical information is withheld from GNSFC or where a child is repeatedly sent to nursery/school without essential medication, placing them at risk. Staff will follow GNSFC's procedures for supporting children with medical conditions and report to the Designated Safeguarding Lead (DSL) where safeguarding concerns arise.

Useful links:

[Supporting pupils with medical conditions at school - GOV.UK](#)

[Allergy safety in schools - GOV.UK](#)

Children who are lesbian, gay or bisexual

Staff at GNSFC know that a child or young person being lesbian, gay, or bisexual is not in itself a risk factor for harm but they can sometimes be vulnerable to discriminatory bullying. We will take steps to prevent discriminatory bullying and put appropriate sanctions in place where this has been reported.

Children who are questioning their gender

GNSFC recognises that some children and young people may question their gender and may require support, understanding and careful consideration. The welfare, wellbeing and safeguarding of the child will always be the primary consideration in any decision-making. Responses will be individualised and based on the child's age, needs, wishes, circumstances and best interests. Staff will listen respectfully, respond sensitively and avoid making assumptions, while remaining alert to any safeguarding concerns, vulnerabilities, mental health needs, bullying, online harms or other risks that may affect the child.

GNSFC will normally work in partnership with parents when supporting a child who is questioning their gender. However, where involving parents could place a child at risk of significant harm, appropriate safeguarding procedures will be followed, and advice will be sought from the DSL. Any requests relating to social transition or other significant changes will be considered carefully on a case-by-case basis, with decisions informed by safeguarding considerations, professional judgement and, where appropriate, advice from relevant agencies. GNSFC will take all reasonable steps to protect children who are questioning their gender from bullying, harassment, discrimination, abuse and victimisation and will maintain appropriate records of concerns, decisions and support arrangements.

Identified areas of risk for GNSFC

- Proximity of the York Road site to the main road. This potential risk is mitigated by the gate system, CCTV and staff vigilance.
- High numbers of children with support needs and those with English as an additional language. Staff are trained to know and understand that these children might have differences verbalising concerns and worries and that they need to be observant of any slight changes in behaviour, appearance, demeanour etc.
- Babies aged 9 months to 2 years. Staff know that bruises and injuries on a non-mobile baby must be reported to the C-SPA.

Useful links:

[Youth and school engagement | Surrey Police](#)

[Safer Communities Programme | Healthy Surrey](#)

[Surrey Healthy Schools | Healthy Surrey](#)

[Partner services | Surrey Police](#)

Lettings and off-site arrangements

We have a separate lettings Policy which is saved in the shared drive. When services or activities are provided by the governing body, under the direct supervision or management of GNSFC staff, the safeguarding procedures listed in this policy will apply. This may not be the case when we hire or rent out GNSFC spaces to other organisations or individuals, such as community groups, sport associations and extra-curricular activities providers. We will make sure there are arrangements in place to keep children safe, regardless of whether they are children at GNSFC.

To make sure the provider has the appropriate safeguarding arrangements in place, we will follow the government's [Keeping children safe during community activities, after-school clubs and tuition](#) non-statutory guidance. This includes checking that the provider has completed the essential pre-employment checks on their staff and that their staff are suitable to be around children. Where appropriate, we will seek assurance and check their safeguarding policies and procedures, as well as establish what the arrangements are for the provider to liaise with GNSFC on safeguarding matters. We will terminate our agreement with the provider if they do not follow the safeguarding requirements listed in the agreement.

Extended school and off-site arrangements

Where extended school activities are provided and managed by GNSFC, our own safeguarding and child protection policy and procedures apply. When our children attend off-site activities, we will ensure that effective child protection arrangements, informed by thorough risk assessments, are in place. These can be found in our Educational Visits Policy and Procedures document which is saved on the shared drive.

Due to the age of our nursery school children, it is unlikely that they will access alternative provision but if they do, we continue to be responsible for their safety and wellbeing. We will satisfy ourselves that the placement can meet the child's needs and obtain written confirmation that appropriate safeguarding checks have been carried out on individuals working at the establishment, i.e. checks that we would otherwise perform on our own staff. This includes written confirmation that the alternative provider will inform us of any arrangements that may put the child at risk (i.e. staff changes), so that we can ensure ourselves that appropriate safeguarding checks have been carried out on new staff. We will always know where a child is based during school hours. This includes having a record of the address of the alternative provider and any subcontracted provision or satellite sites the child may attend. We will regularly review the alternative provision placements we make. Reviews will be at least half termly to provide assurance that the child is regularly attending, and the placement continues to be safe and meets the child's needs. Where safeguarding concerns arise, the placement will be immediately reviewed, and terminated, if necessary, unless or until those concerns have been satisfactorily addressed. We follow the [statutory guidance for alternative provision](#).

Where a parent expresses their intention to remove their child from nursery to educate their child at home (also known as elective home education), we will work together with the parent and other professionals to ensure that this decision has been made in the best interests of the child. We recognise that this is particularly relevant for children who have SEND, are vulnerable and/or have a social worker.

Useful links:

[Education provision for SEND - Surrey County Council](#)

[Alternative Provision: Alternative Curriculum Pathways and Reintegration Support - Surrey County Council](#)

Training

Designated safeguarding lead

The designated safeguarding lead will attend regular training to prepare and assist them in leading GNSFC's safeguarding response and approach. Additional training or research may be required as local or school specific safeguarding issues arise. Minimally, the designated safeguarding lead will:

- On appointment, the DSL and DDSL will initially undertake Surrey DSL 'New to Role' with 'Refresher' training at least every two years as well as attending DSL network events, to refresh knowledge and skills.
- Stay up to date with safeguarding knowledge, resources and changes.

- Have a good understanding of, and form a good relationship with, the Surrey Safeguarding Children Partnership by attending the triannual DSL Network events, sharing the learning with staff as appropriate and making sure staff are aware of any safeguarding training on offer.
- Attend harmful sexual behaviour and Prevent awareness training.
- Receive and share safeguarding (including online safety) updates (for example, via email, e-bulletins, and staff meetings) with staff.
- Make sure staff have regularly updated safeguarding training, updating staff who miss training at the earliest opportunity.
- Gain an understanding of how GNSFC's filtering and monitoring systems work and how they can be best used to keep children safe at GNSFC.

Governors

All governors receive safeguarding and child protection training (including online safety) at induction, which prepares them for testing and challenging GNSFC's procedures and policies, making sure they are working as they should. The training will be regularly updated. Further:

- The governing body will make sure the designated safeguarding lead has the time and resources to attend training.
- The chair of governors will receive training about managing allegations against the headteacher to assist them in the eventuality that an allegation is made.
- The governing body will make sure that online safety is a theme in all staff training.
- Senior members of the board will make sure that those involved with the recruitment and employment of staff to work with children have received appropriate safer recruitment training.
- The link safeguarding governor will make sure that staff and governors attend safeguarding training at induction and regularly after that. The link safeguarding governor will attend regular training and receive e-bulletins or equivalent to stay up to date with the latest statutory guidance.

The governing body will make sure at least one member of every recruitment panel has completed safer recruitment training within the last five years. GNSFC has a separate Recruitment and Selection Policy that explains what safeguarding checks are completed before employment to make sure those who work with children are suitable.

Useful links:

[Check a teacher's record](#)

[Individuals prohibited from managing or governing schools](#)

All staff

Governors recognise the expertise that staff build up by managing safeguarding concerns on a daily basis and, as a result, have the opportunity to contribute to and shape staff training and this policy. All staff receive safeguarding and child protection training (including online safety) at induction. The training is regularly updated and reflects the whole school approach to keeping children safe. In addition, staff receive regular, at least annual, safeguarding updates (for example, via email, e-bulletins and staff meetings) to provide them with what they need to keep children safe.

Our training ensures that staff:

- Can spot the signs of possible abuse, neglect and exploitation.
- Know GNSFC's safeguarding procedures and their role in carrying them out.
- Have awareness of and understand their role in the early help process and the process for making a referral to the local authority's children's services, including what may follow after a referral.
- Know what to do if a child tells them they are being harmed, including how to manage this information confidentially.
- Understand the reasons why children may not feel ready or know how to tell someone that they are being harmed.
- Who have DSL responsibilities receive Prevent training, which will prepare them for identifying children at risk of being radicalised into terrorism and how to challenge extremist ideas.

