



**BASM SAFEGUARDING AND CHILD PROTECTION POLICY  
(FOR GOVERNORS, EMPLOYEES, CONTRACTORS &  
VOLUNTEERS)**

Head Dr I Farhat

Policy No P37 indicative of BSO Inspection  
Standard September 2021



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BRITISH ACADEMY SCHOOL MARRAKECH

## 1. INTRODUCTION

BASMs objective is to be a model of safeguarding best practice. We adapt our practice to remain in line with the principles established by the UK's Children Acts 1989 and 2004 etc, whilst ensuring compliance with all national legislation.

In Morocco there is little infrastructure for referral in terms of Safeguarding or Child Protection to Social Care Agencies. The lack of capacity means the school's scope for onward referral is limited. The Moroccan Consulate or Embassy of the child's country of nationality are an option. Professional counsellors, consultants, psychologists another. In the most extreme cases, direct referral to the Police.

Parents are informed at the start of every term by letter that they can obtain a copy of the school Safeguarding and Child Protection policy on the BASM website or request one from the school (in English or French). The Policy sets out our approach and applies to all members of School staff (see definition)

At BASM we are committed to safeguarding children and young people and we expect everyone who works in our school to share this commitment. Safeguarding is defined as:

- Protecting children from maltreatment;
- Prevent impairment of children's mental and physical health or development
- Ensure children develop in circumstances consistent with the provision of safe and effective care;
- Taking action to enable all children to have the best outcomes.

Adults in our school take all welfare concerns seriously and encourage pupils to talk to us about anything that worries them. The Governing Body takes due consideration over its responsibility, to safeguard and actively promote the welfare of children; and to work together with other agencies where possible to ensure adequate arrangements within school to identify, assess, and support those children who are suffering harm. **All staff have a responsibility to provide a safe environment in which children can learn.**

**As a community, we will always act in what is considered in the best interests of the child.** Their safety is of paramount importance. This is because all children regardless of ability, age, disability, gender, culture, language, race, or religion have equal rights to protection, safeguarding and opportunities.

We recognise that **ALL** adults, including temporary staff, volunteers, and governors, have a full and active part to play in protecting our pupils from harm. Every pupil should feel safe and protected from any form of abuse. Staff are encouraged to think not "what if I am wrong" but rather "what if I am right". The word "staff" is used, it covers ALL staff on site, including ancillary supply and self-employed staff, staff of contractors, volunteers working with children and governors.

## 2. POLICY AIMS

The aims of this policy are to:

- Demonstrate BASM's commitment with regard to safeguarding and child protection to pupils, parents and other third parties.
- Support pupil's development in ways that will foster security, confidence and independence.
- Provide an environment in which pupils feel safe, secure, valued and respected, and feel confident, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
- Raise the awareness of all teaching and non-teaching staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse.
- Provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, contribute to assessments of need and support packages for those children.
- Emphasise the need for good levels of communication between all members of staff.
- Develop a structured procedure within BASM which will be followed by all members of the community in cases of suspected abuse.
- Develop and promote effective working relationships with local agencies and expert professionals.
- Ensure all staff working within BASM who have access to children have been checked as to their suitability, including verification of their identity, qualifications, where UK Nationals are concerned a satisfactory Disclosure and Barring Service (DBS) check (according to guidance), and a central record is kept for audit.

There are four main elements to our safeguarding policy:

**Prevention** e.g. positive, supportive, safe school culture, curriculum and pastoral opportunities for children, safer recruitment procedures.);

**Protection** by following the agreed procedures, unnecessary risks are managed, ensuring all staff are trained and supported to respond appropriately and sensitively to safeguarding concerns;

**Support** for all pupil, parents and staff, and where appropriate specific interactions for those who may be at risk of harm e.g. considerations of culture, disability, history, FGM;

**Working with parents, other agencies and expert professionals** to ensure appropriate communications and actions are undertaken.

Staff should be aware of the professional risks associated with the use of social media and electronic communication and should familiarise themselves with advice and professional expectations outlined in the Code of Conduct.

At BASM we recognise that:

- A child who is abused or is witness to violence may feel helpless and humiliated, blame themselves, find it difficult to develop and maintain a sense of self-worth.
- We may provide the only stability in the lives of children who have been abused or who are at risk of harm.
- Research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.
- Most children suffer harm from within their own families or from someone they know and with whom they have formed a relationship.
- We are receptive to and ready to respond to any particular needs/issues/risks which may emerge in the context of the school pupil population at any one time, or our wider community.
- Significant harm can be "actual" (it is happening now - bruises, injuries, neglect) or could be likely (unless action is taken the child may be exposed to significant risk in the future).

