

# **Thriveology Wellness CIC**

**Child on Child Abuse Policy.**

**September 2024**



# CHILD ON CHILD ABUSE POLICY

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## INTRODUCTION

All team members working directly or indirectly with children and young people have a duty to safeguard and promote their welfare. The following people have specific additional responsibilities with regard to safeguarding children and young people at Thriveology and will work together to ensure a consistent approach across the setting:

Designated Safeguarding Lead (DSL): Mrs Charlotte Martyn

Deputy Designated Safeguarding Lead: Miss Lana Knapp

## POLICY STATEMENT

Thriveology puts the safety of the people we support as the highest priority and is committed to ensuring that children and young people are effectively safeguarded in all our services at all times. Thriveology recognises that children can be capable of abusing other children of similar and different ages or stages of development, and vulnerable to abuse by other children. Such abuse is taken as seriously as abuse perpetrated by an adult and will not be tolerated. Thriveology has a zero-tolerance approach to abuse and will take all concerns and reports seriously.

A contextual safeguarding approach will be taken to understand, and respond to, any occurrences of child-on-child abuse, recognising that children and young people who display harmful behaviours must be seen as vulnerable themselves.

Thriveology is committed to ensuring the prevention, early identification and appropriate management of child-on-child abuse. Where such abuse is identified, child protection procedures must be followed. All children and young people who have been affected by the situation will be supported, with wider risks being considered and addressed.



The specific issues and sensitive nature of child-on-child abuse requires this additional guidance, which is written in line with the statutory guidance contained within:

Keeping Children Safe in Education (KCSiE) 2024 (England)

Working Together to Safeguard Children (England)

National Guidance Child Protection Scotland 2021 – updated 2023

This Policy should also be read and applied alongside the following:

- Safeguarding Policy
- Anti-Bullying Policy
- Behaviour Policy
- Safer Recruitment Policy
- Data Protection Policy
- Staying Safe Online Policy
- Acceptable Use Policy
- Complaints Policy
- Attendance Policy

## WHAT IS CHILD-ON-CHILD ABUSE

Child-on-child abuse is any form of physical, sexual, verbal, emotional or financial abuse, or coercive control exercised between children, and within children's relationships (both intimate and non-intimate), friendships, and wider associations.

This policy applies to children and young people who demonstrate such behaviour and other behaviours that may give cause for concern (this includes but is not exclusive to abusive behaviours). Local Safeguarding Procedures must be followed, and any incidents of sexual violence will be reported to the police.

- In England, referrals for children and young people under 18 will be dealt with under the Children's Safeguarding Arrangements, whereas those 18 and above will be dealt with under the Adult Safeguarding Arrangements.

All staff and volunteers should understand that even if there are no reports in their setting it does not mean it is not happening, it may be the case that it is just not being reported. As such it is important if staff and volunteers have any concerns regarding child-on-child abuse, they should speak to their Designated Safeguarding Lead or Deputy Designated Safeguarding Lead.

It is essential that all staff and volunteers understand the importance of challenging inappropriate behaviours between children, many of which are listed below, that are actually abusive in nature. Downplaying certain behaviours, for example dismissing sexual harassment as "just banter", "just having a laugh", "part of growing up" or "boys being boys" can lead to a culture of unacceptable behaviours, an unsafe environment for children and in worst case scenarios a culture that normalises abuse leading to children accepting it as normal and not coming forward to report it.

All staff and volunteers should be aware that children can abuse other children, and that it can happen both inside and outside of the setting, in the home environment, in the community, both online and offline.

Some examples of how this can manifest itself in different behaviours include, but are not limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying).
- abuse in intimate personal relationships between peers.
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse).
- sexual violence, such as rape, assault by penetration and sexual assault (this may include an online element which facilitates, threatens and/or encourages sexual violence), inappropriate touching.

- sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse.
- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.
- consensual and non-consensual sharing of nudes and semi-nude images and or videos (also known as sexting or youth produced sexual imagery)
- up skirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm; and
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).
- emotional abuse, psychological abuse, coercive control and/ or financial abuse

Some of these behaviours will need to be handled with reference to other policies, such as the Behaviour, Anti-bullying, Safeguarding, and Staying Safe Online Policy.

All staff and volunteers must be aware and alert to signs of child-on-child abuse that may occur offline and online and should be clear as to Thriveology's policies and procedures, ensuring they are followed as part of their everyday practice.

Staff and volunteers must ensure that children and young people know:

- How to report any concerns and feel confident that they will be listened to and supported.
- They can also report any concerns by emailing our DSL and DDSL (Mrs Charlotte Martyn DSL [charlotte@thriveology.co.uk](mailto:charlotte@thriveology.co.uk)) (Miss Lana Knapp DDSL [lane@thriveology.co.uk](mailto:lane@thriveology.co.uk))
- Are aware of the NSPCC dedicated helpline 0800 136 663 and how to contact Childline

## USE OF LANGUAGE

The following terms are used in line with the DfE guidance KCSiE 2024, staff and volunteers should always be mindful of the impact language can have on children and young people, especially those who are vulnerable or have suffered trauma.

The term **victim** is a widely recognised and understood term. It is important that all our settings recognise that not everyone who has been subjected to abuse considers themselves a victim or would want to be described in this way. Staff and volunteers should be conscious of this when managing any incident and be prepared to use any term with which the individual child is most comfortable.

Alleged **perpetrator(s)** and, where appropriate, **perpetrator(s)** are widely used and recognised terms. However, staff and volunteers should think very carefully about terminology, especially when speaking in front of children, not least because in some cases the abusive behaviour will have been harmful to the perpetrator as well. Staff and volunteers should always be aware that a perpetrator may also be a victim of abuse. As above, the use of appropriate terminology will be for staff and volunteers to determine, as appropriate, on a case-by-case basis.

**Boy(s), Girl(s):** refers to a child/children whose biological sex is male and female respectively, as well as trans boys and trans girls, whose gender identity will be different from their biological sex. It is acknowledged that there will also be some children who identify as non-binary or gender fluid and who will not recognise the term boy or girl in respect to themselves.

## VULNERABLE GROUPS

It is important to always be aware that any child or young person can be at risk of child-on-child abuse and that abusers can be younger or older than their victims. Research suggests some groups may be more at risk. The following groups are identified as particularly vulnerable:

- Those ages 10 and upwards (although victims can be younger).
- Girls and young women are more likely to be harmed, and boys and young men are more likely to have harmed.
- Black and minority ethnic children are often under identified as having been harmed and over-identified as having harmed others.
- Young people with intra-familial abuse in their histories or those living with domestic abuse are more likely to be vulnerable.
- Young people in care and those who have experienced loss of a parent, sibling or friend through bereavement.

Children and young people with Special Educational Needs and Disabilities (SEND) are more at risk of abuse. Staff and volunteers must be vigilant in monitoring those who are more vulnerable. Any concerns must be reported immediately to the DSL or deputy/Safeguarding Lead and documented on CPOMS.

The fact that a child or a young person may be lesbian, gay, bisexual or transgender, queer, questioning or ace (LGBTQ+) is not in itself an inherent risk factor for harm. However, children who are LGBTQ+ can be targeted by other children. In some cases, a child who is perceived by other children to be LGBTQ+ (whether they are or not) can be just as vulnerable as children who identify as LGBTQ+. Risks can be compounded where children who re LGBTQ+ lack a trusted adult with whom they can be open. It is therefore vital that team members endeavour to reduce the additional barriers faced and provide a safe space for them to speak out or share their concerns with team members.

Please note: The DfE refer to 'LGBT' in its guidance. Outcomes First Group has chosen to use the term 'LGBTQ+', because this abbreviation appears to be most inclusive and commonly used by the community.