- Understand what cyber security GNSFC has in place to keep children and staff safe when online at school and how to report any issues.
- Understand what ineffective filtering and monitoring systems look like and how to report any concerns or issues.
- Know that children who identify as or are perceived be lesbian, gay, bisexual or questioning their gender can be targeted by other children.
- Know what to do if they have concerns about a member of staff (including supply staff, trainee teachers, volunteers and contractors) posing a risk of harm to children.

We make sure that staff members provided by other agencies and third parties, for example supply teachers and contracted staff (such as catering staff) are aware of this policy, GNSFC's safeguarding procedures, and have received appropriate safeguarding training.

To ensure a high level of knowledge is maintained for all staff and governors:

- There is a safeguarding item in the weekly staff newsletter.
- Every team meeting includes an agenda item on safeguarding.
- There is an annual safeguarding update each September.
- All staff complete a safeguarding quiz and then meet with the DSL 6 weeks after their start date. The results of which inform the weekly updates and support for individuals who are less confident.

The headteacher will receive training about managing allegations against staff to assist them in the eventuality that an allegation is made.

The designated teacher for children who are looked after (CLA)

We follow the [Role and responsibilities of the designated teacher](#)'s statutory government guidance. The designated teacher will have training to make sure they understand the needs of children looked after/previously looked after and how they can best be supported to have the same opportunities as their peers. They will work closely with [Surrey Virtual School](#) accessing their training and forums to stay up to date.

Teaching and learning

At GNSFC, we aim to prevent our children from coming to any harm. We recognise how important it is that we teach and role-model to children how to keep themselves and others safe. Our curriculum meets the needs of all children, including those with SEND and/or have been abused. Details of our key person approach and our curriculum can be found on our website.

If specific safeguarding issues arise during GNSFC year, the headteacher will make sure the curriculum is adapted to cover current issues.

Useful links:

[Relationships Education, Relationships and Sex Education and Health Education guidance](#)
[Promoting children and young people's mental health and wellbeing - GOV.UK](#)
[Promoting Fundamental British Values as part of SMSC in schools](#) (guidance for maintained schools on promoting basic important British values as part of pupils' spiritual, moral, social and cultural (SMSC))
[SMSC requirements for independent schools](#) (guidance for independent schools on how they should support pupils' spiritual, moral, social and cultural development)
[PSHE: Relationships & Sex Education and Health Education Guidance](#)
[PSHE Drug Education Teaching and Learning Resource EYFS-KS5](#)
[Surrey Young People's Substance Misuse | Catch22](#)
[Teaching about relationships, sex and health - GOV.UK](#)

Linked policies

This policy is one of a range of documents that set out what our responsibilities are and how we should carry them out. Other relevant documents include the below policies.

- Allegations of abuse made against staff (incl. low level concerns) policy
- Attendance policy
- Complaints policy
- Curriculum document
- Ending bullying and harassment policy
- Equality, diversity and inclusion policy
- Health, safety and welfare policy
- ICT and internet acceptable use policy
- Intimate care policy
- Medical needs policy
- Promoting positive behaviour policy
- Recruitment and selection policy
- Staff code of conduct
- Whistleblowing policy

Appendix 1: Types of abuse and specific safeguarding concerns

These appendices are based on the Department for Education's KCSIE guidance.

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear or experience its effects. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children. Children may also cause harm to other family members, often referred to as child to parent or care giver abuse.

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

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

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving 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 penetration with an object) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education and all staff should be aware of it and of their school or college's policy and procedures for dealing with it.

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

We use the following guidance to help identify and address cases of neglect.

[Abuse & Neglect - Surrey Safeguarding Children Partnership](#)

[Graded Care Profile 2](#)

[Surrey Neglect Screening Tool](#)

[Surrey Safeguarding Children Partnership Procedures Manual Recognising Abuse and Neglect Handling Cases of Affluent Neglect in Schools](#)

Indicators of abuse

The following list, provided by the [NSPCC](#), covers some common indicators of abuse and neglect.

- unexplained changes in behaviour or personality
- becoming withdrawn
- seeming anxious
- becoming uncharacteristically aggressive
- lacks social skills and has few friends, if any
- poor bond or relationship with a parent
- knowledge of adult issues inappropriate for their age
- running away or going missing
- always choosing to wear clothes which completely cover their body
- patterns of repeated lateness or absence

It is important that staff report all of their concerns, however minor or insignificant they may think they are – they do not need ‘absolute proof’ that the child is at risk.

Specific safeguarding concerns

This section is based on Annex B of KCSIE. Annex B includes further information about other safeguarding issues to be aware of. **All concerns under this section should be addressed in line with the [What to do if you have concerns about a child’s welfare section](#) of this document, unless stated otherwise.**

Children absent from education

All staff will be aware that children missing from education or persistently absent, without explanation and/or for prolonged periods can act as a vital warning sign to a range of safeguarding issues including neglect, child sexual and child criminal exploitation - particularly county lines. Further, it may also indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of FGM, so called ‘honour’-based abuse or risk of forced marriage. We are also aware that absence can increase any existing safeguarding risks.

Attendance is closely monitored at GNSFC to support us in identifying abuse and acting early. Our staff will be aware of GNSFC’s unauthorised absence and children missing education procedures. We notify children’s services if a child who has a social worker is absent from school without a suitable explanation. To support GNSFC’s procedure for addressing children missing or absent from education, we make sure we have more than one emergency contact number for each child. We work in partnership with Surrey County Council Inclusion Service when patterns of absence give rise to concern, including notifying them when a child leaves GNSFC without a new school being named.

Our attendance policy and procedures are set out in a separate document, which is saved on the shared drive. GNSFC follows the government’s [Working together to improve school attendance](#) statutory guidance which sets out how schools must work with the local authority children’s services where school absence indicates safeguarding concerns.

Useful links:

[The Inclusion Service Resources Area \(Surrey Education Services\)](#)

[Inclusion Service - Pupils missing out on education \(PMOOE\) \(Surrey Education Services\)](#)

[Children Missing Education statutory government guidance](#)

[Surrey Safeguarding Children Partnership Procedures Manual Children Missing Education](#)

Anti-bullying

Our policy on anti-bullying is set out in our Ending Bullying and Harassment Policy which is saved on the shared drive and includes measures to prevent bullying (including cyberbullying, prejudice-based and discriminatory bullying).

We keep a record of known bullying incidents which is shared with and analysed by the Governing body. All staff are aware that children with SEND and/or children who identify as Lesbian, Gay, Bisexual, or questioning their gender, those from minority ethnic backgrounds, children open to children's services and children from low-income families are more susceptible to being bullied/victims of child abuse.

Risks can be compounded where children who have additional vulnerabilities lack a trusted adult with whom they can be open. It is therefore vital that staff endeavour to reduce the additional barriers faced and create a culture where they can speak out or share their concerns with members of staff.

Useful links:

[Surrey Safeguarding Children Partnership Procedures Manual Bullying](#)

[Behaviour in schools](#) (advice for schools, including advice for appropriate behaviour between pupils)

[Relationships Education, Relationships and Sex Education and Health Education guidance](#)

[Preventing bullying - GOV.UK](#)

[Guidance for schools on colleges on gender questioning children](#) (currently in draft, to be finalised)

Physical intervention

We acknowledge that staff must only ever use physical intervention as a last resort, when a child is at immediate risk of harming themselves or others, and that at all times it must be the minimal force necessary to prevent injury to another person. Such events should be fully recorded on CPOMS and DSLs alerted.

Staff understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection and/or disciplinary procedures.

We recognise that touch is often appropriate in the context of working with babies and children, and all staff have been given safe practice guidance to ensure they are clear about their professional boundaries.

Contextual safeguarding

Contextual safeguarding, also known as 'risk outside the home', is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships.

GNSFC will maintain records of concerns about contextual safeguarding in accordance with our safeguarding procedures. We know the importance of information sharing, therefore if we identify contextual safeguarding concerns about the local area we will share this information with relevant partners. If there is a specific concern about a child, we will consult with children's services.

