SAFEGUARDING AND CHILD PROTECTION

APPROVED BY: THE BOARD OF TRUSTEES

LAST REVIEWED: 28 MAY 2022
NEXT REVIEW: 27 MAY 2023

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IMPORTANT CONTACTS

ROLE/ORGANIZATION	NAME	CONTACT DETAILS
DESIGNATED SAFEGUARDING LEAD (DSL)	MS NAV GILL	nav@beingthecure.org 020 8152 8639
CHAIR OF THE BOARD OF TRUSTEES	MR VIJITH VIJAY	vijith@beingthecure.org 020 8152 8650 0777 1877 342 (Out of Office Hours)
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1. AIMS

The purpose of this policy is to ensure that Being The Cure exercises its duty of care to safeguard children, young people, and vulnerable adults. We also have a duty to protect our trustees, staff, volunteers, and program participants (including children, young people, and vulnerable adults) from any harm that may be caused due to their coming into contact with Being The Cure. This includes harm arising from:

- The conduct of trustees, staff or personnel associated with Being The Cure
- The design and implementation of Being The Cure's programs and activities

The policy lays out the commitments made by Being The Cure, and informs trustees, staff, and associated personnel of their responsibilities in relation to safeguarding.

Being the Cure (BTC) aims to ensure that:
- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- All staff are aware of their statutory responsibilities with respect to safeguarding
- Staff are properly trained in recognizing and reporting safeguarding issues

We recognize that all staff, including volunteers, have a full, equal, and active part to play in protecting pupils from harm and that everyone at BTC has an objective to keep children and young people safe. Safer children make more successful learners. We recognize that safeguarding incidents can happen anywhere and that children can be harmed anywhere.

All stakeholders need to share and build on existing knowledge and good practice and work together towards ensuring equal protection for disabled children. There is a need to raise awareness about the abuse of disabled children and challenge attitudes and assumptions that act as barriers to protection and to raise disabled children's awareness of abuse and ability to seek help including access to personal safety skills training.

All trustees/members and staff believe that BTC should provide a caring, positive, safe, and stimulating environment, which promotes the social, physical, and moral

development of the individual child. Through its emphasis on prevention and early intervention, this policy aims to minimize the risks of children being abused.
New staff/volunteers will be given a copy of this policy at their induction meeting which is led by the (Designated Safeguarding Lead (DSL) /Child Protection Officer (CPO) – in this document to be known as **DSL**.

2. CHILD PROTECTION STATEMENT

We recognize our moral and statutory responsibility to safeguard and promote the welfare of all pupils. We endeavor to provide a safe and welcoming environment where children 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.
BTC seeks to provide a safe and secure environment for the children who participate in our programs and activities. By implementing the practices mentioned in this policy, our goal is to protect the children from incidents of misconduct or inappropriate behavior.

Being The Cure, for the purposes of this policy and procedures document, considers a Vulnerable Person as anyone who may be restricted in capacity to guard themself against harm or exploitation or to report such harm or exploitation. Restriction of capacity may arise as a result of physical or intellectual impairment. Vulnerability to abuse is influenced by both context and individual circumstances.

Being The Cure, for the purposes of this policy and procedures document, considers a child in line with the United Nations Convention on the Rights of the Child (UNCRC), 1989, under the Policy a child is defined as anyone who has not reached their 18th birthday regardless of whether a nation's laws recognise adulthood earlier.

Being The Cure is committed to the safeguarding of vulnerable persons and children from abuse. The definitions of safeguarding that guide our work at Being The Cure, are taken from the statutory guidance below:
- Safeguarding children as defined in Working Together to Safeguard Children 2018

- Safeguarding adults at risk as defined in the Care and Support Statutory Guidance issued in the Care Act 2014

Safeguarding means protecting peoples' health, wellbeing, and human rights, and enabling them to live free from harm, abuse, and neglect. It acknowledges that all adults have the right to be safe and to live a life free from abuse. All persons are entitled to this right, regardless of their circumstances. All Being The Cure activities have a publicly declared 'No Tolerance' approach to any form of abuse and promotes a culture which supports this ethos.

Being The Cure believes that everyone we come into contact with, regardless of race, color, sex, language, religion, political or other opinion, national, ethnic, or social origin, property, disability, birth, sexual orientation, gender identity, or other status has the right to be protected from all forms of harm, abuse, neglect, and exploitation.

Being The Cure will not tolerate abuse and exploitation by staff or associated personnel. Being The Cure commits to addressing safeguarding throughout its work. This policy is mandatory and must be applied in all situations where Being The Cure, or our partners, work.

This policy forms part of an employees' terms and conditions of employment and may be subject to change at the discretion of management. It is therefore the responsibility of all staff of Being The Cure to raise any concerns they have or any concerns which are reported to them according to this policy. A core governance responsibility is to ensure that safeguarding policies and procedures and associated practices are in place and appropriate to the activities provided.

3. LEGISLATION AND STATUTORY GUIDANCE

This policy is based on the Department for Education's statutory guidance Keeping Children Safe in Education (2022) and Working Together to Safeguard Children (2018), and the Governance Handbook. We comply with this guidance and the arrangements agreed and published by our 3 local safeguarding partners (local authorities, police, and CCGs).

This policy is also based on the following legislation:

Section 175 of the Education Act 2002, which places a duty on schools and local authorities to safeguard and promote the welfare of pupils

The School Staffing (England) Regulations 2009, which set out what must be recorded on the single central record and the requirement for at least one person conducting an interview to be trained in safer recruitment techniques

Part 3 of the schedule to the Education (Independent School Standards) Regulations 2014, which places a duty on academies and independent schools to safeguard and promote the welfare of pupils at the school

Part 1 of the schedule to the Non-Maintained Special Schools (England) Regulations 2015, which places a duty on non-maintained special schools to safeguard and promote the welfare of pupils at the school

The Children Act 1989 (and 2004 amendment), which provides a framework for the care and protection of children

Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the Serious Crime Act 2015, which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18

Statutory guidance on FGM, which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM

The Rehabilitation of Offenders Act 1974, which outlines when people with criminal convictions can work with children

Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, which defines what 'regulated activity' is in relation to children

[Statutory guidance on the Prevent duty](#), which explains schools' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism

The [Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendment) Regulations 2018](#) (referred to in this policy as the "2018 Childcare Disqualification Regulations") and [Childcare Act 2006](#), which set out who is disqualified from working with children

This policy also meets requirements relating to safeguarding and welfare in the [statutory framework for the Early Years Foundation Stage](#)

[United Convention of the Rights of the Child 1991](#)

[GDPR 2018](#)

[Human Rights Act 1998](#)

[Sexual Offences Act 2003](#)

[Protection of Freedoms Act 2012](#)

[Children and Families Act 2014](#)

[Special educational needs and disability (SEND) code of practice: 0 to 25 years](#) – statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities: DFE 2015

[Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers](#): HM Government 2018

[Counter Terrorism and Security Act 2015](#)

Mandatory Reporting of Female Genital Mutilation 2015/Amendment to the Children Act

In London, our procedures for safeguarding children will always be compliant with the London Child Protection Procedures, produced by the London Safeguarding Children Board. Those procedures are available from http://www.londoncp.co.uk

[London Safeguarding Children Partnership Threshold Document 2022](#)

This policy also complies with the charity commission guidance on safeguarding; [Safeguarding and protecting people for charities and trustees](#): The Charity Commission 2017

[Health and Safety at Work etc. Act 1974](#)

4. POLICY IMPLEMENTATION, MONITORING AND REVIEW

Responsibility for leading implementation of this policy and procedure rests with Being The Cure's Operations Team, namely the CEO. The CEO will have overall responsibility for implementation of this policy and procedure within their administrative area, and in collaboration with the DSL will ensure that each manager of relevant Being The Cure activities will undertake the following:

- Communicate this policy to all staff, parents, carers, and volunteers
- Provide appropriate training
- Ensure that service specific procedures are developed, implemented, and reviewed in compliance with this policy

The policy will be monitored, reviewed and approved by the board of trustees who will work with the CEO and relevant staff wherever necessary to inform the policy and procedures.

5. DEFINITIONS

Safeguarding and promoting the welfare of children (as defined in UK statutory guidance, Working Together to Safeguard Children, July 2018) means:

- Protecting children from maltreatment
- Preventing impairment of children's mental and physical health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

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Safeguarding may also refer to the range of proactive measures that BTC has put in place to protect children from potential dangers and risks of exploitation, abuse, and neglect.

