Heatherside Infant School – Safeguarding Policy & Guidance 2026/27

POLICY TYPE	COMMITTEE RESPONSIBLE	APPROVED	REVIEW CYCLE	NEXT REVIEW
Safeguarding	FGB	October 2026	Annual	Autumn 2027

Hampshire County Council

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Any links to local or national advice and guidance can be accessed via the safeguarding in education webpages:
www.hants.gov.uk/educationandlearning/safeguardingchildren/guidance

Links to online specific advice and guidance can be found at
https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingchildren/onlinesafety

Links to other pages from the local authority on safeguarding can be found at
https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingchildren

The procedures of the Hampshire Safeguarding Children Partnership can be accessed at
http://hipsprocedures.org.uk/page/contents

Other policies which sit alongside the Safeguarding Policy:

- Child Protection Policy
- Acceptable Use Policy
- Inclusion Policy
- Behaviour Policy
- Staff Code of Conduct
- Equality Policy

Heatherside Infant School Safeguarding Policy

This policy should be read in conjunction with the school's Child Protection Policy and Staff Code of Conduct

Policy Statement

Safeguarding determines the actions that we take to keep children safe and protect them from harm in all aspects of their school life. As a school we are committed to safeguarding and promoting the welfare of all our pupils.

The actions that we take to prevent harm; to promote wellbeing; to create safe environments; to educate on rights, respect and responsibilities; to respond to specific issues and vulnerabilities all form part of the safeguarding responsibilities of the school. As such, this overarching policy will link to other policies which will provide more information and greater detail.

Aims

- To provide staff with the framework to promote and safeguard the wellbeing of children and in so doing ensure they meet their statutory responsibilities.
- To ensure consistent good practice across the school.
- To demonstrate our commitment to protecting children.

Principles and Values

Safeguarding and promoting the welfare of children is everyone's responsibility. Everyone who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all staff should make sure their approach is child centred. This means that they should consider, at all times, what is in the best interests of the child.

Safeguarding measures are put in place to minimise harm to children. There may be occasions where gaps or deficiencies in our policies and processes will be highlighted. In these situations, a review will be carried out in order to identify learning and inform the policy, practice and culture of the school.

All children in our school can talk to any member of staff about situations, or to share concerns, which are causing them worries. The staff will listen to the child, take their worries seriously and share the information with the safeguarding lead.

In addition, we provide children with information about who they can talk to outside of school, both within the community and with local or national organisations that can provide support or help.

This policy will be reviewed by the DSL and Headteacher at least annually, and whenever changes in legislation, statutory guidance, local safeguarding arrangements, emerging risks or lessons learned require it. The Governing Body will evaluate and approve the policy and hold leaders to account for its effective implementation.

Areas of Safeguarding

Safeguarding areas can be separated into specific areas:-

- emerging or high-risk issues;
- those related to the children as an individual;
- other safeguarding issues affecting children;
- and those related to the running of the school.

Definitions

Within this document:

'***Safeguarding'*** is defined in the Children Act 2004 as protecting from maltreatment whether that is within or outside the home, including online; preventing impairment of children's mental and physical health and development; ensuring that children grow up with the provision of safe and effective care; and taking action to enable all children to have the best outcomes. Our safeguarding practice applies to every child.

The term ***Staff*** applies to all those working for or on behalf of the school, full time or part time, supply teachers and trainees, in either a paid or voluntary capacity. This also includes parent volunteers and Governors.

Child refers to all young people who have not yet reached their 18th birthday. On the whole, this will apply to children of our school; however, the policy will extend to visiting children and students from other establishments.

Parent refers to birth parents and other adults in a parenting role for example adoptive parents, guardians, step parents, and foster carers.

Key personnel

The designated safeguarding lead for the school is:

Leanne Bate

The deputy designated safeguarding leads are:

Laura Norris
Sarah Stone
Alex Fergus-Smith
Phyl Glass

Part 1 – High risk and emerging safeguarding issues

Contextual Safeguarding

All staff should be aware that safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside of our school. All staff, but especially the designated and deputies safeguarding leads should consider whether children are at risk of abuse or exploitation in situations outside their families.

All staff should be aware that abuse, neglect exploitation and safeguarding issues are rarely standalone events and cannot be covered by one definition or one label alone. In most cases, multiple issues will overlap.

Risk and harm outside of the family can take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual abuse (including harassment and exploitation), domestic abuse in their own intimate relationships (teenage relationship abuse including physical sexual, emotional abuse and stalking), criminal exploitation (including financial exploitation), serious youth violence, county lines and radicalisation.

As a school, we will consider the various factors that can impact the life of any child about whom we have concerns. We will consider the level of influence that these factors have on their ability to be protected and remain free from harm, particularly around child exploitation or criminal activity.

What life is like for a child outside the school gates, within the home, within the family and within the community are key considerations when the DSL is looking at any concerns.

Preventing Radicalisation and Extremism

The prevent duty requires that all staff are aware of the signs that a child may be susceptible to radicalisation. The risks include, but are not limited to, political, environmental, animal rights or faith-based extremism that may lead to a child becoming radicalised. All staff have received prevent training in order that they can identify the signs of children being radicalised.

There is no single way of identifying whether a child is likely to be susceptible to an extremist ideology. Background factors combined with specific influences such as family and friends may contribute to a child's susceptibility. Similarly, radicalisation and the grooming of children can occur through many different methods, such as social media or the internet, and at different settings.

As part of the preventative process resilience to radicalisation will be built through the promotion of fundamental British values through the curriculum.

Any child who is considered susceptible to radicalisation will be referred by the DSL using the National Referral Form: Prevent | Hampshire County Council (hants.gov.uk). The Counter Terrorism Police and Children's Services through MASH will then be informed. If

the Counter Terrorism Police consider the information to be indicating a level of risk, a "channel panel" will be convened and the school will attend and support this process. The Prevent leader in school is the Headteacher who has received more in-depth training, including on extremist and terrorist ideologies, how to make referrals and how to work with Channel panels. This training will be refreshed at least every two years to enable them to support other staff on Prevent matters and update them on relevant issues.
The school has completed a risk assessment which assesses how our learners and staff may be at risk of being radicalised into terrorism, including online.

Gender based violence / Violence against women and girls

https://www.gov.uk/government/policies/violence-against-women-and-girls

The government has a strategy looking at specific issues faced by women and girls. Within the context of this safeguarding policy the following sections are how we respond to violence against girls: female genital mutilation, virginity testing and hymenoplasty, forced marriage, honour or faith based violence and teenage relationship abuse all fall under this strategy.

Female Genital Mutilation (FGM)

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies.

The age at which girls undergo FGM varies enormously according to the community. The procedure may be carried out when the girl is newborn, during childhood or adolescence, just before marriage or during the first pregnancy. However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at a higher risk.

FGM is illegal in the UK.

On the 31st October 2025, it became mandatory for teachers to report known cases of FGM to the police. 'Known' cases are those where either a girl informs the person that an act of FGM – however described – has been carried out on her, or where the person observes physical signs on a girl appearing to show that an act of FGM has been carried out and the person has no reason to believe that the act was, or was part of, a surgical operation within section 1(2)(a) or (b) of the FGM Act. In these situations, the DSL and/or headteacher will be informed and the member of teaching staff must call the police to report suspicion that FGM has happened.

At no time will staff examine pupils to confirm concerns.

For cases where it is believed that a girl may be vulnerable to FGM or there is a concern that she may be about to be genitally mutilated, the staff will inform the DSL who will report it as with any other child protection concern.

While FGM has a specific definition, there are other abusive cultural practices which can be considered harmful to women and girls. Breast ironing is one of five UN defined 'forgotten crimes against women.' It is a practice whereby the breasts of girls typically aged 8-16 are pounded using tools such as spatulas, grinding stones, hot stones, and hammers to delay the appearance of puberty. This practice is considered to be abusive and should be referred to children's social care.