Useful links:

[Tackling Child Exploitation multi-agency Practice Principles](#)

[Contextual Safeguarding Network webpages](#)

Child sexual exploitation (CSE) and child criminal exploitation (CCE)

We know that different forms of harm often overlap, and that perpetrators may subject children and young people to multiple forms of abuse, such as criminal exploitation (including financial exploitation and county lines) and sexual exploitation. In some cases, the exploitation or abuse will be in exchange for something the victim needs or wants (for example, money, gifts or affection), and/or will be to the financial benefit or other advantage, such as increased status, of the perpetrator or facilitator and/or through violence or the threat of violence.

Both can occur online. Children can be exploited by adult males or females, as individuals an organised network or gang, and the victim may identify as being part of this group. CCE and CSE can affect children both male and female and can include children who have been moved (trafficked). This may constitute modern slavery. They may also be exploited by other children, who themselves may be experiencing exploitation. Where this is the case, it is important that the child perpetrator is also recognised as a victim.

Our staff will be aware of a range of factors that could make a child more vulnerable to exploitation. We will provide additional support to children who have been exploited to help keep them in education.

Some of the following can be indicators of both child criminal and sexual exploitation where children:

- appear with unexplained gifts, money or new possessions
- associate with other children involved in exploitation
- suffer from changes in emotional well-being
- misuse alcohol and other drugs
- go missing for periods of time or regularly come home late
- regularly miss school or education or do not take part in education.

Child sexual exploitation (CSE)

CSE is a form of child sexual abuse which can affect any child. Sexual abuse may involve physical contact, including assault by penetration (for example, rape or penetration with an object) or non-penetrative 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, for example 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. This can be committed by an individual or an organised network. Most sexual abuse is committed by those previously known to the victim. Some children may not realise they are being exploited, for example believing they are in a genuine romantic relationship.

CSE can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence. Some additional specific indicators that may be present in CSE are children who:

- have older boyfriends or girlfriends
- suffer from sexually transmitted infections, display sexual behaviours beyond expected sexual development
- become pregnant.

See the **Sharing nudes and semi-nudes** section below for details about 'sextortion'.

Child criminal exploitation (CCE)

At GNSFC, we recognise children involved in CCE are victims, despite their engagement in crime. A child may have been criminally exploited even if the activity appears to be consensual. Staff will be aware that girls are at risk of criminal exploitation as well as boys, and that both boys and girls who are being criminally exploited may be at higher risk of sexual exploitation.

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. CCE can include children being forced and/or manipulated:

- to work in cannabis factories.
- into moving drugs or money across the country (county lines).
- to shoplift or pickpocket.
- to threaten serious violence to others.
- into committing vehicle crime.

Useful links:

[Surrey Safeguarding Children Partnership Procedures Manual Child Sexual Exploitation](#)
[Surrey Safeguarding Children Partnership Procedures Manual Child Sexual Abuse in the Family Environment](#)
[Surrey Safeguarding Children Partnership Procedures Manual Child Criminal Exploitation](#)
[Crime - Surrey Safeguarding Children Partnership](#)
[Child sexual exploitation - Surrey County Council](#)
[Child sexual exploitation | Surrey Police](#)
[CEOP Safety Centre](#)
[Home | CSA Centre](#)
[Centre of expertise on child sexual abuse](#)
[Preventing Child Sexual Exploitation](#)
[Lucy Faithfull Foundation webpages](#)
[Child sexual exploitation: definition and guide for practitioners](#)

Serious violence

Staff at GNSFC will be aware that serious violence may involve physical assault, carrying, threatening with, or using weapons, often in the context of peer conflict or bullying and can also be associated with criminal exploitation.

Staff will report any concerns about a child carrying or using a weapon (or expressing intent to do so) to the DSL or DDSL.

Staff will be aware of the indicators, which may signal children are at risk from, or are involved in serious violence.

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.
- 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 are aware of the range of risk factors increasing the likelihood of involvement in serious violence, such as:

- being male.
- having been suspended, spent time in Alternative Provision or permanently excluded from school.
- having experienced child maltreatment.
- having been involved in offending, such as theft or robbery.

Being the victim of, carrying out or allegedly carrying out serious violence (e.g. knife crime) may indicate that a child is involved in county lines.

Useful links:

[Home Office – Serious Violence Strategy, April 2018](#)
[Homepage - Surrey Safeguarding Children Partnership](#)
[Crime - Surrey Safeguarding Children Partnership](#)
[Preventing youth violence and gang involvement government guidance](#)
[Criminal exploitation of children and vulnerable adults: county lines government guidance](#)
[Child exploitation | Catch22](#)
[Keeping kids safe - Children's Commissioner for England | Children's Commissioner for England](#)

Children who run away or go missing from education, home or care

GNSFC recognises that children who run away, go missing or are absent from education and their normal residence are potentially vulnerable to abuse, exploitation, offending and placing themselves in situations where they may suffer physical harm. The statutory guidance [Children Who Run Away or go Missing from Home or Care](#) requires that every child or young person who runs away or goes missing must be offered a return home interview (RHI) within 72 hours of their return.

Useful links:

[Multi agency risk assessment conferences | Healthy Surrey](#)

Mental health

With mental health problems, a child might find the ways they are frequently thinking, feeling or reacting becoming difficult, or even impossible, to cope with. Mental health problems affect around 1 in 6 children. GNSFC recognises that mental health problems can, in some cases, develop into safeguarding concerns. This could include self-harm, suicidal ideation or risk of suicide. They could also be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

Staff will be trained to recognise the signs of a child who may be experiencing a mental health problem. If a child is struggling with their mental health, self-harming, has an eating disorder or is experiencing suicidal ideation and making plans to end their life, there are likely to be potential warning signs. These could include:

- significant changes in behaviour
- ongoing difficulty sleeping
- withdrawing from social situations
- not wanting to do things they usually like
- physical signs of self-harm or neglecting themselves.

GNSFC aims to promote positive mental health for all staff and children. To do so, we take into account the government's [Mental health and behaviour in schools guidance](#). We will ensure early targeted support is provided and liaise with/refer to specialist services where needed. The DSL will consider whether to inform parents/carers to support the child's wellbeing, where doing so would not place the child at additional risk.

Our mental health lead is: Tess Dean.

Useful Links:

[Mind](#)

[Mindworks Surrey](#)

[NSPCC: Child mental health](#)

[Homepage - Surrey Safeguarding Children Partnership](#)

[Mental health and behaviour in schools - GOV.UK](#)

[Promoting Children and Young People's Emotional Health and Wellbeing GOV.UK](#)

[Better Health Every Mind Matters | Campaigns | Campaign Resource Centre](#)

Domestic abuse

Domestic abuse can include a wide range of behaviours and may be a single or pattern of incidents. This form of abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional, and includes coercive or controlling behaviour. It can take place inside and outside the home. The [Domestic Abuse Act 2021](#) states that 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 including physical, sexual, emotional abuse and stalking).

These experiences can have a serious and long-term impact on a child's health, 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. The Act states that domestic abuse occurs between at least two people over the

age of 16. Therefore, legally, some older children can also commit domestic abuse either in their own intimate relationships or against their parents.

GNSFC has signed up to the police initiative [Operation Encompass](#), a scheme between Surrey Police, Surrey Domestic Abuse Service and Surrey schools. The system ensures that when the police are called to an incident of domestic abuse, where there are children in the household who have experienced the domestic incident, the police will inform the DSL in GNSFC before the child or children arrive at GNSFC the following day. This ensures that GNSFC has up to date relevant information about the child's circumstances and can enable immediate support to be put in place, according to the child's needs.

Useful links:

[Surrey Safeguarding Children Partnership Procedures Manual - Domestic Abuse](#)

[Homepage - Surrey Safeguarding Children Partnership](#)

[Surrey Against Domestic Abuse Strategy 2024-2029 | Healthy Surrey](#)

[Multi agency risk assessment conferences | Healthy Surrey](#)

[Request information under Clare's Law: Make a Domestic Violence Disclosure Scheme \(DVDS\) application | Surrey Police](#)

[NSPCC-UK domestic abuse Signs Symptoms Effects](#)

[Refuge what is domestic abuse/effects of domestic abuse on children](#)

[Safe Young Lives | Young people & domestic abuse - SafeLives](#)

[Domestic abuse: specialist sources of support - GOV.UK](#) (includes information for adult victims, young people facing abuse in their own relationships and parents experiencing child to parent violence/abuse)

Homelessness

GNSFC recognises that being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The DSL is aware of contact details and referral routes into the Local Housing Authority so they can raise/progress concerns at the earliest opportunity.

