

Safeguarding Policy

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Policy Statement

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

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

Aims

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

Principles and Values

Safeguarding is everyone's responsibility. As such it does not rest with the Designated Safeguarding Lead (DSL) and their deputies to take a lead responsibility in all of the areas covered within this policy.

Some areas, such as Health and Safety, are a specialist area of safeguarding and a separate lead for this area is in place in the College.

Safeguarding processes are intended to put in place measures that minimise harm to young people. There will be situations where gaps or deficiencies in the policies and processes we have in place will be highlighted. In these situations a review will be carried out in order to identify learning and inform the policy, practice and culture of the College.

All students in our College are able to talk to any member of staff to share concerns or talk about situations which are causing them concern. Staff will listen to the student, take their concerns seriously and share the information with the safeguarding lead. In addition, we provide students with information of who they can talk to outside of College both within the community and with local or national organisations who can provide support or help. As a College, we review this policy annually in line with Department for Education (DfE), Local Safeguarding Children Board (LSCB) and any other relevant guidance.

Areas of Safeguarding

The key guidance on safeguarding for colleges is contained within 'Keeping Children Safe in Education' (2018) and the Ofsted guidance 'Inspecting safeguarding in early years, education and skills settings' (2016). A number of safeguarding issues are directly highlighted or implied within the text of these guidance documents. These areas of safeguarding have been separated into issues that are emerging or high risk issues (part 1); those related to the students as an individual (part 2); other safeguarding issues affecting students (part 3); and those related to the running of the College (part 4).

Definitions

Within this document:

'**Safeguarding**' is defined in the Children Act 2004 as protection from maltreatment; preventing impairment of health and development; ensuring that young people grow up with the provision of safe and effective care; and working in a way that gives the best life chances and transition to adulthood. Our safeguarding practice applies to every young person.

The term **Staff** applies to all those working for or on behalf of the College, full time or part time, in either a paid or voluntary capacity.

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

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

Key personnel

The designated safeguarding lead for the college is:

- Vice Principal Curriculum and Safeguarding (Larry Magee)

The deputy safeguarding leads are:

- Quality Manager (Rachael Jenkins)
- Members of the Senior Management Team

Safeguarding Administration:

- Safeguarding and Quality Administrator (Tim Simpson)
- Child Services Manager (Nicky Branson)

Part 1 – High risk and emerging safeguarding issues

Preventing Radicalisation and Extremism

The prevent duty requires that all staff are aware of the signs that a young person may be vulnerable to radicalisation. Risks will be considered for political; environmental; animal rights; or faith based extremism that may lead to a young person becoming radicalised. All staff of the College will receive awareness training in order that they can identify the signs of young people being radicalised.

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

Any young person who is considered vulnerable to radicalisation will be referred by the DSL to the relevant children's social care department, where the concerns will be considered in the MASH process. If MASH considers the information to be indicating a level of risk a "channel panel" will be convened and the College DSL will attend and support this process.

Gender based violence / Violence against women and girls

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

Within the context of this policy the following sections address specific issues of violence against women and girls; Female genital mutilation, forced marriage, honour based violence and teenage relationship abuse.

Female Genital Mutilation (FGM)

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

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

On the 31 October 2015, it became mandatory for teachers to report known cases of FGM to the police. In these situations, the DSL will be informed that a member of teaching staff has called the police to report suspicion that FGM has happened. At no time will staff examine students to confirm this.

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

Forced Marriage

In the case of young people: *'a forced marriage is a marriage in which one or both spouses cannot consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure.'* In some developing countries 11% of girls are married before the age of 15. One in 3 victims of forced marriage in the U.K. is under 18.

It is important that all members of staff recognise the presenting symptoms, how to respond if there are concerns and where to seek advice. Advice and help can be obtained nationally through the Forced Marriage Unit and locally through the local police safeguarding team or children's social care.

Policies and practices in the College reflect the fact that, while all members of staff, including teachers, have important responsibilities with regard to students who may be at risk of forced marriage, teachers and College leaders should not undertake roles in this regard that are most appropriately discharged by other children's services professionals such as police officers or social workers.