We will support all children by:

- Encouraging self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression or bullying.
- Actively promoting wellbeing alongside a caring, safe and positive environment within the school.
- Liaising and working together with all other agencies and expert professional involved in the safeguarding of children.
- Liaising with Parents / Guardians (the School will always hold two emergency contact numbers).
- Providing continuing support to a child about whom there have been concerns who leaves the school by ensuring that appropriate information is copied under confidential cover to the child's new setting and ensuring the school medical records are forwarded as a matter of priority.

All children understand that they have a *Pupil Voice*:

- They can talk to any of the adults. Each pupil has a Form Tutor or Key Person as a first point of pastoral contact.
- All staff should be prepared to identify children who may benefit from Early Help. Early Help means providing support as soon as a problem emerges in a child's life. Staff should discuss such requirements with the DSL.

BASM staff are committed to:

- being vigilant, listening to children, observing changes in behaviour and attitude, responding to specific concerns at an early stage (self-harm, depression, eating disorders), reporting concerns to the DSL,
- not conducting an investigation themselves but to contact the relevant agencies to deal with significant concerns,
- being prepared to whistle-blow where there are concerns about the conduct of a member of staff towards a child or children.

- Pupils with special educational needs and disabilities can face additional safeguarding challenges. This is because:
- There may be assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration.
- Children with SEN and disabilities can be disproportionately impacted by things like bullying without outwardly showing any signs.
- Difficulties may arise in overcoming communication barriers.

### 3. KEY ROLES, RESPONSIBILITIES AND CONTACT DETAILS

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#### The DSL

The DSL holds ultimate responsibility for safeguarding and child protection at BASM Their key role is to:

- Manage referrals from School staff or any others from outside the School.
- Work with agencies and professionals on matters of safety and safeguarding.

- Ensure appropriate training is undertaken training.
- Raise awareness of safeguarding matters amongst the staff and parents;
- Ensure child protection information is transferred to the pupil's new school;
- Ensure they are available to discuss any safeguarding concerns
- Be aware of pupils who have a social worker or other expert support.
- Help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues with teachers.
- The DSL and DDSL's job descriptions include the key activities of the role.

### **The Governing Body**

The Governing Body will ensure that there is a Safeguarding and Child Protection Policy, Staff Code of Conduct in place. The Governors will ensure that the School has procedures for dealing with allegations of abuse against staff and volunteers and make a referral to the appropriate authorities if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have had they not resigned.

In addition they will:

- Appoint a Safeguarding & Child Protection Governor.
- Make the Chair of Governors available to be responsible if an allegation of child abuse is made against the Head.
- Ensure the Safeguarding and Child Protection Policy and Procedures (and all related policies) are reviewed annually by the DSL and full Board and that the Safeguarding and Child Protection Policy is available on the School website.
- Ensure BASM is compliant with BSO criteria re: Part 4 Suitability of Staff, Supply Staff and Proprietors) including enhanced DBS checks for the Chair of Governors and all members of the Governing Body, or UK equivalent.
- Ensure a Safer Recruitment Policy is implemented and that it is reviewed annually, including all possible external agencies and intelligence checks are sought on all staff that have substantial and unsupervised access to children
- Confirm at least one member of the Governing Body completes Safer Recruitment Training (renewed every 5 years).
- Ensure there are effective mechanisms in place for monitoring the effectiveness of the policies listed.

The Head will be the DSL and ensure that:

- They have sufficient time, funding, supervision and support to fulfil their safeguarding and child protection responsibilities effectively.
- Undertake appropriate training to ensure that they have an equivalent level of knowledge and expertise to that of (SSCB Modules 1 and 2 or with an equivalent and suitably certified provider), DSL 'New to Role' and the 'Update' course every 2 years and that all other staff have Safeguarding training updated regularly. All voluntary and temporary staff who work with children are made aware of these arrangements.

- The names of the DSL, DDSL & Safeguarding Governor are clearly advertised in the School, with a statement explaining the School's role in referring and monitoring cases of suspected abuse.
- That safeguarding is taught (in a planned component of the curriculum) online, through the curriculum and PSHE and personal, social, emotional development in the EYFS.
- The BASM's approach to lettings will seek to ensure the suitability of adults working with children on School sites at any time and that the organisers of such clubs and activities are made aware of the School's Safeguarding and Child Protection Policy.

## The Staff

Safeguarding and promoting the welfare of children is everyone's responsibility. Staff are particularly important as they are in a position to identify concerns early, provide help for children and prevent concerns from escalating. Staff have a responsibility to:

- Provide a safe environment in which all children can learn.
- Share concerns with the DSL.
- Identify children who may benefit from Early Help.
- Work with the DSL (as required) to undertake an Early Help assessment.
- Provide support to the child and if required other agencies and expert professionals working with a child.