Indicators that a family may be at risk of homelessness include household debt, including new poverty induced by the pandemic; rent arrears; domestic abuse and antisocial behaviour; and/or the family being asked to leave a property. If a child has been harmed or is at risk of harm, a referral to children's social care will be made.

Useful links:

[Homelessness Reduction Act Factsheets - GOV.UK](#)

Child-on-child abuse (including harassment and violence)

We recognise that children can abuse other children, often referred to as child-on-child abuse. It can happen inside and outside school and online. This can include, but is not limited to:

- bullying (including online bullying, prejudice-based and discriminatory bullying).
- discriminatory behaviour (including racism, faith-targeted abuse, and other prejudice-based incidents)
- abuse between children in an intimate relationship.
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (including when a child encourages or threatens physical abuse online).
- physical assault and harm, or the threat of harm with a weapon
- sexual violence, such as rape, assault by penetration and sexual assault (including when a child encourages or threatens this online).
- harmful sexual behaviour, sexual violence and sexual harassment – which may include misogyny/misandry.
- sexual harassment, such as sexual comments, jokes and online sexual harassment.
- consensual and non-consensual making or sharing of nudes and semi-nudes, including those generated using AI.
- 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.

- upskirting and initiation/hazing type violence and rituals.

Older children may use any type of child-on-child abuse to 'recruit' younger children into gangs, especially in areas where gangs are prevalent. Young people experiencing child sexual exploitation first hand may be forced to 'recruit' other young people using types of child-on-child abuse. We are aware that boys are more likely to carry out child-on-child abuse and girls are more likely to be impacted by it, but all child-on-child abuse is unacceptable and will be taken seriously.

GNSFC does not tolerate child-on-child abuse. We know that even when there are no reported cases, it could still be happening but yet to be reported. We do not downplay child-on-child abuse, especially sexual violence and sexual harassment, as "just banter", "just having a laugh", "part of growing up" or "boys being boys" as this can lead to a culture of unacceptable behaviour, misogyny and an unsafe environment for children. For children to feel safe at GNSFC, we make sure they know child-on-child abuse is not acceptable behaviour and how to report it to a trusted adult if they are experiencing or witnessing it.

All staff are aware that child-on-child abuse is a safeguarding issue for both the victim and alleged perpetrator. Child-on-child abuse is preventable, and staff know how to recognise behaviours and indicators of risk early and that timely, evidence-based support can be key to preventing children from going on to commit abuse or violence.

It is our duty to minimise the risk of child-on-child abuse. We do this in the following ways:

- Our staff read this policy.
- Our staff are trained to spot the signs that a child is, or may be experiencing, child-on-child abuse and how to report it. They maintain an attitude that 'it could happen here'.
- Our staff challenge any inappropriate behaviour between children, including the use of derogatory language.
- The behaviour policy, which includes our whole school response to abuse, makes sure everyone knows how to behave and how to respond consistently when children show unacceptable or abusive behaviour.
- In all areas of school life, we teach children how to act and to treat other people, including when they are online.
- We have effective systems in place for children and their parents to report child-on-child incidents.

Child-on-child sexual harassment and sexual violence

GNSFC is aware of Ofsted's [Review of sexual abuse in schools and colleges](#). The review was carried out as a result of the large amount of testimonies shared on the [Everyone's Invited](#) website, which highlighted the prevalence of sexual harassment and sexual violence.

GNSFC takes a zero-tolerance approach to sexual harassment and sexual violence.

We know that harmful sexual behaviour (HSB), sexual harassment and sexual violence can happen between two children of any age or sex, from a group of children to a single child or group of children, online and face to face. It is more likely that girls will be impacted by sexual harassment and sexual violence and more likely it will be perpetrated by boys. HSB exists on a continuum and may escalate into sexual harassment or sexual violence. They are never acceptable, and we will not tolerate them. National and local research has made us aware of the prevalence and normalisation of harassment and abuse in school-aged children. No reports do not mean it is not happening here at GNSFC.

Alongside girls, these groups are at higher risk of sexual harassment and sexual violence:

- children with SEND.
- children who are lesbian, gay, bisexual or questioning their gender or who are perceived to be lesbian, gay, bisexual or questioning their gender by their peers.

Children who are victims of sexual harassment and sexual violence will likely find the experience stressful and distressing. This will, in all likelihood, negatively affect their educational attainment and be worsened if the alleged perpetrator(s) attends the same school. If a child reports an incident, they will be reassured that

they have done the right thing by telling a trusted adult, will be taken seriously, supported and kept safe. We will further reassure those affected that the law is there to protect them, not criminalise them.

We are aware that when a child reports sexual violence or harassment, this may only be the start of a larger disclosure that could transpire over time. When there are reports, we will always consider the effectiveness of our policies and procedures and whether any changes are necessary to reduce the risk of it happening again. This will be in line with GNSFC maintaining a culture of safeguarding. GNSFC follows Part 5 of KCSIE when considering our response to sexual violence and sexual harassment. These are mainly captured in the child-on-child abuse section of this policy.

Harmful sexual behaviour (HSB)

Children's sexual behaviours exist on a continuum. HSB refers to problematic, abusive and violent sexual behaviours that are developmentally inappropriate and may cause developmental damage. HSB can occur online or face-to-face. We will always consider HSB in a child protection context. GNSFC recognises that children displaying harmful sexual behaviours have often experienced their own abuse and trauma and they will be offered appropriate support.

When considering HSB, we will take into account the ages and the stages of development of the children. Sexual behaviour between children can be considered harmful if one of the children is much older, particularly if there is more than two years' difference in age, or if one of the children is pre-pubescent and the other is not. However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature.

Our DSL and deputy will:

- have a good understanding of HSB.
- assist in planning the curriculum aimed at preventing HSB.
- ensure staff spot and report inappropriate behaviour to prevent an escalation.
- incorporate our approach to sexual harassment and sexual violence into the whole school approach to safeguarding.

GNSFC's curriculum addresses these issues via the following topics according to the age and stage of development of our children:

- healthy and respectful relationships
- what respectful behaviour looks like
- gender roles, stereotyping, equality
- body confidence and self-esteem
- consent

Useful links:

[Responding to children who display sexualised behaviour](#)

[Sexual development and behaviour in children | NSPCC Learning](#)

[Surrey Safeguarding Children Partnership Procedures Manual- Harmful Sexual Behaviour](#)

[NSPCC Harmful Sexual Behaviours](#)

[Stop it Now](#)

[Shore Space](#)

Upskirting

GNSFC will ensure that all staff and families are aware that 'upskirting' is a criminal offence and will not be tolerated. The Criminal Prosecution Service (CPS) defines 'upskirting' as: "a colloquial term referring to the action of placing equipment such as a camera or mobile phone beneath a person's clothing to take a voyeuristic photograph without their permission".

GNSFC will decide each incident on a case-by-case basis, with the DSL or a deputy taking a leading role and using their professional judgement, supported by other agencies, such as children's social care and the police, as required.

Sharing nudes and semi-nudes

This is defined as the sending or posting of nudes or semi-nudes images, videos or live streams online by young people under the age of 18 ([UKCIS, 2024](#)). It is a form of child sexual abuse. All incidents will be dealt with as safeguarding concerns. The primary concern at all times will be the welfare and protection of the children involved. While sharing nudes and semi-nudes of themselves or their peers breaks the law, we know it is important to avoid criminalising young people unnecessarily.

Children might share nudes because of threats and/or pressures from relationships. They might also want to send nudes, but this is usually because they believe they will get something in return. Sextortion is when someone threatens to share or distribute nudes or semi-nudes images of another person if they do not do what is asked. It can happen to anybody, but a large amount of cases involve teenage boys. The explicit imagery may be used to blackmail the young person into sending more images, money, or in some cases, into recruiting more victims. Images can be both real or generated by artificial intelligence.

We are aware of the [alert guidance](#) and support provided by the National Crime Agency and CEOP, and will use it to respond to incidents.

So-called 'honour'-based abuse, including FGM and forced marriage

So-called 'honour'-based abuse (HBA) means 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. We are aware this abuse often involves a wider network of family or community pressure and can include multiple perpetrators. Therefore, we will consult with children's services before taking any form of action to reduce the dynamic and additional risk factors that might be present as a result.