Characteristics that may indicate forced marriage

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

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

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

Honour Based Violence

Honour based violence is a violent crime or incident which may have been committed to protect or defend the 'honour' of a family or community.

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

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

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

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

If staff believe that a student is at risk from honour based violence the DSL will follow the usual safeguarding referral process, however, if it is clear that a crime has been committed or the student is at immediate risk the police will be contacted in the first place. It is important that, if honour based violence is known or suspected, communities and family members are NOT spoken to prior to referral to the police or social care as this could increase risk to the young person.

Teenage Relationship Abuse

Research has shown that some young people do not understand abusive behaviours such as controlling behaviours, which can escalate to physical abuse, (e.g. checking someone's phone, telling them what to wear, who they can/can't see or speak to) and that this abuse has a higher prevalence within teenage relationships. Research also raises concerns that some young people do not understand what consent means within their relationships.

This can lead to these abusive behaviours feeling 'normal' and therefore being left unchallenged, as they were not recognised as being abusive. In response to this the College will provide education to help prevent young people from becoming victims and perpetrators of abusive relationships by encouraging them to rethink their views of violence, abuse and controlling behaviours, and understand what consent means within their relationships.

The Toxic Trio

The term 'Toxic Trio' has been used to describe the issues of domestic violence, mental ill-health and substance misuse which have been identified as common features of families where harm to women and young people has occurred.

These issues are viewed as indicators of increased risk of harm to young people. An analysis of Serious Cases Reviews undertaken by Ofsted in 2011, found that two or more of the issues were present in nearly 75% of these cases.

Domestic Abuse

Domestic abuse is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members, regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

Research indicates that living within a home where domestic abuse takes place is harmful to young people and can have a serious impact on their behaviour, wellbeing and understanding of what a normal relationship is.

Young people witnessing domestic abuse is recognised as 'significant harm' in law. These young people may become aggressive; display anti-social behaviours; suffer from depression or anxiety; or fail to reach their educational potential.

Indicators that a young person is living within a relationship with domestic abuse include:

- withdrawn
- sudden behaviour changes
- anxious
- clingy
- depressed
- aggressive
- problems sleeping
- eating disorders
- wets the bed
- soils clothes
- takes risks
- misses College

- changes in eating habits
- obsessive behaviour
- nightmares
- drugs
- alcohol
- self-harm
- thoughts about suicide

These behaviours themselves do not indicate that a young person is living with domestic abuse, but should be considered as indicators that this may be the case.

If staff believe that a young person is living with domestic abuse, this will be reported to the designated safeguarding lead for referral to be considered to children's social care

Parental mental ill health

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

For young people the impact of parental mental ill health can include:

- Parent / carer's needs or illnesses taking precedence over the young person's needs
- Own physical and emotional needs neglected
- Acting as a young carer for a parent or a sibling
- Having restricted social and recreational activities
- Finding it difficult to concentrate- impacting on educational achievement
- Missing College regularly as (s)he is being kept home as a companion for a parent / carer
- Adopting paranoid or suspicious behaviour, as they believe their parent's delusions.
- Witnessing self-harming behaviour and suicide attempts (including attempts that involve the young person)
- Obsessional compulsive behaviours involving the young person

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

Parental Substance misuse

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

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

For young people the impact of parental substance misuse can include:

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

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

If staff believe that a young person is living with parental substance misuse, this will be reported to the designated safeguarding lead for referral to be considered for children's social care.

Missing, Exploited and Trafficked Young people (MET)

The acronym MET is used to identify all young people who are missing; believed to be at risk of or being sexually exploited; or who are at risk of or are being trafficked. Given the close links between all of these issues, there has been a considered response to join all three issues so that crossover of risk is not missed.

Young people Missing from Education

Patterns of young people missing education can be an indicator of either abuse or safeguarding risks. A relatively short length of time a young person is missing does not reduce risk of harm to that young person, and all absence or non-attendance should be considered with other known factors or concerns.

DSLs and staff should consider:

Missing lessons: Are there patterns in the lessons that are being missed? Is this more than avoidance of a subject or a teacher? Does the young person remain on the College site or are they absent from the site?