Relationships and associations' that staff have in School and outside (including online), may have an implication for the safeguarding of children in the School. In particular staff should be aware of the risks associated with the use of social media and electronic communication and must ensure that they comply with the Staff Code of Conduct. Where a member of staff considers there is a cause for concern or that they may have inadvertently breached the Code of Conduct they must speak to the Head / DSL.

All new staff, as part of their induction, will receive training in Safeguarding Children which will include how to respond to a pupil who discloses abuse. This training is provided by the DSL, Safeguarding Governor or some other suitably qualified person. Staff sign a register to record that they have seen and understand their respective responsibilities in the Policy.

We acknowledge that staff must only use physical intervention as a last resort, when a child is endangering themselves or others, and that at all times it must be the minimal force necessary to prevent injury to another person. Such events should be recorded and signed by a witness and parents will be informed on the day that physical restraint took place. Corporal punishment is never used or threatened against any child at BASM

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



responsibility to know what to do if a child makes a disclosure or if abuse is suspected. If a child makes a disclosure (if a child tells). It is best practice if staff:

- Express concerns, suspicions or uneasiness as soon as you can to the DSL.
- Pinpoint what practice is concerning and why.
- Remember that we should always put the child's welfare first
- Maintain confidentiality with any concerns.

## The Parents

Schools and staff are placed in a delicate position when allegations of abuse or investigation of abuse is on-going, as the School still needs to maintain a working, constructive relationship with the parents/carers involved.

Allegations of abuse and those cases subsequently proven to be abuse can result in difficulties in maintaining a constructive and open relationship with parents.

Parents will have a range of feelings in relation to abuse of their children. They may well be angry at the School staff, be anxious about confidentiality of the issues and concerned that the children involved may be stigmatised as a result. If the family is broken up, parents are likely to be distressed as well as feeling guilt and shame.

It is paramount that parents are made aware of the School's responsibility to the student so that they are aware that concerns will be dealt with. A clear statement of the child protection and confidentiality policies will be both a support to parents in working with them and provide a clear statement regarding the reasons for such policies. In this way all parents should recognise the priority of the School is the child's welfare. In all cases:

- Be sure you maintain absolute confidentiality. Do not discuss the matter with colleagues.
- Be clear that your responsibility is to the child's welfare and state and reinforce this to parents.
- Provide information that is as objective as possible.
- Acknowledge the parents' feelings

## 4. CONFIDENTIALITY

All staff are made aware through safeguarding training that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing. In deciding whether there is a need to share information, **the pupil's best interests must be paramount**. This may involve working with external agencies and expert professionals.

Staff must ensure that they remain alert to the professional boundaries of confidentiality and do not talk to colleagues or other friends about matters which should remain absolutely private and confidential, discussed only on a need to know basis.

Where a child has been referred to an appropriate professional expert The school may be informed and the student's name and reason for referral to the designated person in school; the Head (DSL) and/or DDSL. The content of the support will remain confidential beyond that point unless a disclosure is made; at that point safeguarding protocols are prioritised.

## 5. CONSENT

The sole purpose of sharing information is to ensure young people in need are given the help and support they are entitled to. Information shared will be no more than is absolutely necessary. All information will be handled with respect and care. Unrecorded observations, which may not at first seem significant, will only be shared on a need to know basis within relevant agencies and between professionals in the interests of the child. Information should be recorded if it is significant.

The school will record the competent child's consent to share recorded information. Fresh consent should be sought if the existing consent does not cover the proposed sharing or there has been a break in involvement. The child should be told what information may be shared, why it would be shared and the consequences of sharing.

**Informed consent** should be sought from the competent child to share recorded information unless;

- The situation is urgent and there is not time to seek consent; or
- Seeking consent is likely to cause serious harm to someone or prejudice the prevention, detection of serious crime.

If consent to sharing recorded information is refused by the competent child, or can/should not be sought from the child, information should still be shared in the following circumstances;

- There is reason to believe that not sharing is likely to result in serious harm to the child or someone else or is likely to prejudice the prevention or detection of serious crime; and
- The risk is sufficiently great to outweigh the harm or prejudice to anyone that may be caused by the sharing; and
- There is a pressing need to share the information.

Anyone under the age of 18 is a child. A judgement must be made as to whether a particular child in a particular situation is competent to consent or refuse consent to sharing information. Consideration should include the child's chronological age, mental and emotional maturity, intelligence, vulnerability and comprehension of the issues. A child at serious risk of self-harm may lack emotional understanding and comprehension (NSPCC Fraser guidelines could be used).

