



**Southwark Diocesan  
Board of Education  
Multi-Academy Trust**  
Developing Church of England Education

Approval Body: SDBEMAT Safeguarding Partner  
Approval Date: September 2025  
Version: 5 (SEPTEMBER 2025)  
Policy Ref: KCSPHCPP

# KEEPING CHILDREN SAFE POLICY HANDBOOK

---

## ST MICHAEL'S CHILD PROTECTION POLICY - 2025/26

**MODEL CHILD PROTECTION POLICY FOR ACADEMIES IN THE  
SOUTHWARK DIOCESAN BOARD OF EDUCATION MULTI-ACADEMY TRUST**

Name of academy: St Michael's CE Primary School

Date: September 2025

**POLICY REVIEW**

This policy will be reviewed in full by the Local Governing Body of the academy no less than annually.

The policy was last reviewed and agreed by the Governing Body on 3<sup>rd</sup> September 2025

It is due for review on 1<sup>st</sup> September 2026

Signature J Gillespie      Date 03.09.24

Head Teacher

Signature B Fielder      Date 03.09.24

Chair of Local Governing Body



## CONTENTS

|            |                                                                                                                                                  |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | Introduction                                                                                                                                     |
| 2          | Statutory Framework                                                                                                                              |
| 3          | Sexual Violence and Harassment                                                                                                                   |
| 4          | The Designated Senior Lead and Deputy Designated Lead                                                                                            |
| 5          | The Local Governing Body                                                                                                                         |
| 6          | When to be concerned                                                                                                                             |
| 7          | Dealing with a Disclosure                                                                                                                        |
| 8          | Record Keeping                                                                                                                                   |
| 9          | Confidentiality                                                                                                                                  |
| 10         | School Procedures                                                                                                                                |
| 11         | Communication with parents                                                                                                                       |
| 12         | Allegations Involving School Staff/Volunteers                                                                                                    |
| Appendix 1 | Link to Keeping Children Safe in Education (DfE, 2022)<br>Part One: Information for all school and college staff<br>Annex A: Further information |
| Appendix 2 | Declaration for staff:<br>Child Protection Policy and Keeping Children Safe in Education (DfE, 2024)                                             |
| Appendix 3 | Actions where there are concerns about a child – Flowchart                                                                                       |
| Appendix 4 | Operation Encompass – Information sharing from Police regarding<br>Domestic Abuse notifications (2 <sup>nd</sup> December 2019)                  |

## 1. INTRODUCTION

- 1.1. Safeguarding is defined as providing help and support to meet the needs of children as soon as problems emerge, protecting children from maltreatment whether that is within or outside the home, including online, , preventing impairment of children’s health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care, promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children and taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children’s Social Care National Framework. (Working Together to Safeguard Children, DfE, 2023, pgs. 7 and 8)

This child protection policy forms part of a suite of documents and policies which relate to the safeguarding responsibilities of the academy.

In particular this policy should be read in conjunction with:  
the behaviour policy; the SEND policy; the online safety policy; the staff code of conduct

**Copies of policies and a copy of Part one of this document must be provided to staff at induction.**

### 1.2. PURPOSE OF A CHILD PROTECTION POLICY

To inform staff, parents, volunteers and governors about the school's responsibilities for safeguarding children. To enable everyone to have a clear understanding of how these responsibilities should be carried out.

### LOCAL SAFEGUARDING CHILDREN BOARD INTER-AGENCY CHILD PROTECTION AND SAFEGUARDING CHILDREN PROCEDURES

The school follows the procedures established by the Lewisham Safeguarding Children Board.

### 1.3. SCHOOL STAFF & VOLUNTEERS

All school and college staff have a responsibility to provide a safe environment in which children can learn.

School staff and volunteers are particularly well placed to observe outward signs of abuse, changes in behaviour and failure to develop because they have daily contact with children.

All school staff will receive appropriate safeguarding children training, which is updated every three years, so that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse or neglect and of the appropriate procedures to follow. This training will include an understanding of the expectations, applicable roles and responsibilities in relation to filtering and monitoring. There will be at least annual training for staff on this academy’s approach to online safety. In addition, all staff members should receive safeguarding and child protection updates (for example, via email, e-bulletins and staff meetings), as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

Temporary staff and volunteers will be made aware of the safeguarding policies



and procedures by the Designated Senior Lead -including the child protection policy and the staff behaviour policy. (may be known as the staff code of conduct)

#### 1.4. MISSION STATEMENT

At St Michael's we have a primary responsibility for the care, welfare and safety of all pupils in our charge in fulfilling our purpose for every child to live an abundant life based on John 10:10. We are committed to practice that protects children from harm.

We encourage a culture in which all staff believe safeguarding to be of the highest importance and understand that their vigilance is critical. We want all staff to feel confident to discuss their concerns with designated staff/Governors and have clear lines of protocol in place for how to do this.

At St Michael's we establish and maintain an ethos and culture where children feel secure, are encouraged to talk, and are listened and responded to when they have a worry or concern.

At St Michael's we establish and maintain an ethos and culture where school staff and volunteers feel safe, are encouraged to talk and are listened and responded to when they have concerns about the safety and well-being of a child.

We ensure children know that there are adults in the school whom they can approach if they are worried.

We ensure that children, who have additional/unmet needs are supported appropriately. This could include referrals to Early Help or Children's Services.

Staff members working with children are advised to maintain an attitude of 'it could happen here' and 'it could be happening to this child', where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.

#### IMPLEMENTATION, MONITORING AND REVIEW OF THE CHILD PROTECTION POLICY

The policy will be reviewed at least annually by the Local Governing Body. It will be implemented through the school's induction and training programme, and as part of day to day practice. Compliance with the policy will be monitored by the Designated Senior Lead and through staff performance measures. The safeguarding Trustee will oversee and report

on the culture and practices to keep children safe across the schools in the MAT. The safeguarding Trustee is Colin Powell. He can be contacted via the SDBE MAT Union Street offices.

