

BE ME PROJECT

identity ~ truth ~ purpose

CHILD PROTECTION AND SAFEGUARDING POLICY

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Author: Lucy Mason

Signed : Alison Thomas, Chair of Trustees

.....signed at meeting..... Date 22/11/22....

Liesel Wild, Safeguarding Lead

.....signed at meeting..... Date...22/11/22

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All staff and volunteers must have access to this policy, and sign to confirm that they have read, understood and will adhere to its contents.

Trustee Lead: Liesel Wild

Designated Safeguarding Lead: Lucy Mason -lucy@bemeproject.org

Deputy Designated Safeguarding Leads: Sue Gledhill -sue@bemeproject.org

Safeguarding Statement

Be Me project (hereinafter Be Me) recognises our moral and statutory responsibility to safeguard and promote the welfare of all Children and Adults At Risk who attend any Be Me course. We endeavour to provide a safe and welcoming environment where they are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice. Child protection forms part of our safeguarding responsibilities.

Terminology:

Safeguarding (and promoting the welfare of children) is defined as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes.

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

Staff refers to all those working for or on behalf of Be Me including Managers, Leaders and Staff, whether full or part time, temporary or permanent, paid or voluntary) and the board of trustees. Wherever the word "staff" is used, it covers ALL staff.

Child includes everyone under the age of 18. **Adult At Risk** refers to those who find it difficult or are unable to protect themselves against significant harm or exploitation.

Partners refers to any organisation Be Me works alongside in providing provide our service.

Contents

1.	Introduction	Page 4
2.	Policy Principles	Page 4
3.	Policy Aims	Page 5
4.	Safe Staff	Page 5
5.	Designated Safeguarding Lead AND Deputy Safeguarding Lead	Page 6
6.	Confidentiality	Page 6
7.	Child Protection Procedures	Page 7-9
8.	Anti-Bullying / Cyberbullying	Page 9
9.	Racist Incidents	Page 9
10.	Radicalisation and Extremism	Page 10
11.	Domestic Abuse	Page 10
12.	Child Sexual Exploitation (CSE)	Page 11
13.	Female Genital Mutilation (FGM), Forced Marriage, Honour based Violence	Page 11-12

14.	One Chance Rule	Page 12
15.	Private Fostering Arrangements	Page 12-13
16.	Online Safety	Page 13
17.	Peer on Peer Abuse	Page 13
18.	Youth Produced Sexual Imagery (Sexting)	Page 13-14
19.	Allegations against Staff	Page 15
20.	Whistle-blowing	Page 15
21.	Physical Intervention	Page 15
Appendix 1	Recognising signs of child abuse	Page 16-19
Appendix 2	Sexual Abuse by Young People	Page 20
Appendix 3	Child Sexual Exploitation	Page 21
Appendix 4	Female Genital Mutilation	Page 22
Appendix 5	Domestic Abuse	Page 23
Appendix 6	Radicalisation and Extremism	Page 24-25
Appendix 7	Peer on Peer Abuse	Page 26
Appendix 8	Be Me DBS Checks Guidelines	Page 27
Appendix 8a	Safeguarding during Covid 19	Page 27
Appendix 9	Resources	Page 28-29
Appendix 10	Expression of Concern Form	Page 30
Appendix 11	Incident Form	Page 31
Appendix 12	Reporting Process – quick guide	Page 32

1. Introduction

This policy has been developed in accordance with:

- the principles established by the Children Acts 1989 and 2004
- 'Working Together to Safeguard Children' 2015
- 'Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers'; HM Government 2015
- Special educational needs and disability (SEND) code of practice: 0-25 years - Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities; HM Government 2014
- Revised Safeguarding Statutory Guidance 2 'Framework for the Assessment of Children in Need and their Families' 2000
- 'What to do if You are Worried a Child is Being Abused' 2015
- The guidance also reflects Surrey Safeguarding Children Board SSCB Child Protection Procedures
- Counter Terrorism and security Act 2015

The Trustees and safeguarding Officers take seriously their responsibility to safeguard and promote the welfare of children; and to work together with other agencies to ensure adequate arrangements to support those children who are suffering harm.

Whilst this policy focuses on Children, the same guidance and instruction will apply to Adults at Risk.

2. Policy Principles

- The welfare of the child is paramount
- All children regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection, safeguarding and opportunities
- We recognise that all staff within our organisation have a full and active part to play in protecting children from harm and have an equal responsibility to act on any suspicion or disclosure that may suggest a child is at risk of harm.
- All staff believe that Be Me should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child.
- Children and staff involved in child protection issues will receive appropriate support.