- Is the young person being sexually exploited during this time?
- Are they late because of a caring responsibility?
- Have they been directly or indirectly affected by substance misuse?

- Are other students routinely missing the same lessons, and does this raise other risks or concerns?
- Is the lesson being missed one that would cause bruising or injuries to become visible?

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

- Is the young person being sexually exploited during this day?
- Do the parents appear to be aware?
- Are the student's peers making comments or suggestions as to where the student is?

Continuous missing days: Has the College been able to make contact with the parent? Is medical evidence being provided?

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

The College will view absence as both a safeguarding issue and an educational outcomes issue. The College may take steps that could result in specific actions to improve attendance, or a referral to children's social care, or both.

Young people Missing from Home or Care

Young people who run away from home or from care, may provide a behavioural indication that they are either unhappy or do not feel safe in the place that they are living. Research shows that young people may often run away from conflict or problems at home or College, neglect or abuse, or because young people are being groomed by predatory individuals who seek to exploit them. Many run away on numerous occasions.

The association of chief police officers has provided the following definitions and guidance:

"Missing person is: 'Anyone whose whereabouts cannot be established and where the circumstances are out of character or the context suggests the person may be the subject of crime or at risk of harm to themselves or another.'

An absent person is: 'A person not at a place where they are expected or required to be.'

All cases classified as 'missing' by the police will receive an active police response – such as deployment of police officers to locate a young person. Cases where the young person was classified as 'absent' will be recorded by the police and risk assessed regularly but no active response will be deployed.

The absent case will be resolved when a young person returns or new information comes to light suggesting that he/she is at risk. In the latter instance, the case is upgraded to 'missing'.

Within any case of young people who are missing both push and pull factors will need to be considered.

Push factors include:

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

Pull factors include:

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

As a College we will inform all parents of young people who are absent (unless the parent has informed us). If the parent is also unaware of the location of their child, and the definition of missing is met, we will either support the parent to/directly contact the police to inform them.

Child Sexual Exploitation (CSE)

Sexual exploitation of young people is not limited by the age of consent and can occur up until the age of 18. CSE involves young people being in situations, contexts or relationships where they (or a third person) receive 'something' as a result of them performing sexual activities. The something can include food, accommodation, drugs, alcohol, cigarettes, affection, gifts, or money.

Child sexual exploitation can happen via technology without the young person's being aware; for example, being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain.

In all cases, those exploiting the young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Indicators a young person may be at risk of CSE include:

- Going missing for periods of time or regularly coming home late;
- Regularly missing College;
- 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;
- Mood swings or changes in emotional wellbeing;

- Drug and alcohol misuse; and
- Displaying inappropriate sexualised behaviour.

CSE can happen to a young person of any age, gender, ability or social status. Often the victim of CSE is not aware that they are being exploited and do not see themselves as a victim.

As a College we inform all staff of the signs and indicators of sexual exploitation. We use the sexual exploitation risk assessment form (SERAF) and associated guidance to identify students who are at risk and the DSL will share this information as appropriate with children's social care. We recognise that we may have information or intelligence that could be used to both protect young people and prevent risk. Any relevant information that we have will be shared on the community partnership information (CPI) form [Appendix 2]

Trafficked Young people

Human trafficking is defined by the UNHCR in respect of young people as a process that is a combination of:

- Movement (including within the UK);
- For the purpose of exploitation

Any young person transported for exploitative reasons is considered to be a trafficking victim.

There is significant evidence that young people (both of UK and other citizenship) are being trafficked internally within the UK and this is regarded as a more common form of trafficking in the UK.

There are a number of indicators which suggest that a young person may have been trafficked into the UK, and may still be controlled by the traffickers or receiving adults. These are:

- Shows signs of physical or sexual abuse, and/or has contracted a sexually transmitted infection or has an unwanted pregnancy;
- Has a history with missing details and unexplained moves;
- Is required to earn a minimum amount of money every day;
- Works in various locations;
- Has limited freedom of movement;
- Appears to be missing for periods;
- Is known to beg for money;
- Is being cared for by adult/s who are not their parents and the quality of the relationship between the young person and their adult carers is not good;
- Is one among a number of unrelated young people found at one address;
- Has not been registered with or attended a GP practice;
- Is excessively afraid of being deported.