T: 0207 234 9201 E: [enquiries@southwark.anglican.org](mailto:enquiries@southwark.anglican.org)

#### 2. STATUTORY FRAMEWORK

2.1. In order to safeguard and promote the welfare of children, the academy will act in accordance with the following legislation and guidance:

2.1.1. The Children Act 1989

2.1.2. The Children Act 2004

2.1.3. Children and Social Work Act 2017

2.1.4. Education Act 2002 (Section 175/157)

*Outlines that Local Authorities and School Governing Bodies have a responsibility to "ensure that their functions relating to the conduct of school are exercised with a view to safeguarding and promoting the welfare of children who are its pupils".*

2.1.5. Lewisham Safeguarding Children Board Procedures Manual

2.1.6. Keeping Children Safe in Education (DfE, September 2024)

2.1.7. Working Together to Safeguard Children (DfE 2023)

2.1.8. The Education (Pupil Information) (England) Regulations 2005

2.1.9. Sexual Offences Act (2003)

2.1.10. Section 26, The Counter Terrorism and Security Act 2015 (Prevent duty)

2.1.11. Female Genital Mutilation Act 2003 (Section 74, Serious Crime Act 2015)

2.1.12. Anti-social Behaviour, Crime and Policing Act 2014 (makes it a criminal offence to force someone to **marry**. Includes taking someone overseas to force them to **marry** (whether or not the **forced marriage** takes place).



2.2. Serious Violence Strategy 2018

- 2.3. Furthermore, it also states that governing bodies and proprietors of all schools and colleges should ensure that their safeguarding arrangements consider the procedures and practice of the local authority as part of inter-agency safeguarding procedures set up by the local safeguarding children board.

**3. SEXUAL VIOLENCE AND HARASSMENT**

- 3.1 This section should be read in conjunction with the section on child on child abuse.

- 3.2 This academy will adopt an approach which assumes that sexual violence and harassment 'can happen here.' This form of abuse can take place online or offline. Whilst both boys and girls may be victims of this kind of abuse, this academy is aware that it is mostly girls who are victims.

- 3.3 This academy will adopt a whole-school approach to this issue, as reflected in KCSiE 2025 part 5 and annex B. In this academy, the details of the responses are shared annually with all staff in September. They include school-based actions which are taken in accordance with Lewisham's referral procedures.

- 3.4 Staff will define sexual behaviours using the terminology of S Hackett and the Ofsted report on sexual violence in schools, 2021, namely:

Normal – developmentally expected, socially acceptable, consensual, mutual and reciprocal, shared decision-making

Inappropriate – single instances of inappropriate sexual behaviour, socially acceptable behaviour within a peer group, context may be inappropriate, generally consensual and reciprocal

Problematic – concerning behaviour, developmentally unusual and socially unexpected, no overt elements of victimisation, consent issues may be unclear, may lack reciprocity or equal power, may include levels of compulsivity

Abusive – victimising intent or outcome, includes misuse of power, coercion and force to ensure victim compliance, intrusive, informed consent lacking or not able to be freely given by victim, may include elements of expressive violence

Violent – physically violent sexual abuse, highly intrusive, instrumental violence that is psychologically and/or sexually arousing to the perpetrator, sadism

- 3.5 This academy's approach to the consensual sharing of nude or semi-nude images and/or videos is to refer to The UK Council for child internet safety advice for educational settings working with children

- 3.6 The whole-school approach to causing someone to engage in sexual activity without consent or to engage in sexual activity with a third party is immediately refer the matter to Lewisham children's social care as well as inform the Chair of Governors and the COO of the SDBE MAT.

- 3.7 Leaders in this academy are aware of the recommendations from the 2021 DfE report on sexual violence and harassment between children in schools and colleges. They seek to implement the recommendations on an ongoing basis. This academy's approach to responding to and reporting sexual violence and harassment is as outlined in KCSiE 2024 paragraphs 466-469.

**4. DESIGNATED SAFEGUARDING LEAD AND DEPUTY DESIGNATED LEAD**

Local governing bodies should ensure an appropriate senior member of staff, from the school or college leadership team, is appointed to the role of DSL.

During term time the DSL and or a Deputy will always be available (during school or college hours) for staff in the school or college to discuss any safeguarding concerns and individual arrangement for out of hours/out of term activities will be to contact the out of office hours Lewisham Council Multi Agency Safeguarding Hub (MASH) and ask for the emergency duty team. If you think a child or young person is at IMMEDIATE risk, you should treat this as an emergency and call 999 to report your concerns to the Police.

- 4.1. The Designated Senior Lead for child protection in this academy is:

NAME: Jacqueline Gillespie and Eunice Asante

There should be a Deputy Designated Senior Lead (DDSL) in the absence of the lead DSL.

The Deputy Designated Senior Lead for Child Protection in this school is:

NAME: Ashley Aldridge and Claire Gayle



## THE BROAD AREAS OF RESPONSIBILITY FOR THE DESIGNATED SENIOR LEAD ARE:

Championing the educational achievement of pupils where there are child protection concerns

4.2.

Managing Child Protection Contact and cases

Contacting the Multi Agency Support Hub (MASH) when advice is needed regarding child protection concerns which possibly meet the threshold for statutory intervention

Completing MASH for all cases of suspected abuse or neglect where there is a risk of significant harm to the child/young person, Police where a crime may have been committed and to the Channel programme where there is a radicalisation concern

Liaise with the Head Teacher or Principal to inform him/her of issues, especially ongoing enquiries under Section 47 of the Children Act 1989 and police investigations

Act as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether to make a Child Protection Contact Referral by liaising with relevant agencies

Support staff who make MASH Referrals and other service referrals

Share information with appropriate staff in relation to a child's looked after (CLA) legal status (whether they are looked after under voluntary arrangements with consent of parents or on an Interim Care Order or Care Order) and contact arrangements with birth parents or those with parental responsibility.