3. Policy Aims

- To demonstrate Be Me's commitment with regard to safeguarding and child protection to children, Adults at Risk and other partners.
- To provide an environment in which those who attend any Be Me course feel safe, secure, valued and respected, and feel confident to, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
- To raise the awareness of all staff of the need to safeguard children and adults at risk and of their responsibilities in identifying and reporting possible cases of abuse.
- To emphasise the need for good levels of communication between all members of staff.
- To develop a structured procedure as we work independently and with our Partners which will be followed by all members of Be Me in cases of suspected abuse.
- To develop and promote effective working relationships with other agencies.
- To ensure that all staff who have access to children or adults at risk have been checked as to their suitability, including verification of their identity, any relevant / appropriate qualifications, and a satisfactory DBS check (according to guidance) and a single central record is kept for audit.

4. Safe Staff

- Safe Staff Recruitment
 - We are committed to recruiting the right members of staff to fulfil positions.
 - Our procedures are rigorous in order to deter those who are unsuitable.
 - We ask questions at interview to explore their attitudes towards children and adults at risk and their perceptions about boundaries of acceptable behaviour towards children and adults at risk.
 - Candidates are required to confirm their identity through official documentation.
 - DBS checks are required for all staff and volunteers working with children, and Trustees.
 - References are taken up prior to employment/engagement (in whatever capacity). Be Me will use all reasonable endeavours to speak to the referee to obtain an accurate verbal reference, rather than simply relying on a written reference.
 - All appointments are subject to a probationary period.
 - successful applicants will be supervised and assured of the support of their manager.
- All Be Me staff will receive information about safeguarding arrangements, the child protection policy, the role and names of the Designated Safeguarding Lead and their deputy(ies).
- All staff will receive safeguarding and child protection training in keeping with good practice and will be regularly updated.
- Ensure all staff are aware of guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks.
- If relevant, Be Me staff will be provided with information on a respective Partner's DSLs and Deputy and their Child Protection Policy, guidelines and procedures.

5a. The Designated Safeguarding Lead

- holds ultimate responsibility for safeguarding and child protection within Be Me
- acts as a source of support and expertise in carrying out safeguarding duties for the whole school community
- encourages a culture of listening to children and taking account of their wishes and feelings
- will be appropriately trained with updates every two years, and will refresh their knowledge and skills at regular intervals but at least annually
- will liaise, if applicable, with the relevant staff working within the Partner organisation (if applicable) where there are concerns about a child
- will refer a child where necessary, if there are concerns about possible abuse, to the Children's Services Local Referral, Intervention and Assessment Service Team
- will keep detailed accurate records of all concerns about a child even if there is no need to make an immediate referral
- will ensure that all such records are kept confidential, stored securely and are separate from pupil records, until the child's 25th birthday (or in line with insurance guidance, if stipulated
<https://learning.nspcc.org.uk/media/1442/child-protection-records-retention-and-storage-guidelines.pdf>)
- will ensure that all staff sign to say they have read, understood and agree to work within the Child Protection policy and ensure that the policies are used appropriately;
- will organise child protection and safeguarding induction and ensure regularly updated training takes place.
- will ensure that the name of the designated members of staff for Child Protection, the Designated Safeguarding Lead and deputies, are clearly communicated to staff.

5b The Deputy Designated Safeguarding Leads

- Are trained to the same standard as the Designated Safeguarding Lead and, in the absence of the DSL, carries out those functions necessary to ensure the ongoing safety and protection of pupils. In the event of the long-term absence of the DSL the deputy will assume all of the functions above.

6. Confidentiality

- Personal information about children and families is subject to a legal duty of confidence and should not normally be disclosed without the consent of the subject. However, the law permits the disclosure of confidential information necessary to safeguard a child or children in the public interest, that is, the public interest in child protection may override the public interest in maintaining confidentiality.
- All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing.
- However, we also recognise that all matters relating to child protection are personal to children and families. Therefore, the managers or DSL will only disclose information about a child to other members of staff on a need to know basis.

7. Child Protection Procedures

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in the family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or by another child or children.

Further information about the four categories of abuse; physical, emotional, sexual and neglect, and indicators that a child may be being abused can be found in appendices 1 and 2.

Any child in any family in any school or group could become a victim of abuse. Staff should always maintain an attitude of "It could happen here".

There are also a number of specific safeguarding concerns that we recognise children who attend a Be Me course may experience;

- child missing from home or care
- child sexual exploitation (CSE) (see Appendix 3)
- bullying including cyber bullying (see p9)
- domestic abuse (see Appendix 5)
- drugs
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM) (see Appendix 4)
- forced marriage (see p10)
- gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- mental health
- private fostering (see p12-13)
- radicalisation (see Appendix 6)
- youth produced sexual imagery (sexting) (see p 13-14)
- teenage relationship abuse (see p12)
- trafficking, peer on peer abuse (see p 13)

We also recognise that abuse, neglect and safeguarding issues are complex and are rarely standalone events that can be covered by one definition or label. Staff are aware that in most cases multiple issues will overlap one another.