Virginity testing and hymenoplasty

Staff should be aware that virginity testing and hymenoplasty became illegal in 2022 and that it is a criminal offence for anyone to perform or assist in the performance of FGM, virginity testing or hymenoplasty, in the UK or abroad, or to fail to protect a person under 16 for whom they are responsible. For cases where it is believed that a girl may be vulnerable to virginity testing or hymenoplasty, the staff will inform the DSL who will report it as with any other child protection concern.

Virginity testing is any examination (with or without contact) of the female genitalia intended to establish if vaginal intercourse has taken place. This is irrespective of whether consent has been given.

Hymenoplasty is a procedure undertaken to reconstruct a hymen. The aim of the procedure is to ensure that a woman bleeds the next time she has intercourse to give the impression that she has no history of vaginal intercourse.

Forced Marriage

[an alternative and fuller summary about the risk and impact of forced marriage on children can be found in the multi-agency guidance of the forced marriage unit page 32 - 36]

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 marriage. Threats can be physical or emotional and psychological. Duress can include physical, *psychological, financial, sexual and emotional pressure.* In developing countries 11% of girls are married before the age of 15. One in 3 victims of forced marriage in the U.K. is under 18.

It is important that all members of staff recognise the presenting symptoms, how to respond if there are concerns and where to turn for advice.

Advice and help can be obtained nationally through the Forced Marriage Unit and locally through the local police safeguarding team or children's social care. Policies and practices in this school reflect the fact that while all members of staff, including teachers, have important responsibilities with regard to children who may be at risk of forced marriage, teachers and school leaders should not undertake roles in this regard that are most appropriately discharged by other children's services professionals such as police officers or social workers.

Characteristics that may indicate forced marriage
While individual cases of forced marriage, and attempted forced marriage, are often very particular, they are likely to share a number of common and important characteristics, including:

- an extended absence from school/college, including truancy;
- a drop in performance or sudden signs of low motivation;
- excessive parental restriction and control of movements;
- a history of siblings leaving education to marry early;
- poor performance, parental control of income and students being allowed only limited career choices;
- evidence of self-harm, treatment for depression, attempted suicide, social isolation, eating disorders or substance abuse; and/or
- evidence of family disputes/conflict, domestic violence/abuse or running away from home.

On their own, these characteristics may not indicate forced marriage. However, it is important to be satisfied that where these behaviours occur, they are not linked to forced marriage. It is also important to avoid making assumptions about an individual childr's circumstances or act on the basis of stereotyping. For example, an extended holiday may be taken for entirely legitimate reasons and may not necessarily represent a pretext for forced marriage.

Honour or Faith-Based Abuse

So-called 'honour' or faith-based abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take.

It is often linked to family or community members who believe someone has brought shame to their family or community by doing something that is not in keeping with their unwritten rule of conduct. For example, honour-based abuse might be committed against people who:

- become involved with a boyfriend or girlfriend from a different culture or religion
- want to get out of an arranged marriage
- want to get out of a forced marriage
- wear clothes or take part in activities that might not be considered traditional within a particular culture
- convert to a different faith from the family
- are exploring their sexuality or identity

Women and girls are the most common victims of honour-based abuse however, it can also affect men and boys. Crimes of 'honour' do not always include violence. Crimes committed in the name of 'honour' might include:

- domestic abuse

- threats of violence
- sexual or psychological abuse
- forced marriage
- being held against your will or taken somewhere you don’t want to go
- assault

All forms of honour-based abuse are abusive (regardless of the motivation) and should be handled and escalated as such. If staff believe that a child is at risk or has already suffered from honour-based abuse, they will report to the DSL who will follow the usual safeguarding referral process; however, if it is clear that a crime has been committed or the child is at immediate risk, the police will be contacted in the first instance. It is important that, if honour-based abuse is known or suspected, communities and family members are NOT spoken to prior to referral to the police or social care as this could increase risk to the child.

Teenage Relationship Abuse

Relationship abuse can take place at any age and describes unacceptable behaviour between two people who are in a relationship.

Research has shown that teenagers do not always understand what may constitute abusive and controlling behaviours, e.g. checking someone's ‘phone, telling them what to wear, who they can/can't see or speak to or coercing them to engage in activities they are not comfortable with. The government campaign “disrespect nobody” provides other examples of abusive behaviour within a relationship.

This lack of understanding can lead to these abusive behaviours feeling ‘normal’ and therefore left unchallenged, as they are not recognised as being abusive.

In response to these research findings, the school will provide education to help prevent teenagers from becoming victims and perpetrators of abusive relationships. In the context of our infant school, we will encourage and educate children to develop positive and respectful relationships with others and to understand consent in its broadest form. This will form part of the school’s curriculum in respect of PSHE and Relationship Education and in developing this curriculum school will follow the RSHE guidance (July 2025) Relationships Education, Relationships and Sex Education and Health Education guidance

If the school has concerns about a child in respect of relationship abuse, it will report those concerns in line with procedures to the appropriate authorities as a safeguarding concern, a crime or both.

Sexual Violence and Sexual Harassment Between Children

Sexual violence and sexual harassment (SVSH) can occur between two children of any age and sex from primary to secondary stage and into colleges. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Harmful sexual behaviour exists on a continuum and may escalate into sexual harassment or sexual violence; it can occur online or face-to-face and is never acceptable. Whilst the age of children in our school means that such behaviours are rare, we must be

alert for them. Concerns, even ‘small’ ones, are raised with the DSL and, when appropriate to do so, are talked through with parents and logged via CPOMS.

Within our school all staff receive training about sexual violence and sexual harassment and what to do if they have a concern or receive a report. Whilst any report of sexual violence or sexual harassment should be taken seriously, staff are aware it is more likely that girls will be the victims of sexual violence and sexual harassment and more likely it will be perpetrated by boys. This pattern of prevalence will not, however, be an obstacle to ALL concerns being treated seriously. Staff are also aware of the age relevance of our children.

Staff are also aware that children with disabilities are three times more likely to be abused than their peers.

This school has a zero-tolerance approach to SVSH. We are clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up. It cannot be described as ‘banter,’ ‘having a laugh’ or ‘boys being boys.

We will also take seriously any sharing of sexual images (photos, pictures or drawings) and videos; sexual jokes, comments or taunting either in person or on social media; or online sexual harassment.

The child protection policy has a clear procedure dealing with SVSH.

We will follow Part five in KCSiE 2026 Child-on child sexual violence and sexual harassment which says:

- Making it clear that there is a zero-tolerance approach to sexual violence and sexual harassment, that it is never acceptable, and it will not be tolerated. It should never be passed off as “banter,” “just having a laugh,” “a part of growing up” or “boys being boys.”
- Understanding that a failure to do so can lead to a culture of unacceptable behaviour, misogyny, an unsafe environment and in worst case scenarios a culture that normalises abuse, leading to children accepting it as normal and not coming forward to report it.
- Recognising, acknowledging, and understanding the scale of harmful sexual behaviour (HSB), sexual harassment and sexual abuse and that even if there are no reports it does not mean it is not happening, it may be the case that it is just not being reported.
- Recognising the escalatory nature of misogyny and the benefits of early identification to support the school’s approach to minimising the risk of HSB, sexual harassment and sexual violence, and
- Also challenging physical behaviour (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.

All staff will maintain the attitude that “It could happen here.”

Sexism and stereotyping

The new RSHE Guidance (July 2025) Relationships Education, Relationships and Sex Education and Health Education guidance outlines the importance of developing positive concepts and masculinity and femininity.

Both within and beyond the classroom, staff should be conscious of everyday sexism, misogyny/ misandry, homophobia, biphobia and stereotypes, and should take action to build a culture where prejudice is identified and tackled. Staff have an important role in modelling positive behaviour and avoiding language that might perpetuate harmful stereotypes. Children should understand the importance of challenging harmful beliefs and attitudes and should understand the links between sexism and misogyny and violence against women and girls. Where misogynistic ideas are expressed at school, staff should challenge the ideas, rather than the person expressing them.