It is recognised that both boys and girls experience child-on-child abuse. Boys are less likely to report intimate relationship abuse and may display other behaviour, such as antisocial behaviour. Boys report high levels of victimisation in areas where they are affected by gangs.

Research has also shown that bullying victimisation is a prevalent concern for neurodivergent (e.g., autistic, ADHD) youth. A neurodivergent young person may be more likely to be perceived as different by their peers and therefore may be more likely to be bullied/abused for this difference. In addition, a neurodivergent young person may be less likely to fully understand that another person does not have their best interests at heart and therefore, may not interpret certain actions as abuse. Therefore, they may be less likely to speak up/report about the abuse. Individuals who are non-speaking may need additional augmentative alternative methods of communication to support any disclosures.

It should also be recognised that some neurodivergent young people may engage in behaviours which could be considered as abusive to another child, however due to that young person's cognitive ability or emotional literacy, they may not understand the consequences of their actions. Even when there is no malice or premeditation, any incidents of child-on-child abuse will be taken seriously.

## RECOGNISING CHILD-ON-CHILD ABUSE

The following signs have been identified that a child may be suffering from child-on-child abuse can also overlap with those indicating other types of abuse and can include, but are not limited to:

- Absence from school or lack of interest in school activities
- Physical injuries
- Mental or emotional ill-health
- Becoming withdrawn
- Poor self-esteem



- Tiredness
- Alcohol or other substance misuse
- Changes in behaviour
- Inappropriate behaviour for their age
- Displaying harmful behaviour towards others

This list is not exhaustive, and if a child displays these signs, it does not necessarily indicate abuse. Staff and volunteers must be alert to behaviour that might cause concern and think about what the behaviour might signify. Children should be encouraged to share any underlying reasons for their behaviour and, where appropriate, staff and volunteers might need to engage parents or carers to understand the context more fully.

Where a child exhibits any behaviour that is out of character or inappropriate for his/her age or stage of development, staff and volunteers should always consider whether an underlying concern is contributing to their behaviour and, if so, what the concern is and how the child can be supported going forwards.

For children and young people with special educational needs or disabilities (SEND), it can be difficult to distinguish between signs of abuse and behaviour that is part of the child or young person's condition. Staff and volunteers should be alert to changes in their behaviour and always consider all possible causes of this.

## ABUSE INVOLVING SEXUAL HARRASSMENT AND SEXUAL VIOLENCE

Please also see Part Five of KCSiE 2024 and the NSPCC's Harmful Sexual Behaviour (HSB)

Sexual violence and sexual harassment can occur between two children of any age and sex, from primary through to secondary stage and into colleges. It can occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Sexual

violence and sexual harassment exist on a continuum and may overlap; they can occur outside of the school/college/home premises, and or online and face to face (both physically and verbally) and are never acceptable. All staff and volunteers working with children are advised to maintain an attitude of 'it could happen here.'

Any report of sexual violence or sexual harassment should be taken seriously, KCSiE 2024 highlights that it is more likely that girls will be victims of sexual violence and harassment and more likely it will be perpetrated by boys. However, it is important to understand that girls can abuse other girls and boys, and boys can abuse other boys and girls. Staff and volunteers should always remain open to all possibilities and not let assumptions distract them from seeing what is really happening.

The importance of distinguishing between problematic and abusive sexual behaviour (Harmful Sexual Behaviour) is recognised. Understanding where a child's behaviour falls on the spectrum is essential to being able to respond appropriately to it.

## PHYSICAL ASBUSE

Physical assaults and initiation violence and rituals can also be a form of child-on-child abuse. Such behaviour will not be tolerated and if it is believed that a crime has been committed, it will be reported to the police.