Ensure they have details of the CLA's social worker and the name of the virtual school Head Teacher in the authority that looks after the child.

4.3. **Training**

The Designated Senior Lead should undergo formal training every two years. The DSL should also undertake Prevent Duty awareness training. In addition to this training, their knowledge and skills should be refreshed (for example via e-bulletins, meeting other DSLs, or taking time to read and digest safeguarding

developments) at least annually to:

- 4.3.1. Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments;
- 4.3.2. Have a working knowledge of how Lewisham conducts a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so;
- 4.3.3. Ensure each member of staff has access to and understands the school's safeguarding and child protection policy and procedures, especially new and part time staff;
- 4.3.4. Be alert to the specific needs of children in need, those with special educational needs and young carers so that these children reach their academic potential
- 4.3.5. Understand and support the academy with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation;
- 4.3.6. Are able to understand the unique risks associated with online safety and be confident that they have the relevant knowledge and up to date capability required to keep children safe whilst they are online at the academy. DSLs will ensure staff are aware of the implications of the academy's use of artificial intelligence (AI) such as child exploitation and data protection. They will lead on ensuring the intelligent and strategic use of AI in the academy. They will ensure staff are aware of the difference between misinformation (based on being mistaken) and disinformation (based on intent). They will include in staff training how the academy deals with conspiracy theory. They will cover in the training the following offences cited in the 2023 Online Safety Act – cyberflashing, epilepsy trolling, threatening communications, encouraging serious self-harm and sharing intimate images, including deep fake images.
- 4.3.7. Are able to understand and respond to the specific risks relating to sexual violence and harassment
- 4.3.8. Can recognise the additional risks that children with SEN and disabilities (SEND) face online, for example, from online bullying, grooming and radicalisation and are confident they have the capability to support SEND children to stay safe online. Staff know that reasonable adjustments will be made in all areas of the life of the

school for disabled pupils.

- 4.3.9. Be able to keep detailed, accurate, secure written records of concerns, MASH Referrals alongside referrals to other agencies
- 4.3.10. Obtain access to resources and attend any relevant or refresher training courses;
- 4.3.11. Encourage a culture of listening and responding to children and taking account of their wishes and feelings, among all staff, in any measures the academy may put in place to protect them.

#### 4.4. Raising Awareness

- 4.4.1. The Designated Safeguarding Lead should:
  - 4.4.1.1. ensure the academy's policies are known, understood and used appropriately;
  - 4.4.1.2. take the lead responsibility for understanding the IT filtering and monitoring systems in place.
  - 4.4.1.3. Ensure that staff know that children may not feel ready or know how to tell someone they are being abused. This should not prevent staff from having professional curiosity and speaking to the DSL if they have concerns.
  - 4.4.1.4. work with the local governing body to ensure that the academy's child protection policy is reviewed annually, and the procedures and implementation are updated and reviewed regularly.
  - 4.4.1.5. Ensure the child protection policy is available publicly and that parents are aware that advice regarding child protection concerns could be sought from the Multi Agency Support Hub and that MASH Referrals about suspected abuse or neglect may be made. Ensure parents are aware of the school or college's statutory role regarding safeguarding of children.
  - 4.4.1.6. link with Lewisham Safeguarding Children's Board to make sure staff are aware of training opportunities and the latest local policies on safeguarding;
  - 4.4.1.7. Ensure staff are aware that, where a school places a pupil with an alternative provision provider, it continues to be responsible for the safeguarding of that pupil and should be satisfied that the placement meets the pupil's needs;

- 4.4.1.8. Ensure that when children leave the academy, they ensure the file for safeguarding and any child protection information is sent to any new school as soon as possible but transferred separately from the main pupil file. The file should not be sent until the child is physically attending the new school.
- 4.4.1.9. obtain proof that the new school has received the safeguarding file for any child transferring and then destroy any information held on the child in line with GDPR requirements.
- 4.4.1.10. Consider if it would be appropriate to share any information with the new school in advance of a child leaving, for example, information that would allow the new school or college to continue supporting victims of abuse and have that support in place for when the child arrives.

#### 5. THE LOCAL GOVERNING BODY

- 5.1. Governing bodies must ensure that they comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and training in their academy are always effective and comply with the law.
- 5.2. The Local Governing Body of St Michael's will have a senior governor to take **leadership** responsibility for the academy's safeguarding arrangements.
- 5.3. All governors should receive training on child protection and safeguarding as part of their induction and at regular intervals thereafter. **The SDBE MAT recommends that governor training is updated annually.**
- 5.4. The nominated governor for child protection is:  
  
NAME: Beryl Fielder and Fatmatta Bentil-Mensah  
  
The responsibilities placed on the local governing bodies include:
  - 5.4.1. their contribution to inter-agency working, which includes providing a coordinated offer of early help when additional needs of children are identified;
  - 5.4.2. ensuring that an effective child protection policy is in place, together with a staff behaviour policy;