If staff are concerned about a child's welfare

If staff notice any indicators of abuse/neglect or signs that a child may be experiencing a safeguarding issue they should record these concerns on an Expression of Concern Form and pass it to the DSL. They may also discuss their concerns in person with the DSL but the details of the concern should be recorded in writing on the form.

If a pupil discloses harm or abuse to a member of staff

- We recognise that it takes a lot of courage for a child to disclose they are being abused. They may feel ashamed, guilty or scared, their abuser may have threatened that something will happen if they tell, they may have lost all trust in adults or believe that what has happened is their fault. Sometimes they may not be aware that what is happening is abuse.
- A child who makes a disclosure may have to tell their story on a number of subsequent occasions to the police and/or social workers. Therefore, it is vital that their first experience of talking to a trusted adult is a positive one.

- During their conversation with the pupil staff will;
 - Listen to what the child has to say and allow them to speak freely
 - Remain calm and not overreact or act shocked or disgusted – the pupil may stop talking if they feel they are upsetting the listener
 - Reassure the child that it is not their fault and that they have done the right thing in telling someone
 - Not be afraid of silences – staff must remember how difficult it is for the pupil and allow them time to talk
 - Take what the child is disclosing seriously
 - Ask open questions and avoid asking leading questions
 - Avoid jumping to conclusions, speculation or make accusations
 - Not automatically offer any physical touch as comfort. It may be anything but comforting to a child who is being abused.
 - Avoid admonishing the child for not disclosing sooner. Saying things such as ‘I do wish you had told me about it when it started’ may be the staff member’s way of being supportive but may be interpreted by the child to mean they have done something wrong.
 - Tell the child what will happen next.
 - If a pupil talks to any member of staff about any risks to their safety or wellbeing the staff member will let the child know that they will have to pass the information on – staff are not allowed to keep secrets.
 - The member of staff should write up their conversation as soon as possible on the Expression of Concern Form in the child’s own words. Staff should make this a matter of priority. The record should have:
 - ❖ the staff members name, signature and date
 - ❖ the name of the child
 - ❖ the name of the Partner Organisation
 - ❖ it should also detail where the disclosure was made
 - ❖ the time of the disclosure
 - ❖ a record of who else was present.
 - ❖ whether the parent was informed and by whom
 - The record should be handed to the DSL.

Making a referral

- Responsibility for liaising with our Partner organisation and statutory authorities will be undertaken by the DSL or Deputy. Concerns need to be referred to them as soon as possible. There is additional guidance in this Policy on what to do if your concerns are not addressed, or there is immediate risk for a child (see below) as well as contact details for further support detailed in Appendix 9.
- Concerns about a child or a disclosure should be discussed with the DSL who will help decide whether a referral to the Partner Organisation should be made or direct referral to Children’s social care is appropriate.
- If a referral is needed then the DSL should make it. However, anyone 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.
- The child (subject to their age and understanding) will be told that a referral is being made, unless to do so would increase the risk to the child.
- If after a referral the child’s situation does not appear to be improving the DSL (or the person that made the referral) should press for re-consideration to ensure their concerns have been addressed, and most importantly the child’s situation improves.
- If a child is in immediate danger or is at risk of harm a referral should be made to children’s social care and/or the police immediately. Anybody can make a referral.
- Where referrals are not made by Be Me’s DSL, they should be informed as soon as possible.

We aim to report within 24 hours to the school and if we do not receive an acknowledgement within 7 days (24 hours for a time-critical concern), we will report directly. For community courses referral should be made directly by one of the safeguarding leads.

Surrey Referral

If you are concerned about the safety of a child, young person or an adult you can contact the Surrey County Council Single Point of Access (SPA)

For Surrey, the SPA responds to initial enquiries about children, young people and adults.

Contact details for Surrey are contained in Appendix 9. For counties other than Surrey, the contact details are available from the respective County Council website.

Contact details for SPA (Surrey):

0300 470 9100 or email csmash@surreycc.gov.uk (available 9am to 5pm, Monday to Friday)

01483 517 898 Out of Hours

Kent referral

If you have submitted a referral form via kentchildrenslado@kent.gov.uk this will be screened by the Contact and Referral Officers. If appropriate it will then be passed in a timely manner to the Duty LADO who will triage the referral against the LADO Harm Threshold, respond and prioritise according to risk. The LADO will contact you to discuss next steps (within 24 hours).

If you have a referral being overseen by a LADO and are awaiting a response to a completed risk assessment or investigation please wait 7 working days before requesting a response. LADOs read, quality assure reports against risk and need time to ensure quality oversight is provided.

Please be advised that currently the County LADO Service is NOT able to offer the LADO Enquiries line. In the absence of the telephone line please submit an email into the service and a LADO will contact you as soon as possible. Currently enquiries are only able to be addressed between 2pm and 4pm.

It is important to highlight that the County LADO Service is not an emergency service. If you need urgent advice or a child is in danger please contact 999 or the Front Door Service on 03000 411111. Out of Hours can be contacted on 03000 419191 outside of office hours for urgent safeguarding matters.