The principles from the Anti-bullying policy will be applied in these cases, with recognition that any police investigation will need to take priority. Assess where the alleged behaviour falls on the spectrum and decide how to respond. This could include, for example, considering whether the behaviour:

- is socially acceptable or is socially acceptable within the peer group
- involves a single incident or has occurred over a period of time
- is problematic and concerning
- involves any overt elements of victimisation or discrimination e.g. related to race, gender, sexual orientation, physical, emotional, or intellectual vulnerability
- involves an element of coercion or pre-planning or misuse of power
- involves a power imbalance between the child/children allegedly responsible for the behaviour

## ONLINE BEHAVIOUR

Many forms of child-on-child abuse have an element of online behaviour. Online child-on-child abuse is any form of child-on-child with a digital element. for example, consensual and non-consensual sharing of nudes and semi-nude images and/or video, online abuse, coercion and exploitation, child-on-child grooming, threatening language delivered via online means, distribution of sexualised content and harassment.

Please also see the Staying Safe Online Policy, Anti-bullying Policy and Safeguarding Policy.

## RESPONDING TO ALLEGED INCIDENTS AND CONCERNS

Staff and volunteers must follow the setting's Safeguarding Policy if a child is at risk of harm, is in immediate danger, or has been harmed. Consideration must be given to the proportionality of the response on a case-by-case basis.

When making decisions about how to deal with allegations, the age and understanding of the young person who has displayed harmful behaviour must be taken into consideration, as well as any relevant personal circumstances and how this relates to their behaviour.

Consideration must be given to any disparity in age and development between the young person who has displayed harmful behaviour and the victim, the impact the behaviour has had on the victim, and any element of coercion or violence.

**Staff and volunteers must act immediately and report any concerns regarding child-on-child abuse to the DSL /Safeguarding Lead or their deputies, within one working day, and document this on CPOMS.**

The DSL/Safeguarding Lead must deal with any concerns of child-on-child abuse immediately and sensitively. As much information as possible must be gathered from the victim and the young person who has allegedly displayed harmful behaviour in order to gain the facts of what has happened.

The language used must be sensitive, non-judgmental and must not blame the victim. Victims must be supported and reassured that their safety and welfare within the setting/home is the priority. Risk assessments must be implemented where necessary.

Where the DSL/Safeguarding Lead believes that there has been significant harm caused to a child or young person, a referral must be made to the Local Authority immediately. It is important that the setting and the children's homes provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and enable a contextual approach to address such harm. In agreement with the Local Authority, parents/carers/those with parental responsibility, must be informed. Where possible, this should be done face-to-face.

If the Local Authority does not believe it meets their threshold for further action and the DSL/Safeguarding Lead is not in agreement this must be challenged with the Local Authority.

## THE IMMEDIATE RESPONSE TO REPORT

How staff and volunteers respond to a report can encourage or undermine the confidence of future victims of sexual violence and sexual harassment to report or come forward.

Staff and volunteers must:

- Report any concerns about a child's welfare immediately to the DSL/Safeguarding Lead rather than waiting to be told. The DSL/ Safeguarding Lead will support the staff or volunteer to report the information to other agencies as appropriate e.g., the placing authority and the police.
- Be able to reassure victims that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting abuse, sexual violence or sexual harassment. All staff and volunteers will be trained to manage a report.
- Explain, in such a way that avoids alarming or distressing children, that the law is in place to protect them rather than criminalise them.

- Listen, ask open questions and write down as much as possible. Language must be used that is not victim blaming or judgmental and reassure the child that they have not caused a problem by disclosing.
- Be aware that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. For example, children may feel embarrassed, humiliated, or threatened. Children with learning difficulties, particularly those with multiple complex needs may not have the communication skills or understanding to tell someone. This should not prevent staff and volunteers from having a professional curiosity and speaking to the DSL/Safeguarding Lead if they have concerns about a child. It is also important that staff or volunteers determine how best to build trusted relationships with children and young people which facilitate communication.
- Understand that victims may not talk about the whole picture immediately. They may be more comfortable providing information on a piecemeal basis. It is essential that dialogue is kept open and encouraged.
- When it is clear that ongoing support will be required, the victim should be asked if they would find it helpful to have a designated trusted adult to talk to about their needs. The choice of any such adult should be the victim's, as far as reasonably possible; their choice should be respected and supported.
- Not promise confidentiality as the concern will need to be shared further (for example, with the DSL or social care). Staff and volunteers will only share the report with those people who are necessary to progress it. Information can be legally shared even if the child states they do not want it to be.
- Produce a written report as soon after the interview as possible, recording the facts as presented by the child. These may be used as part of a statutory assessment if the case is escalated later.