For those young people who are internally trafficked within the UK indicators include:

- Physical symptoms (bruising indicating either physical or sexual assault);
- Prevalence of a sexually transmitted infection or unwanted pregnancy;
- Reports from reliable sources suggesting the likelihood of involvement in sexual exploitation / the young person has been seen in places known to be used for sexual exploitation;
- Evidence of drug, alcohol or substance misuse;
- Being in the community in clothing unusual for a young person i.e. inappropriate for age, or borrowing clothing from older people
- Relationship with a significantly older partner;
- Accounts of social activities, expensive clothes, mobile phones or other possessions with no plausible explanation of the source of necessary funding;
- Persistently missing, staying out overnight or returning late with no plausible explanation;
- Returning after having been missing, looking well cared for despite having not been at home;
- Having keys to premises other than those known about;
- Low self-image, low self-esteem, self-harming behaviour including cutting, overdosing, eating disorder, promiscuity;
- Truancy / disengagement with education;
- Entering or leaving vehicles driven by unknown adults;
- Going missing and being found in areas where the young person has no known links; and/or
- Possible inappropriate use of the Internet and forming on-line relationships, particularly with adults.

These behaviours themselves do not indicate that a young person is being trafficked, but should be considered as indicators that this may be the case.

If staff believe that a young person is being trafficked, this will be reported to the designated safeguarding lead for referral to be considered to children's social care.

Technologies

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

Online Safety & Social media

With the current speed of on-line change, some young people have only a limited understanding of online risks and issues. Some may underestimate the effects of potentially harmful and inappropriate material on the Internet and may be unsure about how to respond. Some of the risks could be:

- unwanted contact
- grooming
- online bullying including sexting
- digital footprint

The College will therefore seek to provide information and awareness to students through:

- Publicising the 'Student use of College Computers, e-Mail and Internet Policy'
- Curriculum activities involving raising awareness around staying safe online
- Information included on College intranet and VLE
- Building awareness around information that is held on relevant web sites and or publications

Cyberbullying

Central to the College's anti-bullying policy is the principle that '*bullying is always unacceptable*' and that '*all students have a right not to be bullied*'. The College also recognises that it must take note of bullying perpetrated outside College, which affects students when they are at College and so will respond to concerns about cyber-bullying carried out by students when they are away from the site.

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

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

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

Cyber-bullying may be at a level where it is criminal in character. It is unlawful to disseminate defamatory information in any media including Internet sites. Section 127 of the Communications Act 2003 makes it an offence to send, by public means of a public electronic communications network, a message or other matter that is grossly offensive or one of an indecent, obscene or menacing character. The Protection from Harassment Act 1997 makes it an offence to knowingly pursue any course of conduct amounting to harassment.

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

Sexting

'Sexting' often refers to the sharing of naked pictures or video through mobile phones and the Internet. It also includes underwear shots, sexual poses and explicit text messaging. While sexting often takes place in a consensual relationship between two young people, the use of Sexted images in revenge following a relationship breakdown is becoming more commonplace. Sexting can also be used as a form of sexual exploitation and take place between strangers.

The College will use appropriate educational materials with students to raise awareness, to promote safety and deal with pressure.

Gaming

Online gaming is an activity that the majority of children and many adults get involved in. The College will raise awareness:

- by talking to students and helping them to identify whether they are appropriate
- by highlighting relevant resources

Online reputation

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

Grooming

Online grooming is the process by which one person with an inappropriate sexual interest in young people will approach a child online, with the intention of developing a relationship with that young person, to be able to meet them in person and intentionally cause harm.

The College will build awareness amongst young people to understand:

- the processes and implications of online grooming
- how to protect privacy and reduce the opportunities for grooming

Part 2 – Safeguarding issues relating to individual student needs

Students with medical conditions

The College will seek to ensure that sufficient staff are trained to support any student with a medical condition. All relevant staff will be made aware of the condition to support the young person and be aware of medical needs and risks to the young person. Specialist advice may be sought by the College Health Advisor and an individual healthcare plan may be put in place to support the young person and their medical needs.