Contact details for Area Safeguarding Adviser (Education Safeguarding Team) ▪ Tel: 03000 412284 Online Safety in the Education Safeguarding Team ▪ Rebecca Avery, Education Safeguarding Adviser (Online Protection): Ashley Assiter, e-Safety Development Officer ▪ 03000 415797

Cumbria Referral

Children's Services Safeguarding Hub on 0333 240 1727.

Supporting Staff

- We recognise that staff who have become involved in working with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.
- We will support such staff by providing an opportunity to talk through their anxieties with the DSLs and to seek further support as appropriate.

8 Anti-Bullying/Cyberbullying

- All staff are aware that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms e.g. cyber, racist, homophobic and gender related bullying. We keep a record of known bullying incidents.
- When there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm, a bullying incident should be addressed as a child-protection concern and the DSL will consider implementing child protection procedures.
- The subject of bullying is addressed as part of our Be Me discussion material.

9. Racist Incidents

- Be Me acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of racist incidents.

10. Radicalisation and Extremism

The Prevent Duty for England and Wales (2015) under section 26 of the Counter-Terrorism and Security Act 2015 places a duty on children's services to have due regard to the need to prevent people from being drawn into terrorism.

Extremism is defined as 'vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs'. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

Some children are at risk of being radicalised; adopting beliefs and engaging in activities which are harmful, criminal or dangerous. This can happen both online and offline.

Be Me is clear that exploitation of vulnerable children and radicalisation should be viewed as a safeguarding concern.

Be Me seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.

Be Me staff receive training to help identify early signs of radicalisation and extremism. Indicators of vulnerability to radicalisation are detailed in Appendix 6.

When any member of staff has concerns that a pupil may be at risk of radicalisation or involvement in terrorism, they should speak with the DSL. They should then follow normal safeguarding procedures. The Department of Education has also set up a dedicated telephone helpline for staff to raise concerns around Prevent (020 7340 7264).

11. Domestic Abuse

Domestic abuse represents one quarter of all violent crime. It is actual or threatened physical, emotional, psychological or sexual abuse. It involves the use of power and control by one person over another. It occurs regardless of race, ethnicity, gender, class, sexuality, age, religion, mental or physical ability. Domestic abuse can also involve other types of abuse.

We use the term domestic abuse to reflect that a number of abusive and controlling behaviours are involved beyond violence.

Slapping, punching, kicking, bruising, rape, ridicule, constant criticism, threats, manipulation, sleep deprivation, social isolation, and other controlling behaviours all count as abuse.

Living in a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, well-being and understanding of healthy, positive relationships. Children who witness domestic abuse are at risk of significant harm and staff are alert to the signs and symptoms of a child suffering or witnessing domestic abuse (See Appendix 5).

12. Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. All staff are trained to be aware of the link between online safety and vulnerability to CSE.

Any concerns that a child is being or is at risk of being sexually exploited should be passed without delay to the DSL. The DSL should use their respective County Council's Safeguarding Children's Board CSE tool (google CSE form for your respective County Council) on all occasions when there is a concern that a child is being or is at risk of being sexually exploited or where indicators have been observed that are consistent with a child who is being or who is at risk of being sexually exploited.

In all cases if the tool identified any level of concern (green, amber or red) the DSL should contact the respective County Council's MASH and email the completed CSE Screening Tool along with a Multi-Agency Referral Form (MARF). If a child is in immediate danger the police should be called on 999.

Be Me is aware that a child often is not able to recognise the coercive nature of the abuse and does not see themselves as a victim. As a consequence the child may resent what they perceive as interference by staff. However, staff must act on their concerns as they would for any other type of abuse. Children also rarely self-report CSE, so staff must be particularly vigilant to potential indicators of risk.

Be Me includes the risks of sexual exploitation as part of the course material.

13. FGM, Forced Marriage, Honour based Violence

- Female Genital Mutilation (FGM)
Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act (2003). It is a form of child abuse and violence against women.

Be Me staff are trained to be aware of risk indicators of FGM which are set out in Appendix 4. Concerns about FGM outside of the mandatory reporting duty should be reported as per Be Me's child protection procedures. Staff should be particularly alert to suspicions or concerns expressed by female pupils about going on a long holiday during the summer vacation period. There should also be consideration of potential risk to other girls in the family and practising community.

There are no circumstances in which a member of staff should examine a girl.

- **Forced Marriage**

A forced marriage is a marriage in which one or both people do not (or in cases of people with learning disabilities cannot) consent to the marriage but are coerced into it. Coercion may include physical, psychological, financial, sexual and emotional pressure. It may also involve physical or sexual violence and abuse.

Forced marriage is an appalling and indefensible practice and is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights. Since June 2014 forcing someone to marry has become a criminal offence in England and Wales under the Anti-Social Behaviour, Crime and Policing Act 2014.