- 5.4.3. ensuring staff are provided with Part One of Keeping Children Safe in Education (DfE 2024) – Annex A and are aware of specific safeguarding issues;
- 5.4.4. ensuring that staff induction is in place with regards to child protection and safeguarding;
- 5.4.5. appointing an appropriate senior member of staff to act as the Lead Designated Senior Lead. It is a matter for the individual academy to choose to have more than one Deputy Designated Senior Lead;
- 5.4.6. ensuring that all of the DSLs, including deputies, should undergo formal child protection training every two years, in line with KCSIE and Lewisham Local Safeguarding Children Board procedures, and receive regular, at least annual, safeguarding updates via e-bulletins, meeting other DSLs, or taking time to read and digest safeguarding developments, for example.
- 5.4.7. prioritising the welfare of children and creating a culture where staff are confident to challenge senior leaders over any safeguarding concerns;
- 5.4.8. where they are involved in recruitment, the requirements of “Safer Recruitment are met. They should ensure that short-listed candidates are made aware that online searches will be made as part of due diligence.
- 5.4.9. ensuring that children are taught about safeguarding, including online safety. Schools should consider this as part of providing a broad and balanced curriculum;
- 5.4.10. ensuring appropriate, up to date and fit for purpose filters and appropriate monitoring systems are in place to safeguard children from potentially harmful and inappropriate online material. They should understand, and check that staff understand, the expectations, applicable roles and responsibilities for IT filtering and monitoring systems. Additional information to support governing bodies and proprietors is provided in Keeping Children Safe in Education (DfE 2024). They should be assured that staff are aware of harmful online challenges and hoaxes. They should be assured that staff know how to escalate concerns identified by the academy’s IT filters.
- 5.4.11. seek assurance that providers using the premises for non-school activities have appropriate safeguarding and child protection policies and procedures in place. They should ensure that there are arrangements in place for the providers to liaise with the school on these matters where appropriate.

## 6. WHEN TO BE CONCERNED

- 6.1. Knowing what to look for is vital for the early identification of abuse and neglect. All staff should be aware of the Indicators of abuse and neglect so that they are able to identify cases of children who may need help or protection.
- 6.2. Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology maybe used to facilitate offline abuse. Children maybe abused by an adult or adults or by another child or children.

### Abuse, neglect and exploitation.

| PHYSICAL ABUSE                                                                                                                                                                                                                                                                                      |                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. |                                                             |
| CHILD                                                                                                                                                                                                                                                                                               |                                                             |
| Bruises – shape, grouping, site, repeat or multiple                                                                                                                                                                                                                                                 | Withdrawal from physical contact                            |
| Bite-marks – site and size<br>Burns and Scalds – shape, definition, size, depth, scars                                                                                                                                                                                                              | Aggression towards others, emotional and behaviour problems |
| Improbable, conflicting explanations for injuries or unexplained injuries                                                                                                                                                                                                                           | Frequently absent from school                               |
| Untreated injuries                                                                                                                                                                                                                                                                                  | Admission of punishment which appears excessive             |
| Injuries on parts of body where accidental injury is unlikely                                                                                                                                                                                                                                       | Fractures                                                   |
| Repeated or multiple injuries                                                                                                                                                                                                                                                                       | Fabricated or induced illness -                             |



| PARENT                                                  | FAMILY/ENVIRONMENT                                                                                                               |
|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Parent with injuries                                    | History of mental health, alcohol or drug misuse or domestic violence.                                                           |
| Evasive or aggressive towards child or others           | Past history in the family of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault |
| Explanation inconsistent with injury                    | Marginalised or isolated by the community.                                                                                       |
| Fear of medical help / parents not seeking medical help | Physical or sexual assault or a culture of physical chastisement.                                                                |
| Over chastisement of child                              |                                                                                                                                  |

### EMOTIONAL ABUSE

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

### CHILD

|                                                                 |                                                                                     |
|-----------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Self-harm                                                       | Over-reaction to mistakes / Inappropriate emotional responses                       |
| Chronic running away                                            | Abnormal or indiscriminate attachment                                               |
| Drug/solvent abuse                                              | Low self-esteem                                                                     |
| Compulsive stealing                                             | Extremes of passivity or aggression                                                 |
| Makes a disclosure                                              | Social isolation – withdrawn, a 'loner' Frozen watchfulness particularly pre-school |
| Developmental delay                                             | Depression                                                                          |
| Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking) | Desperate attention-seeking behaviour                                               |

| PARENT                                                                                              | FAMILY/ENVIRONMENT                                                                                                             |
|-----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Observed to be aggressive towards child or others                                                   | Marginalised or isolated by the community.                                                                                     |
| Intensely involved with their children, never allowing anyone else to undertake their child's care. | History of mental health, alcohol or drug misuse or domestic violence.                                                         |
| Previous domestic violence                                                                          | History of unexplained death, illness or multiple surgery in parents and/or siblings of the family                             |
| History of abuse or mental health problems                                                          | Past history in the care of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault |
| Mental health, drug or alcohol difficulties                                                         | Wider parenting difficulties                                                                                                   |
| Cold and unresponsive to the child's emotional needs                                                | Physical or sexual assault or a culture of physical chastisement.                                                              |
| Overly critical of the child                                                                        | Lack of support from family or social network.                                                                                 |

### NEGLECT

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.

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

### CHILD

|                                                                                             |                                                  |
|---------------------------------------------------------------------------------------------|--------------------------------------------------|
| Failure to thrive - underweight, small stature                                              | Low self-esteem                                  |
| Dirty and unkempt condition                                                                 | Inadequate social skills and poor socialisation  |
| Inadequately clothed                                                                        | Frequent lateness or non-attendance at school    |
| Dry sparse hair                                                                             | Abnormal voracious appetite at school or nursery |
| Untreated medical problems                                                                  | Self-harming behaviour                           |
| Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold | Constant tiredness                               |
| Swollen limbs with sores that are slow to heal, usually associated with cold injury         | Disturbed peer relationships                     |



| PARENT                                                                   | FAMILY/ENVIRONMENT                                                                                                               |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Failure to meet the child's basic essential needs including health needs | Marginalised or isolated by the community.                                                                                       |
| Leaving a child alone                                                    | History of mental health, alcohol or drug misuse or domestic violence.                                                           |
| Failure to provide adequate caretakers                                   | History of unexplained death, illness or multiple surgery in parents and/or siblings of the family                               |
| Keeping an unhygienic dangerous or hazardous home environment            | Past history in the family of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault |
| Unkempt presentation                                                     | Lack of opportunities for child to play and learn                                                                                |
| Unable to meet child's emotional needs                                   | Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals                        |
| Mental health, alcohol or drug difficulties                              |                                                                                                                                  |