Female genital mutilation (FGM)

Female genital mutilation (FGM) means all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. The DSL will make sure that staff have appropriate training to prepare them for spotting signs that a child has been affected by FGM or is at risk of FGM.

What to do if you have concerns about a child's welfare section of this policy sets out the procedures to be followed if a staff member discovers that an act of FGM has been carried out or suspects that a child is at risk of FGM.

Signs that FGM might happen:

- A relative or someone known as a 'cutter' visiting from abroad.
- A special occasion or ceremony takes place where a girl 'becomes a woman' or is 'prepared for marriage'.
- A female relative, like a mother, sister or aunt has undergone FGM.
- A family arranges a long holiday overseas or visits a family abroad during the summer holidays.
- A girl has an unexpected or long absence from school.
- A girl struggles to keep up in school.
- A girl runs away – or plans to run away - from home (NSPCC).

Signs FGM might have taken place:

- having difficulty walking, standing or sitting.
- spending longer in the bathroom or toilet.
- appearing quiet, anxious or depressed.
- acting differently after an absence from school or college.

- reluctance to go to the doctors or have routine medical examinations.
- asking for help – though they might not be explicit about the problem because they are scared or embarrassed ([NSPCC](#)).

Useful information:

[Female Genital Mutilation Statutory Guidance](#)

[Surrey Safeguarding Children Partnership Procedures Manual Female Genital Mutilation](#)

Forced marriage

A forced marriage is non-consensual. Either person could be forced/pressured in several ways, including physically, psychologically, financially, sexually and emotionally. It is a criminal offence in England and Wales.

An arranged marriage is different. The families of both spouses take a leading role in arranging the marriage, but the choice of whether or not to accept the arrangement remains with those who are considered for marriage.

We are aware that the legal age for marriage in the UK has risen to 18, regardless of parental consent. The DSL will follow the local safeguarding procedure and, if necessary, seek advice from the Forced Marriage Unit on 020 7008 0151 if a concern comes to their attention.

Useful information:

[Freedom charity](#)

[Handling cases of forced marriage guidance](#)

[National FGM Centre](#)

[Forced marriage](#)

[Karma Nirvana](#)

One chance rule

All staff are aware of the 'One Chance' Rule' in relation to forced marriage, FGM and HBA. Staff recognise they may only have one chance' to speak to a child who is a potential victim and have just one chance to save a life.

GNSFC is aware that if the victim is not offered support following disclosure that the 'One Chance' opportunity may be lost. Therefore, all staff are aware of their responsibilities and obligations when they become aware of potential forced marriage, FGM and HBA cases.

Modern slavery

Modern slavery is a crime whereby a person uses another person, by means of deception or coercion, as a possession for the purposes of exploitation. We are aware modern slavery exists in the UK and that some victims are children.

Common places modern slavery occurs includes:

- The sex industry, including brothels.
- Retail: nail bars, hand car washes.
- Factories: food packing.
- Hospitality: fast-food outlets.
- Agriculture: fruit picking.
- Domestic labour: cooking, cleaning and childminding.

Victims can be forced into criminal activities such as cannabis production, theft or begging.

The DSL will seek advice and support from children's services who may in turn make a referral to the National Crime Agency via the National Referral Mechanism (NRM). Further advice can be provided directly by the modern slavery helpline on 0800 012 1700.

Useful links:

[Crime - Surrey Safeguarding Children Partnership](#)

[Modern slavery - GOV.UK](#)

[Modern slavery: how to identify and support victims](#)

[Behind the Behaviour: Identifying the criminal exploitation of migrant children | ECPAT UK](#)

[Protecting children from trafficking and modern slavery | NSPCC Learning](#)

[Surrey Safeguarding Children Partnership Procedures Manual Children from Abroad, including Victims of Modern Slavery, Trafficking and Exploitation](#)

Private fostering

Definition: A privately fostered child is a child under 16 (or 18 if disabled) who is cared for by an adult who is not a parent, grandparent, aunt, uncle, step parent (including civil partnerships), sister or brother where the child is to be cared for in that person's home for 28 days or more.

A child who is looked after or placed in any residential home, hospital or school (where they are receiving full-time education) is excluded from the definition. In a private fostering arrangement, the parent retains parental responsibility.

However, children under 16 who spend more than 2 weeks in residence during holiday time in a school, become privately fostered children for the purposes of the legislation during that holiday period. See also Schedule 8 (para 9) Children Act 1989.

A private fostering arrangement occurs when someone other than a parent or close relative cares for a child for a period of 28 days or more, (as per section 66(1)(a) and (b) of the Children Act 1989) with the agreement of the child's parents. It applies to children under the age of 16 years old or 18 years old if the child is disabled.

Looked After Children by the local authority or those who are placed in residential settings, children's homes or hospitals are not considered to be privately fostered.

Private fostering occurs in all cultures and children may be privately fostered at any age.

GNSFC recognises that most privately fostered children remain safe and well but are aware that safeguarding concerns have been raised in some cases. Therefore, all staff are alert to possible safeguarding issues, including the possibility that the child has been trafficked into the country.

GNSFC is aware that, by law, a parent or other persons involved in making a private fostering arrangement must notify children's services as soon as possible. We have a duty to inform children's services of this arrangement if they have not been notified, but we will encourage parents and private foster carers to do so in the first instance. Where a member of staff becomes aware that a child may be in a private fostering arrangement, they will raise this with the DSL and the DSL will notify the C-SPA immediately.

Useful links:

[Surrey Children's Services Procedure Manual Private Fostering](#)

[A5-Private-Fostering-leaflet.pdf](#)

Preventing radicalisation and extremism

While some children are more susceptible, any child can be radicalised into terrorism. We take our [statutory duty](#) to prevent children from becoming terrorists or supporting terrorism seriously.

Radicalisation is the process of a person legitimising support for, or use of, terrorist violence. It can occur over a period of time or quickly.

Extremism is vocal or active opposition to fundamental British values, such as democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs. This includes calling for the death of members of the armed forces.

Terrorism is an action that:

- endangers or causes serious violence to a person/people
- causes serious damage to property, or
- seriously interferes or disrupts an electronic system.

The use or threat of terrorism must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

To prevent children from being radicalised into terrorism, we make sure:

- Our filtering and monitoring systems will prevent and protect children from accessing extremist material.
- Children are taught about British Values and staying safe online via the curriculum.
- Children are provided with a safe space to discuss controversial issues and the skills they need to challenge extremist views.
- Staff are trained to spot the indicators of radicalisation and extremism and how to report concerns as soon as possible.
- The DSL attends Prevent awareness training and is aware of the latest guidance.
- We consider how our learners or staff may be at risk of being radicalised into terrorism (including online).

The [Educate against hate](#) government website lists signs that could indicate that a child is being radicalised:

- becoming increasingly argumentative
- refusing to listen to different points of view
- unwilling to engage with children who are different
- becoming abusive to children who are different
- embracing conspiracy theories
- feeling persecuted
- changing friends and appearance
- distancing themselves from old friends
- no longer doing things they used to enjoy
- converting to a new religion
- being secretive and reluctant to discuss their whereabouts
- changing online identity
- having more than one online identity
- spending a lot of time online or on the phone
- accessing extremist online content
- joining or trying to join an extremist organisation.

If you have concerns that a child may be at risk of radicalisation or involvement in terrorism, go to **Concerns about extremism and radicalisation** section of this policy.

Useful links:

[Crime - Surrey Safeguarding Children Partnership](#)
[Prevent | Healthy Surrey](#)
[For Professionals - Prevent and Channel | Healthy Surrey](#)
[Protecting children from radicalisation: the prevent duty](#)
[Advice For Families | Counter Terrorism Policing](#)

Child abuse linked to faith or belief

This type of abuse can happen anywhere across any community and/or religion. There are a variety of definitions associated with abuse linked to faith or belief. It can include, but is not limited to, the concept of belief in:

- Witchcraft and spirit possession, demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs).
- The evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context).
- Ritual or multi-murders where the killing of children is believed to bring supernatural benefits or the use of their body parts is believed to produce potent magical remedies.
- Use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation.

If you suspect a case of child abuse linked to faith or belief, follow the safeguarding procedures in this policy. In addition, the Metropolitan Police's specialised Project Violet team can be contacted on the non-emergency, 24/7 number: 101.