A forced marriage is not the same as an arranged marriage which is common in several cultures. 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 the prospective spouses.

Be Me staff should never attempt to intervene directly. Contact should be made with the partner Organisation or the Forced Marriage Unit 200 7008 0151.

- **Honour-based Violence**

Honour based violence (HBV) can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

Honour based violence might be committed against people who;

- become involved with a boyfriend or girlfriend from a different culture or religion;
- want to get out of an arranged marriage;
- want to get out of a forced marriage;
- wear clothes or take part in activities that might not be considered traditional within a particular culture.

It is a violation of human rights and may be a form of domestic and/or sexual abuse. There is no, and cannot be, honour or justification for abusing the human rights of others.

14. One Chance Rule

All staff are aware of the 'One Chance' Rule' in relation to forced marriage, FGM and HBV. Staff recognise they may only have one chance to speak to a pupil who is a potential victim. When any member of staff has concerns that a pupil may be at risk, they should speak with the DSL. They should then follow normal safeguarding procedures..

Be Me are 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 HBV cases.

15. Private Fostering Arrangements

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, with the agreement of the child's parents. It applies to children under the age of 16, or 18 if the child is disabled. Children looked after by the local authority or who are placed in residential schools, children's homes or hospitals are not considered to be privately fostered.

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

Be Me recognise 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.

By law, a parent, private foster carer or other persons involved in making a private fostering arrangement must notify children's services as soon as possible. However, where a member of staff becomes aware that a pupil may be in a private fostering arrangement they will raise this in the first instance with our Partner Organisation and the DSL will notify Surrey Children's Social Care of the circumstances.

16. Online Safety

Children increasingly use electronic equipment on a daily basis to access the internet, share and view content and images via social media sites such as Facebook, Twitter, Instagram, snapchat and oovoo.

Unfortunately, some adults and other children use these technologies to harm children. The harm might range from sending hurtful or abusive texts or emails, to grooming and enticing children to engage in extremist or sexual behaviour such as webcam photography or face-to-face meetings. Pupils may also be distressed or harmed by accessing inappropriate material such as pornographic websites or those which promote extremist behaviour, criminal activity, suicide or eating disorders

17. Peer on Peer Abuse

In most instances, the conduct of children towards each other will be covered by our behaviour policy. However, some allegations may be of such a serious nature that they may raise safeguarding concerns. Be Me recognise that children are capable of abusing their peers. It will not be passed off as 'banter' or 'part of growing up'. The indicators of peer on peer abuse are outlined in Appendix 7 .

Any concerns, disclosures or allegations of peer on peer abuse in any form should be referred to the DSL using Be Me's child protection procedures as set out in this policy. Where a concern regarding peer on peer abuse has been disclosed to the DSL(s), advice and guidance will be sought from Children's Social Care and where it is clear a crime has been committed or there is a risk of crime being committed the Police will be contacted.

Working with external agencies the school will respond to the unacceptable behaviour. If a pupil's behaviour negatively impacts on the safety and welfare of other pupils then safeguards will be put in place to promote the wellbeing of the pupils affected and the victim and perpetrator will be provided with support.

18. Youth produced sexual imagery (sexting)

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 illegal.

Youth produced sexual imagery 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. 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 accordingly.

If a member of staff becomes aware of an incident involving youth produced sexual imagery they should follow the child protection procedures and refer to the DSL as soon as possible. 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 should NOT copy, print or unnecessarily view the youth produced sexual imagery.

The DSL should inform the Partner Organisation and follow their procedures if appropriate. 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 Children's Social Care 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 pupils involved and may decide, with input from the Partner Organisation, to respond to the incident without escalation to Children's Social Care or the police.

In applying judgement 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 more vulnerable than usual i.e. at risk;
- 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 are other circumstances relating to either the sender or recipient that may add cause for concern i.e. difficult home circumstances;
- the children have been involved in incidents relating to youth produced imagery before.

If any of these circumstances are present the situation will be escalated according to our child protection procedures, including reporting to the police or children's social care. Otherwise, the situation will be managed within the Partner Organisation.

The DSL will record all incidents of youth produced sexual imagery, including both the actions taken, actions not taken, reasons for doing so and the resolution in line with safeguarding recording procedures.

19. Allegations against staff

All staff should take care not to place themselves in a vulnerable position with a child. Anybody running a Be Me course should try to ensure that there is always at least one (preferably two) DBS approved adults in the room with any child(ren) at any given time.

We understand that a child may make an allegation against a member of staff or staff may have concerns about another staff member. If such an allegation is made, or information is received which suggests that a person may be unsuitable to work with children, the member of staff receiving the allegation or aware of the information, will immediately inform the DSL. On all such occasions will discuss the content of the allegation with the Local Authority Designated Officer (LADO) at the earliest opportunity and before taking any further action.