Children may be exposed to online content which normalises harmful or violent sexual behaviours, which might include sexist and misogynistic influencers who normalise sexual harassment and abuse. Young people may be more vulnerable to this content when they have low self-esteem, are being bullied, or have other challenges in their lives. Teachers should encourage children to consider how this content may be harmful to both men and women, while avoiding stigmatising or perpetuating harmful stereotypes about boys, and avoiding directly signposting to specific content and content producers.

Upskirting

In 2019 the Voyeurism Offences Act came into force and made the practice of upskirting illegal.

Upskirting is defined as someone taking a picture under another person's clothing without their knowledge, with the intention of viewing their genitals or buttocks, with or without underwear. The intent of upskirting is to gain sexual gratification or to cause the victim humiliation, distress or alarm. It is a criminal offence. Anyone of any gender, can be a victim.

If staff become aware that upskirting has occurred, this will be treated as a sexual offence and reported accordingly to the DSL and parents will be informed.

Behaviours that would be considered as sexual harassment which may be pre-cursors to upskirting, such as the use of reflective surfaces or mirrors to view underwear or genitals, will not be tolerated and the school will respond to these with appropriate disciplinary action and education.

In our school, children are not permitted to have personal cameras or other means of taking photos in school. Should a child be found to have a camera or mobile phone with them in school, this would, be confiscated and handed to the headteacher until the parents came to collect the child. All use of school owned cameras and photo imaging technology are always used and accessed within taught lesson time where staff are always present.

Should any child be thought to be taking inappropriate photos of other children, or displaying pre-cursive behaviour to up-skirting, such as using mirrors to try and view underwear or genitals, the staff will talk to all children involved and their parents to make clear the gravity of such behaviour. Any such incidents would be reported to the DSL and logged on CPOMS. As our children under 10 years of age, this would not be reported to the police, although would be referred to Children's Services should the threshold of concern be met.

The Trigger Trio

The term 'Trigger Trio' has replaced the previous phrase 'Toxic Trio' which was used to describe the issues of domestic violence, mental ill-health and substance misuse which have been identified as common features of families where harm to adults and children has occurred.

The Trigger Trio are viewed as indicators of increased risk of harm to children and young people. In an analysis of Serious Cases Reviews undertaken by Ofsted in 2011, they found that in nearly 75% of these cases two or more of the triggers were present.
These factors will have a contextual impact on the safeguarding of children and young people.

For **information about Domestic Abuse**, including indicators of abuse, please see the school's Child Protection Policy.

Parental mental health

The term 'mental ill health' is used to cover a wide range of conditions, from eating disorders, mild depression and anxiety to psychotic illnesses such as schizophrenia or bipolar disorder. Parental mental illness does not necessarily have an adverse impact on a child's developmental needs, but it is essential to always assess its implications for each child in the family. It is essential that the diagnosis of a parent's/carer's mental health is not seen as defining the level of risk. Similarly, the absence of a diagnosis does not equate to there being little or no risk.

For children, the impact of poor parental mental health can include:

- The parent's/carer's needs or illnesses taking precedence over the child's needs.
- The child's physical and emotional needs being neglected.
- The child acting as a young carer for a parent or a sibling.
- The child having restricted social and recreational activities.
- The child finding it difficult to concentrate, potentially having an impact on educational achievement.
- The child missing school regularly as they are being kept home as a companion for a parent/carer.
- The child adopting paranoid or suspicious behaviour as they believe their parent's delusions.
- Witnessing self-harming behaviour and suicide attempts (including attempts that involve the child)
- Obsessional compulsive behaviours involving the child.

If staff become aware of any of the above indicators, or others that suggest a child is suffering due to parental mental health, the information will be shared with the DSL to consider a referral to children's social care.

Parental Substance misuse

Substance misuse applies to the misuse of alcohol as well as 'problem drug use', defined by the Advisory Council on the Misuse of Drugs as drug use which has: 'serious negative consequences of a physical, psychological, social and interpersonal, financial or legal nature for users and those around them.

Parental substance misuse of drugs or alcohol becomes relevant to child protection when substance misuse and personal circumstances indicate that their parenting capacity is likely to be seriously impaired or that undue caring responsibilities are likely to be falling on a child in the family.

For children, the impact of parental substance misuse can include:

- Inadequate food, heat and clothing for children (family finances used to fund adult's dependency)
- Lack of engagement or interest from parents in their development, education or wellbeing
- Behavioural difficulties- inappropriate display of sexual and/or aggressive behaviour
- Bullying (including due to poor physical appearance)
- Isolation – finding it hard to socialise, make friends or invite them home
- Tiredness or lack of concentration
- Child talking of or bringing into school drugs or related paraphernalia
- Injuries /accidents (due to inadequate adult supervision)
- Taking on a caring role
- Continued poor academic performance including difficulties completing homework on time
- Poor attendance or late arrival.

These behaviours themselves do not indicate that a child's parent is misusing substances but should be considered as indicators that this may be the case.

If staff believe that a child is living with parental substance misuse, this will be reported to the Designated Safeguarding Lead for referral to Children's Social Care to be considered.

Young Carers

As many as 1 in 12 children and young people provide care for another person. This could be a parent, a relative or a sibling and for different reasons such as disability, chronic illness, mental health needs, or adults who are misusing drugs or alcohol.
Pupils who provide care for another are Young Carers. These young people can miss out on opportunities, and the requirement to provide care can impact on school attendance or punctuality, limit time for homework, leisure activities and social time with friends and

impact upon behaviour and wellbeing. Early identification is essential to ensure young carers receive support at the time and by the appropriate services.

As a school, we may refer a young carer to Children's Social Care for a carers assessment to be carried out. We will consider support that can be offered and make use of the resources and guidance from Save the Children and Hampshire Young Carer's Alliance Hampshire Young Carers Alliance, Eastleigh in their young carers work.

Missing, Exploited and Trafficked Children (MET)

Within Hampshire, the acronym MET is used to identify all children who are missing, believed to be at risk of or are being exploited, or who are at risk of or are being trafficked. Given the close links between all these issues, there has been a considered response to view them as potentially linked, so that cross over of risk is not missed.

Children Absent from Education

'All staff should be aware that children being absent from school or college, particularly repeatedly and/or for prolonged periods, and children missing education can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect such as sexual abuse or exploitation and can also be a sign of child criminal exploitation including involvement in county lines. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation, so called 'honour'-based abuse or risk of forced marriage. Early intervention is essential to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future. It is important that staff are aware of their school's or college's unauthorised absence procedures and children missing education procedures.' KCSiE 2026, p. 159

DSLs and staff should consider:

Single missing days: Is there a pattern in the day missed? Is it before or after the weekend suggesting the child is away from the area? Are there specific lessons or members of staff on these days? Is the parent informing the school of the absence on the day? Are missing days reported back to parents to confirm their awareness?

- Is the child being sexually exploited during this day?
- Is the child avoiding abusive behaviour from peers or staff on this day?
- Do the parents appear to be aware and are they condoning the behaviour?
- Are the child's peers making comments or suggestions as to where the child is?
- Can the parent be contacted and made aware?
- If parents are separated, are both aware of the patterns of missing days?

Continuous missing days: Has the school been able to make contact with the parent(s)? Is medical evidence being provided? Are siblings attending school (either our or local schools)?

- Did we have any concerns about radicalisation, FGM, forced marriage, honour-based violence, sexual exploitation?
- Have we had any concerns about physical or sexual abuse?

- Does the parent have any known medical needs? Is the child safe?

The school will view absence as both a safeguarding issue and an educational outcomes issue. The school may take steps that could result in legal action for attendance, or a referral to children's social care, or both.

Children Missing from Home or Care

It is known that children who go missing are at risk of suffering significant harm, and there are specific risks around children running away and the risk of sexual exploitation.
The Hampshire Police Force, as the lead agency for investigating and finding missing children, will respond to children going missing based on on-going risk assessments in line with current guidance.

The police definition of 'missing' is: "Anyone whose whereabouts cannot be established will be considered as missing until located, and their well-being or otherwise confirmed."