Useful links:

[Child abuse linked to faith or belief | Surrey Police](#)

[Short YouTube introduction video](#)

Fabricated or induced illnesses

Staff at GNSFC are alert to the issues surrounding fabricated or induced illnesses.

Fabricated or induced illness (FII) is a rare form of child abuse. It happens when a parent or carer, usually the child's biological mother, exaggerates or deliberately causes symptoms of illness in the child. Our Medical Needs Policy details our procedure for ensuring reported medical needs are evidenced by medical professionals.

Useful link:

[The Royal College of Paediatrics and Child Health \(RCPCH\) guidance](#)

Appendix 2: Indicators of abuse

Neglect

The nature of neglect

Neglect is a lack of parental care but poverty and lack of information or adequate services can be contributory factors.

Far more children are registered to the category of neglect on Child in Need and Child Protection plans than to the other categories. As with abuse, the number of children experiencing neglect is likely to be much higher than the numbers on the plans.

Neglect can include parents or carers failing to:

- provide adequate food, clothing and shelter
- protect a child from physical and emotional harm or danger
- ensure adequate supervision or stimulation
- ensure access to appropriate medical care or treatment
- Failure to bring the child to school
- Regular lateness

NSPCC research has highlighted the following examples of the neglect of children under 12 years old:

- frequently going hungry
- frequently having to go to school in dirty clothes
- regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse
- being abandoned or deserted
- living at home in dangerous physical conditions
- not being taken to the doctor when ill
- not receiving dental care.

Neglect is a difficult form of abuse to recognise and is often seen as less serious than other categories. This is not the case, it is very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group.

Neglect is often noticed at a stage when it does not pose a risk to the child. The duty to safeguard and promote the welfare of children (What to do if You're Worried a Child is Being Abused DfE 2015) would suggest that an appropriate intervention or conversation at this early stage can address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm or in significant need.

Neglect is often linked to other forms of abuse, so any concerns should be discussed with the DSL.

Indicators of neglect

The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm.

It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don't keep it to yourself. The Neglect Risk Assessment Tool provides staff with a resource to identify and act on concerns regarding neglect.

Surrey County Council also recommend the use of the Graded Care Profile 2 (GCP2) to support staff in measuring the quality of care a child is receiving and identifying neglect. Members of the family centre team are trained to use this tool.

Physical indicators of neglect

- Constant hunger and stealing food
- Poor personal hygiene - unkempt, dirty or smelly
- Underweight
- Dress unsuitable for weather
- Poor state of clothing
- Illness or injury untreated

Behavioural indicators of neglect

- Constant tiredness
- Frequent absence from school or lateness
- Missing medical appointments
- Isolated among peers
- Frequently unsupervised
- Stealing or scavenging, especially food
- Destructive tendencies

Emotional abuse

The nature of emotional abuse

- Most harm is produced in low warmth, high criticism homes, not from single incidents.
- Emotional abuse is difficult to define, identify/recognise and/or prove.
- Emotional abuse is chronic and cumulative and has a long-term impact.
- All kinds of abuse and neglect have emotional effects although emotional abuse can occur by itself.
- Children can be harmed by witnessing someone harming another person – as in domestic abuse.

It is sometimes possible to spot emotionally abusive behaviour from parents and carers to their children, by the way that the adults are speaking to, or behaving towards children. An appropriate challenge or intervention could affect positive change and prevent more intensive work being carried out later on.

Indicators of emotional abuse

Developmental issues

- Delays in physical, mental and emotional development
- Poor school performance
- Speech disorders, particularly sudden disorders or changes.

Behaviour

- Acceptance of punishment which appears excessive
- Over-reaction to mistakes
- Continual self-deprecation (I'm stupid, ugly, worthless etc)
- Neurotic behaviour (such as rocking, hair-twisting, thumb-sucking)
- Self-mutilation
- Suicide attempts
- Drug/solvent abuse
- Running away
- Compulsive stealing, scavenging
- Acting out
- Poor trust in significant adults
- Regressive behaviour – e.g., wetting
- Eating disorders
- Destructive tendencies
- Neurotic behaviour
- Arriving early at school, leaving late

Social issues

- Withdrawal from physical contact
- Withdrawal from social interaction
- Over-compliant behaviour
- Insecure, clinging behaviour
- Poor social relationships

Emotional responses

- Extreme fear of new situations
- Inappropriate emotional responses to painful situations (“I deserve this”)
- Fear of parents being contacted
- Self-disgust
- Low self-esteem
- Unusually fearful with adults
- Lack of concentration, restlessness, aimlessness
- Extremes of passivity or aggression

Physical abuse

The nature of physical abuse

Most children collect cuts and bruises quite routinely as part of the rough and tumble of daily life. Clearly, it is not necessary to be concerned about most of these minor injuries. But accidental injuries normally occur on the bony prominences – e.g. knees, shins.

Injuries on the soft areas of the body are more likely to be inflicted intentionally and should therefore make us more alert to other concerning factors that may be present.

A body map can assist in the clear recording and reporting of physical abuse. The body map should only be used to record observed injuries and no child should be asked to remove clothing by a member of staff.

Indicators of physical abuse / factors that should increase concern

- Multiple bruising or bruises and scratches (especially on the head and face)
- Clusters of bruises – e.g., fingertip bruising (caused by being grasped)
- Bruises around the neck and behind the ears – the most common abusive injuries are to the head
- Bruises on the back, chest, buttocks, or on the inside of the thighs
- Marks indicating injury by an instrument – e.g., linear bruising (stick), parallel bruising (belt), marks of a buckle
- Bite marks
- Deliberate burning may also be indicated by the pattern of an instrument or object – e.g., electric fire, cooker, cigarette
- Scalds with upward splash marks or tide marks
- Untreated injuries
- Recurrent injuries or burns
- Bald patches.

In the context of GNSFC, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:

- the explanation given does not match the injury
- the explanation uses words or phrases that do not match the vocabulary of the child (adults words)
- no explanation is forthcoming
- the child (or the parent/carer) is secretive or evasive
- the injury is accompanied by allegations of abuse or assault

You should be concerned if a child:

- is reluctant to have parents/carers contacted
- runs away or shows fear of going home
- is aggressive towards themselves or others
- flinches when approached or touched
- is reluctant to undress to change clothing for sport
- wears long sleeves during hot weather
- is unnaturally compliant in the presence of parents/carers
- has a fear of medical help or attention
- admits to a punishment that appears excessive.

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 an non-mobile 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 shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or 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 their 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 discolouration over a bone or 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 the body, may suggest abuse.

Sexual abuse

The nature of sexual abuse

Sexual abuse is often perpetrated by people who are known and trusted by the child – e.g., relatives, family friends, neighbours, babysitters, and people working with the child in GNSFC, faith settings, clubs or activities. Children can also be subject to child sexual exploitation.

Sexual exploitation is seen as a separate category of sexual abuse. The SCCP Screening Tool and guidance provides staff with information regarding indicators of CSE.

Characteristics of child sexual abuse:

- it is often planned and systematic – people do not sexually abuse children by accident, though sexual abuse can be opportunistic
- grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent (this may occur online)
- grooming the child's environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Most people who sexually abuse children are men, but some women sexually abuse too.

Indicators of sexual abuse

Physical observations:

- Damage to genitalia, anus or mouth
- Sexually transmitted diseases
- Unexpected pregnancy, especially in very young girls
- Soreness in genital area, anus or mouth and other medical problems such as chronic itching
- Unexplained recurrent urinary tract infections and discharges or abdominal pain

Behavioural observations:

- Sexual knowledge inappropriate for age
- Sexualised behaviour or affection inappropriate for age
- Sexually inappropriate behaviour
- Hinting at sexual activity
- Inexplicable decline in education progress
- Depression or other sudden apparent changes in personality such as becoming insecure
- Lack of concentration, restlessness, aimlessness
- Socially isolated or withdrawn
- Overly-compliant behaviour
- Acting out, aggressive behaviour
- Poor trust or fear concerning significant adults
- Regressive behaviour
- Onset of wetting, by day or night; nightmares
- Arriving early at school, leaving late, running away from home

- Suicide attempts, self-mutilation,
- Suddenly drawing sexually explicit pictures
- Eating disorders or sudden loss of appetite or compulsive eating
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Becomes worried about clothing being removed
- Trying to be 'ultra-good' or perfect; overreacting to criticism.