#### SEXUAL ABUSE

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

#### CHILD

|                                                                             |                                                                                                        |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Self-harm - eating disorders, self-mutilation and suicide attempts          | Poor self-image, self-harm, self-hatred                                                                |
| Running away from home                                                      | Inappropriate sexualised conduct                                                                       |
| Reluctant to undress for PE                                                 | Withdrawal, isolation or excessive worrying                                                            |
| Pregnancy                                                                   | Sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit |
| Inexplicable changes in behaviour, such as becoming aggressive or withdrawn | Poor attention / concentration (world of their own)                                                    |

| Pain, bleeding, bruising or itching in genital and /or anal area            | Sudden changes in school work habits, become truant                                                                            |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Sexually exploited or indiscriminate choice of sexual partners              |                                                                                                                                |
| PARENT                                                                      | FAMILY/ENVIRONMENT                                                                                                             |
| History of sexual abuse                                                     | Marginalised or isolated by the community.                                                                                     |
| Excessively interested in the child.                                        | History of mental health, alcohol or drug misuse or domestic violence.                                                         |
| Parent displays inappropriate behaviour towards the child or other children | History of unexplained death, illness or multiple surgery in parents and/or siblings of the family                             |
| Conviction for sexual offences                                              | Past history in the care of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault |
| Comments made by the parent/carers about the child.                         | Grooming behaviour                                                                                                             |
| Lack of sexual boundaries                                                   | Physical or sexual assault or a culture of physical chastisement.                                                              |

- 6.3. If staff have any concerns about a child's welfare, they should act on them immediately. If staff have a concern, they should follow this policy and speak to the Designated Senior Lead (or deputy). The designated safeguarding lead (and any deputies) are most likely to have a complete safeguarding picture and be the most appropriate person to advise on the response to safeguarding concerns.
- 6.4. Any staff member should be able to make a safeguarding referral to Lewisham Multi Agency Support Hub if necessary.
- 6.5. All staff should be aware of the process for making MASH Referrals to Children's Services for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm - from abuse or neglect) that may follow a Contact Referral, MASH referral along with the role they might be expected to play in such assessments.
- 6.6. Staff should not assume a colleague or another professional will take action but should share information that might be critical in keeping children safe. They should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate provision.

**Options will then include:**



- 6.6.1. managing any support for the child internally via the academy's own pastoral support processes;
- 6.6.2. completing an Early Help or Family Thrive Request for Support referral.
- 6.6.3. a referral to the Multi Agency Support Hub for statutory services, for example as the child might be in need, is in need or suffering or likely to suffer significant harm from abuse or neglect

#### 6.7. **Contextual Safeguarding**

Safeguarding incidents and/or behaviours can be associated with factors outside the academy and/or can occur between children outside the academy. All staff, but especially the designated safeguarding lead (or deputy) should consider the context within which such incidents and/or behaviours occur. This is known as contextual safeguarding, which means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare.

#### 6.8. **A child centred and coordinated approach to safeguarding**

Safeguarding and promoting the welfare of children is **everyone's responsibility**. In order to fulfil this responsibility effectively, each professional 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.

The academy staff form part of the wider safeguarding system for children. This system is based on the principle of providing help for families to stay together where it is safe for the children to do so, and looking at alternatives where it is not, whilst acting in the best interests of the child at all times.

#### 6.9. **Children who may require early help**

- 6.10. All staff should be aware of the early help process, and understand their role in identifying emerging problems, sharing information with other professionals to support early identification and assessment of a child's needs. It is important for children to receive the right help at the right time to address risks and prevent issues escalating. This also includes staff monitoring the situation and feeding back to the DSL any ongoing/escalation of concerns so that consideration can be given to a Multi-Agency Support Hub Referral if the child's situation doesn't

appear to be improving.

If early help is appropriate, the DSL or a Deputy will generally lead on liaising with other agencies and setting up further assessments as appropriate.

Any child may benefit from early help, but all academy staff should be particularly alert to the potential need for early help for a child who:

- 6.10.1. is disabled and has specific additional needs;
- 6.10.2. has special educational needs (whether or not they have a statutory education, health and care plan);
- 6.10.3. is from a black, Asian or mixed-heritage background, given that research tells us that these pupils are particularly subject to fatal abuse and/or neglect;
- 6.10.4. is a young carer;
- 6.10.5. identifies as LGBT and gender questioning;
- 6.10.6. is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
- 6.10.7. has unexplained and/or persistent absences from education;
- 6.10.8. is frequently missing/goes missing from care or from home;
- 6.10.9. is misusing drugs or alcohol themselves;
- 6.10.10. is at risk of modern slavery, trafficking or exploitation;
- 6.10.11. is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse. All staff are aware of the possible detrimental and long-term impact of domestic abuse on children's health, well-being, development and ability to learn;
- 6.10.12. has returned home to their family from care;
- 6.10.13. is showing early signs of abuse and/or neglect;
- 6.10.14. is at risk of being radicalised or exploited;
- 6.10.15. is a privately fostered child.
- 6.11. Academies in the SDBE MAT will not discriminate unlawfully against pupils because of their protected characteristics, as defined in the Equality Act 2010. Leaders will make reasonable adjustments to provision as appropriate.
- 6.12. Academy staff will be aware of the main categories of maltreatment: physical abuse, emotional abuse, sexual abuse and neglect. They should also be aware of the indicators of maltreatment and specific safeguarding issues so that they are able to identify cases of children who may be in need of help or protection.
- 6.13. **Children with special educational needs and disabilities:**



Additional barriers can exist when recognising abuse and neglect in this group of children.