Child protection is defined as the activity that is undertaken to protect a specific child who is suffering, or is likely to suffer, significant harm caused by exploitation, abuse, or neglect.
Operational child protection procedures are child centered and provide early help, which is more effective in promoting the welfare of children than reacting later..

Abuse is a form of maltreatment of a child and may involve inflicting harm or failing to act to prevent harm. Appendix 1 explains the different types of abuse.

Neglect is a form of abuse and is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Appendix 1 defines neglect in more detail.

Sharing of nudes and semi-nudes (also known as sexting or youth produced sexual imagery) is where children share nude or semi-nude images, videos, or live streams.

Children includes everyone under the age of 18.

The following 3 safeguarding partners are identified in Keeping Children Safe in Education, 2021 (and defined in the Children Act 2004, as amended by chapter 2 of the Children and Social Work Act 2017). They will make arrangements to work together to safeguard and promote the welfare of local children, including identifying and responding to their needs:

- The local authority (LA)
- A clinical commissioning group for an area within the LA
- The chief officer of police for a police area in the LA area

Early help also known as early intervention, is support given to a family when a problem first emerges. It can be provided at any stage in a child or young person's life. Early help can take many forms, such as: home visiting programmes, school-based programmes, mentoring schemes.

6. EQUALITY STATEMENT

Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

We give special consideration to children who:

- Have special educational needs (SEN) or disabilities or health conditions (see section 11)
- Are young carers
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- Have English as an additional language
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Are asylum seekers
- Are at risk due to either their own or a family member's mental health needs
- Are looked after or previously looked after (see section 12)
- Are missing from education
- Whose parent/carer has expressed an intention to remove them from the program

7. ROLES AND RESPONSIBILITIES

Safeguarding and child protection is **everyone's** responsibility. This policy applies to all staff, volunteers, and Trustees in BTC and is consistent with the procedures of the 3 safeguarding partners. Our policy and procedures also apply to the Saturday School and off-site activities.

7.1 ALL STAFF

- All staff will read and understand part 1 and annex B of the Department for Education's statutory safeguarding guidance, [Keeping Children Safe in Education](), and review this guidance annually.
- All staff will sign a declaration at the beginning of each academic year to say that they have reviewed the guidance.

All staff will be aware of:
- Our systems which support safeguarding, including this child protection and safeguarding policy, the staff code of conduct, the role and identity of the designated safeguarding lead (DSL) and deputy/deputies, the behaviour policy of BTC.
- All staff should take care not to place themselves in a vulnerable position with a child. Wherever possible interviews or work with individual children or parents should be conducted in view of other adults.
- The early help process (sometimes known as the common assessment framework) and their role in it, including identifying emerging problems, liaising with BTC DSL, and sharing information with other professionals to support early identification and assessment.
- The process for making referrals to local authority children's social care and for statutory assessments that may follow a referral, including the role they might be expected to play.
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals.
- The signs of different types of abuse and neglect (see appendix 1), as well as specific safeguarding issues, such as peer-on-peer abuse, child sexual exploitation (CSE), child criminal exploitation (CCE), indicators of being at risk from or involved with serious violent crime, FGM and radicalisation.
- The importance of reassuring victims that they are being taken seriously and that they will be supported and kept safe.
- All BTC staff and volunteers must adhere to the safeguarding policy. They must also report any child safeguarding concerns to the DSL of BTC immediately using the 'SG concern form' on page 25.

7.2 THE DESIGNATED SAFEGUARDING LEAD (DSL)

The DSL is a senior leader in BTC. Our DSL is Ms. Nav Gill. The DSL takes lead responsibility for child protection and wider safeguarding at BTC.
The DSL will be available during working hours for staff to discuss any safeguarding concerns.
The DSL can be contacted out of working hours, if necessary, by email via nav@beingthecure.org or by dialing 020 8152 8639.
In the absence of the DSL, the CEO will cover the responsibilities of the DSL. If the DSL and CEO are not available, all safeguarding incidents and inquiries will be picked up by the safeguarding link trustees mentioned at the beginning of this document. They can be contacted at safeguarding@beingthecure.org

The DSL will be given the time, funding, training, resources, and support to:

- Provide advice and support to other staff on child welfare and child protection matters.
- Take part in strategy discussions and/or support other staff to do so.
- Refer suspected cases, as appropriate, to the relevant body (local authority children's social care, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly.

The DSL will also keep the CEO and the Safeguarding Link Trustees informed of any issues, and liaise with DSLs at other educational establishments, if need be, local authority case managers and designated officers for child protection concerns as appropriate.

The full responsibilities of the DSL and deputy/deputies are set out in their job description.

7.3 THE BOARD OF TRUSTEES

The Board of Trustees will:

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- Facilitate a whole-organisation approach to safeguarding, ensuring that safeguarding and child protection are at the forefront and underpin all relevant aspects of process and policy development.
- Evaluate and approve this policy at each review, ensuring it complies with the law, and hold the CEO to account for its implementation.
- Appoint a senior board level (or equivalent) lead or, link Trustee or trustees to monitor the effectiveness of this policy in conjunction with the full Trust board. This is always a different person from the DSL.
- The chair of the Board of Trustees will act as the 'case manager' in the event that an allegation of abuse is made against the CEO, where appropriate (see appendix 3).
- All members will read Keeping Children Safe in Education, 2022 in its entirety.
- Section 16 of this policy has information on how trustees are supported to fulfil their role.

7.4 THE CEO

The CEO is responsible for the implementation of this policy, including:

- Ensuring that staff (including temporary staff) and volunteers:
  - o Are informed of our systems which support safeguarding, including this policy, as part of their induction
  - o Understand and follow the procedures included in this policy, particularly those concerning referrals of cases of suspected abuse and neglect.
- Communicating this policy via the BTC website.
- Ensuring that the DSL has appropriate time, funding, training, and resources, and that there is always adequate cover if the DSL is absent.
- Ensuring that all staff undertake appropriate safeguarding and child protection training annually, and updating the content of the training regularly
- Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate (see appendix 3).

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8. CONFIDENTIALITY

BTC's approach to confidentiality and data protection with respect to safeguarding is outlined below. This covers the process and principles for sharing information within other educational establishments, and with the 3 safeguarding partners and other agencies as required.

At BTC :

Timely information sharing is essential to effective safeguarding. Information should be shared with the relevant staff or authorities within 24 hours or sooner.

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.

The Data Protection Act (DPA) 2018 and UK GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe.

If staff need to share 'special category personal data', the DPA 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information without consent if it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk.

Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the child's best interests.

The government's information sharing advice for safeguarding practitioners includes 7 'golden rules' for sharing information, and will support staff who have to make decisions about sharing information.

If staff are in any doubt about sharing information, they should speak to the designated safeguarding lead or the safeguarding link trustee.

Confidentiality is also addressed in this policy with respect to record-keeping in section 15, and allegations of abuse against staff in appendix 3.

9. RECOGNISING ABUSE AND TAKING ACTION

Staff, volunteers, and trustees must follow the procedures set out below in the event of a safeguarding issue.

Please note – in this and subsequent sections, you should take any references to the DSL to mean "the DSL (or deputy DSL)".

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

Make a referral to children's social care, for example, LADO or children's services and/or the police **immediately** if you believe a child is suffering or likely to suffer from harm or is in immediate danger. **Anyone can make a referral.**

Tell the DSL of the educational establishment you are in (see section 7.2) as soon as possible if you make a referral directly.
You should also use the following link to the GOV.UK webpage for reporting child abuse to your local council:

https://www.gov.uk/report-child-abuse-to-local-council

9.2 If a child makes a disclosure to you

We take a non-biased approach to disclosures. It's vital that any child who is trying to disclose abuse feels that they are being listened to and taken seriously. But there can be a risk that if professionals just believe the child's account without thoroughly investigating the situation, this can lead to unfair bias against the alleged abuser as formal investigations progress (Child Protection Resource, 2021; Transparency Project, 2018).

If a child discloses a safeguarding issue to you, you should:

- Listen to and believe them. Allow them time to talk freely and do not ask leading questions
- Stay calm and do not show that you are shocked or upset

- Tell the child they have done the right thing in telling you. Do not tell them they should have told you sooner
- Explain what will happen next and that you will have to pass this information on. Do not promise to keep it a secret
- Write up your conversation as soon as possible in the child's own words. Stick to the facts, and do not put your own judgement on it
- Sign and date the write-up and pass it on to the DSL. Alternatively, if appropriate, make a referral to children's social care and/or the police directly (see 8.1). Aside from these people, do not disclose the information to anyone else unless told to do so by a relevant authority involved in the safeguarding process.
- BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3).