Mental health

We are aware that 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 will attempt to make a diagnosis of a mental health problem. 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.

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.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following the child protection policy and speaking to the designated safeguarding lead or a deputy.

Sharing nudes and semi-nudes images and/or videos

The practice of children sharing images and videos via text message, email, social media or mobile messaging apps has become commonplace. However, this online technology has also given children the opportunity to produce and distribute sexual imagery in the form of photos and videos. Such imagery involving anyone under the age of 18 is unlawful.

Sharing nudes/semi-nudes refers to both images and videos where:

- A person under the age of 18 creates and shares sexual imagery of themselves with a peer under the age of 18.
- A person under the age of 18 shares sexual imagery created by another person under the age of 18 with a peer under the age of 18 or an adult.
- A person under the age of 18 is in possession of sexual imagery created by another person under the age of 18.

All incidents of this nature should be treated as a safeguarding concern and in line with the UKCCIS guidance '[Sharing nudes and semi-nudes advice for education settings](#)'.

Cases where sexual imagery of people under 18 has been shared by adults and where sexual imagery of a person of any age has been shared by an adult to a child is child sexual abuse and should be responded to.

If a member of staff becomes aware of an incident involving making or sharing nudes/semi-nudes they should follow the child protection procedures and refer to the DSL immediately.

The member of staff should confiscate the device involved and set it to flight mode or, if this is not possible, turn it off. Staff must not view, copy or print the youth produced sexual imagery.

The DSL should hold an initial review meeting with appropriate staff and subsequent interviews with the children involved (if appropriate).

Parents should be informed at an early stage and involved in the process unless there is reason to believe that involving parents would put the child at risk of harm.

At any point in the process if there is concern a young person has been harmed or is at risk of harm a referral should be made to the SPA or the Police as appropriate.

Immediate referral at the initial review stage should be made to Children's Social Care/Police if:

- The incident involves an adult.
- There is good reason to believe that a young person has been coerced, blackmailed or groomed or if there are concerns about their capacity to consent (for example, owing to special education needs).
- What you know about the imagery suggests the content depicts sexual acts which are unusual for the child's development stage or are violent.
- The imagery involves sexual acts.
- The imagery involves anyone aged 12 or under.
- There is reason to believe a child is at immediate risk of harm owing to the sharing of the imagery, for example the child is presenting as suicidal or self-harming.

If none of the above apply then the DSL will use their professional judgement to assess the risk to children involved and may decide, with input from the Headteacher, to respond to the incident without referral to the C-SPA or the Police.

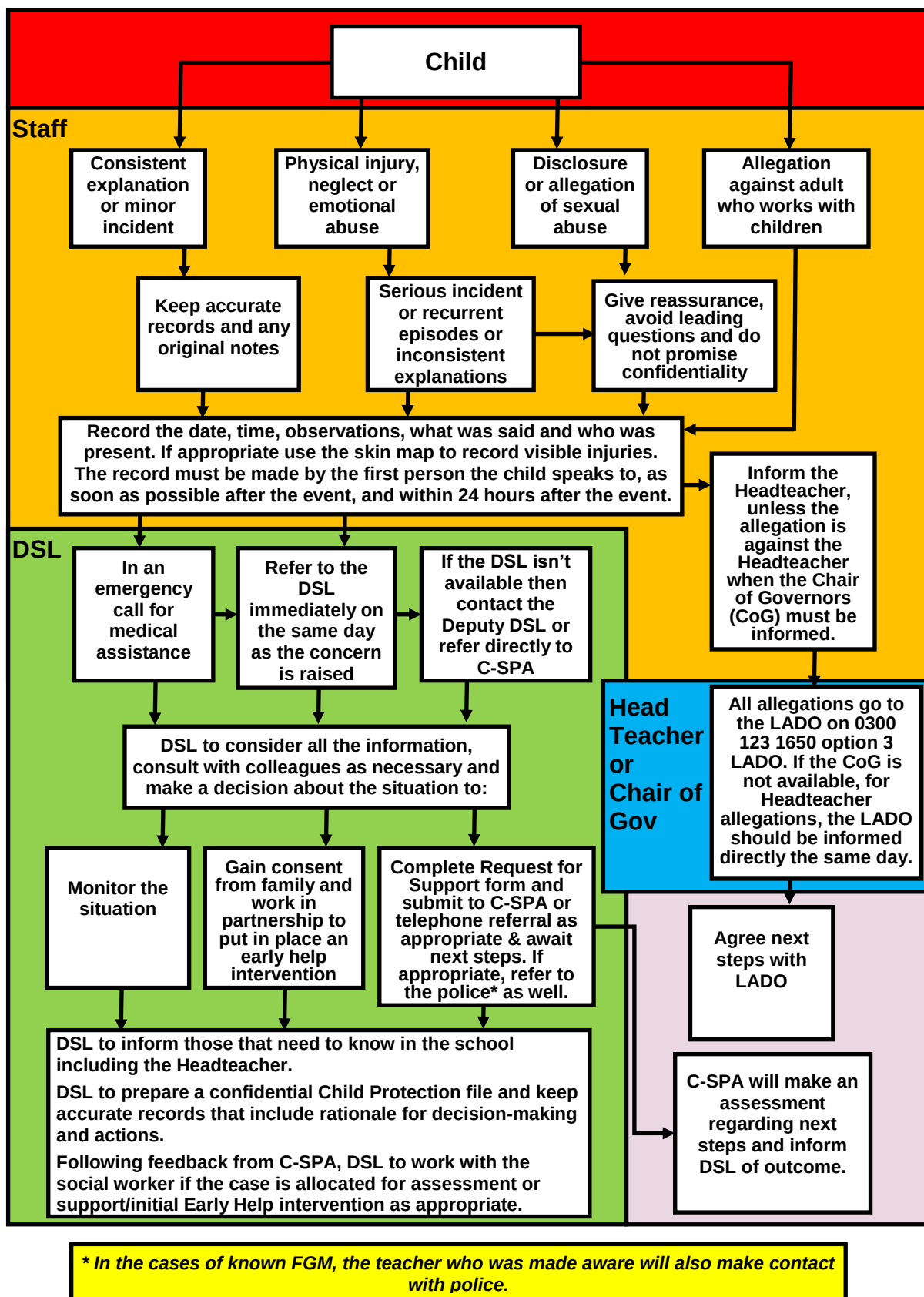
During the decision making the DSL will consider if:

- There is a significant age difference between the sender/receiver.
- There is any coercion or encouragement beyond the sender/receiver.
- The imagery was shared and received with the knowledge of the child in the imagery.
- The child is vulnerable, for example subject to Child in Need, Child Protection or Early Help plans, Looked After, SEND.
- There is a significant impact on the children involved.
- The image is of a severe or extreme nature.
- The child involved understands consent.
- The situation is isolated or if the image been more widely distributed.
- There other circumstances relating to either the sender or recipient that may add cause for concern.
- The children have been involved in incidents relating to youth produced imagery before.

If any of these circumstances are present the situation will be referred according to our child protection procedures, including referral to the C-SPA or the Police.

The DSL will record all incidents of youth produced sexual imagery, including the actions taken, rationale for actions and the outcome.

Appendix 3: Flowchart of actions to take



Appendix 4: Children who may need additional safeguarding support

Children who need a social worker (Child in Need and Child Protection Plans)

Children may need a social worker due to safeguarding or welfare needs. Children may need this help due to abuse, neglect and complex family circumstances. A child's experiences of adversity and trauma can leave them vulnerable to further harm, as well as educationally disadvantaged in facing barriers to attendance, learning, behaviour and mental health.

Local authorities should share the fact a child has a social worker, and the designated safeguarding lead should hold and use this information so that decisions can be made in the best interests of the child's safety, welfare and educational outcomes. This should be considered as a matter of routine.

Where children need a social worker, this should inform decisions about safeguarding (for example, responding to unauthorised absence or missing education where there are known safeguarding risks) and about promoting welfare (for example, considering the provision of pastoral and/or academic support, alongside action by statutory services).

Children who are particularly vulnerable

GNSFC recognises that some children are more vulnerable to abuse and neglect and that additional barriers exist when recognising abuse for some children.

We understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures which fail to acknowledge children's diverse circumstances, rather than the individual child's personality, impairment or circumstances.

In some cases, possible indicators of abuse such as a child's mood, behaviour or injury might be assumed to relate to the child's impairment or disability rather than giving a cause for concern.