Various categories of risk should be considered and Hampshire Local Safeguarding Children's Partnership provides further guidance:

Local authorities have safeguarding duties in relation to children missing from home and should work with the police to risk assess and analyse data for patterns that indicate particular concerns and risks. The police will prioritise all incidents of missing children as medium or high risk. Where a child is recorded as being absent, the details will be recorded by the police, who will also agree review times and any on-going actions with person reporting.

A missing child incident would be prioritised as 'high risk' where:

- the risk posed is immediate and there are substantial grounds for believing that the child is in danger through their own vulnerability; or
- the child may have been the victim of a serious crime; or
- the risk posed is immediate and there are substantial grounds for believing that the public is in danger.

The high-risk category requires the immediate deployment of police resources.

Authorities need to be alert to the risk of sexual exploitation or involvement in drugs, gangs or criminal activity, trafficking and to be aware of local "hot spots," as well as concerns about any individuals with whom children might runaway.

Child protection procedures must be initiated in collaboration with Children's Social Care services whenever there are concerns that a child who is missing may be suffering, or likely to suffer, significant harm. Within any case of children who are missing both push and pull factors will need to be considered.
Push factors include:

- Conflict with parents/carers
- Feeling powerless
- Being bullied/abused
- Being unhappy/not being listened to

- The Trigger Trio (domestic abuse, parental mental ill health and parental substance misuse)

Pull factors include:

- Wanting to be with family/friends
- Drugs, money and any exchangeable item
- Peer pressure
- For those who have been trafficked into the United Kingdom as unaccompanied asylum-seeking children, there will be pressure to make contact with their trafficker.

We will inform all parents of children who are absent (unless the parent has informed us). If the parent is also unaware of the location of their child, and the definition of missing is met, we will either support the parent to contact the police to inform them or do so ourselves with urgency.

Child abduction

Child abduction is the unauthorised removal or retention of a minor from a parent or anyone with legal responsibility for the child. Child abduction can be committed by parents or other family members; by people known but not related to the victim (such as neighbours, friends and acquaintances); and by strangers. Further information is available at: www.actionagainstabduction.org.

When we consider who is abducted and who abducts:

- Nearly three-quarters of children abducted abroad by a parent are aged between 0 and 6 years-old.
- Roughly equal numbers are boys and girls.
- Two-thirds of children are from minority ethnic groups.
- 70% of abductors are mothers. The vast majority have primary care or joint primary care for the child abducted.
- Many abductions occur during school holidays when a child is not returned following a visit to the parent's home country (so-called 'wrongful retentions').

If we become aware of an abduction, we will follow the HIPS procedure and contact the police and children's social care (if they are not already aware).

If we are made aware of a potential risk of abduction, we will seek advice and support from police and children's social care to confirm that they are aware and seek clarity on what actions we are able to take.

Returning home from care

When children are taken into care, consideration may be given in the future to those children being returned to the care of their parents, or one of their parents. Other children are placed in care on a voluntary basis by the parents and they are able to remove their voluntary consent.

While this is a positive experience for many children who have returned to their families, for some there are different challenges and stresses in this process.

As a school, if we become aware that a looked-after child is returning to their home, we will consider what support we can offer and ensure, as a minimum, that the child has a trusted adult they can talk to or share concerns with.

Technologies

Technological hardware and software is developing continuously with an increase in functionality of devices that people use. The majority of children use online tools to communicate with others locally, nationally and internationally. Access to the Internet and other tools that technology provides is an invaluable way of finding, sharing and communicating information. While technology itself is not harmful, it can be used by others to make children vulnerable and to abuse them.

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

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

• **contact:** being subjected to harmful online interaction with other users or generative AI applications that simulate this; for example: peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.

• **conduct:** personal online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images (e.g. consensual and non-consensual sharing of nudes and semi-nudes and/or pornography) including those generated using AI, and online bullying; and

• **commerce -** risks such as online gambling, inappropriate advertising, phishing and or financial scams. If we feel children, students or staff are at risk, we will report it to the Anti-Phishing Working Group (https://apwg.org/).

Online Safety and Social Media

With the current speed of online change, some parents and carers have only a limited understanding of online risks and issues. Parents may underestimate how often their children come across potentially harmful and inappropriate material on the internet and may be unsure about how to respond. Some of the risks could be:

- unwanted contact
- grooming
- online bullying including sexting
- digital footprint
- accessing and generating inappropriate content
- misinformation, disinformation (including fake news), conspiracy theories

- generative artificial intelligence
- gambling
- child sexual exploitation
- child criminal exploitation
- radicalisation, including the emerging threat of Com groups
- cyber-crime, including 'cyber enabled' and 'cyber dependent'

The school will therefore seek to provide information and awareness to both children and their parents through:

- Acceptable use agreements for children, teachers, parents/carers and governors (within Code of Conduct)
- Curriculum activities involving raising awareness around staying safe online
- Information included in letters, newsletters, web site
- Parents evenings / sessions
- High profile events / campaigns e.g. Safer Internet Day
- Building awareness around information that is held on relevant web sites and or publications
- Social media policy

The school will ensure that appropriate filtering and monitoring are in place on all school devices and school networks. Staff training will include understanding of roles and responsibilities in relation to filtering and monitoring. To support schools with this the DfE have produced the following guidance: Meeting digital and technology standards in schools and colleges - Filtering and monitoring standards for schools and colleges - Guidance - GOV.UK (www.gov.uk) and the department's Plan technology for your school - GOV.UK to carry out a self-assessment against the filtering and monitoring standards.

We recognise that AI in education affords both opportunities and challenges in schools. In developing our approach to AI, we will refer to DfE guidance Generative artificial intelligence (AI) in education - GOV.UK and Using AI in education settings: support materials - GOV.UK.

We understand that education settings are directly responsible for ensuring they have the appropriate level of cyber security protection procedures in place in order to safeguard their systems, staff and learners and review the effectiveness of these procedures periodically to keep up with evolving cyber-crime technologies. Guidance on e-security is available from the National Education Network.

Cyberbullying

Central to the school's anti-bullying policy is the principle that '*bullying is always unacceptable'* and that '*all children have a right not to be bullied*'.

The school also recognises that it must take note of bullying perpetrated outside school which has an impact within the school; therefore, once aware we will respond to any cyber-bullying carried out by children when they are away from the site.

Cyber-bullying is defined as ‘an aggressive, intentional act carried out by a group or individual using electronic forms of contact repeatedly over time against a victim who cannot easily defend themselves.’

By cyber-bullying, we mean bullying by electronic media:

- Bullying by texts or messages or calls on mobile ‘phones.
- The use of mobile ‘phone cameras to cause distress, fear or humiliation.
- Posting threatening, abusive, defamatory or humiliating material on websites, to include blogs, personal websites, social networking sites.
- Using e-mail to message others
- Hijacking/cloning e-mail accounts
- Making threatening, abusive, defamatory or humiliating remarks in on-line forums

Cyber-bullying may be at a level where it is criminal in character. It is unlawful to disseminate defamatory information in any media including internet sites.

Section 127 of the Communications Act 2003 makes it an offence to send, by public means of a public electronic communications network, a message or other matter that is grossly offensive or one of an indecent, obscene or menacing character.

The Protection from Harassment Act 1997 makes it an offence to knowingly pursue any course of conduct amounting to harassment.

If we become aware of any incidents of cyberbullying, we will need to consider each case individually as to any criminal act that may have been committed. The school will pass on information to the police if it feels that it is appropriate or is required to do so.

Despite the age the children who attend our school, we know that cyberbullying can still happen. What is important is that we address nascent behaviours that we are aware of through our computing and PSHE teaching and on an individual basis. If we know that children this age are spending the majority of their time online at home, we would speak with parents directly about this, likewise if they talk about communicating with people online that they do not know in real life.

Making or sharing of nudes or semi-nudes, including AI-generated images

Making or sharing nudes and semi-nudes means the creation, sending or posting of nude or semi-nude visual content by children under 18. Images include photographs, videos and livestreams and may be self-generated, taken or created by another person, digitally altered or wholly generated using artificial intelligence, including “deepfakes” or “deep nudes”. All incidents require a safeguarding response, whether the making or sharing is consensual or non-consensual.’