Special educational needs and disabilities

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

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs;
- Communication barriers and difficulties in overcoming these barriers.
- Having fewer outside contacts than other children;
- Receiving intimate care from a considerable number of carers, which may increase the risk of exposure to abusive behaviour and make it more difficult to set and maintain physical boundaries;
- Having an impaired capacity to resist or avoid abuse;
- Having communication difficulties that may make it difficult to tell others what is happening;
- Being inhibited about complaining for fear of losing services;
- Being especially vulnerable to bullying and intimidation
- Being more vulnerable than other children to abuse by their peers.

As a College we will respond to this by:

- Making it common practice to enable disabled children to make their wishes and feelings known in respect of their care and treatment;
- Ensuring that disabled children receive appropriate personal, health and social education

- Making sure that all disabled children know how to raise concerns and give them access to a range of adults with whom they can communicate. This could mean using interpreters and facilitators who are skilled in using the child's preferred method of communication;
- Recognising and utilising key sources of support including staff in schools, friends and family members where appropriate;
- Developing the safe support services that families want, and a culture of openness and joint working with parents and carers on the part of services;
- Ensuring that guidance on good practice is in place and being followed in relation to: intimate care; working with children of the opposite sex; managing behaviour that challenges families and services; issues around consent to treatment; anti-bullying and inclusion strategies; sexuality and safe sexual behaviour among young people; monitoring and challenging placement arrangements for young people living away from home.

Intimate care

The provision of intimate care is currently rare in the College context. If intimate care were to be required, guidelines for good practice are provided in Appendix 1 (adapted from the Chailey Heritage centre)

Fabricated or induced illness

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

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

If the College is concerned that a young person may be suffering from fabricated or induced illness we will follow the established procedures of the Local Safeguarding Children Board.

Mental Health

Teachers and tutors often get to know young people well and are, therefore, well placed to identify changes in behaviour that might indicate an emerging problem with the mental health and emotional wellbeing of students.

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

- **loss or separation** – resulting from death, parental separation, divorce, hospitalisation, loss of friendships, family conflict or breakdown that results in the young person having to live elsewhere, being taken into care or adopted;
- **life changes** – such as the birth of a sibling, moving house or changing Colleges or during other transitions
- **traumatic events** such as abuse, domestic violence, bullying, violence, accidents, injuries or natural disaster.

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

Where the needs require additional professional support referrals will be made to the appropriate team or service with the parent's agreement (or young person's if they are competent, as established by the Fraser guidelines).

The protocol for dealing with students with immediate mental health concerns (Suicide Intent) can be found within **Appendix 3**.

Part 3 – Other safeguarding issues impacting students

Bullying

The College has established a separate anti-bullying policy that can be found at <http://intranet.farn-ct.ac.uk/your-college/policies-and-procedures/antibullying-policy/>

Prejudice based abuse

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

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

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

This can be evidenced by:

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

As a College we will respond by:

- clearly identifying any prejudice based incidents and hate crimes and monitoring the frequency and nature of them within the College

- taking preventative action to reduce the likelihood of such incidents occurring
- recognising the wider implications of such incidents for the College and local community
- providing regular reports of these incidents to the Governing Body
- ensuring that staff are familiar with formal procedures for recording and dealing with prejudice based incidents and hate crimes
- dealing with perpetrators of prejudice based abuse effectively
- supporting victims of prejudice based incidents and hate crimes
- ensuring that staff are familiar with a range of restorative practices to address bullying and prevent it happening again

Drugs and substance misuse

The College has established a separate substance misuse policy that can be found at <http://intranet.farn-ct.ac.uk/staff/policies-procedures/safeguarding/substance-misuse-policy.pdf>

Faith Abuse

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

A young person could be viewed as “different” for a variety of reasons such as, disobedience; independence; bed-wetting; nightmares; illness; or disability. There is often a weak bond of attachment between the carer and the young person. There are various social reasons that make a young person more vulnerable to an accusation of “possession” or “witchcraft”. These include family stress and/or a change in the family structure. The attempt to “exorcise” may involve severe beating, burning, starvation, cutting or stabbing and isolation, and usually occurs in the household where the young person lives.