If the allegation made to a member of staff concerns the DSL, the person receiving the allegation will immediately inform the Trustee Lead who will consult the LADO without notifying the DSL first.

Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers will be given at induction.

20. Whistle-blowing

All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues, poor or unsafe practice and potential failures in the school's safeguarding arrangements. If it becomes necessary to consult outside the school, The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and Email: help@nspcc.org.uk.

21. Physical Intervention

We acknowledge that staff must only ever use physical intervention as a last resort, when a child is endangering him/herself or others, and that at all times it must be the minimal force necessary to prevent injury to another person.

Such events should be recorded and signed by a witness.

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

We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.

APPENDIX 1 - RECOGNISING SIGNS OF CHILD ABUSE

Categories of Abuse:

- Physical Abuse
- Emotional Abuse (including Domestic Abuse)
- Sexual Abuse (including child sexual exploitation)
- Neglect

Signs of Abuse in Children:

The following non-specific signs may indicate something is wrong:

- Significant change in behaviour
- Extreme anger or sadness
- Aggressive and attention-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour
- Child Sexual Exploitation.

Risk Indicators

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred (although the absence of such indicators does not mean that abuse or neglect has not occurred), but:

- Must be regarded as indicators of the possibility of significant harm
- Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
- May require consultation with and / or referral to Children's Services
- The absence of such i.

In an abusive relationship the child may:

- Appear frightened of the parent/s
- Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits
- Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

Recognising Physical Abuse

The following are often regarded as indicators of concern:

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

Bruising

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

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

Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent 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 is his/her 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.

Recognising Emotional Abuse

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

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

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
- Indiscriminate attachment or failure to attach
- Aggressive behaviour towards others
- Scape-goated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self esteem and lack of confidence
- Withdrawn or seen as a “loner” – difficulty relating to others

Recognising Signs of Sexual Abuse

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

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

Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct

- Sexually explicit behaviour, play or conversation, inappropriate to the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder), self mutilation and suicide attempts
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a younger girl where the identity of the father is not disclosed
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Recognising Neglect

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

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

Appendix 2 - SEXUAL ABUSE BY YOUNG PEOPLE

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.

Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is “acting out” which may derive from other sexual situations to which the child or young person has been exposed. If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base. In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

- **Equality** – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies
- **Consent** – agreement including all the following:
 - Understanding that is proposed based on age, maturity, development level, functioning and experience
 - Knowledge of society’s standards for what is being proposed
 - Awareness of potential consequences and alternatives
 - Assumption that agreements or disagreements will be respected equally
 - Voluntary decision
 - Mental competence
- **Coercion** – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide. Further information and advice is available in the Brook Sexual Behaviours Traffic Light Tool. Assessment, Consultation and Therapy (ACT) 01306 745310 can also assist professionals in identifying sexual behaviour of concern in children and adolescents.

Appendix 3 - CHILD SEXUAL EXPLOITATION

Staff should refer to Part A of 'Child Sexual Exploitation: Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation' (2017) for comprehensive guidance on Child Sexual Exploitation.

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- going missing from home or school
- regular school absence/truancy
- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- online safety concerns such as youth produced sexual imagery or being coerced into sharing explicit images.
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

Appendix 4 - FEMALE GENITAL MUTILATION (FGM)

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM.

What is FGM?

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons.

4 types of procedure:

Type 1 Clitoridectomy – partial/total removal of clitoris

Type 2 Excision – partial/total removal of clitoris and labia minora

Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl – social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Is FGM legal?

FGM is internationally recognised as a violation of human rights of girls and women. It is **illegal** the UK.

Circumstances and occurrences that may point to FGM happening are:

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad
- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- Prolonged absence from school and other activities
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to sit still and looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated urinary tract infection
- Disclosure

Appendix 5 - DOMESTIC ABUSE

How does it affect children?

Children can be traumatised by seeing and hearing violence and abuse. They may also be directly targeted by the abuser or take on a protective role and get caught in the middle. In the long term this can lead to mental health issues such as depression, self-harm and anxiety.

What are the signs to look out for?

Children affected by domestic abuse reflect their distress in a variety of ways. They may change their usual behaviour and become withdrawn, tired, start to wet the bed and have behavioural difficulties. They may not want to leave their house or may become reluctant to return. Others will excel, using their time in your care as a way to escape from their home life. None of these signs are exclusive to domestic abuse so when you are considering changes in behaviours and concerns about a child, think about whether domestic abuse may be a factor.

What should I do if I suspect a family is affected by domestic abuse?