While sharing of nudes or semi-nudes often takes place in a consensual relationship between two young people, the use of sexted images (known as sextortion) in revenge following a relationship breakdown is becoming more commonplace. This can also be used as a form of sexual exploitation and take place between strangers.

As the average age of first smartphone or camera enabled tablet usage for a child is 6 years old, sexting is an issue that requires awareness raising across all ages.

The school will use age-appropriate educational material to raise awareness, to promote safety and deal with pressure. Parents should be aware that they can come to the school for advice. If anyone becomes aware of any incident involving the consensual or non-consensual making or sharing of nude or semi-nude images, videos or livestreams, including content digitally altered or wholly generated using AI, they must report it to the DSL/DDSL immediately. Every such incident requires a safeguarding response.

Online sexual abuse

As a school we will:

- **Report** to the police, Child Exploitation and Online Protection command (CEOP) or any other relevant body any on-line sexual abuse or harmful content we are made aware of. This could include sending abusive, harassing and misogynistic messages; sharing nude and semi-nude images and videos; and coercing others to make and share sexual imagery. We will seek guidance from the National Police Chiefs' Council (NPCC) 'when to call the police' document and the internet watch foundations 'report harmful content' website
- **Educate** to raise awareness of what on-line sexual abuse is, how it can happen, how to limit the impact and what to do if you become aware of it.
- **Support** victims of on-line abuse within the school community.

Gaming

Online gaming is an activity that engages many children.

The school will raise awareness:

- By talking to parents and carers about the games their children play and help them identify whether they are appropriate.
- By supporting parents in identifying the most effective way to safeguard their children by using parental controls and child safety mode.
- By talking to parents about setting boundaries and time limits when games are played.
- By highlighting relevant resources.
- By highlighting the link between gaming and gambling.

Online reputation

Online reputation is the opinion others get of a person when they encounter them on-line. It is formed by posts, photos that have been uploaded and comments made by others on people's profiles. It is important that children and staff are aware that anything that is posted could influence their future professional reputation. The majority of organisations and work establishments now check digital footprint before considering applications for positions or places on courses.

Cyber crime

Cyber crime is criminal activity committed using computers and/or the internet. It is broadly categorised as either ‘cyber-enabled’ (crimes that can happen off-line but are enabled at scale and speed online), or ‘cyber dependent’ (crimes that can be committed only by using a computer).

Cyber-dependent crime represents one of the most significant and rapidly evolving threats within the UK. Children and young people may experiment with illegal online activity, often without understanding the legal or ethical implications. The impact of cybercrime extends well beyond immediate financial losses, with potential to cause disruption to national infrastructure.

Children with particular skills and interest in computing and technology may inadvertently or deliberately stray into cybercrime which may include cyber-dependent crime, money muling (moving, hiding or laundering stolen money and cryptocurrency), sextortion and blackmail, and social engineering (using children to phish for data, distribute scams or harass others on social media. Children are often highly skilled with technology but lack maturity and awareness of the law. They are therefore seen as highly valuable and easily manipulated ‘assets’ by criminal organizations, hacking networks, and online predators who will target, groom, and coerce young people into performing illegal digital activities.

Cyber-dependent crimes include:

- unauthorised access to computers (illegal hacking) for example accessing a school’s computer network
- ‘Denial of service’ – known as Dos or DDoS attacks or ‘booting’. These are attempts to make the computer, network or website unavailable by overwhelming it with internet traffic from multiple sources
- Making, supplying or obtaining malware (malicious software) such as viruses, spyware, ransomware, botnets and Remote Access Trojans with the intent to commit further offence, including those above.

If there are concerns about a child in this area, they can be referred into the Cyber Choices program. Cyber Choices - National Crime Agency

Part 2 – Safeguarding issues relating to individual pupil needs

Homelessness

We recognise that being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The impact of losing a place of safety and security can affect a child's behaviour and attachments.

In line with the Homelessness Reduction Act 2017, this school will promote links into the Local Housing Authority for the parent or care giver in order to raise/progress concerns at the earliest opportunity.

We recognise that whilst referrals and/or discussion with the Local Housing Authority should be progressed as appropriate, this does not, and should not, replace a referral into children's social care where a child has been harmed or is at risk of harm.

Temporary accommodation notification duty
Where the school becomes aware that a child has been placed in temporary accommodation outside the local authority area, it will share relevant safeguarding information promptly and work with the responsible local authorities and other agencies in accordance with the applicable notification duties and local arrangements. The DSL will consider the impact of temporary accommodation on attendance, access to services, welfare and safeguarding risk.

Children and the Court System

We recognise that children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. We know that this can be a stressful experience and therefore the school will aim to support children through this process and use materials published by Gov.UK: Young witness booklet for 5- to 11-year-olds - GOV.UK, Young witness booklet for 12- to 17-year-olds - GOV.UK

Along with pastoral support, the school will use age-appropriate materials published by HM Courts and Tribunals Services (2017) that explain to children what it means to be a witness, how to give evidence and the help they can access. Improving support for children going to court as well as witnesses

We recognise that making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. This school will support children going through this process.

Alongside pastoral support this school will use online materials published by The Ministry of Justice (2018) which offers children information & advice on the dispute resolution service.

These materials will also be offered to parents and carers if appropriate.

Children with family members in prison

Children who have a family member in prison are at greater risk of poor outcomes, including poverty, stigma, isolation, and poor mental health. They are more likely to be absent or excluded, less likely to be in education, training or employment later in life and at higher risk of experiencing drug and alcohol misuse.

This school aims to:

- understand and respect the child's wishes. We will respect the child's wishes about sharing information. If other children become aware, the school will be vigilant to potential bullying or harassment.

- keep as much contact as possible with the parent/caregiver. We will maintain good links with the remaining caregiver in order to foresee and manage any developing problems. Following discussions, we will develop appropriate systems for keeping the imprisoned caregiver updates about their child's education.

- be sensitive in lessons. The school will consider the needs of any child with an imprisoned parent/caregiver during lesson planning.

- Provide extra support. We recognise that having a parent in prison can attach a real stigma to a child, particularly if the crime is known and serious. We will provide support and mentoring to help a child work through their feelings on the issue.

Alongside pastoral care the school will use the resources provided by the National Information Centre on Children of Offender (NICCO) in order to support and mentor children in these circumstances.

Pupils with medical conditions (in school)

There is a separate policy and procedure outlining the school's position on this available on the school website.

We will make ensure that sufficient staff are trained to support any child with a medical condition and that all relevant staff will be made aware of the condition to support the child and be aware of medical needs and risks to the child. An individual healthcare plan may be put in place to support the child and their medical needs.

An incident relating to the management of a child's medical condition, including allergies, would not automatically indicate a cause for concern. However, staff will be trained to consider if an incident highlights that a child may be at increased risk of being neglected, abused or exploited by those in or outside of the family because of their medical condition. This may be where relevant information about a child's medical condition is not shared with the setting or where they are repeatedly sent without essential medication, thereby putting them at risk. The school is aware of the statutory guidance and refers to this: Supporting pupils with medical conditions at school - GOV.UK, Allergy safety in schools - GOV.UK

Pupils with medical conditions (out of school)

There will be occasions when children are temporarily unable to attend our school on a full-time basis because of their medical needs. These children and young people are likely to be:

- children and young people suffering from long-term illnesses.
- children and young people with long-term post-operative or post-injury recovery periods
- children and young people with long-term mental health problems (emotionally vulnerable).

Where it is clear that an absence will extend beyond 15 continuous school days, the Education and Inclusion branch of Children's Services will be contacted to advise on the child's education.

Special educational needs and disabilities

Children who have special educational needs and/or disabilities can have additional vulnerabilities when recognising abuse and neglect. These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration
- The potential for a disproportionate impact on children with SEND, for example by behaviours such as bullying, without outwardly showing any signs
- Communication barriers and difficulties in overcoming these barriers
- Having fewer outside contacts than other children
- Receiving intimate care from a considerable number of carers, which may increase the risk of exposure to abusive behaviour and make it more difficult to set and maintain physical boundaries
- Having an impaired capacity to resist or avoid abuse
- Having communication difficulties that may make it difficult to tell others what is happening
- Being inhibited about complaining for fear of losing services
- Being more vulnerable online – having difficulty understanding the difference between fact and fiction, repeating the content/behaviours in school/college
- Being more vulnerable than other children to abuse by their peers, including peer group isolation or bullying (including prejudice-based bullying) and intimidation.