6.13.1. This can include:

6.13.1.1. Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's impairment without further exploration;

6.13.1.2. Assumptions that children with SEN and disabilities can be disproportionately impacted by things like bullying- without outwardly showing any signs;

6.13.1.3. If our academy uses alternative provision, we will follow the DfE guidance 'Arranging Alternative Provision';

6.13.1.4. Communication barriers and difficulties;

6.13.1.5. Reluctance to challenge carers, (professionals may over empathise with carers because of the perceived stress of caring for a disabled child);

6.13.1.6. Disabled children often rely on a wide network of carers to meet their basic needs and therefore the potential risk of exposure to abusive behaviour can be increased;

6.13.1.7. A disabled child's understanding of abuse;

6.13.1.8. Lack of choice/participation;

6.13.1.9. Isolation.

#### 6.14. **Child on child abuse**

6.14.1. All staff will be aware that safeguarding issues can manifest themselves via child on child abuse. This is most likely to include, but may not be limited to:

6.14.1.1. bullying (including cyberbullying, prejudice-based bullying and discriminatory bullying);

6.14.1.2. physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;

6.14.1.3. sexual violence, such as rape, assault by penetration and sexual assault;

6.14.1.4. sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be stand-alone or part of a broader pattern of abuse. This may include abuse in intimate personal relationships between peers of any age or gender.

6.14.1.5. upskirting, which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm;

6.14.1.6. sexting (also known as youth produced sexual imagery); and

6.14.1.7. initiation/hazing type violence and rituals.

6.14.2. All staff will be aware that abuse is abuse and peer on peer abuse will never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up". Furthermore they will recognise the gendered nature of child on child abuse (i.e. that it is more likely that girls will be victims and boys perpetrators), but that all peer on peer abuse is unacceptable and will be taken seriously.

6.14.3. Academies may wish to use The Sexual Behaviours Traffic Light Tool by the Brook Advisory Service to help professionals; assess and respond appropriately to sexualised behaviour. The traffic light tool can be found at:  
<https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool>

6.14.4. In order to minimise the risk of child on child abuse St Michael's will:

6.14.4.1. provide a developmentally appropriate PSHE curriculum which develops students understanding of acceptable behaviour and keeping themselves safe.

6.14.4.2. have systems in place for any child to raise concerns with staff, knowing that they will be listened to, believed and valued.

6.14.4.3. ensure victims, perpetrators and any other child affected by Child on Child abuse are supported by having a safe environment where they are listened to and not judged.

6.14.4.4. develop robust, bespoke risk assessments where appropriate

6.14.4.5. have relevant policies in place



6.14.5. Local Safeguarding Children Board procedures may include guidance for referring and reporting child on child abuse.

#### 6.15. **Serious violence**

All staff should be aware of indicators, which may mean that children are at risk from, or involved with, serious violent crime. Indicators may include increased absence, a change in friendships, a change in relationships with older individuals or groups, a decline in performance, signs of self harm and/or unexplained injuries, unexplained gifts and/or new possessions.

#### 6.16. **Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE)**

Both CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources. In some cases, the abuse will be in exchange for something the victim needs or wants and/or will be to the financial benefit or other advantage (such as increased status) of the perpetrator or facilitator. The abuse can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse. It can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence. Victims can be exploited even when activity appears consensual and it should be noted exploitation as well as being physical can be facilitated and/or take place online. More information include definitions and indicators are included in Annex A KCSiE DfE 2024.

#### 6.17. **Mental Health**

All staff should be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Only appropriate trained professionals should attempt to make a diagnosis of a mental health problem. Staff however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken by following the procedures in this policy and speaking to the schools DSL.

#### 6.18. **PREVENT: Safeguarding Children and Young People from Radicalisation**

Children can be vulnerable to extreme ideologies and radicalisation. Similar to protecting children from other forms of harm and abuse, protecting children from radicalisation must be part of all school and college safeguarding approaches.

All schools and colleges are subject to the Prevent Duty under Section 26 of the Counter Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions to have “due regard to the need to prevent people from being drawn into terrorism.”

There are signs and vulnerability factors that may indicate a child is susceptible to radicalisation or is in the process of being radicalised. It is possible to protect vulnerable people from extremist thinking and intervene to safeguard those at risk of radicalisation. Staff must be alert to changes in children’s behaviour, which could indicate that they may be in need of Prevent support. They must act proportionately to the concern using the Prevent ‘notice, check, share’ approach, which may lead to the DSL making a Prevent referral.

#### 6.19. **Domestic Abuse**

Domestic abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological; physical; sexual; financial; and emotional.

All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. See Appendix 4 for information regarding Operation Encompass

### 7. **DEALING WITH A DISCLOSURE**



If a child confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality – instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe.

- 7.1. If a child discloses that he or she has been abused in some way, the member of staff/ volunteer will:
  - 7.1.1. listen to what is being said without displaying shock or disbelief;
  - 7.1.2. accept what is being said;
  - 7.1.3. allow the child to talk freely;
  - 7.1.4. reassure the child, but not make promises which it might not be possible to keep;
  - 7.1.5. never promise a child that they will not tell anyone, as this may ultimately not be in the best interests of the child;
  - 7.1.6. reassure him or her that what has happened is not his or her fault;
  - 7.1.7. stress that it was the right thing to tell;
  - 7.1.8. listen, only asking questions when necessary to clarify;
  - 7.1.9. not criticise the alleged perpetrator;
  - 7.1.10. explain what has to be done next and who has to be told;
  - 7.1.11. make a written record (see Record Keeping);
  - 7.1.12. Pass the information to the DSL without delay (if a DSL or Deputy is not available, staff must inform a senior member of staff or complete a child protection contact referral if this disclosure indicates that the child may be at risk of immediate harm and/or have been suffered significant harm to ensure reporting to Police and/or Children's Services where necessary is not delayed.)