If the College become aware of a young person who is being abused in this context, the DSL will follow the normal referral route in to children’s social care.

Gangs and Youth Violence

The vast majority of young people will not be affected by serious violence or gangs. However, where these problems do occur, even at low levels there will almost certainly be a significant impact. As a College we have a duty and a responsibility to protect our students. It is also well established that success in learning is one of the most powerful indicators in the prevention of youth crime. Dealing with violence also helps attainment.

While students generally see educational establishments as safe places, even low levels of youth violence can have a disproportionate impact on any education. Crucial preventive work can be done within College to prevent negative behaviour from escalating and becoming entrenched.

As a College we will:

- develop skills and knowledge to resolve conflict as part of the curriculum;
- challenge aggressive behaviour in ways that prevent the recurrence of such behaviour;
- understand risks for specific groups, including those that are gender-based, and target interventions;
- safeguard, and specifically organise child protection, when needed;
- make referrals to appropriate external agencies;
- cooperate with local partners in the prevention of anti-social behaviour or crime.

Private fostering

Private fostering is an arrangement by a parent for their child (under 16 or 18 if disabled) to be cared for by another adult who is not closely related and is not a legal guardian with parental responsibility for 28 days or more. It is not private fostering if the carer is a close relative to the young person such as grandparent, brother, sister, uncle or aunt. Due to the ages of the young people at the College, private fostering issues are rarely found.

The Law requires that the carers and parents must notify the children's services department of any private fostering arrangement.

If the College becomes aware that a student is being privately fostered we will inform the children's services department and inform both the parents and carers that we have done so.

Parenting

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

Some children have medical conditions and/or needs e.g. Tourette's, some autistic linked conditions, ADHD; that have a direct impact on behaviour and can cause challenges for parents in dealing with behaviours. This does not highlight poor parenting either.

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

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

Part 4 –Safeguarding processes

Safer Recruitment

The College operates a separate safer recruitment process as part of the Recruitment Procedure and the Disclosure and Barring Service Policy and Procedure. On all recruitment panels there is at least one member who has undertaken safer recruitment training. The process checks identity, criminal record (enhanced DBS), mental and physical capacity, right to work in the U.K., professional qualification and seeks confirmation of the applicant's experience and history through references.

Staff Induction

The College provides all new staff with training to enable them to both fulfil their role and also to understand the child protection policy, the safeguarding policy, the staff code of conduct, and part one of Keeping Children Safe in Education. This induction may be covered within the annual training if this falls at the same time; otherwise it will be carried out separately during the initial starting period.

Health and Safety

The site, the equipment and the activities carried out as part of the curriculum are all required to comply with the Health and Safety at Work act 1974 and regulations made under the act.

All risks are required to be assessed and recorded plans of how to manage the risk are in place. The plans should always take a common sense and proportionate approach to allow activities to be safe rather than preventing them from taking place.

The College has an established Health & Safety Policy and accompanying procedures that can be found at <http://intranet.farn-ct.ac.uk/staff/policies-procedures/policies-and-procedures#H&S> .

Site Security

The College aims to provide a secure site within which young people feel safe. By its nature the College is a diverse environment which brings together a broad range of individuals engaged in education and training. Therefore, a number of strategies are used to enhance site security. These are:

- All persons on the College site must wear and display the relevant identity card
- Identity cards are displayed by the use of coloured lanyards, which identify whether an individual is a student, a member of staff, a contractor or a visitor
- Frequent compliance checks are carried out to ensure that persons on site are wearing the correct identity card and lanyard
- Visitors are required to enter at the reception and must sign in.
- Patrols are undertaken by the College's safeguarding and security staff throughout the College day
- An extensive network of CCTV is deployed throughout the College which is continuously monitored

Off site visits

The College has a separate procedure detailing the processes used to ensure safety when young people are engaged in external activities. This can be found at <http://intranet.farn-ct.ac.uk/staff/policies-procedures/policies-and-procedures#H&S> .