9.3 If you discover that FGM has taken place, or a pupil is at risk of FGM

Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".

FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.

Possible indicators that a pupil has already been subjected to FGM, and factors that suggest a pupil may be at risk, are set out in appendix 4 of this policy.

Staff who either:
- Are informed by a girl under 18 that an act of FGM has been carried out on her; or

- Observes physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth

Must immediately report this to the police, personally. This is a mandatory statutory duty, and teachers will face disciplinary sanctions for failing to meet it. Unless they have been specifically told not to disclose, they should also discuss the case with the DSL and involve children's social care as appropriate.

Any other member of staff and/or volunteer who discovers that an act of FGM appears to have been carried out on a **pupil under 18** must speak to the DSL and follow our safeguarding procedures. The DSL of BTC will report this to the police.
The duty for staff does not apply in cases where a pupil is *at risk* of FGM or FGM is suspected but is not known to have been carried out. Staff should not examine pupils.
Any member of staff who suspects a pupil is *at risk* of FGM or suspects that FGM has been carried out or discovers that a pupil **aged 18 or over** appears to have been a victim of FGM must speak to the DSL and follow our safeguarding procedures.
BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3).

9.4 If you have concerns about a child (as opposed to believing a child is suffering or likely to suffer from harm, or is in immediate danger)

Figure 1 below illustrates the procedure to follow if you have any concerns about a child's welfare.
Where possible, speak to the DSL first to agree a course of action.
If in exceptional circumstances the need to raise concerns with the DSL should not delay appropriate action being taken. Speak to one of the safeguarding link trustees and/or take advice from local authority children's social care. You can also seek advice at any time from the NSPCC helpline on 0808 800 5000. Share details of any actions you take with the DSL as soon as practically possible.

Make a referral to local authority children's social care directly, if appropriate (see 'Referral' below). Share any action taken with the DSL as soon as possible.
BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3).

Early help

If early help is appropriate, the DSL will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. BTC and/or volunteers may be required to support other agencies and professionals in an early help assessment.
The DSL will keep the case under constant review and the charity will consider a referral to local authority children's social care if the situation does not seem to be improving. Timelines of interventions will be monitored and reviewed.

BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3). The DSL may wish to refer to Early help or escalate.

Referral

If it is appropriate to refer the case to local authority children's social care or the police, the DSL will make the referral or support you to do so. If you make a referral directly (see section 8.1), you must tell the DSL as soon as possible.
The local authority will make a decision within 1 working day of a referral about what course of action to take and will let the person who made the referral know the outcome. The DSL or person who made the referral must follow up with the local authority if this information is not made available, and ensure outcomes are properly recorded.

If the child's situation does not seem to be improving after the referral, the DSL or person who made the referral must follow local escalation procedures to ensure their concerns have been addressed and that the child's situation improves. BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3). The DSL may wish to refer or escalate.

9.5 If you have concerns about extremism

If a child is not suffering or likely to suffer from harm, or in immediate danger, where possible speak to the DSL first to agree a course of action.

If in exceptional circumstances the DSL is unavailable this should not delay appropriate action being taken. Speak to one of the safeguarding link trustees and/or seek advice from local authority children's social care. Make a referral to local authority children's social care directly, if appropriate (see 'Referral' above). Inform the DSL or deputy as soon as practically possible after the referral.

Where there is a concern, the DSL will consider the level of risk and decide which agency to make a referral to. This could include Channel, the government's program for identifying and supporting individuals at risk of being drawn into terrorism, or the local authority children's social care team.

The Department for Education also has a dedicated telephone helpline, 020 7340 7264, which staff, volunteers and trustees can call to raise concerns about extremism with respect to a pupil. You can also email counter.extremism@education.gov.uk. Note that this is not for use in emergency situations.

In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you:

- Think someone is in immediate danger
- Think someone may be planning to travel to join an extremist group
- See or hear something that may be terrorist-related

BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3). The DSL may wish to refer or escalate.

9.6 If you have a mental health concern

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.

Staff will be alert to behavioural signs that suggest a child may be experiencing a mental health problem or be at risk of developing one.

If you have a mental health concern about a child that is also a safeguarding concern, take immediate action by following the steps in section 9.4.

BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3). The DSL of BTC may wish to refer or escalate.

If you have a mental health concern that is **not** also a safeguarding concern, speak to the DSL to agree a course of action.

Refer to the Department for Education guidance on mental health and behaviour in schools for more information.

Medications Policy

It is the policy of **Being The Cure** not to administer either prescription or non-prescription medications to the children under our care. A parent/carer at home should administer medications.

Exceptions to the medications policy may be granted to parents of children with potentially life-threatening conditions (such as asthma or severe allergic reactions). Parents of such children should address their situation with a staff member to develop a plan of action. Staff must refer to guidance in the Medical and First Aid policy for further details.

FIGURE 1 - FLOW CHART FOR REPORTING A CONCERN ABOUT A CHILD

STEP ONE

IMMEDIATELY AFTER THE EVENT SPEAK TO THE DSL
This must be done immediately. If you cannot find the DSL speak to a safeguarding link trustee

STEP TWO

COMPLETE THE SAFEGUARDING FORM ONLINE - SEE FIGURE 2

STEP THREE

FILL THE SAFEGAURDING CONCERN FORM OR EMAIL THE FORM TO THE DSL AT NAV@BEINGTHECURE.ORG
This must be done the same day or as soon as possible if the risk is significant

STEP FOUR

THE DESIGNATED SAFEGUARDING LEAD WILL INVESTIGATE AND IF NEED BE, REPORT TO AN EXTERNAL AGENCY IMMEDIATELY DEPENDENT UPON THE NATURE OF THE REFERRAL

RECORD - DSL

COMMUNICATIONS, MONITORING, DECISIONS AND/OR ACTIONS MUST BE RECORDED IMMEDIATELY.
This should be done on the BTC safeguarding spreadsheet which is password protected.

Figure 2 – Incident Reporting Process Flow Chart

```
                    ┌──────────────────────┐
                    │   DSL Informed and   │
                    │   Incident details   │
                    │      recorded        │
                    └──────────────────────┘
                              │
                    ┌──────────────────────┐
                    │  Investigation opens │
                    └──────────────────────┘
```

NEEDS THRESHOLD EVALUATION

REFERRAL NOT NEEDED | **REFERRAL NEEDED**

Incident involves external personnel

Incident involves internal personnel

TIER 1 — Signposting and Support provided — Monitor

TIER 2 — Liaison with external agencies, support and signposting offered — Monitor