Partners should keep parents informed and involve them in the information sharing decision even if a child is competent or over 16. However, if a competent child wants to limit the information given to his parents or does not want them to know it at all; the child's wishes should be respected, unless the conditions for sharing without consent apply including local

legislation. Where a child is not competent, a parent with parental responsibility should give consent unless the circumstances for sharing without consent apply.

## **6. HEALTH AND SAFETY**

Our Health & Safety Policy reflects the consideration we give to the protection of our children both physically within the School environment, and for example in relation to internet use, and when away from the School and when undertaking School trips and visits. When pupils visit another site and are doing activities where staff from another organisation will be involved, we undertake or obtain Risk Assessments, to seek reassurance correct checks and qualifications of staff are in place before the School's Risk Assessment is agreed and signed off by the Head.

## **7. MOBILE PHONE AND DIGITAL DEVICES WITH PHOTOGRAPHIC CAPABILITIES**

Mobile phones should not be used by members of staff in classrooms and corridors. Usage is restricted to areas which are used exclusively by adults, such as the staff room, meeting rooms. They may be used outside of the school building. No image of a BASM child should ever be taken used private / personal technology i.e. a personal mobile phone or ipad.

In the EYFS department all staff mobiles must be turned off and placed in the designated locked cupboard either in the room or relevant office. Phones may only be checked at break times in the staff room, never in the classrooms or in toilets. Staff are responsible for ensuring their mobile phones do not hold inappropriate or illegal content.

All adults, including parents and visitors, who attend the EYFS site are made aware that mobile phones are not to be used on the site in the presence of the children. More detailed guidance about conduct and safe practice, including safe use of mobile phones and digital devices with photographic capabilities by staff and volunteers is given at staff training and induction.

## **8. PROCEDURES TO FOLLOW IF ABUSE IS SUSPECTED OR REPORTED.**

If any member of staff has concerns about a child in their care then they should report it using CPOMS (once implemented) or to the DSL or DDSL who will record the matter on CPOMS or in writing. This will help to identify early if any further additional help is required to support the child further. If any member of staff:

- suspects that child abuse is occurring;
- identifies child abuse;
- is concerned that School practices or the behaviour of others may be putting a child at risk of abuse;
- has an incident, complaint or suspicion reported to him/her;

he/she must:

- Immediately stop to listen and give them space to do this safely.
- Make brief notes at the time or as soon as possible afterwards and ensure that these original notes are kept.
- Try to use the exact words of child.
- Not ask leading questions (it may prejudice any investigation).
- Not give guarantees of confidentiality to the child (or keep any secrets from the school) but to give assurances only to those who need to know will be informed.
- Not make any attempt to investigate the incident themselves.
- At the earliest opportunity report to the DSL and provide DSL with notes on our Safeguarding Concern Form (attached at the end of this document). If the complaint involves the DSL, the informant must report it to the Chair of Governors or Safeguarding Governor.
- If the disclosure happens after School hours, the teacher/adult should attempt contact the DSL or DDSL at home.
- **If, at any point, there is a risk of immediate serious harm to a child contact the Police.**

At BASM we recognise that children must receive the right help at the right time to address risks and prevent issues escalating, the importance of acting on and referring the early signs of abuse and neglect, keeping clear records, listening to views of the child, reassessing concerns when situations do not improve, sharing information quickly and challenging inaction are vital.

We recognise that staff working in the School who have become involved with a child who has suffered harm, or appears to have suffered harm will be offered the opportunity to talk through their anxieties with the DSL and to seek further support as appropriate.

#### **9. PROCEDURES TO FOLLOW IF A MEMBER OF STAFF IS SUSPECTED OF ABUSE.**

We recognise the possibility that staff at BASM may harm children. Any concerns about the conduct of other adults in the School should be taken to the Head / DSL or where that is not possible to the Chair of Governors or Safeguarding Governor.

If an allegation is made against a member of staff there should be no unnecessary delays. All allegations will be referred to the relevant external agencies (where possible) for advice before any investigation by the School takes place, or in the most serious cases, the police, so as not to jeopardise statutory investigations.

The Head/DSL will follow procedures in line with School Disciplinary Policy, as well as locally agreed procedures.

All School staff should take care not to place themselves in a vulnerable position with a child. They should be aware of the School's own policies relating to staff conduct and behaviour via the Code of Conduct. Guidance about conduct and safe practice, including safe use of mobile phones and digital devices with photographic capabilities by staff and volunteers will be given at induction.