First Aid

The College has a separate procedure detailing the arrangements for providing First Aid. This can be found at <http://intranet.farn-ct.ac.uk/staff/policies-procedures/policies-and-procedures#H&S> .

Physical Intervention (use of reasonable force)

The use of physical intervention is rarely required within the context of the College. The College utilises the non-statutory DfE advice contained in 'Use of reasonable force: Advice for headteachers, staff and governing bodies' in order to provide guidance for staff. This can be found at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/444051/Use_of_reasonable_force_advice_Reviewed_July_2015.pdf

Photographs and images

As a College we will seek consent from the student, and their parent if under 18, before taking and publishing photographs or videos that contain images that are sufficiently detailed to identify the individual in College publications, printed media or on electronic publications. We will not seek consent for photos where you would not be able to identify the individual.

Photographs and videos will be taken by members of staff and professional photographers/videographers. They will be deleted from memory cards/computers after being processed, and securely stored on the college network thereafter. No images of pupils will be taken or stored on privately owned equipment by staff members.

Disqualification under the childcare act

<https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006>

Within the College, the provisions of the Childcare Act 2006 regarding suitability to work with young children apply only to staff employed within, or responsible for the management of, the College nursery. The Childcare Act was put in place to prevent adults who have been cautioned or convicted of a number of specific offences from working within childcare.

Staff are covered by this legislation in the following circumstances:

- they are employed and/or provide early years childcare (this covers the age range from birth until 1 September following a child's fifth birthday, i.e. up to and including reception age). This includes education in nursery and reception classes (e.g. teachers and support staff in a reception class) and/or any supervised activity (such as breakfast clubs, lunchtime supervision and after College care provided by the College) both during and outside of College hours for young people in the early years age range; and
- they work in childcare provided by the College outside of College hours for young people who are above reception age but who have not attained the age of 8. This includes before College settings, such as breakfast clubs, after College provision and holiday clubs. It does NOT include education or supervised activity for young people above reception age during College hours including extended College hours for co-curricular learning activities, such as the College's choir or sports teams.

The legislation also applies to any staff directly concerned in the management of such early or later years' provision.

In 2009 additional regulations were made to include those living in the same household as another person who is (or would be) disqualified under the Act.

As a College we require all staff who may be impacted by this piece of legislation to complete a self declaration form and to inform the Principal immediately if they become aware of any changes to their circumstances that would require us to be aware.

If a member of staff is impacted by the disqualification by association provisions we will ask them to apply for a waiver from Ofsted and put in place appropriate risk management plans while the waiver is being processed. If a waiver is not granted we will seek advice from the Local Authority Designated Officer (LADO) as to how risk is most effectively managed.

Appendices

Appendix 1: Intimate care

Guidelines for good practice adapted from the Chailey Heritage centre

1. Treat every young person with dignity and respect and ensure privacy appropriate to the young person's age and the situation. Privacy is an important issue. Much intimate care is carried out by one staff member alone with one young person. The four Local Safeguarding Children Boards (4LSCBs) believe this practice should be actively supported unless the task requires two people. Having people working alone does increase the opportunity for possible abuse. However, this is balanced by the loss of privacy and lack of trust implied if two people have to be present - quite apart from the practical difficulties. It should also be noted that the presence of two people does not guarantee the safety of the young person - organised abuse by several perpetrators can, and does, take place. Therefore, staff should be supported in carrying out the intimate care of young people alone unless the task requires the presence of two people. The 4LSCBs recognise that there are partner agencies that recommend two carers in specific circumstances. Where possible, the member of staff carrying out intimate care should be someone chosen by the young person. For older young people it is preferable if the member of staff is the same gender as the young person. However, this is not always possible in practice. Agencies should consider the implications of using a single named member of staff for intimate care or a rota system in terms of risks of abuse.
2. Involve the young person as far as possible in his or her own intimate care. Try to avoid doing things for a young person that s/he can do alone, and if a young person is able to help ensure that s/he is given the chance to do so. This is as important for tasks such as removing underclothes as it is for washing the private parts of a young person's body. Support young people in doing all that they can themselves. If a young person is fully dependent on you, talk with her or him about what you are doing and give choices where possible.
3. Be responsive to a young person's reactions. It is appropriate to "check" your practice by asking the young person - particularly a young person you have not previously cared for - "Is it OK to do it this way?"; "Can you wash there?"; "How does your parent do that?". If a young person expresses dislike of a certain person carrying out her or his intimate care, try and find out why. Conversely, if a young person has a "grudge" against you or dislikes you for some reason, ensure your line manager is aware of this.
4. Make sure practice in intimate care is as consistent as possible. Line managers have a responsibility for ensuring their staff have a consistent approach. This does not mean that everyone has to do things in an identical fashion, but it is important that approaches to intimate care are not markedly different between individuals. For example, do you use a flannel to wash a young person's private parts rather than bare hands? Do you pull back a young person's foreskin as part of daily washing? Is care during menstruation consistent across different staff?