TIER 3 — Referral needed — LA informed and involved

TIER 4 — Police informed — Serious Incident reported to Charity Commission
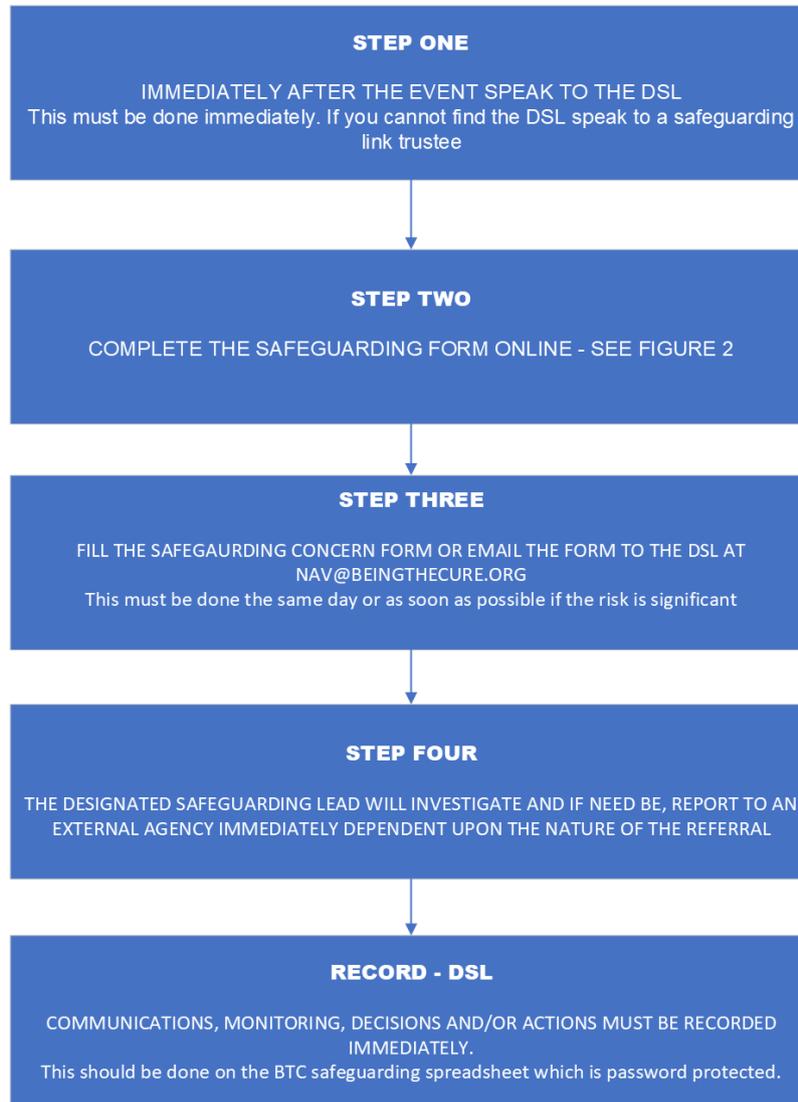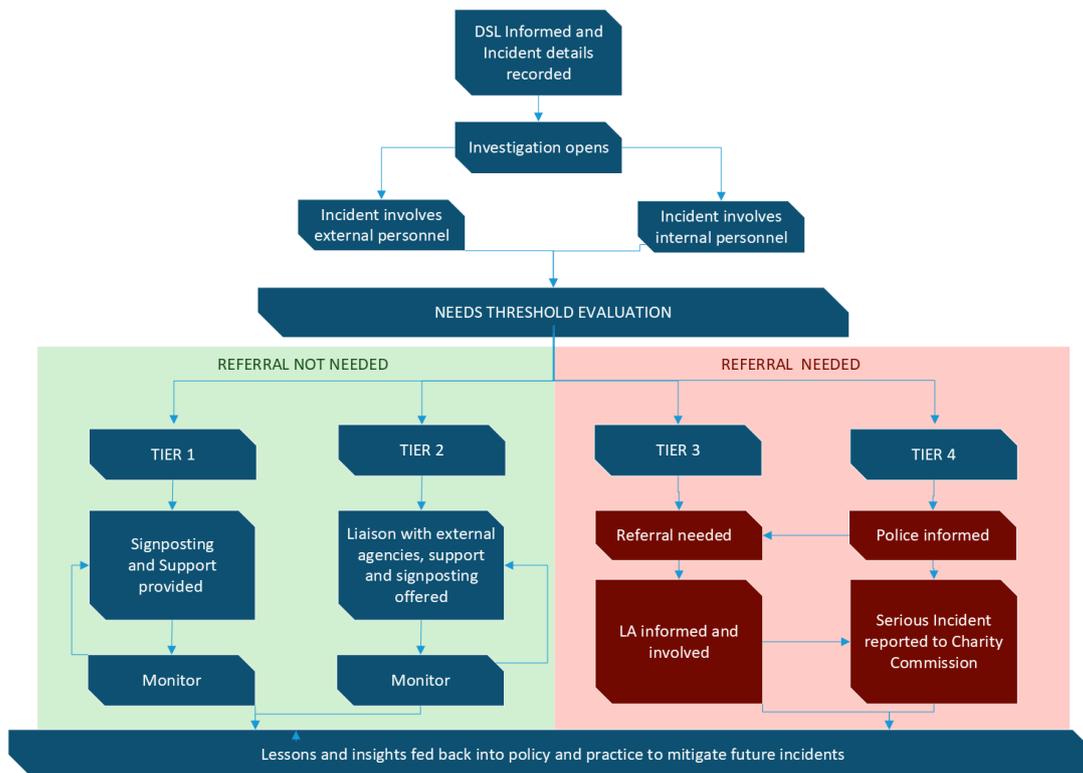
Lessons and insights fed back into policy and practice to mitigate future incidents

The needs threshold evaluation is conducted based on the criteria as per the Indicators of Need Matrix [Tier 1-4] of the Threshold Document outlined by the London Safeguarding Children Procedures. The DSL thereafter decides whether the incident needs a referral, and if so, in what capacity.

The DSL will report the incident to the Charity Commission via their online serious incident reporting portal.

Charity Commission - Serious Incident Report Form

This 'Concern form' is to be completed by BTC staff/volunteers and immediately sent to the BTC DSL via the email at safeguarding@beingthecure.org

Figure 3 – Incident Reporting Form

This form must be sent to the BTC DSL immediately/on the same day of the concern being raised.

Concern Form questions:

1. Your name:

2. Give the initials of the pupil:

3. Give the year group/age:

4. Give the gender:

5. Give a summary of the concern: *e.g., Physical/Neglect/Sexual/Emotional/Online/Peer on Peer/FGM/Radicalisation/CSE/CCE*

6. Enter the date and time of the concern:

7. Enter the details of the concern:

8. Location of the incident:

9. Which school did this incident take place at:

10. Who did you inform at the BTC event?

11. When did you inform this person(s) as the BTC event?

12. Other relevant information:

Note – if the concern is immediate risk to life you must refer to Police/social services/BTC by phone/in-person.

Figure 3 – BTC Safeguarding Concern Form

9.7 CONCERNS ABOUT A STAFF MEMBER, SUPPLY TEACHER, VOLUNTEER, OR CONTRACTOR

If you have concerns about a member of staff or volunteer within BTC or a member of staff at the educational establishments you are visiting (supply teachers, volunteers, site or contractors), or an allegation is made about a member of BTC staff or volunteer or a member of staff at the educational establishments you are visiting (including a supply teacher, volunteer or contractor) posing a risk of harm to children, speak to the CEO of BTC as soon as possible.

If the concerns/allegations are about the CEO, speak to the safeguarding link trustee at safeguarding@beingthecure.org

The CEO/safeguarding link trustee will then follow the procedures set out in appendix 3, if appropriate.
If the concerns/allegations are about the Chair of the board of trustees or safeguarding link trustees, speak to the local authority designated officer (LADO).
Where you believe there is a conflict of interest in reporting a concern or allegation about a member of staff (including a supply teacher, volunteer, or contractor) to the CEO and/or to the safeguarding link trustee report it directly to the local authority designated officer (LADO).

9.8 ALLEGATIONS OF ABUSE MADE AGAINST OTHER PUPILS

We recognize that children are capable of abusing their peers. Abuse will never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up", as this can lead to a culture of unacceptable behaviours and an unsafe environment for pupils.

We also recognize the gendered nature of peer-on-peer abuse. However, all peer-on-peer abuse is unacceptable and will be taken seriously.

Most cases of pupils hurting other pupils will be dealt with under BTC's behaviour policy, but this child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns. This might include where the alleged behaviour:

- Is serious, and potentially a criminal offence

- Could put pupils in the setting at risk

- Is violent

- Involves pupils being forced to use drugs or alcohol

- Involves sexual exploitation, sexual abuse, or sexual harassment, such as indecent exposure, sexual assault, up-skirting or sexually inappropriate pictures or videos (including the sharing of nudes and semi-nudes)

See appendix 4 for more information about peer-on-peer abuse.

Procedures for dealing with allegations of peer-on-peer abuse

If a pupil makes an allegation of abuse against another pupil:
You must record the allegation and tell the DSL but do not investigate it

The DSL will contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence

The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made and any others affected) with a named person they can talk to if needed.

The DSL will contact the children and adolescent mental health services (CAMHS), if appropriate

BTC staff must also report this to their DSL immediately following normal safeguarding reporting procedures (see figure 1, figure 2, and figure 3).

Creating a supportive environment and minimising the risk of peer-on-peer abuse

We recognise the importance of taking proactive action to minimise the risk of peer-on-peer abuse, and of creating a supportive environment where victims feel confident in reporting incidents.