We understand that a pupil may make an allegation against a member of staff. Where it is alleged that a member of staff has behaved in a way that has harmed, or may have harmed a child, possibly committed a criminal offence against a child or behaved towards a child in a way that indicates that he/she is unsuitable to work with children, the member of staff receiving the allegation will immediately inform the Head.

The School will adopt the following procedures for managing allegations against a member of staff.

- The Head will seek appropriate expert advice, within one working day, to discuss the content of the allegation.
- They will consider the nature, content and context of the allegation and agree a course of action including any involvement of the police. Discussions will be recorded in writing, and any communication with both the individual and the parents of the child/children agreed.
- Each case will be considered carefully to ascertain whether the circumstances of the case warrant suspension or whether alternative arrangements should be put in place, taking into account the expert external advice.
- The Chair of Governors and Deputy Chair (Safeguarding) will be informed of any child protection issue as soon as possible after it arises.
- Any allegation involving the Head will be passed on to the Chair of Governors and / or Deputy Chair (Safeguarding) without informing the Head first. The Chair of Governors and / or Deputy Chair (Safeguarding) will follow the procedures above.
- Allegations against staff, volunteers should be reported to the Head. If the Head is absent, the allegation should be passed to the Chair of Governors or Safeguarding Governor
- We will make every effort to maintain confidentiality and guard against unwanted publicity whilst ensuring that we remain compliant with all relevant legislation. These restrictions apply up to the point where the accused person is charged with an offence, or decision in a disciplinary case.
- The Head will report promptly any UK qualified member of staff who is deemed unsuitable to work with vulnerable and young people and who has been removed from regulated activity to the DBS. We will also refer such a member of staff to the TRA (Teaching Regulation Agency). The school will comply with all local requirements.
- In the event of an allegation against the Head, the decision to suspend will be made by the Chair of Governors with advice as mentioned above. We have a procedure for managing the suspension of a contract for a community user in the event of an allegation arising in that context.

## **10. RECORDS AND MONITORING**

BASM introduced CPOMS to store all safeguarding records in October 2021. All historical notes will be processed through this system to ensure accuracy of previous cases.

Well-kept records are essential to good child protection practice. BASM is clear about the need to record concerns held about a child or children within our school, the status of such records and when these records should be passed over to other agencies.

Any member of staff receiving a disclosure of abuse or noticing signs or indicators of abuse, must make an accurate record as soon as possible noting what was said or seen, putting the event in context, and giving the date, time and location. All records will be noted as required by the CPOMS system.

If a student transfers from the school, the password protected pdf copy files will be forwarded to the student's new school marked confidential and for the attention of the receiving school's Designated Safeguarding Lead. If the school has CPOMS already, these will be transferred directly through the system.

## **11. OTHER RELEVANT SCHOOL POLICIES**

This policy should be read in conjunction with the following school policies.

- Safer Recruitment and Selection
- Code of Conduct
- Behaviour
- Anti-bullying
- Whistleblowing
- Health and Safety
- EYFS PHSE Curriculum
- EYFS Nappy Changing and Toileting

## **12. WHISTLEBLOWING**

Where there are concerns about the way that safeguarding is carried out in the School, staff should refer to the Whistleblowing Policy. A whistleblowing disclosure must be about something that affects the general public such as:

- A criminal offence has been committed, is being committed or is likely to be committed;
- A legal obligation has been breached;
- There has been a miscarriage of justice;
- The health or safety of any individual has been endangered;
- The environment has been damaged;
- Information about any of the above has been concealed.

## **13. USE OF THE SCHOOL PREMISES BY OTHER ORGANISATIONS**

Where services or activities are provided separately by another body, using the school premises, the Governing Body will seek assurance that the body concerned has appropriate policies and procedures in place in regard to safeguarding children and child protection.

#### **14. MONITORING AND EVALUATION**

This Policy and Procedures will be monitored and evaluated by:

- Annual scrutiny and ratification by the Full Governing Board
- Listening to pupil voice
- Pupil surveys and questionnaires
- Scrutiny of Attendance data
- Scrutiny of a range of risk assessments
- Scrutiny of Governor Committee and Board minutes
- Monitor of log recording any bullying/racist/behaviour incidents
- Review of parental concerns and parent questionnaires