## 7.2. Support

Dealing with a disclosure from a child and safeguarding issues generally can be stressful. The member of staff/volunteer should, therefore, consider seeking support for him/herself and discuss this with the Designated Senior Lead.

If a school /college staff member receives a disclosure about potential harm caused by another staff member, they should see section 11 of this policy– Allegations involving school staff/volunteers.

## 8. RECORD KEEPING

All academy staff will be confident of the processing conditions under the Data Protection Act 2018 and the GDPR which allow them to store and share information for safeguarding purposes, including information which is sensitive and personal, and should be treated as 'special category personal data'.

All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing. If in doubt about recording requirements staff will discuss with the designated safeguarding lead.

- 8.1. When a child has made a disclosure, the member of staff/volunteer will:
  - 8.1.1. Record as soon as possible after the conversation. Use the schools Child Protection Recording system which, in the SDBE MAT is CPOMS.
  - 8.1.2. Ensure the date, time, place is recorded, and any noticeable non-verbal behaviour and the words used by the child
  - 8.1.3. Use a body map to indicate the position of any injuries and a clear description of the injury
  - 8.1.4. record statements and observations rather than interpretations or assumptions;
  - 8.1.5. not destroy the original records in case they are needed by a court.
- 8.2. All records will be given to the Designated Senior Lead promptly. No copy will be retained by the member of staff or volunteer.



8.3. The DSL will ensure that all safeguarding records are managed in accordance with the Education (Pupil Information) (England) Regulations 2005.

## 9. **CONFIDENTIALITY**

9.1. Safeguarding children raises issues of confidentiality that must be clearly understood by all staff/volunteers in St Michael's.

9.2. All staff in schools, both teaching and non-teaching staff, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies.

9.3. Staff/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

## 10. **SCHOOL PROCEDURES**

10.1. If any member of staff is concerned about a child, he or she must inform the DSL. The DSL will decide whether the concerns should be raised to Children's Services and if deemed to have met the threshold a Child Protection Contact Referral will be completed. If a Child Protection Contact Referral to Children's Services is made the DSL will discuss the referral with the parents, unless to do so would place the child at further risk of harm.

10.2. While it is the DSL's role to make Child Protection Contact Referrals, any staff member can make a Child Protection Contact Referral to Children's Services if a child is in immediate danger or is at risk of harm (e.g. concern that a family might have plans to carry out FGM, Forced Marriage etc). In these circumstances a Child Protection Contact Referral should be made to Children's Services and/or the Police immediately. Where Child Protection Contact Referrals are made by another member of staff, the DSL should be informed as soon as possible.

10.3. If a teacher (persons employed or engaged to carry out teaching work at schools and other institutions in England) , in the course of their work in the profession, discovers that an act of Female Genital Mutilation (FGM) appears to have been

carried out on a girl under the age of 18 the teacher must report this to the police via 101. This is a mandatory reporting duty.

10.4. If the allegations raised are against other children, the school should follow section - Children Who Abuse Others. Please see the school's anti-bullying policy for more details on procedures to minimise the risk of child on child abuse.

10.5. The member of staff must record information regarding the concerns on the same day. The recording must be a clear, precise and a factual account of any verbal disclosures and observations.

10.6. Particular attention should be paid to the attendance and development of any child about whom the school has concerns, or who has been identified as being the subject of a Child Protection Plan and a written record will be kept.

10.7. If a pupil who is/or has been the subject of a child protection plan changes school, the DSL will inform the social worker responsible for the case and transfer the appropriate records to the DSL at the receiving school, in a secure manner, and separate from the child's academic file.

10.8. The DSL is responsible for making the senior leadership team aware of trends in behaviour that may affect pupil welfare. If necessary, training will be arranged.

## 11. **COMMUNICATION WITH PARENTS**

11.1. St Michael's will ensure the Child Protection Policy is available publicly either via the school or college website or by other means.

11.2. Parents should be informed prior to a referral, unless it is considered to do so might place the child at increased risk of significant harm by:

11.2.1. the behavioural response it prompts such a where a child being subjected to abuse, is forced to remain silent;

11.2.2. leading to an unreasonable delay;

11.2.3. leading to the risk of loss of evidential material.





- 11.3. The academy will also consider not informing parent(s) where this would place a member of staff at risk.
- 11.4. The school will endeavour to ensure that parents understand the responsibilities placed on the school staff for safeguarding children.
- 11.5. Where reasonably possible schools and colleges should hold more than one emergency contact number for each pupil.

## 12. ALLEGATIONS INVOLVING ACADEMY STAFF AND VOLUNTEERS

- 12.1. An allegation is any information which indicates that a member of staff/ a supply member of staff/volunteer may have:
  - 12.1.1. behaved in a way that has, or may have harmed a child;
  - 12.1.2. possibly committed a criminal offence against/related to a child;
  - 12.1.3. Behaved towards a child or children in a way which indicates he or she would pose a risk of harm to children; or
  - 12.1.4. Behaved or may have behaved in a way that indicated they may not be suitable to work with children.
  - 12.1.5. This relates to members of staff, supply staff and volunteers who are currently working in any school or college regardless of whether the school or college is where the alleged abuse took place. Allegations against a teacher who is no longer teaching should be referred to the police. Historical allegations of abuse should also be referred to the police.
  - 12.1.6. In the event of allegations of abuse being made against the Head Teacher, where the Head Teacher is also the sole Proprietor of an independent school or where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, allegations should be reported directly to the Local Authority Designated Officer (LADO). Staff may consider discussing any concerns with the DSL if appropriate make any referral via them.
  - 12.1.7. Where allegations are received about an individual using the premises for the purpose of running activities for children, the LADO should be informed.