## CONSIDERATIONS BY THE SETTING

The setting will consider:

- The wishes of the victim in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment
- The nature of the alleged incident(s), including whether a crime may have been committed and consideration of harmful sexual behaviour
- The ages and developmental stages of the children involved
- Any power imbalance between the children. For example, is the alleged perpetrator significantly older, more mature or more confident? Does the victim have a disability or learning difficulty?
- If the alleged incident is a one-off or a sustained pattern of abuse; (sexual abuse can be accompanied by other forms of abuse and a sustained pattern may not just be of a sexual nature)
- that sexual violence and harassment can take place within intimate personal relationships between peers
- other related issues and wider context, including any links to child sexual or criminal exploitation
- any intra familial harms and any necessary support for siblings following incidents.

## CHILDREN SHARING A LEARNING AREA

Whilst the DSL/Safeguarding Lead establishes the facts of the case and starts the process of liaising with children's social care and the police:

- The perpetrator will be removed from any classes they share with the victim.
- The setting will assess how best to keep the victim and alleged perpetrator a reasonable distance apart on the premises and on transport to and from the setting.

These actions are in the best interests of both children and should not be perceived to be a judgment on the alleged perpetrator.

## RESPONSE TO THE ALLEGED PERPETRATOR

Any allegation is likely to be traumatic for the alleged perpetrator. In cases of child-on-child abuse the alleged perpetrator must also be treated as vulnerable and may require specialist



support, which should be organised by the DSL/Safeguarding Lead. Staff and volunteers must be aware that the perpetrator may have suffered or be suffering abuse and/or trauma.

The DSL/Safeguarding Lead must ensure that the alleged perpetrator's age, cognitive and emotional understanding is taken into account, as well as trying to understand the reasons why the alleged perpetrator may have harmed another child. A risk assessment must be completed immediately which should balance the proportionality of the allegation alongside the needs of the victim and the alleged perpetrator's right to continue to be educated.

It is good practice for the DSL/Safeguarding Lead to meet with the parents/carers/those with parental responsibility of the alleged perpetrator to explain the situation and what measures will be put in place to support their child. The DSL/Safeguarding Lead must be led by the police regarding what information can be shared with the alleged perpetrator and their family.

If the alleged perpetrator moves setting the DSL/Safeguarding Lead must ensure that all safeguarding information is shared in advance with the new setting. Schools must also inform their Local Authority of all deletions from their admission register when a child is taken off roll.

The DSL/Safeguarding Lead must liaise with the Police and Social Care should they wish to take disciplinary action prior to the conclusion of a Police/Social Care investigation. Other professionals investigating an incident does not in itself prevent a setting from coming to its own conclusion, on the balance of probabilities, about what happened, and imposing a penalty accordingly.

Staff and volunteers must be alert to possible bullying of the alleged perpetrator either within the setting or online. Arrangements must be made to safeguard them. Staff and volunteers must promote a culture where bullying is not tolerated.

## LOCAL PROCEDURES

The DSL/Safeguarding Lead will be familiar with the local referral procedures for safeguarding and child protection concerns and safeguarding procedures for adults. They must also be familiar with local responses to sexual violence and harassment, and these must shape their own responses. They will also ensure that staff and volunteers are aware and understand the local processes and that they are familiar with local support services. Where statutory assessments are appropriate, the DSL/Safeguarding Lead will work alongside the relevant lead social worker. Collaborative working will help ensure the best possible package of coordinated support is implemented for the victim and, where appropriate, the alleged perpetrator and any other children that require support.