In the first Instance talk to BE Me's Session leader or DSL. To talk through your concerns call the Surrey Domestic Abuse Helpline on 01483 776822

Appendix 6 - INDICATORS OF VULNERABILITY TO RADICALISATION

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
2. Extremism is defined by the Government in the Prevent Strategy as:
Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
3. Extremism is defined by the Crown Prosecution Service as:
The demonstration of unacceptable behaviour by using any means or medium to express views which:
 - Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
 - Seek to provoke others to terrorist acts;
 - Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
 - Foster hatred which might lead to inter-community violence in the UK.
4. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.
5. Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.
6. Indicators of vulnerability include:
 - Identity Crisis – the student / pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
 - Personal Crisis – the student / pupil may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
 - Personal Circumstances – migration; local community tensions; and events affecting the student / pupil’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
 - Unmet Aspirations – the student / pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;
 - Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
 - Special Educational Need – students / pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.
7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.
8. More critical risk factors could include:
 - Being in contact with extremist recruiters;
 - Accessing violent extremist websites, especially those with a social networking element;
 - Possessing or accessing violent extremist literature;

- Using extremist narratives and a global ideology to explain personal disadvantage;
 - Justifying the use of violence to solve societal issues;
 - Joining or seeking to join extremist organisations; and
 - Significant changes to appearance and / or behaviour;
 - Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.
- Domestic abuse – an incident or pattern of actual or threatened acts of physical, sexual, financial and/or emotional abuse, perpetrated by an adolescent against a current or former dating partner regardless of gender or sexuality.

Appendix 7 - PEER ON PEER ABUSE

- Child Sexual Exploitation – children under the age of 18 may be sexually abused in the context of exploitative relationships, contexts and situations by peers who are also under 18.
- Harmful Sexual Behaviour – Children and young people presenting with sexual behaviours that are outside of developmentally ‘normative’ parameters and harmful to themselves and others (For more information, please see Appendix 2).
- Serious Youth Violence – Any offence of most serious violence or weapon enabled crime, where the victim is aged 1-19 i.e. murder, manslaughter, rape, wounding with intent and causing grievous bodily harm. ‘Youth violence’ is defined in the same way, but also includes assault with injury offences.

The term peer-on-peer abuse can refer to all of these definitions and a child may experience one or multiple facets of abuse at any one time. Therefore, our response will cut across these definitions and capture the complex web of their experiences.

There are also different gender issues that can be prevalent when dealing with peer on peer abuse (i.e. girls being sexually touched/assaulted or boys being subjected to initiation/hazing type violence).

Be Me aims to reduce the likelihood of peer on peer abuse through;

- the established ethos of respect, friendship, courtesy and kindness;
- high expectations of behaviour;
- clear consequences for unacceptable behaviour;
- providing a developmentally appropriate PSHE curriculum which develops pupils’ understanding of healthy relationships, acceptable behaviour, consent and keeping themselves safe;
- systems for any pupil to raise concerns with staff, knowing that they will be listened to, valued and believed;
- robust risk assessments and providing targeted work for pupils identified as being a potential risk to other pupils and those identified as being at risk.

Appendix 8 - BE ME DBS CHECKS GUIDELINES

1. All staff must have an Enhanced DBS + CBL (Children's Barred List) check through Thirtyone:eight. All staff will be allocated a personalised name badge/lanyard.
2. All Trustees are required to have DBS checks.
3. All regular volunteer helpers must have an Enhanced DBS + CBL check through Thirtyone:eight.
4. Ad-hoc volunteer helpers do not require a DBS check. These will be easily identified by their visitor badge: this denotes to staff that children should never be left on their own with the volunteer.
5. It is the expectation that volunteers will attend safeguarding training as requested.

Appendix 8a - Covid 19

All government guidelines to following

<https://www.gov.uk/government/publications/covid-19-safeguarding-in-schools-colleges-and-other-providers/coronavirus-covid-19-safeguarding-in-schools-colleges-and-other-providers>

Be Me Project will be working alongside the safeguarding protocol of each school that they are partnered with. Please refer to our safeguarding procedure.

Appendix 9 - RESOURCES

Designated Safeguarding Lead (DSL) - Lucy Mason

Deputy DSL - Sue Gledhill

Be Me Project's points of contact for children who are the focus of concern are as follows:

Surrey Referral

Contact details for SPA (Surrey):

0300 470 9100 or email csmash@surreycc.gov.uk (available 9am to 5pm, Monday to Friday)

01483 517 898 Out of Hours

Kent referral

It is important to highlight that the County LADO Service is not an emergency service. If you need urgent advice or a child is in danger please contact 999 or the Front Door Service on **03000 411111**. Out of Hours can be contacted on **03000 419191** outside of office hours for urgent safeguarding matters.

Contact details for Area Safeguarding Adviser (Education Safeguarding Team) ▪ Tel: 03000 412284 Online Safety in the Education Safeguarding Team ▪ Rebecca Avery, Education Safeguarding Adviser (Online Protection): Ashley Assiter, e-Safety Development Officer ▪ 03000 415797

Cumbria Referral

Children's Services Safeguarding Hub on **0333 240 1727**.