#### **15. TYPES OF ABUSE AND NEGLECT AND RECOGNISING SIGNS**

All staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

**Some of the following signs might be general indicators of child abuse or neglect:**

- Becoming aggressive, challenging, disruptive, withdrawn or clingy.
- Difficulty sleeping or start wetting the bed;
- Clothes are ill-fitting and/or dirty;
- Consistently poor hygiene;
- Makes efforts to avoid specific family members or friends, without an obvious reason;
- Don't want to change clothes in front of others or participate in physical activities;
- Problems in school, a sudden lack of concentration and learning or appearing to be tired and hungry;
- Talk about being left home alone, with inappropriate carers or with strangers;
- Reaching developmental milestones, late, such as learning to speak or walk, with no medical reason;
- Children who are regularly missing from school or education;
- Children who are reluctant to go home after school;
- Children with poor school attendance and punctuality, or who are consistently late being picked up;
- Parents who are dismissive and non-responsive to practitioners' concerns;
- Parents who collect their children from school when drunk, or under the influence of drugs;
- Children who drink alcohol regularly from an early age;
- Children who are concerned for younger siblings without explaining why;

- Children who talk about running away; and
- Children who shy away from being touched or flinch at sudden movements.

## 16. CATEGORIES OF ABUSE

**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 (e.g. via the internet). They may be abused by an adult or adults or by another child or children.

**PHYSICAL:** 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. Some of the following signs may be indicators of abuse / physical abuse:

- Children with frequent injuries;
- Children with unexplained or unusual fractures or broken bones; and
- Children with unexplained bruises or cuts; burns or scalds; or bite marks.

**EMOTIONAL:** the persistent emotional maltreatment of a child such as to cause severe and 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 overprotection 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 cyberbullying), 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, although it may occur alone. Its diagnosis will require medical, psychological, psychiatric, social and/or educational assessment. It is accepted that all abuse involves emotional abuse, but this category supersedes only when it is the main or the sole form of abuse. Some of the following signs may be indicators of emotional abuse:

- The Child is developmentally delayed
- Inappropriateness of social responses
- Excessive fear of situations or people
- Self-mutilation
- Extreme passivity or aggression



- Social isolation / depression
- Children who are excessively withdrawn, fearful, or anxious about doing something wrong
- Drugs or solvent abuse (either in the child or in its principal carer).
- Parents or carers who withdraw their attention from their child, giving the child the 'cold shoulder'
- Parents or carers blaming their problems on their child
- Parents or carers who humiliate their child, for example, by name-calling or making negative comparisons.

**SEXUAL:** 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. Some of the following signs may be indicators of sexual abuse:

- Children who display knowledge or interest in sexual acts inappropriate to their age;
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have;
- Children who ask others to behave sexually or play sexual games; and
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

Some of the following signs may be indicators of sexual exploitation:

- Appearing with unexplained gifts or new possessions;
- Associating with other young people involved in exploitation;
- Having older boyfriends or girlfriends;
- Suffering from sexually transmitted infections or become pregnant;
- Suffering from changes in emotional well-being;
- Misusing drugs and alcohol;
- Going missing for periods of time or regularly come home late; and
- Regularly miss school or education or don't take part in education.

**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. Some of the following signs may be indicators of neglect:

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty, poor personal hygiene;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care; and
- Parents who fail to seek medical treatment when their children are ill or are injured, especially burns
- Avoidance of school medicals
- Tiredness
- Reluctance to go home
- Poor social relationships
- Frequent lateness/non-attendance

### **PEER ON PEER (including Sexual Violence & Harassment)**

Staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but is not limited to: bullying (including cyber bullying), gender based violence. Sexual violence; sexual harassment: physical abuse; sexting (youth-produced sexual imagery), upskirting (a photograph taken under a person's clothing without them knowing, for sexual gratification or to cause the victim humiliation, distress or alarm / initiation). Hazing type violence and rituals. Hazing refers to any activity expected of someone on joining a group, or maintaining status in a group, that humiliates, degrades or risks emotional and/or physical harm, regardless of the person's willingness to participate.

At BASM we believe that abuse is abuse and will never be tolerated or passed as mere 'banter'. Whilst recognising the gendered nature of peer-on-peer abuse all peer-on-peer abuse is unacceptable and will be taken seriously. All children have a right to attend school and learn in a safe environment. Children should be free from harm by adults in the School and other pupils.

We recognise that some children will sometimes negatively affect the learning and wellbeing of others and their behaviour will be dealt with under the School's Behaviour Policy. Our curriculum will help children develop healthy, respectful relationships with each other, and with staff.

Sexual violence and sexual harassment can occur between two children of any sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. We believe that sexual violence and sexual harassment is never acceptable and all such incidents will be taken seriously. We will take seriously any incidents of sexual harassment, including sexual comments, 'jokes' or taunting, physical behaviour, displaying pictures, photos or drawings of a sexual nature; and online sexual harassment.

At BASM we recognise that some pupils are at greater risk of sexual violence, sexual harassment and peer on peer abuse or other, including girls, and those with SEN and disabilities, and may need greater support.