We will respond to this by:

- Making it common practice to enable children with SEND to make their wishes and feelings known in respect of their care and treatment
- Ensuring that children with SEND receive appropriate personal, health and social education (including sex education)
- Ensuring children with SEND know how to raise concerns and give them access to a range of adults with whom they can communicate. This could mean using

interpreters and facilitators who are skilled in using the child's preferred method of communication.
- Recognising and utilising key sources of support including staff in schools, friends and family members where appropriate
- Developing the safe support services that families want, and a culture of openness and joint working with parents and carers on the part of services
- Ensuring that guidance on good practice is in place and being followed in relation to: intimate care; working with children of the opposite sex; managing behaviour that challenges families and services; issues around consent to treatment; anti-bullying and inclusion strategies; sexuality and safe sexual behaviour among young people; monitoring and challenging placement arrangements for young people living away from home.
- Ensuring that if children need regular physical touch, e.g. encouraging to stand up or move from place to place, that practice will be discussed and agreed with parents and classroom staff and regularly reviewed. This is different and separate to our practice as outlined in the Restrictive Physical Intervention Policy.

Intimate and personal care

'Intimate Care' can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body. The intimate care tasks specifically identified as relevant to our school include:

- Dressing and undressing (underwear)
- Helping someone use the toilet.
- Changing continence pads (faeces/urine)
- Bathing / showering
- Washing intimate parts of the body

Other intimate care relating to medical needs would be considered on a case-by-case basis.

'Personal Care' involves touching another person, although the nature of this touching is more socially acceptable. These tasks do not invade conventional personal, private or social space to the same extent as intimate care.
Those Personal Care tasks specifically identified as relevant here include:

- Skin care/applying external medication.
- Feeding
- Administering oral medication
- Hair care
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet.

Personal Care encompasses those areas of physical and medical care that most people carry out for themselves but which some are unable to do because of disability or medical need. Children and young people may require help with eating, drinking, washing, dressing and toileting.

Where Intimate Care is required, we will follow the following principles:

1. **Involve the child in the intimate care**
   Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and give choices where possible. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.

2. **Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.**
   Staff can administer intimate care alone; however, we will be aware of the potential safeguarding issues for the child and member of staff. Care should be taken to ensure adequate supervision, primarily to safeguard the child, but also to protect the staff member from potential risk. The staff member administering intimate care will ideally be well known to the child, e.g. a member of the classroom team. The member of staff will ensure that their line manager or another member of staff knows that they are administering intimate care and when this has been completed. The classroom toilet will be used for all intimate care whenever possible which is within earshot of the class. For privacy, other children will not be allowed into the toilets during this time.

3. **Be aware of your own limitations**
   Only carry out activities you understand and with which you feel competent. If in doubt, ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed. Those children who are not yet toilet trained, or who are incontinent, an individual Intimate Care Plan will be written, which will name staff who are permitted to administer intimate care to that child. This plan will be shared with parents. The plan will be reviewed regularly.

4. **Promote positive self-esteem and body image**
   Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

5. **If you have any concerns, you must report them.**
   If you observe any unusual markings, discolouration or swelling, report it immediately to the DSL.

   If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the DSL. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be recorded on CPOMS.

6. **Helping through communication**
   There is careful communication with each child who needs help with intimate care in

line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

7. **Support to achieve the highest level of autonomy**
   As a basic principle, children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer and health.

8. **Record keeping**
   For those children who have needed intimate care, and who do not have an intimate care plan, staff should record a brief summary on CPOMS including which adults were present. Parents should also be told that intimate care was required.

Further information from the DfE can be found:
SEND code of practice: 0 to 25 years - GOV.UK (www.gov.uk)
Supporting pupils with medical conditions at school - GOV.UK (www.gov.uk)
Hampshire SENDIASS: Hampshire (councilfordisabledchildren.org.uk)
Mencap - Represents people with learning disabilities, with specific advice and information for people who work with children and young people.

Perplexing presentations (PP) / Fabricated or induced illness (FII)

The Royal College of Paediatrics and Child Health have added the term “Perplexing presentations” to the guidance around FII.

Perplexing Presentations (PP) has been introduced to describe those situations where there are indicators of possible FII which have not caused or brought on any actual significant harm.

It is important to highlight any potential discrepancies between reports, presentations of the child and independent observations of the child. What is key to note are implausible descriptions and/or unexplained findings and/or parental behaviour.

There are three main ways that a parent/carer could fabricate or induce illness in a child. These are not mutually exclusive and include:

- fabrication of signs and symptoms. This may include fabrication of past medical history.
- fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents.
- induction of illness by a variety of means.

If we are concerned that a child may be suffering from fabricated or induced illness, we will follow the HIPS protocol and inform children's social care.

Mental Health

Form tutors and class teachers see their children day in, day out. They know them well and are well placed to spot changes in behaviour that might indicate an emerging problem with the mental health and emotional wellbeing of children. All staff should also be aware that mental health problems can, in some cases, develop into safeguarding concerns. This could include self-harm, signs of an eating disorder, suicidal ideation or suicide. They could be be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

The balance between the risk and protective factors is most likely to be disrupted when difficult events happen in childrens' lives. These include:

- **loss or separation** – resulting from death, parental separation, divorce, hospitalisation, loss of friendships (especially in adolescence), family conflict or breakdown that results in the child having to live elsewhere, being taken into care or adopted.
- **life changes** – such as the birth of a sibling, moving house or changing schools or during transition from infants to juniors.
- **traumatic events** such as abuse, domestic violence, bullying, violence, accidents, injuries or natural disaster.

When concerns are identified, school staff will provide opportunities for the child to talk or receive support within the school environment. Parents will be informed of the concerns and a shared way to support the child will be discussed.

We recognise schools have an important role to play in supporting children with mental health problems. We will support through:

- promoting good mental wellbeing and preventing the onset of mental illness
- observing children and identifying early those who may be experiencing mental health problems or being at risk of developing one
- ensuring early targeted support is provided and
- liaison with/referral to specialist services where needed.

Where the needs require additional professional support, referrals will be made to the appropriate team or service with the appropriate agreement.

If staff have a mental health concern about a child that is also a safeguarding concern, they will take immediate action, raising the issue with the designated safeguarding lead or a deputy and/or mental health lead.

Children who are lesbian, gay or bisexual

A child or young person being lesbian, gay or bisexual is not in itself a risk factor for harm, however, they can sometimes be vulnerable to discriminatory bullying. In some cases, a child who is perceived by other children to be lesbian, gay or bisexual (whether they are or not) can be just as vulnerable as children who are. We will consider how to address

vulnerabilities such as the risk of bullying and take steps to prevent it, including putting appropriate sanctions in place.

Children who are questioning their gender

Children may question the way they feel about being a boy or a girl, including the physical attributes of their sex and the related ways in which they fit into society. Sometimes young children go though a period of questioning their gender, but for the majority this will not continue into adulthood, while a small proportion may continue to question their gender and this feeling may intensify into puberty.

All staff will have training to ensure they understand that it is not for the school to initiate any action in this area and that members of staff should not adopt any changes relating to social transition unless a decision has been made by the school in consultation with parents or carers.

When responding to a request relating to social transition from a child or their parents, the school will;

- take time to understand the thoughts and feelings of children who are questioning their gender
- be professionally curious about the full range of the child's experiences
- remain aware of the potential vulnerabilities of children who are questioning their gender, including the possibility of complex mental health and psychological needs, for example relating to relationships with family, peers or their broader social environment, including discriminatory bullying
- consider the best interests of the child
- consider everything that could be affecting a child, including whether they have any wider health issues or neurodiversity

Part 3 – Other safeguarding issues that may potentially have an impact on pupils.