The local authority must be notified immediately where it has been identified that there are immediate safeguarding concerns. It is recommended as best practice that steps are taken to convene a multi-agency professionals meeting to review any potential risks and agree actions to be taken to safeguard the young person/young people. The DSL/Safeguarding Lead is responsible for this.

The setting should be part of discussions with statutory safeguarding partners to agree the levels for the different types of assessment and services to be commissioned and delivered, as part of the local arrangements. Safeguarding partners should publish a local threshold document which includes the process for the local early help assessment and the type and level of early help services to be provided, and DSLs/Safeguarding Lead (and their deputies) will need to familiarise themselves with this document.

## REPORTING TO THE POLICE

**Where a crime has been committed the DSL/Safeguarding Lead must immediately contact the police.**

Whilst the age of criminal responsibility is ten, if the alleged perpetrator is under ten, the starting principle of reporting to the police remains. The police will take a welfare, rather than a criminal justice, approach.



Where a report has been made to the police, the setting will consult the police and agree what information can be disclosed to staff and volunteers, the alleged perpetrator and their parents or carers. They will also discuss the best way to protect the victim and their anonymity.

Where there is a criminal investigation, the setting will work closely with the relevant agencies to support all children involved (including potential witnesses). Where required, advice from the police will be sought in order to help manage the situation sensitively. Staff and volunteers must be aware of the requirement for children and vulnerable adults to have an Appropriate Adult with them if they are interviewed or detained by the police (See PACE Code C 2019), and the DFE Guidance, Searching, Screening and Confiscation.

Whilst protecting children and/or taking any disciplinary measures against the alleged perpetrator, the setting will work closely with the police (and other agencies as required), to ensure any actions the setting take do not jeopardise the police investigation. The DSL/ Safeguarding Lead must inform the Company Directors and Senior Leadership.

## **ACTION FOLLOWING A REPORT OF SEXUAL VIOLENCE AND/OR SEXUAL HARRASMENT**

**If a child or young person alleges that they have been raped, assaulted by penetration or sexually assaulted, this must be reported to the Police and Social Care immediately.** The child or young person's parents/carers should normally be informed unless this creates a greater risk of harm.

Staff and volunteers must ensure that their response to sexual violence, harassment or harmful behaviours between children of the same sex is equally robust as it is for between children of different sexes.

When there has been a report of sexual violence, the DSL/ Safeguarding Lead will make an immediate risk and needs assessment which will be recorded within one working day and

recorded on the electronic recording system. The risk and needs assessment should consider:

- The victim, especially their protection and support
- whether there may have been other victims,
- The alleged perpetrator(s); and
- All the other children (and, if appropriate, adult students and team members) at the setting, especially any actions that are appropriate to protect them.

The risk assessment must be shared with the police (where requested), local authority, company directors, Head of Service/Care and the Regional Director, and the Director of Safeguarding/Safeguarding Adviser.

Risk assessments will be kept under review by the DSL/Safeguarding Lead. Where there has been a report of sexual harassment, a risk assessment should also be completed.

## AFTER THE OUTCOME/CONCLUSION OF THE INCIDENT

The setting must:

- take a contextual safeguarding approach.
- take all necessary action to learn from the incident and prevent future incidents from occurring, such as through targeted education around specific types of child-on-child abuse.
- offer support for the victim and ensure it is provided wherever possible. Appropriate risk assessments must be implemented to provide reassurance and safety for the victim.
- ensure that they do not adopt a victim blaming approach; complete an investigation into the incident, carried out by the DSL/Safeguarding Lead. The investigation must consider the occurrence of the incident itself, whether it is an isolated incident, and the personal circumstances of the young person who is alleged to have displayed harmful behaviour.
- if necessary, make appropriate referrals to support services for the young person who has displayed harmful behaviours.

- complete and implement a risk assessment for the young person who has displayed harmful behaviours in order to safeguard them and other children and young people.