Reports of sexual violence and sexual harassment will be dealt with by the DSL. Some incidents must be reported to the Police or other external services, others may be dealt with in School.

Occasionally, allegations may be made against pupils by others in the School, which are of a safeguarding nature. Safeguarding issues raised in this way may include physical abuse, emotional abuse, sexual abuse and sexual exploitation. It is likely that to be considered a safeguarding allegation against a pupil, some of the following features will be found. The allegation:

- is made against an older pupil and refers to their behaviour towards a younger pupil or a more vulnerable pupil;
- is of a serious nature, possibly including a criminal offence;
- raises risk factors for other pupils in the School;
- indicates that other pupils may have been affected by this pupil;
- indicates that young people outside the School may be affected by this pupil.

We will support the victims of peer-on-peer abuse and victims of sexual violence and sexual harassment by discussing the incident with them, supporting and investigating the incident fully and reporting it to relevant authorities where appropriate.

## **CHILD SEXUAL EXPLOITATION AND CHILD CRIMINAL EXPLOITATION**

CSE and CCE are forms of abuse, occurring where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual 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 for the financial advantage or 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. Indicators of child sexual exploitation may include:

- Acquisition of money, clothes, mobile phones, etc. without plausible explanation;
- Gang-association and/or isolation from peers/social networks;
- Exclusion or unexplained absences from school;
- Leaving home without explanation and persistently going missing or returning late;
- Excessive receipt of texts/phone calls;

- Returning home under the influence of drugs/alcohol;
- Inappropriate sexualised behaviour for age/sexually transmitted infections;
- Evidence of/suspicions of physical or sexual assault;
- Relationships with controlling or significantly older individuals or groups;
- Multiple callers (unknown adults or peers);
- Concerning use of internet or other social media;
- Increasing secretiveness around behaviours; and
- Self-harm or significant changes in emotional well-being.

Potential vulnerabilities include:

Although the following vulnerabilities increase the risk of child sexual exploitation, it must be remembered that not all children with these indicators will be exploited. Child sexual exploitation can occur without any of these issues.

- Having a prior experience of neglect, physical and/or sexual abuse;
- Lack of a safe/stable home environment, now or in the past (domestic violence or parental substance misuse, mental health issues or criminality, for example);
- Recent bereavement or loss;
- Social isolation or social difficulties;
- Absence of a safe environment to explore sexuality;
- Economic vulnerability;
- Homelessness or insecure accommodation status;
- Connections with other children and young people who are being sexually exploited;
- Family members or other connections involved in adult sex work;
- Having a physical or learning disability;
- Being in care (particularly those in residential care and those with interrupted care histories).

## **HONOUR BASED ABUSE**

- 'Honour-based' Abuse (HBA) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including FGM, forced marriage, and practices such as breast ironing. All forms of HBA are abuse (regardless of the motivation) and should be handled and escalated as such. Where staff are concerned that a child might be at risk of HBA, they must contact the DSL as a matter of urgency.

## **FORCED MARRIAGE**

- A forced marriage is a marriage in which one or both people do not (or in cases of people with learning disabilities cannot) consent to the marriage but are coerced into it. Coercion may include physical, psychological, financial, sexual and emotional pressure. It may also involve physical or sexual violence and abuse. School staff should never attempt to intervene directly as a School or through a third party, but inform the DSL.

## **FEMALE GENITAL MUTILATION**

Female Genital Mutilation (FGM) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. FGM typically takes place between birth and around 15 years old; however, it is believed that the majority of cases happen between the ages of 5 and 8.

Risk factors for FGM include:

- Mother or a sister who has undergone FGM.
- Girls who are withdrawn from PSHE.
- Visiting female elder from the country of origin.
- Being taken on a long holiday to the country of origin.
- Talk about a 'special' procedure to become a woman.

Symptoms of FGM

FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out of school to visit an 'at-risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM. Indications that FGM may have already taken place may include:

- Difficulty walking, sitting or standing and may even look uncomfortable.
- Spending longer than normal in the bathroom or toilet due to difficulties urinating.
- Spending long periods of time away from a classroom during the day with bladder or menstrual problems.
- Frequent urinary, menstrual or stomach problems.
- Prolonged or repeated absences from school or college, especially with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return.
- Reluctance to undergo normal medical examinations.
- Confiding in a professional without being explicit about the problem due to embarrassment or fear.
- Talking about pain or discomfort between her legs.

FGM is illegal. Teachers must inform the DSL and personally report to the police cases where they discover that an act of FGM appears to have been carried out. The duty does not apply in relation to suspected cases.