Anti-Bullying

The school's approach to tackling bullying and prejudice-based abuse can be found in the Behaviour Policy which is available on the school website.

Prejudice-based abuse

Prejudice-based abuse or hate crime is any criminal offence which is perceived by the victim or any other person to be motivated by a hostility or prejudice-based on a person's real or perceived:

- Disability
- Race
- Religion
- Gender identity
- Sexual orientation

Although this sort of crime is collectively known as 'Hate Crime' the offender does not have to go as far as being motivated by 'hate', they only have to exhibit 'hostility'.

This can be evidenced by:

- threatened or actual physical assault.
- derogatory name calling, insults, for example racist jokes or homophobic language.
- hate graffiti (e.g. on school furniture, walls or books).
- provocative behaviour e.g. wearing of badges or symbols belonging to known right wing, or extremist organisations.
- distributing literature that may be offensive in relation to a protected characteristic.
- verbal abuse.
- inciting hatred or bullying against children who share a protected characteristic.
- prejudiced or hostile comments in the course of discussions within lessons
- teasing in relation to any protected characteristic e.g. sexuality, language, religion or cultural background.
- refusal to co-operate with others because of their protected characteristic, whether real or perceived.
- expressions of prejudice calculated to offend or influence the behaviour of others.
- attempts to recruit other children to organisations and groups that sanction violence, terrorism or hatred.

We will respond by:

- clearly identifying prejudice-based incidents and hate crimes and monitor the frequency and nature of them within the school.
- taking preventative action to reduce the likelihood of such incidents occurring.

- recognising the wider implications of such incidents for the school and local community.
- providing regular reports of these incidents to the Governing Body.
- ensuring that staff are familiar with formal procedures for recording and dealing with prejudice-based incidents.
- dealing with perpetrators of prejudice-based abuse effectively.
- supporting victims of prejudice-based incidents and hate crimes.
- ensuring that staff are familiar with a range of restorative practices to address bullying and prevent it happening again.
- try to understand reasons for the prejudicial behaviour as we recognise that at this age children can say things that they do not understand and/or are repeating words/behaviour that others have said/demonstrated with little understanding of what those words/behaviours mean or the implications of their actions

Drugs and substance misuse

The school recognises that the age of our children means that they are unlikely to be misusing drugs or alcohol. However, we recognise the importance of teaching our children to keep themselves safe and healthy, and making good choices. Through PSHE we teach about the importance of not touching medicines. We also recognise that children may bring in drugs or drug based paraphernalia from home. This would be dealt with seriously and promptly; the school would always contact parents in these instances and would also involve other agencies if required (e.g. if a child brings in a bottle of Calpol by accident we would not contact children's services; should they bring in illegal substances we would contact the police and children's services).

Faith Abuse

The number of known cases of child abuse linked to accusations of 'possession' or 'witchcraft' is small, but children involved can suffer damage to their physical and mental health, their capacity to learn, their ability to form relationships and to their self-esteem. Such abuse generally occurs when a carer views a child as being 'different', attributes this difference to the child being 'possessed' or involved in 'witchcraft' and attempts to exorcise him or her.

A child could be viewed as 'different' for a variety of reasons such as, disobedience; independence; bed-wetting; nightmares; illness; or disability. There is often a weak bond of attachment between the carer and the child.

There are various social reasons that make a child more vulnerable to an accusation of 'possession' or 'witchcraft'. These include family stress and/or a change in the family structure.

The attempt to 'exorcise' may involve severe beating, burning, starvation, cutting or stabbing and isolation, and usually occurs in the household where the child lives.

If the school becomes aware of a child who is being abused in this context, the DSL will follow the normal referral route to children's social care.

Gangs and Youth Violence

The majority of young people will not be affected by serious violence or gangs. However, where these problems do occur, even at low levels, there will almost certainly be a significant impact.

We have a duty and a responsibility to protect our children. It is also well established that success in learning is one of the most powerful indicators in the prevention of youth crime. Dealing with violence also helps attainment. While children generally see educational establishments as safe places, even low levels of youth violence can have a disproportionate impact on any education.

Primary schools are also increasingly recognised as places where early warning signs that younger children may be at risk of getting involved in gangs can be spotted. Crucial preventive work can be done within school to prevent negative behaviour from escalating and becoming entrenched.
Through PSHE lessons (including lessons on the fundamental British Value of the Rule of Law) as well as ad hoc discussions about behaviour, feelings and making good, kind choices, we instil in children that violence is never the answer. All incidents of violence are dealt with in an appropriate way and we always seek to understand the reason behind the violence. Serious and/or repeated incidences of violence are always logged on CPOMS and discussed with parents. Children may receive ELSA to help them understand their feelings and behaviours. Other agencies may be involved as appropriate, e.g. children's service, EHH and the Primary Behaviour Service.

We will:

- develop skills and knowledge to resolve conflict as part of the curriculum
- challenge aggressive behaviour in ways that prevent the recurrence of such behaviour
- understand risks for specific groups, including those that are gender-based, and target interventions
- safeguard, and specifically organise child protection, when needed
- make referrals to appropriate external agencies
- carefully manage individual transitions between educational establishments especially into Pupil Referral Units (PRUs) or alternative provision
- work with local partners to prevent anti-social behaviour or what would be considered a crime if they were older.

Private fostering

Private fostering is an arrangement by a child's parents for their child (under 16 or 18 if disabled) to be cared for by another adult who is not closely related and is not a legal guardian with parental responsibility, for 28 days or more.

It is not private fostering if the carer is a close relative to the child such as grandparent, brother, sister, uncle or aunt.

The law requires that the carers and parents must notify the children's social care of any private fostering arrangement.

If the school becomes aware that a child is being privately fostered, we will inform the Children's social care and inform both the parents and carers that we have done so.

Parenting

All parents will struggle with the behaviour of their child(ren) at some point. This does not make them poor parents or generate safeguarding concerns. Rather it provides them with opportunities to learn and develop new skills and approaches to deal with their child(ren).

Some children have medical conditions and/or needs e.g. Tourette's Syndromeor conditions associated with autism or ADHD - that directly impact behaviour and can present challenges for parents in dealing with behaviours. This does not highlight poor parenting either.

Children may also cause harm to other family members, often referred to as child-to-parent or carer abuse. Support for this can be found at: CAPVA | Respect

Parenting becomes a safeguarding concern when the repeated lack of supervision, boundaries, basic care or medical treatment places the child(ren) in situations of risk or harm.

In situations where parents struggle with tasks such as setting boundaries and providing appropriate supervision, timely interventions can make drastic changes to the wellbeing and life experiences of the child(ren), without the requirement for a social work assessment or plan to be in place.

We will support parents in understanding the parenting role and providing them with strategies that may assist:

- providing details of community-based parenting courses
- linking to web-based parenting resources
- referring to the school parenting worker/home school link worker (where available)
- discussing the issue with the parent and supporting them in making their own plans of how to respond differently (using evidence-based parenting programmes)
- signposting to support services
- considering appropriate early help services.

Safeguarding requirements for sport and school premises

Sport: where a sport is separated by sex for safety or fairness in accordance with the Equality Act 2010, participation will be organised by biological sex. Where there are no safety concerns and a child requests an alternative arrangement, the school/college will consider the request in the child's best interests, the interests of other children and the need for safe and fair participation.

Toilets: schools must not allow children to use toilets designated for the opposite biological sex. Separate toilets will be provided for boys and girls aged eight and over unless each toilet is in an individual room lockable from the inside for one user. Alternative individual facilities may be considered without compromising single-sex provision or anyone's safety, comfort, privacy or dignity. Arrangements will be recorded, communicated appropriately and reviewed regularly.

Part 4 –Safeguarding processes

Alternative provision

If the school commissions a place for a child with an alternative provision provider, it continues to be responsible for the safeguarding of that child and will undertake all checks and ensure that the placement meets the child's needs. Checks would include, for example, the suitability of provision and provision type; safeguarding; health and safety; arrangements for attendance and reporting progress; and information sharing.