## 12.1.8. The Chair of the Local Governing Body in this academy is:

**NAME: Beryl Fielder**

**CONTACT NUMBER: 0208 778 8407 for school office and message will sent**

In the absence of the Chair of Governors, the Vice Chair should be contacted. The Vice Chair in this academy is:

**NAME: Ben Leslie**

**CONTACT NUMBER: 0208 778 8407 for school office and message will sent**

- 12.1.9. The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification; it is important not to make assumptions. Confidentiality should not be promised and the person should be advised that the concern will be shared on a 'need to know' basis only.
- 12.1.10. Actions to be taken include making an immediate written record of the allegation using the informant's words – including time, date and place where the alleged incident took place, brief details of what happened, what was said and who was present. This record should be signed, dated and immediately passed on to the Head Teacher.
- 12.1.11. The recipient of an allegation must not unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.
- 12.1.12. The Head Teacher/Chair of Governors will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Local Authority Designated Officer.
- 12.1.13. Children's Services Multi-Agency Safeguarding Hub / Children's Services – 0208 314 6660 or 0208 314 9181
- 12.1.14. SOOHS (Out of Hours Service-Children's Services) – Lewisham Out of Hours Service on 020 8314 6000
- 12.1.15. If the allegation meets any of the four criteria set out at the start of this section, contact should always be made with the Local Authority Designated Officer without delay.





12.1.16. If it is decided that the allegation requires a child protection strategy meeting or joint evaluation meeting, this will take place in accordance Lewisham Safeguarding Children Board procedures

12.1.17. If it is decided it does not require a child protection strategy meeting or joint evaluation meeting, the LADO will provide the employer with advice and support on how the allegations should be managed.

12.1.18. The Head Teacher should, as soon as possible, following briefing from the Local Authority Designated Officer inform the subject of the allegation.

12.1.19. Where a staff member feels unable to raise an issue with their employer/through the whistleblowing procedure or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them:

Children's Services: 0208 314 6660

NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and Email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

12.1.20. Lessons from safeguarding concerns about adults should include all cases and not just those which are substantiated.

12.2. **What St Michael's will do if they have concerns about safeguarding practices within the academy.**

12.3. All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the academy's safeguarding arrangements.

12.4. Appropriate whistleblowing procedures, which are suitably reflected in staff training and staff behaviour policies, should be in place for such concerns to be raised with the senior leadership team.

### 13. Safer working practice

13.1. To reduce the risk of allegations, all staff should be aware of safer working practice and should be familiar with the guidance contained in the staff

handbook/school code of conduct/staff behaviour policy and Safer Recruitment Consortium Document Guidance for safer working practice for those working with children and young people in education settings (May 2019) available at

<https://www.saferrecruitmentconsortium.org/>

The document seeks to ensure that the responsibilities of school leaders towards children and staff are discharged by raising awareness of illegal, unsafe, unprofessional and unwise behaviour. This includes guidelines for staff on positive behaviour management in line with the ban on corporal punishment (School Standards and Framework Act 1998).

Please see the school/college's behaviour management policy for more information.



APPENDIX 1:  
KEEPING CHILDREN SAFE IN EDUCATION  
(DfE 2025)

Part One: Information for all school and college staff  
Annex A: Further Information

All staff should have access and have read Part one and Annex A (which provides further information specific forms of abuse and safeguarding issues) of this statutory guidance. They should also have the opportunity to seek clarity from designated staff for any content.

This is to assist staff to understand their role and discharge their responsibilities as set out in this guidance.

Staff will be asked to sign to say they have read these sections (please see Appendix 2 below) and should subsequently be re-directed to these documents again should any changes occur.

APPENDIX 2: DECLARATION FOR STAFF  
Child Protection Policy and Keeping Children Safe in  
Education (DfE 2025)

Academy Name: St Michael’s CE Primary School  
Academic Year 2025-26

Please sign and return to Jacqui Gillespie (DSL) by Friday 19<sup>th</sup> September 2025

I, \_\_\_\_\_<insert name>\_\_\_\_\_ have read and am  
familiar with the contents of the following documents and understand my role  
and responsibilities as set out in these document(s):

- (1) The School/College's Child Protection Policy
- (2) Part 1 and Annex A of 'Keeping Children Safe in Education' DfE Guidance, 2025

I am aware that the DSLs are:

.....

.....

and I able to discuss any concerns that I may have with them.

I know that further guidance, together with copies of the policies mentioned above, are  
available via the office or on the shared server.

Signed:

.....

Date:

.....



### APPENDIX 3: ACTIONS WHERE THERE ARE CONCERNS ABOUT A CHILD FLOWCHART



### APPENDIX 4: OPERATION ENCOMPASS Information sharing from Police regarding Domestic Abuse notifications (2<sup>nd</sup> December 2019)

Operation Encompass Safeguarding Statement:

- Our academy is part of Operation Encompass. This is a police and education early intervention safeguarding partnership which supports children and young people who experience Domestic Abuse.
- Operation Encompass means that the police will share information about Domestic Abuse incidents with our academy PRIOR to the start of the next school day when they have been called to a domestic incident.
- Our parents are fully aware that we are an Operation Encompass school.
- The Operation Encompass information is stored in line with all other confidential safeguarding and child protection information.
- The Key Adult has also led training for all school staff and Governors about Operation Encompass, the prevalence of Domestic Abuse and the impact of this abuse on children. We have also discussed how we can support our children following the Operation Encompass notification.
- We are aware that we must do nothing that puts the child/ren or the non-abusing adult at risk.
- The Safeguarding Governor will report on Operation Encompass in the termly report to Governors. All information is anonymised for these reports.
- The Key Adult has used the Operation Encompass Toolkit to ensure that all appropriate actions have been taken by the school.

OUR KEY ADULTS ARE: .....  
(add names)