To achieve this, we will work pro-actively with the staff of educational establishments we are visiting to:

- Challenge any form of derogatory or sexualised language or inappropriate behaviour between peers, including requesting or sending sexual images

- Be vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female pupils, and initiation or hazing type violence with respect to boys

- Ensure our curriculum helps to educate pupils about appropriate behaviour and consent

- Ensure pupils are able to easily and confidently report abuse using our reporting systems

- Ensure staff and volunteers reassure victims that they are being taken seriously

- Ensure staff and volunteers are trained to understand:

  - How to recognise the indicators and signs of peer-on-peer abuse, and know how to identify it and respond to reports

  - That even if there are no reports of peer-on-peer abuse, it does not mean it is not happening – staff and volunteers should maintain an attitude of "it could happen here"

  - That if they have any concerns about a child's welfare, they should act on them immediately rather than wait to be told, and that victims may not always make a direct report. For example:

    - Children can show signs or act in ways they hope adults will notice and react to

    - A friend may make a report

    - A member of staff/volunteer may overhear a conversation

    - A child's behaviour might indicate that something is wrong

o   That certain children may face additional barriers to telling someone because of their vulnerability, disability, gender, ethnicity and/or sexual orientation

o   That a pupil harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy

o   The important role they have to play in preventing peer-on-peer abuse and responding where they believe a child may be at risk from it

BTC staff and volunteers must also report this to their DSL immediately following normal safeguarding reporting procedures. The DSL of BTC may wish to refer to escalate.

9.9 SHARING OF NUDES AND SEMI-NUDES ('SEXTING')

Your responsibilities when responding to an incident

If you are made aware of an incident involving the consensual or non-consensual sharing of nude or semi-nude images/videos (also known as 'sexting' or 'youth produced sexual imagery'), you must report it to the DSL immediately.

You must **not**:
- View, copy, print, share, store or save the imagery yourself, or ask a pupil to share or download it (if you have already viewed the imagery by accident, you must report this to the DSL)

- Delete the imagery or ask the pupil to delete it

- Ask the pupil(s) who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)

- Share information about the incident with other members of staff, the pupil(s) it involves or their, or other, parents and/or carers

- Say or do anything to blame or shame any young people involved

You should explain that you need to report the incident, and reassure the pupil(s) that they will receive support and help from the DSL

BTC staff and volunteers must also report this to their DSL immediately following normal safeguarding reporting procedures. The DSL may wish to refer to escalate.

Initial review meeting

Following a report of an incident, the DSL will hold an initial review meeting with appropriate staff – this may include the staff member who reported the incident and the safeguarding or leadership team that deals with safeguarding concerns. This meeting will consider the initial evidence and aim to determine:
Whether there is an immediate risk to pupil(s)

If a referral needs to be made to the police and/or children's social care

What further information is required to decide on the best response

If there is a need to contact the school, college for follow up.

The DSL will make an immediate referral to police and/or children's social care if:
The incident involves an adult

There is 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 educational needs)

The DSL knows that the images or videos suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent

The imagery involves sexual acts and any pupil in the images or videos is under 13

The DSL has reason to believe a pupil is at immediate risk of harm owing to the sharing of nudes and semi-nudes (for example, the young person is presenting as suicidal or self-harming)

If none of the above apply then the DSL, in consultation with the CEO and other members of staff as appropriate, may decide to respond to the incident without involving the police or children's social care. The decision will be made and recorded in line with the procedures set out in this policy.

10. ONLINE SAFETY AND THE USE OF MOBILE TECHNOLOGY

We recognise the importance of safeguarding children from potentially harmful and inappropriate online material, and we understand that technology is a significant component in many safeguarding and wellbeing issues.
To address this, BTC aims to:

- Have robust processes in place to ensure the online safety of pupils, staff, volunteers, and Trustees
- Protect and educate the whole BTC community in its safe and responsible use of technology, including mobile and smart technology (which we refer to as 'mobile phones')
- Set clear guidelines for the use of mobile phones for staff and volunteers.
- Establish clear mechanisms to identify, intervene in and escalate any incidents or concerns, where appropriate

The 4 key categories of risk

Our approach to online safety is based on addressing the following categories of risk:

Content – being exposed to illegal, inappropriate, or harmful content, such as pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation, and extremism

Contact – being subjected to harmful online interaction with other users, such as peer-to-peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes

Conduct – personal online behaviour that increases the likelihood of, or causes, harm, such as making, sending, and receiving explicit images (e.g., consensual and non-consensual sharing of nudes and semi-nudes and/or pornography), sharing other explicit images and online bullying; and

Commerce – risks such as online gambling, inappropriate advertising, phishing and/or financial scams

To meet our aims and address the risks above we will:

- Educate pupils about online safety as part of our curriculum. For example:
  - The safe use of social media, the internet and technology

  - Keeping personal information private

- o How to recognise unacceptable behaviour online
- o How to report any incidents of cyber-bullying, ensuring pupils are encouraged to do so, including where they are a witness rather than a victim.
- Train staff, as part of their induction, on safe internet use and online safeguarding issues including cyber-bullying and the risks of online radicalisation. All staff members will receive refresher training at least once each academic year.
- Make sure staff are aware of any restrictions placed on them with regards to the use of their mobile phone and cameras, for example that:
  - o Staff are allowed to bring their personal phones to BTC sites for their own use, but will limit such use to non-contact time when pupils are not present
  - o Staff will not take pictures or recordings of pupils on their personal phones or cameras
- Make all pupils, parents/carers, staff, volunteers and BTC members aware that they are expected to sign an agreement regarding the acceptable use of the internet in any educational establishment, use of the establishment ICT systems and use of their mobile and smart technology
- Carry out an annual review of our approach to online safety, supported by an annual risk assessment that considers and reflects the risks faced by our visits to educational establishments.

This section summarizes our approach to online safety and mobile phone use. For comprehensive details about BTCs policy on online safety and the use of mobile phones, please refer to our online safety policy and mobile phone policy, which you can find on our website **at www.beingthecure.org/policies**

11. PUPILS WITH SPECIAL EDUCATIONAL NEEDS, DISABILITIES, OR HEALTH ISSUES

We recognize that pupils with special educational needs (SEN) or disabilities or certain health conditions can face additional safeguarding challenges. Additional barriers can exist when recognizing abuse and neglect in this group, including:
- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration

- Pupils being more prone to peer group isolation or bullying (including prejudice-based bullying) than other pupils

- The potential for pupils with SEN, disabilities or certain health conditions being disproportionally impacted by behaviours such as bullying, without outwardly showing any signs

- Communication barriers and difficulties in managing or reporting these challenges.

Pupils with a social worker

Pupils may need a social worker due to safeguarding or welfare needs. We recognise that a child's experiences of adversity and trauma can leave them vulnerable to further harm as well as potentially creating barriers to attendance, learning, behaviour, and mental health.

The DSL will alert BTC staff to those students who are supported with social workers before the visit starts to help us protect vulnerable children.

13. LOOKED-AFTER AND PREVIOUSLY LOOKED-AFTER CHILDREN

We will ensure that BTC staff and volunteers have the skills, knowledge and understanding to keep looked-after children and previously looked-after children safe. In particular, we will ensure that:

- Staff have relevant training and information about Looked-after and previously looked-after children and the importance of being vigilant in terms of safeguarding.

14. COMPLAINTS AND CONCERNS ABOUT BTC SAFEGUARDING POLICIES

14.1 COMPLAINTS AGAINST STAFF

Complaints against staff and volunteers that are likely to require a child protection investigation will be handled in accordance with our procedures for dealing with allegations of abuse made against staff (see appendix 3).

14.2 WHISTLEBLOWING

Staff who have safeguarding concerns about another staff member and their behaviour towards or conduct towards a child must immediately inform the CEO of BTC. If the concern is about the CEO, you must immediately inform the Chair of the Trustees. Staff must consult the Whistleblowing policy for further details.

15. RECORD-KEEPING

We will hold records in line with our records retention schedule.
All safeguarding concerns, discussions, decisions made and the reasons for those decisions, must be recorded in writing. If you are in any doubt about whether to record something, discuss it with the DSL.

Records will include:

- A clear and comprehensive summary of the concern

- Details of how the concern was followed up and resolved

- A note of any action taken, decisions reached and the outcome

- Any non-confidential records will be readily accessible and available. Confidential information and records will be held securely electronically, and password

protected. They will only be available to those who have a right or professional need to see them.

- Safeguarding records relating to individual children will be retained for a reasonable period of time after they have left the program.

- Safeguarding records which contain information about allegations of sexual abuse will be retained for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry.

In addition:

Appendix 2 sets out our policy on record-keeping specifically with respect to recruitment and pre-appointment checks.

Appendix 3 sets out our policy on record-keeping with respect to allegations of abuse made against staff

16.   TRAINING

16.1 ALL STAFF

All staff members will undertake safeguarding and child protection training at induction and annually thereafter, including on whistle-blowing procedures and online safety, to ensure they understand BTC's safeguarding systems and their responsibilities, and can identify signs of possible abuse or neglect.