The school will follow the statutory guidance for commissioning Alternative Provision:
Education for children with health needs who cannot attend school - GOV.UK
Alternative provision - GOV.UK
Keeping children safe in education 2025
Hampshire County Council Alternative Provision Guidance June 2025

The DfE has also published voluntary national standards for non-school alternative provision, alongside guidance to support schools and local authority commissioners in quality assuring providers. Local authorities may use the standards to develop a register of approved settings for use by schools. However, schools remain ultimately responsible for the provision they commission. This means we will continue to carry out safeguarding checks and conduct our own due diligence to ensure that the provision is appropriate for meeting each child's individual needs.

Restrictive interventions and reasonable force

Staff may use reasonable force only where lawful and necessary, using no more force than is necessary for the least amount of time. The decision is based on professional judgement and individual circumstances. The school will not adopt a "no contact" policy that prevents staff from safeguarding children. For children with SEND, mental health needs or medical conditions, staff will consider additional vulnerability, reasonable adjustments and proactive individual support plans in line with DfE restrictive-intervention guidance.

Holding and Sharing Information

The DSL and DDSLs keep detailed, accurate, secure written records of all concerns, discussions, and decisions made, including the rationale for those decisions. These include instances where referrals were or were not made to another agency, such as LA children's social care or the Prevent programme etc. This rationale should be recorded on CPOMs.

Staff will be proactive in sharing information as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children. Where children leave the setting, the DSL will ensure their safeguarding file is transferred to the new school or college as soon as possible and within 5 days of an in-year transfer or the start of a new term. In addition, the DSL will consider if it would be appropriate to share any information with the new setting in advance of the child leaving to enable the setting to put appropriate support in place and particularly when the information would support an assessment of risk to the individual child or others.

Safer Recruitment

The school operates a separate safer recruitment process in line with Hampshire County Council and national guidance. On all recruitment panels there is at least one member who has undertaken safer recruitment training.

The recruitment process checks the identity, criminal record (enhanced DBS), mental and physical capacity, right to work in the U.K., and professional qualifications, and seeks confirmation of the applicant's experience and history through references.

Staff Induction

The DSL or their deputy will provide all new staff with training to enable them to fulfil their role and understand the child protection policy, the safeguarding policy, the staff behaviour policy/code of conduct, and Part One of Keeping Children Safe in Education. This induction may be covered within the annual training if this falls at the same time; otherwise, it will be delivered separately during the initial starting period.

Health and Safety

There is a requirement that all schools must have a Health and Safety Policy that details the organisation, roles and responsibilities and the arrangements in place at the premises for the managing and promoting of health and safety in accordance with the Health and Safety at Work act 1974 and the regulations made under the act.

Schools must assess all their hazards and record any significant findings along with what control measures are required. The plans should, wherever possible, take a common sense and proportionate approach with the aim to allow activities to continue rather than preventing them from taking place. The school Health & Safety policy can be accessed via the school website.

Site Security

We aim to provide a secure site but recognise that it is only as secure as the people who use it. Therefore, everyone on the site must adhere to the rules that govern it. These are:

- Gates are locked except at the start and end of the school day
- Visitors and volunteers enter at the reception and must sign in
- Visitors and volunteers are identified by a lanyard or visitor sticker
- Children are only allowed home during the school day with adults/carers with parental responsibility or permission being given
- All children leaving or returning during the school day have to be signed out and in
- Empty classrooms have windows closed.

Off site visits

A particular strand of health and safety is looking at risks when undertaking off site visits. Some activities, especially those happening away from the school and residential visits, can involve higher levels of risk. If these are annual or infrequent activities, a review of an existing assessment may be sufficient. If it is a new activity, or a visit involving adventure

activities, residential stays, overseas, or an ‘Open Country’ visit, a specific assessment of significant risks must be carried out. The school has an Educational Visits Co-ordinator (EVC), who liaises with the local authority’s outdoor education adviser, supports colleagues in managing risks and planning off site visits, and provides training in group management and outdoor First Aid.

First Aid

The school’s first aid arrangements can be requested at the office.

Physical Intervention (use of reasonable force)

We have a separate policy outlining how we will use physical intervention. This can be requested at the office. The school Behaviour Policy also includes information regarding physical intervention.

The taking, use and storage of images

We will seek consent from the parent/carer of a child and from teachers and other adults before taking and publishing photographs or videos that contain images that are sufficiently detailed to identify the individual in school publications, printed media or on electronic publications.

We will not seek consent for photos where you would not be able to identify the individual.

We will seek consent for the period the child remains registered with us and, unless we have specific written permission, we will remove photographs after a child (or teacher) appearing in them leaves the school, or if consent is withdrawn.

Photographs will only be taken on school owned equipment and stored on the school network. No images of children will be taken or stored on privately owned equipment by staff members.

We will be mindful of imagery published on public facing platforms such as the school website and are aware of potential risks associated with this. In making decisions about information shared on the website and via social media, we will refer to Hampshire guidance and Safer Internet guidance on image sharing. Image guidance for education settings - UK Safer Internet Centre.

Transporting pupils

On occasions, parents and volunteers support with the task of transporting children to visits and off-site activities arranged by the school; this is in addition to any informal arrangements made directly between parents for after school clubs etc. In managing these arrangements, the school will put in place measures to ensure the safety and welfare of young people carried in parents’ and volunteers’ cars. This is based on guidance from the local authority and follows similar procedures for school staff using their cars on school business.

Where parents'/volunteers' cars are used on school activities the school will notify parents/volunteers of their responsibilities for the safety of children, to maintain suitable insurance cover and to ensure their vehicle is roadworthy. Please see the section on transporting children in our health and safety policy.

Disqualification under the childcare act

The Childcare Act of 2006 was put in place to prevent adults who have been cautioned or convicted of a number of specific offences from working within childcare.

We will check for disqualification under the Childcare Act as part of our safer recruitment processes for any offences committed by staff members or volunteers.

Community Safety Incidents

Other community safety incidents in the vicinity of a school can raise concerns amongst children and parents, for example, people loitering nearby or unknown adults engaging children in conversation, or gang related activity.

Our children do not come into or leave school unless with an identified adult. However, as part of our PSHE curriculum the school teaches children about how to stay safe when outside the home or school through teaching about road safety and the use of programmes such as Clever Never Goes (www.clevernevergoes.org).

Use of school premises for non-school activities

Where governing bodies hire or rent out college or school facilities / premises to organisations or individuals, for example sports associations, they should ensure that appropriate arrangements are in place to keep children safe.

Safeguarding monitoring of our wraparound care provider and other clubs is included within our annual monitoring cycle.

When services or activities are provided by the governing body or proprietor, under the direct supervision or management of their school or college staff, their arrangements for child protection will apply. Where a safeguarding incident occurs involving other providers who are using the school premises, the school is expected to follow their safeguarding policies and procedures, including informing the LADO. The governing body or proprietor should also seek assurance that the provider concerned has appropriate safeguarding and child protection policies and procedures in place (including inspecting these as needed), and ensure that there are arrangements in place for the provider to liaise with the school or college on these matters where appropriate. This applies regardless of whether or not the children who attend any of these services or activities are children on the school roll or attend the college.

External speakers

At times, external organisations will be invited in to deliver input with children as it is acknowledged that they can provide a varied and useful range of information, resources, and speakers which enrich education. Careful consideration will be given to the suitability of

external organisations and checks carried out to ensure the content of information delivered is consistent with the school's ethos, values and curriculum.

The school has clear arrangements for all individuals coming onto the premises. The Headteacher will use professional judgement to decide whether visitors should be escorted or supervised.

Visitors will be asked to provide appropriate identification, sign in and wear a visitor lanyard/badge. The school will consider the educational value and age-appropriateness of external organisations or speakers and whether any safeguarding checks are required. Visiting speakers will be accompanied by a member of staff at all times. We will not invite into the school any speaker who is known to disseminate extremist views, and will carry out appropriate checks to ensure that any individual or organisation using school facilities is not seeking to disseminate extremist views or radicalise children or staff.