### **17. GENERAL SAFEGUARDING CONCERNS**

The emotional wellbeing and mental health of a child and young person must be supported and harm minimised. All staff should be aware that a variety of safeguarding concerns mental health, self-harm can, be indicators that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

### **18. MENTAL HEALTH**

Only appropriately 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.

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that staff are aware of how these children's experiences, can impact on their mental health, behaviour and education.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following their safeguarding policy and speaking to the designated safeguarding lead or a deputy.

## **SELF HARM**

The child or young person will be supported to access service(s) which will assist the child or young person with opportunities and strategies for hope and recovery from the effects of self-harming and the risk of future harm minimised.

Some self-harm behaviours

- Scratching or picking skin
- Cutting body
- Tying something around body
- Inserting things into body scouring/scrubbing body excessively
- Hitting, punching self
- Pulling out hair
- Over/under-eating
- Excessive drinking of alcohol
- Taking non-prescription drugs or over/under- use of prescription drugs
- Burning or scalding body (physically or chemically)
- Hitting walls with head
- Taking an overdose
- Self-strangulation
- Risky behaviours such as running into the road
- Episodes of drug abuse
- Risky sexual behaviour
- Swallowing objects
- Self-tattooing

As most self-harm is privately or secretly carried out it can be hard to notice that a young person is self-harming but some signs to look out for are:

- Changes in clothing to cover parts of the body, e.g. wearing long sleeved tops
- Reluctance to participate in previously enjoyed physical activities, particularly those that involve wearing shorts or swimsuits, for example
- Changes in eating and/or sleeping habits

- Changes in consumption of drugs/alcohol
- Changes in levels of activity or mood
- Increasing isolation from friends/family

## **Risk**

There is a need to initiate a prompt assessment of the level of risk self-harm presents. Unless the student is in obvious emotional crisis, kind and calm attention to assuring that all physical wounds are treated should precede additional conversation with the student about the non-physical aspects of self-harm. Questions of value in assessing severity might include:

- Where on your body do you typically self-harm?
- What do you typically use to self-harm?
- What do you do to care for the wounds?
- Have you ever hurt yourself more severely than you intended?
- Have your wounds ever become infected?
- Have you ever seen a doctor because you were worried about a wound?

Collecting basic information is also important in determining the need for engagement of outside resources. Questions might include aiming to assess:

- history
- frequency
- types of method use
- triggers
- psychological purpose
- disclosure
- help seeking and support
- past history and current presence of suicidal ideation and/or behaviours

Advice on managing a disclosure can be found here: <http://www.sec-ed.co.uk/best-practice/self-harm-what-not-to-do/> In general students are likely to fall into 1 of 2 risk categories:

### **Low risk students**

Students with little history of self-harm, a generally manageable amount of stress, and at least some positive coping skills and some external support.

### **Higher risk students**

Students with more complicated profiles – those who report frequent or long-standing self-harm practices; who use high lethality methods, and/or who are experiencing chronic internal and external stress with few positive supports or coping skills.

### **Information Sharing**

This is concise guidance for sharing recorded information about children or young people who harm themselves or are perceived to be at risk of self-harm including suicide.

### 19. ONLINE SAFETY

When children use the school's network to access the internet, they are protected from inappropriate content by our filtering and monitoring systems. However, many pupils are able to access the internet using their own data plan. To minimise inappropriate use, as a school we ensure that children are taught about safeguarding, including online safety as part of our broad and balanced curriculum. Additionally BASM provides information and presentations for parents to help support families staying safe online.

### 20. STAFF TRAINING

Induction Training - Mandatory

The Head and all other staff who work with children will undertake appropriate child protection awareness training to equip them to carry out their responsibilities for child protection effectively

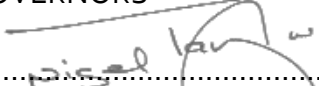
The school will ensure that the Designated Safeguarding Lead and Deputy Designated Safeguarding Lead also undertake training and refresher training at an Advanced Level on an annual basis to keep knowledge and skills up to date. Temporary staff and volunteers who work with children in the school will be made aware of the school's arrangements for safeguarding and child protection and their responsibilities.

All staff will receive termly Safeguarding and Child Protection training and receive updates as required to provide them with relevant skills and knowledge to safeguard children effectively. Safer Recruitment training is available to all relevant staff and governors who are involved in the recruitment process.

SIGNED BY: HEAD

Head's Signature .....  .....13/09/2021

RATIFIED BY: BOARD OF GOVERNORS

Board Member's Signature .....  .....13/09/2021

NE. Deputy Chair – (Safeguarding)

Full sign off by Board after Meeting October 2021

REVIEWED: AUTUMN 2021 NEXT REVIEW DATE: AUTUMN 2022