This training will be regularly updated and will:
- Be integrated, aligned, and considered as part of the whole organisations safeguarding approach and wider staff training.

- Be in line with advice from the 3 safeguarding partners

- Have a clear understanding of the needs of all pupils

All staff and volunteers will have training on the government's anti-radicalization strategy, Prevent (more details in Appendix 4), to enable them to identify children at risk of being drawn into terrorism and to challenge extremist ideas.

Staff will also receive regular safeguarding and child protection updates, including on online safety, as required but at least annually (for example, through emails, e-bulletins, and staff meetings).

Volunteers will receive appropriate training, if applicable.

16.2 THE DSL AND DEPUTY/DEPUTIES

The DSL and deputy/deputies will undertake child protection and safeguarding training at least every 2 years. In addition, they will update their knowledge and skills at regular intervals and at least annually (for example, through e-bulletins, meeting other DSLs, or taking time to read and digest safeguarding developments). They will also undertake Prevent awareness training.

16.3 CHARITY BOARD MEMBERS

All Trustees receive training about safeguarding, to make sure they have the knowledge and information needed to perform their functions and understand their responsibilities. The safeguarding link trustee(s) may be required to act as the 'case manager' in the event that an allegation of abuse is made against the CEO, they receive training in managing allegations for this purpose.

16.4 RECRUITMENT – INTERVIEW PANELS

At least one person conducting any interview for any post at BTC will have undertaken safer recruitment training. This will cover, as a minimum, the contents of Keeping Children Safe in Education, 2022, and will be in line with local safeguarding procedures. See appendix 2 of this policy for more information about our safer recruitment procedures.

17. MONITORING ARRANGEMENTS

This policy will be reviewed annually by the safeguarding link trustee(s). At every review, it will be approved by the full board of trustees.

18. EXTENDED AND OFF-SITE ARRANGEMENTS

All extended and off-site activities are subject to a risk assessment to satisfy health and safety and safeguarding requirements. Where extended activities are provided by and managed by BTC, our own child protection policy and procedures apply. If other organizations provide services or activities on our site on behalf of us, we will check that they have appropriate procedures in place, including safer recruitment procedures. When our pupils attend off-site activities, including day and residential visits and work-related activities, we will check that effective child protection arrangements are in place and risk assessments completed.

19. RESTROOM GUIDELINES

Children five years of age and younger should use a classroom bathroom if one is available. If a classroom bathroom is not available, workers should escort a group of children to the hallway bathroom. They should always go in a group, never taking a child to the bathroom alone. The workers should check the bathroom first to make sure that it is empty, and then allow the children inside. The workers should then remain outside the bathroom door and escort the children back to the classroom. If a child is taking longer than seems necessary, the worker should open the bathroom door and call the child's name. If a child requires assistance, the workers should prop open the bathroom door, and leave the stall door open as they assist the child.
For children between the ages of five and eight, at least one adult male should take boys to the restroom and at least one adult female should take girls. The worker should check the bathroom first to make sure that the bathroom is empty, and then allow the children inside. The worker should then remain outside the bathroom door and escort the children back to the classroom.

For the protection of all, workers should *never* be alone with a child in a bathroom with the door closed and never be in a closed bathroom stall with a child. Parents are strongly encouraged to have their children visit the bathroom prior to each class.

20. LINKS WITH OTHER POLICIES

This policy links to the following policies and procedures:
Staff Code of Conduct
Complaints
Online safety
Mobile phone use
Equality
Whistleblowing
IT acceptable use policy
Medication and First Aid policy
Managing allegations against members of staff policy.

These appendices are based on the Department for Education's statutory guidance, Keeping Children Safe in Education.

APPENDIX 1: TYPES OF ABUSE

Abuse, including neglect, and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap.

Physical abuse 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 is the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Emotional abuse may involve:

- Conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person

- Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate

- Age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction

- Seeing or hearing the ill-treatment of another

- Serious bullying (including cyber-bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve:

- Physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing

- Non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet)

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy 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)

- Ensure access to appropriate medical care or treatment

- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

APPENDIX 2: SAFER RECRUITMENT AND DBS CHECKS – POLICY AND PROCEDURES

Recruitment and selection process

To make sure we recruit suitable people, we will ensure that those involved in the recruitment and employment of staff to work with children have received appropriate safer recruitment training.

We have put the following steps in place during our recruitment and selection process to ensure we are committed to safeguarding and promoting the welfare of children.

Advertising

When advertising roles, we will make clear:

- BTC's commitment to safeguarding and promoting the welfare of children

- That safeguarding checks will be undertaken

- The safeguarding requirements and responsibilities of the role, such as the extent to which the role will involve contact with children

- Whether or not the role is exempt from the Rehabilitation of Offenders Act 1974 and the amendments to the Exceptions Order 1975, 2013 and 2020. If the role is exempt, certain spent convictions and cautions are 'protected', so they do not need to be disclosed, and if they are disclosed, we cannot take them into account

Application forms

Our application forms will:

BEING THE CURE (UK)
Charity Number: 1188077
67 Central Park Road,
London, E6 3DW
+44 (0)208 152 8650
uk@beingthecure.org

www.beingthecure.org

- Include a statement saying that it is an offence to apply for the role if an applicant is barred from engaging in regulated activity relevant to children (where the role involves this type of regulated activity)
- Include a copy of, or link to, our child protection and safeguarding policy and our policy on the employment of ex-offenders

Shortlisting

Our shortlisting process will involve at least 2 people and will:

- Consider any inconsistencies and look for gaps in employment and reasons given for them
- Explore all potential concerns

Once we have shortlisted candidates, we will ask shortlisted candidates to:

- Complete a self-declaration of their criminal record or any information that would make them unsuitable to work with children, so that they have the opportunity to share relevant information and discuss it at interview stage. The information we will ask for includes:
    - If they have a criminal history
    - Whether they are included on the barred list
    - Whether they are prohibited from teaching
    - Information about any criminal offences committed in any country in line with the law as applicable in England and Wales
    - Any relevant overseas information
- Sign a declaration confirming the information they have provided is true

Seeking references and checking employment history

We will obtain references before interview. Any concerns raised will be explored further with referees and taken up with the candidate at interview.

When seeking references, we will:

- Not accept open references
- Liaise directly with referees and verify any information contained within references with the referees

- Ensure any references are from the candidate's current employer and completed by a senior person. Where the referee is school based, we will ask for the reference to be confirmed by the headteacher/principal as accurate in respect to disciplinary investigations

- Obtain verification of the candidate's most recent relevant period of employment if they are not currently employed

- Secure a reference from the relevant employer from the last time the candidate worked with children if they are not currently working with children

- Compare the information on the application form with that in the reference and take up any inconsistencies with the candidate

- Resolve any concerns before any appointment is confirmed

Interview and selection

When interviewing candidates, we will:

- Probe any gaps in employment, or where the candidate has changed employment or location frequently, and ask candidates to explain this

- Explore any potential areas of concern to determine the candidate's suitability to work with children

- Record all information considered and decisions made

Pre-appointment vetting checks

We will record all information on the checks carried out in our single central record (SCR). Copies of these checks, where appropriate, will be held in individuals' personnel files. We follow requirements and best practice in retaining copies of these checks, as set out below.

New staff

All offers of appointment will be conditional until satisfactory completion of the necessary pre-employment checks. When appointing new staff, we will:

- Verify their identity

- Obtain (via the applicant) an enhanced DBS certificate, including barred list information for those who will be engaging in regulated activity (see definition

below). We will obtain the certificate before, or as soon as practicable after, appointment, including when using the DBS update service. We will not keep a copy of the certificate for longer than 6 months, but when the copy is destroyed, we may still keep a record of the fact that vetting took place, the result of the check and recruitment decision taken

- Obtain a separate barred list check if they will start work in regulated activity before the DBS certificate is available

- Verify their mental and physical fitness to carry out their work responsibilities

- Verify their right to work in the UK. We will keep a copy of this verification for the duration of the member of staff's employment and for 2 years afterwards

- Verify their professional qualifications, as appropriate

- Ensure they are not subject to a prohibition order if they are employed to be a teacher

- Carry out further additional checks, as appropriate, on candidates who have lived or worked outside of the UK. Where available, these will include:

  o For all staff, including teaching positions: criminal records checks for overseas applicants

  o For teaching positions: obtaining a letter of professional standing from the professional regulating authority in the country where the applicant has worked

- Check that candidates taking up a management position* are not subject to a prohibition from management (section 128) direction made by the secretary of state

* Management positions are most likely to include, but are not limited to, headteachers, principals and deputy/assistant headteachers.