## THE END OF THE CRIMINAL PROCESS

If a child is convicted or receives a caution for a sexual offence, the school/college/home will update its risk assessment and ensure relevant protections are in place for all children and young people. The setting will consider any suitable action in line with its Behaviour Policy. If the perpetrator remains in the setting, expectations regarding the perpetrator will be clearly set out if they have been convicted or cautioned. This could include expectations regarding their behaviour and any restrictions the setting thinks are reasonable and proportionate about the perpetrator's timetable.

Any conviction (even with legal anonymity reporting restrictions) is potentially going to generate interest among other children and young people in the setting. The setting will take measures to protect all children involved, especially from any bullying or harassment offline and online.

Where cases are classified as "no further action" (NFA'd) by the police or Crown Prosecution Service, or where there is a not guilty verdict, the setting will continue to offer support to the victim and the alleged perpetrator for as long as is necessary. A not guilty verdict or a decision not to progress with their case will likely be traumatic for the victim. The fact that an allegation cannot be substantiated does not necessarily mean that it was unfounded. The setting will continue to support all parties in this instance.

## UNSUBSTAINED, UNFOUND, FALSE OR MALICIOUS REPORTS

All concerns, discussions and decisions made, and the reasons for those decisions, should be recorded in writing. Records should be reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified, and addressed.



If a report is determined to be unsubstantiated, unfounded or false, the DSL/Safeguarding Lead should consider whether the child and/or the person who has made the allegation is in need of help or may have been abused by someone else and this is a cry for help. In such circumstances, a referral to children's social care or adult's social care may be appropriate.

## SUPPORT FOR CHILDREN AFFECTED BY SEXUAL ASSAULT

Where there is a criminal investigation, the alleged perpetrator will be removed from any shared classes and activities with the victim and consideration will be given as to how best to keep them a reasonable distance apart within the setting or on transport to and from the setting. This is in the best interest of the children concerned and should not be perceived to be a judgement of guilt before any legal proceedings. The setting will work closely with the police.

Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, the setting will take suitable action. In all but the most exceptional of circumstances, the rape or assault is likely to constitute a serious breach of discipline and lead to the view that allowing the perpetrator to remain in the same setting would seriously harm the education or welfare of the victim (and potentially other children and young people).

Where a criminal investigation into sexual assault leads to a conviction or caution, the setting will consider any suitable sanctions using the relevant policies, including consideration of permanent exclusion, where applicable.

Where the perpetrator is going to remain at the setting, the principle would be to continue keeping the victim and perpetrator in separate classes/areas and continue to consider the most appropriate way to manage potential contact on the premises and transport. The nature of the conviction or caution and wishes of the victim will be especially important in determining how to proceed in such cases.

Sexual assault can result in a range of health needs, including physical, mental, and sexual health problems and unwanted pregnancy. Children and young people that have a health need arising from sexual assault or abuse can access specialist NHS support from a Sexual Assault Referral Centre (SARC), which can be found through a location search at: [Rape-and-sexual-assault-referral-centres/LocationSearch/364](https://www.nhs.uk/conditions/sexual-assault-referral-centres/LocationSearch/364)

The victim should be given all the necessary support to remain in their setting, however, if the trauma results in the victim being unable to do this, alternative provision or a move to another setting should be considered to enable them to continue to receive suitable education and care. This should only be at the request of the victim and following discussion with their parents or carers/those with parental responsibility.

If the victim does move for any reason, the DSL/Safeguarding Lead must ensure that the new setting is aware of any ongoing support needs and should discuss with the victim and their parents/carers/those with parental responsibility the most suitable way of doing this. The DSL/Safeguarding Lead must transfer the child protection file.

All the above will be considered with the needs and wishes of the victim at the heart of the process (supported by parents/carers as required). Any arrangements should be kept under review.