Further advice on child protection is available from:

NSPCC: <http://www.nspcc.org.uk>

Childline: <http://www.childline.org.uk/pages/home.aspx>

CEOPS (Child Exploitation Online protection Centre) Thinkuknow: <https://www.thinkuknow.co.uk/>

Anti-Bullying Alliance: <http://anti-bullyingalliance.org.uk/>

Beat Bullying: <http://www.beatbullying.org/>

Childnet International –making the internet a great and safe place for children. Includes resources for professionals and parents <http://www.childnet.com/>

Safer Internet Centre <http://www.saferinternet.org.uk/>

Child Sexual Exploitation Screen tool

["http://www.surreyscb.org.uk/wp-content/uploads/2016/06/SSCB-CSE-Screening-Tool-May-16.pdf"](http://www.surreyscb.org.uk/wp-content/uploads/2016/06/SSCB-CSE-Screening-Tool-May-16.pdf)

FGM procedure info:

"<https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information>"

Dfe Guidance on Prevent

<https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>

Department for Education dedicated helpline for staff and Management Committee members:

020 7340 7264 and counter-extremism@education.gsi.gov.uk

Prevent referral form can be found at <https://www.surreyscp.org.uk/2018/12/16/prevent-referral-process-september-2018/>

Police Emergency - 999

Surrey Police Non-Emergency – 101

DBS

Disclosure and Barring Service:

PO Box 181, Darlington, DL1 9FA Tel: 01325 953795

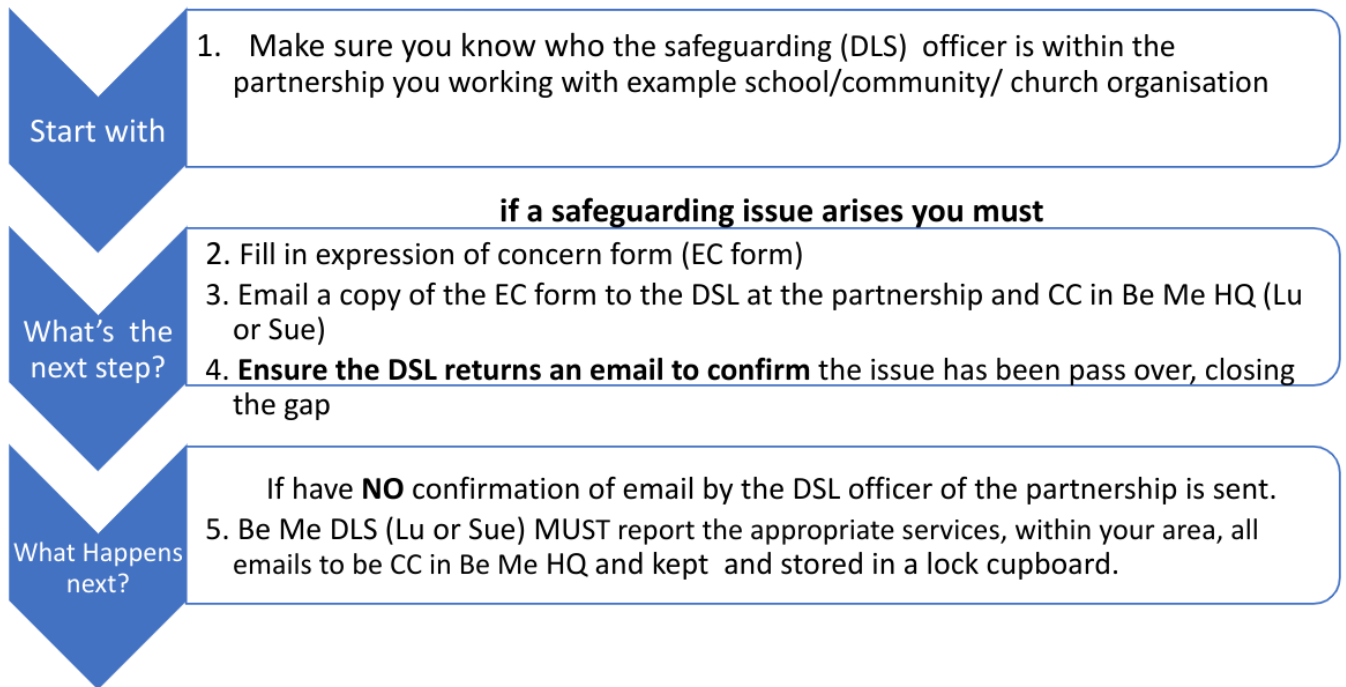
Appendix 10

Be Me Project Expression or incident of concern form

Child/student's name	
Name of partnership/school	
Date and time of Observation/discussion/concern Where was this incident divulged	
People involved (identify who is who in terms of their role)	
Nature of incident	
Signature of Be Me project staff member:	
Signature of parent (if appropriate):	
Date:	

Action to be taken: e.g. reported concern to the partnership involved.

Appendix 11 – Reporting process quick guide



I have read through the Be Me Project safeguarding policy and will follow the procedures.

Print name.....

Sign

Date