BTC works with pupils under the age of 8 and as such we will ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006. Where we take a decision that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment on the individual's personnel file. This

will include our evaluation of any risks and control measures put in place, and any advice sought.

Regulated activity means a person who will be:

- Responsible, on a regular basis in a school or college, for teaching, training, instructing, caring for or supervising children; or

- Carrying out paid, or unsupervised unpaid, work regularly in a school or college where that work provides an opportunity for contact with children; or

- Engaging in intimate or personal care or overnight activity, even if this happens only once and regardless of whether they are supervised or not

Existing staff

In certain circumstances we will carry out all the relevant checks on existing staff as if the individual was a new member of staff. These circumstances are when:

- There are concerns about an existing member of staff's suitability to work with children; or

- An individual moves from a post that is not regulated activity to one that is; or

- There has been a break in service of 12 weeks or more

- We will refer to the DBS anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult where:
    - We believe the individual has engaged in relevant conduct; or

    - We believe the individual has received a caution or conviction for a relevant (automatic barring either with or without the right to make representations) offence, under the Safeguarding Vulnerable Groups Act 2006 (Prescribed Criteria and Miscellaneous Provisions) Regulations 2009; or

    - We believe the 'harm test' is satisfied in respect of the individual (i.e. they may harm a child or vulnerable adult or put them at risk of harm); and

    - The individual has been removed from working in regulated activity (paid or unpaid) or would have been removed if they had not left.

Agency and third-party staff

We will obtain written notification from any agency or third-party organization that it has carried out the necessary safer recruitment checks that we would otherwise perform. We will also check that the person presenting themselves for work is the same person on whom the checks have been made.

Contractors

We will ensure that any contractor, or any employee of the contractor, who is to work at BTC has had the appropriate level of DBS check (this includes contractors who are provided through a PFI or similar contract). This will be:

- An enhanced DBS check with barred list information for contractors engaging in regulated activity.
- An enhanced DBS check, not including barred list information, for all other contractors who are not in regulated activity but whose work provides them with an opportunity for regular contact with children.

We will obtain the DBS check for self-employed contractors. We will not keep copies of such checks for longer than 6 months. Contractors who have not had any checks will not be allowed to work unsupervised or engage in regulated activity under any circumstances. We will check the identity of all contractors and their staff on arrival at our sites.

Volunteers

We will:

- Never leave an unchecked volunteer unsupervised or allow them to work in regulated activity.

- Obtain an enhanced DBS check with barred list information for all volunteers who are new to working in regulated activity.

- Carry out a risk assessment when deciding whether to seek an enhanced DBS check without barred list information for any volunteers not engaging in regulated activity. We will retain a record of this risk assessment.

- Ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare

Act 2006. Where we decide that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment. This will include our evaluation of any risks and control measures put in place, and any advice sought.

Trustees

All BTC board members will have an enhanced DBS check without barred list information. They will have an enhanced DBS check with barred list information if working in regulated activity.

Trustees will also have the following checks:

- A section 128 check (to check prohibition on participation in management under section 128 of the Education and Skills Act 2008).

- Identity

- Right to work in the UK

- Other checks deemed necessary if they have lived or worked outside the UK.

APPENDIX 3: ALLEGATIONS OF ABUSE MADE AGAINST STAFF

SECTION 1: ALLEGATIONS THAT MAY MEET THE HARMS THRESHOLD

This section is based on 'Section 1: Allegations that may meet the harms threshold' in part 4 of Keeping Children Safe in Education. This section applies to all cases in which it is alleged that a current member of staff, including a volunteer or contractor, 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 he or she 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 – this includes behaviour taking place both inside and outside of the settings

We will deal with any allegation of abuse quickly, in a fair and consistent way that provides effective child protection while also supporting the individual who is the subject of the allegation.

A 'case manager' will lead any investigation. This will be the CEO, or the safeguarding link trustee where the CEO is the subject of the allegation. The case manager will be identified at the earliest opportunity.

Our procedures for dealing with allegations will be applied with common sense and judgement. The procedure is set out in our 'Managing allegations against members of staff policy'.

Low-level Concerns

Concerns may be graded Low-level if the concern does not meet the criteria for an allegation; and the person* has acted in a way that is inconsistent with the staff code of conduct, including inappropriate conduct outside of work. Example behaviours include, but are not limited to:

- being over friendly with children; having favourites;
- taking photographs of children on their mobile phone;
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or,
- using inappropriate sexualized, intimidating, or offensive language.

If the concern has been raised via a third party, the case manager should collect as much evidence as possible by speaking:

- directly to the person who raised the concern unless it has been raised anonymously.
- to the individual involved and any witnesses.

Reports about supply staff and contractors should be notified to their employers, so any potential patterns of inappropriate behaviour can be identified.

Staff should be encouraged and feel confident to self-refer, where, for example, they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a

way that they consider falls below the expected professional standards.
Low-level concerns should be recorded in writing, including:

- name* of individual sharing their concerns • details of the concern
- context in which the concern arose
- action taken

(* if the individual wishes to remain anonymous then that should be respected as far as reasonably possible)

Records must be kept confidential, held securely, and comply with the Data Protection Act 2018. BTC will keep the records until the individual leaves their employment. Records should be reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.

If a concerning pattern of behaviour is identified and now meets the criteria for an allegation, then the matter should be referred to the LADO.

The records' review might identify that there are wider cultural issues within the charity's settings that enabled the behaviour to occur. This might mean that policies or processes could be revised, or extra training delivered to minimize the risk of it happening again.

APPENDIX 4: SPECIFIC SAFEGUARDING ISSUES

Child criminal exploitation

Child criminal exploitation (CCE) is a form of abuse where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into criminal activity, in exchange for something the victim needs or wants, and/or for the financial or other advantage of the perpetrator or facilitator, and/or through violence or the threat of violence.

The abuse can be perpetrated by males or females, and children or adults. It can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse.

The victim can be exploited even when the activity appears to be consensual. It does not always involve physical contact and can happen online. For example, young people may be forced to work in cannabis factories, coerced into moving drugs or money across the country (county lines), forced to shoplift or pickpocket, or to threaten other young people.

Indicators of CCE can include a child:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Suffering from changes in emotional wellbeing
- Misusing drugs and alcohol
- Going missing for periods of time or regularly coming home late
- Regularly missing school or education
- Not taking part in education

If a member of staff suspects CCE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

Child sexual exploitation

Child sexual exploitation (CSE) is a form of child sexual abuse where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a

child into sexual activity, in exchange for something the victim needs or wants and/or for the financial advantage or increased status of the perpetrator or facilitator. It may, or may not, be accompanied by violence or threats of violence.

The abuse can be perpetrated by males or females, and children or adults. It can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse.

The victim can be exploited even when the activity appears to be consensual. Children or young people who are being sexually exploited may not understand that they are being abused. They often trust their abuser and may be tricked into believing they are in a loving, consensual relationship.

CSE can include both physical contact (penetrative and non-penetrative acts) and non-contact sexual activity. It can also happen online. For example, young people may be persuaded or forced to share sexually explicit images of themselves, have sexual conversations by text, or take part in sexual activities using a webcam. CSE may also occur without the victim's immediate knowledge, for example through others copying videos or images.

In addition to the CCE indicators above, indicators of CSE can include a child:

- Having an older boyfriend or girlfriend
- Suffering from sexually transmitted infections or becoming pregnant

If a member of staff suspects CSE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

Domestic abuse

Children can witness and be adversely affected by domestic abuse and/or violence at home where it occurs between family members. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and child/adolescent to parent violence and abuse. Anyone can be a victim of domestic abuse, regardless of gender, age, ethnicity, socioeconomic status, sexuality or background, and domestic abuse can take place inside or outside of the home.

Older children may also experience domestic abuse and/or violence in their own personal relationships.

Exposure to domestic abuse and/or violence can have a serious, long-lasting emotional and psychological impact on children.

If police are called to an incident of domestic abuse and any children in the household have experienced the incident, the police will inform the key adult at BTC (usually the designated safeguarding lead) before the child or children arrive at school/setting the following day.

The DSL will provide support according to the child's needs and update records about their circumstances.

Homelessness

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare.