Or a focus may be on the child's disability, special educational needs or situation without consideration of the full picture. In other cases, such as bullying, the child may be disproportionately impacted by the behaviour without outwardly showing any signs that they are experiencing it.

Some children may also find it harder to disclose abuse due to communication barriers, lack of access to a trusted adult or not being aware that what they are experiencing is abuse.

To ensure that all of our children receive equal protection we will give special consideration to children who are:

- Disabled or have special educational needs
- Young carers
- Affected by parental substance misuse, domestic abuse or parental mental health needs
- Asylum seekers
- Living away from home
- Vulnerable to being bullied or engaged in bullying
- Already viewed as a 'problem'
- Living in temporary accommodation
- Living transient lifestyles
- Living in chaotic and unsupportive home situations
- Vulnerable to discrimination on the grounds of race, ethnicity, religion, disability or sexuality
- At risk of sexual exploitation
- Do not have English as a first language
- At risk of female genital mutilation
- At risk of forced marriage
- At risk of being drawn into extremism.

Appendix 5: Brook Sexual Behaviours Traffic Light Tool

Behaviours: ages 0 to 5

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?	What is an amber behaviour?	What is a red behaviour?
Green behaviours reflect safe and healthy sexual development. They are: - displayed between children or young people of similar age or developmental ability - reflective of natural curiosity, experimentation, consensual activities and positive choices	Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be: - of potential concern due to age, or developmental differences - of potential concern due to activity type, frequency, duration or context in which they occur	Red behaviours are outside of safe and healthy behaviour. They may be: - excessive, secretive, compulsive, coercive, degrading or threatening - involving significant age, developmental, or power differences - of concern due to the activity type, frequency, duration or the context in which they occur
What can you do?	What can you do?	What can you do?
Green behaviours provide opportunities to give positive feedback and additional information.	Amber behaviours signal the need to take notice and gather information to assess the appropriate action.	Red behaviours indicate a need for immediate intervention and action.
Green behaviours	Amber behaviours	Red behaviours
- holding or playing with own genitals - attempting to touch or curiosity about other children's genitals - attempting to touch or curiosity about breasts, bottoms or genitals of adults - games e.g. mummies and daddies, doctors and nurses - enjoying nakedness - interest in body parts and what they do - Curiosity about the differences between boys and girls	- preoccupation with adult sexual behaviour - pulling other children's pants down/skirts up/trousers down against their will - talking about sex using adult slang - preoccupation with touching the genitals of other people - following others into toilets or changing rooms to look at them or touch them - talking about sexual activities seen on TV/online	- persistently touching the genitals of other children - persistent attempts to touch the genitals of adults - simulation of sexual activity in play - sexual behaviour between young children involving penetration with objects - forcing other children to engage in sexual play

Behaviours: age 5 to 9

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?	What is an amber behaviour?	What is a red behaviour?
Green behaviours reflect safe and healthy sexual development. They are: - displayed between children or young people of similar age or developmental ability - reflective of natural curiosity, experimentation, consensual activities and positive choices	Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be: - of potential concern due to age, or developmental differences - of potential concern due to activity type, frequency, duration or context in which they occur	Red behaviours are outside of safe and healthy behaviour. They may be: - excessive, secretive, compulsive, coercive, degrading or threatening - involving significant age, developmental, or power differences - of concern due to the activity type, frequency, duration or the context in which they occur
What can you do?	What can you do?	What can you do?
Green behaviours provide opportunities to give positive feedback and additional information.	Amber behaviours signal the need to take notice and gather information to assess the appropriate action.	Red behaviours indicate a need for immediate intervention and action.
Green behaviours	Amber behaviours	Red behaviours
- feeling and touching own genitals - curiosity about other children's genitals - curiosity about sex and relationships e.g. differences between boys and girls, how sex happens, where babies come from, same sex relationships - sense of privacy about bodies - telling stories or asking questions using sear and slang words for parts of the body	- questions about sexual activity which persist or are repeated frequently, despite an answer having been given - sexual bullying face to face or through texts or online messaging - engaging in mutual masturbation - persistent sexual images and ideas in talk, play and art - use of adult slang language to discuss sex	- frequent masturbation in front of others - sexual behaviour engaging significantly younger or less able children - forcing other children to take part in sexual activities - simulation of oral or penetrative sex - sourcing pornographic material online

Behaviours: 9 to 13

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?	What is an amber behaviour?	What is a red behaviour?
Green behaviours reflect safe and healthy sexual development. They are: - displayed between children or young people of similar age or developmental ability - reflective of natural curiosity, experimentation, consensual activities and positive choices	Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be: - of potential concern due to age, or developmental differences - of potential concern due to activity type, frequency, duration or context in which they occur	Red behaviours are outside of safe and healthy behaviour. They may be: - excessive, secretive, compulsive, coercive, degrading or threatening - involving significant age, developmental, or power differences - of concern due to the activity type, frequency, duration or the context in which they occur
What can you do?	What can you do?	What can you do?
Green behaviours provide opportunities to give positive feedback and additional information.	Amber behaviours signal the need to take notice and gather information to assess the appropriate action.	Red behaviours indicate a need for immediate intervention and action.
Green behaviours	Amber behaviours	Red behaviours
- solitary masturbation - use of sexual language including swear and slang words - having girl/boyfriends who are of the same, opposite or any gender - interest in popular culture e.g. fashion, music, media, online games, chatting online - need for privacy - consensual kissing, hugging, holding hands with peers	- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing - verbal, physical or cyber/virtual sexual bullying involving sexual aggression - LGBT (lesbian, gay, bisexual, transgender) targeted bullying - exhibitionism e.g. flashing or mooning - giving out contact details online - viewing pornographic material - worrying about being pregnant or having STIs	- exposing genitals or masturbating in public - distributing naked or sexually provocative images of self or others - sexually explicit talk with younger children - sexual harassment - arranging to meet with an online acquaintance in secret - genital injury to self or others - forcing other children of same age, younger or less able to take part in sexual activities - sexual activity e.g. oral sex or intercourse - presence of sexually transmitted infection (STI) - evidence of pregnancy

Behaviours: 13 to 17

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

What is a green behaviour?	What is an amber behaviour?	What is a red behaviour?
Green behaviours reflect safe and healthy sexual development. They are: - displayed between children or young people of similar age or developmental ability - reflective of natural curiosity, experimentation, consensual activities and positive choices	Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be: - of potential concern due to age, or developmental differences - of potential concern due to activity type, frequency, duration or context in which they occur	Red behaviours are outside of safe and healthy behaviour. They may be: - excessive, secretive, compulsive, coercive, degrading or threatening - involving significant age, developmental, or power differences - of concern due to the activity type, frequency, duration or the context in which they occur
What can you do?	What can you do?	What can you do?
Green behaviours provide opportunities to give positive feedback and additional information.	Amber behaviours signal the need to take notice and gather information to assess the appropriate action.	Red behaviours indicate a need for immediate intervention and action.
Green behaviours	Amber behaviours	Red behaviours
- solitary masturbation - sexually explicit conversations with peers - obscenities and jokes within the current cultural norm - interest in erotica/pornography - use of internet/e-media to chat online - having sexual or non-sexual relationships - sexual activity including hugging, kissing, holding hands - consenting oral and/or penetrative sex with others of the same or opposite gender who are of similar age and developmental ability - choosing not to be sexually active	- accessing exploitative or violent pornography - uncharacteristic and risk-related behaviour e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing - concern about body image - taking and sending naked or sexually provocative images of self or others - single occurrence of peeping, exposing, mooning or obscene gestures - giving out contact details online - joining adult-only social networking sites and giving false personal information - arranging a face to face meeting with an online contact alone	- exposing genitals or masturbating in public - preoccupation with sex, which interferes with daily function - sexual degradation/humiliation of self or others - attempting/forcing others to expose genitals - sexually aggressive/exploitative behaviour - sexually explicit talk with younger children - sexual harassment - non-consensual sexual activity - use of/acceptance of power and control in sexual relationships - genital injury to self or others

		• sexual contact with others where there is a big difference in age or ability • sexual activity with someone in authority and in a position of trust • sexual activity with family members • involvement in sexual exploitation and/or trafficking • sexual contact with animals • receipt of gifts or money in exchange for sex
--	--	--