## PREVENTION STRATEGIES

Throughout the setting we actively raise awareness of and prevent all forms of child-on-child abuse by:

- Educating all responsible individuals, senior leaders, company directors, staff and volunteers, children and young people, parents and carers about this issue. This will include training all responsible individuals; company directors, senior leaders, and staff and volunteers on the nature, prevalence and effect of child-on-child abuse, and how to prevent, identify and respond to it and challenge attitudes that underly such abuse.
- Taking appropriate action to ensure that children and young people learn about appropriate relationships with adults, online safety, as well as sex and healthy

relationships. RSE lessons, Relationships Education, and Relationships and Sex Education will focus on important age-appropriate and developmentally appropriate issues in line with Government guidance.

- Supporting children to understand what abuse is and the impact it can have on those who experience it.
- Creating a culture in which our children and young people feel able to share their concerns openly, in a non-judgmental environment and have them listened to.
- Ensuring our children and young people are clear about how to report abuse or any concerns about possible abuse or harmful behaviour. This includes being able to access in private, relevant websites or help lines, such as Childline and the NSPCC, to seek advice and help.
- Recognising that some children and young people are more vulnerable by virtue of their complex health or behavioural needs, or disabilities. All staff and volunteers have a responsibility to be the 'eyes and ears' and report all concerns to the DSL/Safeguarding Lead. Consideration will be given as to whether additional support for children with protected characteristics is required.
- Engaging with parents/carers on this issue by:
  - Talking with parents/carers about it and asking them what they perceive to be the risks facing their child and how they would like to see the setting address those risks
  - Ensuring that all child-on-child abuse issues are fed back to the Managing Director and DSL/Safeguarding Lead, so they can spot and address any concerning trends and identify children and young people who may need additional support.
  - Working with company directors, senior leaders, all staff and volunteers, children and young people and parents to address equality issues, to promote positive values, and to encourage a culture of tolerance and respect amongst all members of Thriveology's community.
  - Working with partners agencies to further understand and address child-on-child abuse and reduce its occurrence.

## RISK ASSESSMENT

Thriveology will complete a comprehensive risk assessment to determine the risks to which their pupils are, or may be exposed, and will assess and monitor those risks. This is a proactive assessment of the risks facing pupils and distinct from the assessments that must be conducted following concerns or allegations.

The risk assessment may include:

- the composition of pupil population, including specific characteristics that affect their vulnerability to child-on-child abuse for example, gender, age, special educational needs and/or disabilities, sexual orientation and/or religious belief.
- Which pupils are more at risk of being affected by child-on-child abuse?
- Any relevant trends in behaviour.
- Environmental factors and local awareness, for example, high levels of gang activity.
- Online activities and vulnerabilities.

This should be reviewed and updated at least annually and reviewed after any incident of child-on-child abuse.

Review Date: SEPT 2025

## Appendix 1 – Reporting Child on Child Abuse Flow Chart

### Flow Chart for the Reporting Child on Child Abuse

**Designated Safeguarding Lead:**

Mrs Bobie Jones/Mrs Charlotte Martyn

**Deputy Designated Safeguarding Lead:**

Mrs Amiee Northcote

**Staff or Volunteer have concerns about a child and take immediate action.**

Follow child on child abuse policy and report to DSL immediately via CPOMS (all permanent staff) or a disclosure form (voluntary staff)



**Designated Safeguarding Lead reviews concern and acts immediately and sensitively**

The DSL will gather as much information as possible from the victim and the young person who has allegedly displayed harmful behaviour in order to gain the facts. All information will be recorded on CPOMS. Risk assessment to be completed if appropriate.



**Referral made to Local Authority**

If there has been significant harm caused to a child or young person, the Designated Safeguarding Lead will make a referral to the Local Authority immediately. All information and evidence will be given to the LA. If appropriate parents will be contacted or the police.



**If the Local Authority does not believe it meets their threshold for further action and the Designated Safeguarding Lead is not in agreement this must be challenged with the Local Authority.**

Hampshire County Council's Children Services:

[Safeguarding children and young people](#) | [Children and Families](#) | [Hampshire County Council](#)

Hampshire MASH:

[Multi Agency Safeguarding Hub](#) | [Children and Families](#) | [Hampshire County Council](#)