The DSL and deputy/deputies will be aware of contact details and referral routes in to the local housing authority so they can raise/progress concerns at the earliest opportunity (where appropriate and in accordance with local procedures).

Where a child has been harmed or is at risk of harm, the DSL will also make a referral to children's social care.

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

So-called 'honour-based' abuse (HBA) encompasses incidents or crimes committed to protect or defend the honour of the family and/or community, including FGM, forced marriage, and practices such as breast ironing.

Abuse committed in this context often involves a wider network of family or community pressure and can include multiple perpetrators.

All forms of HBA are abuse and will be handled and escalated as such. All staff will be alert to the possibility of a child being at risk of HBA or already having suffered it. If staff have a concern, they will speak to the DSL, who will activate local safeguarding procedures.

FGM
The DSL will make sure that staff have access to appropriate training to equip them to be alert to children affected by FGM or at risk of FGM.

Section 9.3 of this policy sets out the procedures to be followed if a staff member discovers that an act of FGM appears to have been carried out or suspects that a pupil is at risk of FGM.

Indicators that FGM has already occurred include:

- A pupil confiding in a professional that FGM has taken place
- A mother/family member disclosing that FGM has been carried out
- A family/pupil already being known to social services in relation to other safeguarding issues
- A girl:
  - Having difficulty walking, sitting, or standing, or looking uncomfortable
  - Finding it hard to sit still for long periods of time (where this was not a problem previously)
  - Spending longer than normal in the bathroom or toilet due to difficulties urinating
  - Having frequent urinary, menstrual or stomach problems
  - Avoiding physical exercise or missing PE
  - Being repeatedly absent from school, or absent for a prolonged period
  - Demonstrating increased emotional and psychological needs – for example, withdrawal or depression, or significant change in behaviour
  - Being reluctant to undergo any medical examinations
  - Asking for help, but not being explicit about the problem
  - Talking about pain or discomfort between her legs

Potential signs that a pupil may be at risk of FGM include:
- The girl's family having a history of practising FGM (this is the biggest risk factor to consider)
- FGM being known to be practised in the girl's community or country of origin
- A parent or family member expressing concern that FGM may be carried out

- A family not engaging with professionals (health, education or other) or already being known to social care in relation to other safeguarding issues
- A girl:
  - Having a mother, older sibling or cousin who has undergone FGM
  - Having limited level of integration within UK society
  - Confiding to a professional that she is to have a "special procedure" or to attend a special occasion to "become a woman"
  - Talking about a long holiday to her country of origin or another country where the practice is prevalent, or parents/carers stating that they or a relative will take the girl out of the country for a prolonged period
  - Requesting help from a teacher or another adult because she is aware or suspects that she is at immediate risk of FGM
  - Talking about FGM in conversation – for example, a girl may tell other children about it (although it is important to take into account the context of the discussion)
  - Being unexpectedly absent from school
  - Having sections missing from her 'red book' (child health record) and/or attending a travel clinic or equivalent for vaccinations/anti-malarial medication

The above indicators and risk factors are not intended to be exhaustive.

Forced marriage

Forcing a person into marriage is a crime. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats, or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological.

Staff will receive training around forced marriage and the presenting symptoms. We are aware of the 'one chance' rule, i.e., we may only have one chance to speak to the potential victim and only one chance to save them.

If a member of staff suspects that a pupil is being forced into marriage, they will speak to the pupil about their concerns in a secure and private place. They will then report this to the DSL.

The DSL will:

- Speak to the pupil about the concerns in a secure and private place
- Activate the local safeguarding procedures and refer the case to the local authority's designated officer
- Seek advice from the Forced Marriage Unit on 020 7008 0151 or fmu@fco.gov.uk
- Refer the pupil to an education welfare officer, pastoral tutor, learning mentor, or school counsellor, as appropriate

Preventing radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups

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 also 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.

Educational institutions have a duty to prevent children from being drawn into terrorism. The DSL and all other staff will undertake Prevent awareness training and make sure that staff have access to appropriate training to equip them to identify children at risk.

We will assess the risk of children in our settings being drawn into terrorism. This assessment will be based on an understanding of the potential risk in our local area, in collaboration with our local safeguarding partners and local police force.
We will ensure that suitable internet filtering is in place and equip our pupils to stay safe online at our sites..

There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. Radicalization can occur quickly or over a long period.
Staff will be alert to changes in pupils' behaviour.
The government website Educate Against Hate and charity NSPCC say that signs that a pupil is being radicalized can include:

- Refusal to engage with, or becoming abusive to, peers who are different from themselves

- Becoming susceptible to conspiracy theories and feelings of persecution

- Changes in friendship groups and appearance

- Rejecting activities, they used to enjoy

- Converting to a new religion

- Isolating themselves from family and friends

- Talking as if from a scripted speech

- An unwillingness or inability to discuss their views

- A sudden disrespectful attitude towards others

- Increased levels of anger

- Increased secretiveness, especially around internet use

- Expressions of sympathy for extremist ideologies and groups, or justification of their actions

- Accessing extremist material online, including on Facebook or Twitter

- Possessing extremist literature

- Being in contact with extremist recruiters and joining, or seeking to join, extremist organisations

Children who are at risk of radicalisation may have low self-esteem or be victims of bullying or discrimination. It is important to note that these signs can also be part of normal teenage behaviour – staff should have confidence in their instincts and seek advice if something feels wrong.

If staff are concerned about a pupil, they will follow our procedures set out in section 9.4 of this policy, including discussing their concerns with the DSL.

Staff should **always** take action if they are worried.

Further information on the BTC's measures to prevent radicalisation are set out in other policies and procedures.

Peer-on-peer abuse

Peer-on-peer abuse is when children abuse other children. This type of abuse can take place inside and outside of the settings and online.
Peer-on-peer abuse is most likely to include, but may not be limited to:

- Bullying (including cyber-bullying, prejudice-based and discriminatory bullying)

- Abuse in intimate personal relationships between peers

- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse)

- Sexual violence, such as rape, assault by penetration and sexual assault (this may include an online element which facilitates, threatens and/or encourages sexual violence)

- Sexual harassment, such as sexual comments, remarks, jokes, and online sexual harassment, which may be standalone or part of a broader pattern of abuse

- Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party

- Consensual and non-consensual sharing of nudes and semi nudes images and/or videos (also known as sexting or youth produced sexual imagery)

Upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm

Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element)

Where children abuse their peers online, this can take the form of, for example, abusive, harassing, and misogynistic messages; the non-consensual sharing of indecent images, especially around chat groups; and the sharing of abusive images and pornography, to those who don't want to receive such content.

If staff have any concerns about peer-on-peer abuse, or a child makes a report to them, they will follow the procedures set out in this policy.

Sexual violence and sexual harassment between children in educational settings

Sexual violence and sexual harassment can occur:

- Between 2 children of any age and sex
- Through a group of children sexually assaulting or sexually harassing a single child or group of children
- Online and face to face (both physically and verbally)

Sexual violence and sexual harassment exist on a continuum and may overlap.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment and will be exacerbated if the alleged perpetrator(s) attends the same school.

If a victim reports an incident, it is essential that staff make sure they are reassured that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

Some groups are potentially more at risk. Evidence shows that girls, children with SEN and/or disabilities, and lesbian, gay, bisexual and transgender (LGBT) children are at greater risk.

Staff should be aware of the importance of:

- Challenging inappropriate behaviours

- Making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up

- Challenging physical behaviours (potentially criminal in nature), such as grabbing bottoms, breasts, and genitalia, pulling down trousers, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them

If staff have any concerns about sexual violence or sexual harassment, or a child makes a report to them, they will follow the procedures set out in section 9 of this policy, as appropriate. In particular, section 9.8 and 9.9 set out more detail about our approach to this type of abuse.

Serious violence

Indicators which may signal that a child is at risk from, or involved with, serious violent crime may include:

- Increased absence from the setting

- Change in friendships or relationships with older individuals or groups

- 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 (this could indicate that the child has been approached by, or is involved with, individuals associated with criminal networks or gangs and may be at risk of criminal exploitation (see above))

Risk factors which increase the likelihood of involvement in serious violence include:

- Being male

- Having been frequently absent or permanently excluded from school/our setting

- Having experienced child maltreatment

- Having been involved in offending, such as theft or robbery

Staff will be aware of these indicators and risk factors. If a member of staff has a concern about a pupil being involved in, or at risk of, serious violence, they will report this to the DSL.