5. Never do something unless you know how to do it. If you are not sure how to do something, ask. If you need to be shown more than once, ask again. Certain intimate care or treatment procedures, such as rectal examinations, must only be carried out by nursing or medical staff. Other procedures, such as giving rectal valium, suppositories or intermittent catheterisation, must only be carried out by staff who have been formally trained and assessed as competent.
6. If you are concerned that during the intimate care of a young person:
 - You accidentally hurt the young person;
 - The young person seems sore or unusually tender in the genital area;
 - The young person appears to be sexually aroused by your actions;
 - The young person misunderstands or misinterprets something;
 - The young person has a very emotional reaction without apparent cause (sudden crying or shouting).

Report any such incident as soon as possible to another person working with you and make a brief written note of it. This is for two reasons: first, because some of these could be cause for concern, and secondly, because the young person or another adult might possibly misconstrue something you have done.

7. Additionally, if you are a member of staff who has noticed that a young person's demeanour has changed directly following intimate care, e.g. sudden distress or withdrawal, this should be noted in writing and discussed with your designated person for child protection.
8. Encourage the young person to have a positive image of her or his own body. Confident, assertive young people who feel their body belongs to them are less vulnerable to abuse. As well as the basics like privacy, the approach you take to a young person's intimate care can convey lots of messages about what her or his body is "worth". Your attitude to the young person's intimate care is important. As far as appropriate and keeping in mind the young person's age, routine care of a young person should be enjoyable, relaxed and fun.

Intimate care is to some extent individually defined, and varies according to personal experience, cultural expectations and gender. The 4LSCBs recognise that young people who experience intimate care may be more vulnerable to abuse:-

- Young people with additional needs are sometimes taught to do as they are told to a greater degree than other young people. This can continue into later years. Young people who are dependent or over-protected may have fewer opportunities to take decisions for themselves and may have limited choices. The young person may come to believe they are passive and powerless
- Increased numbers of adult carers may increase the vulnerability of the young person, either by increasing the possibility of a carer harming them, or by adding to their sense of lack of attachment to a trusted adult
- Physical dependency in basic core needs, for example toileting, bathing, dressing, may increase the accessibility and opportunity for some carers to exploit being alone with and justify touching the young person inappropriately
- Repeated "invasion" of body space for physical or medical care may result in the young person feeling ownership of their bodies has been taken from them

- Young people with additional needs can be isolated from knowledge and information about alternative sources of care and residence. This means, for example, that a young person who is physically dependent on daily care may be more reluctant to disclose abuse, since they fear the loss of these needs being met. Their fear may also include who might replace their abusive carer



Community Partnership Information

Guidance: This form is for the sharing of non-urgent information by partner agencies that relates to the **Missing, Exploited and Trafficked** agenda and inter-connecting issues, such as **Modern Slavery**. This information may be sanitised and used in subsequent partnership forums for the purposes of identifying and mitigating risk. Completed forms should be sent electronically to 24/7-Intel@hampshire.pnn.police.uk. Any questions or concerns regarding this form can be raised with your police contact, or to FIB. The form is not a referral form,

Your name:

Your organisation:

Your telephone number:

Your email address:

Information (including date & location):

Information Source:

Where did this information come from (name/DoB/address)?

Can they be re-contacted? What are their contact details?

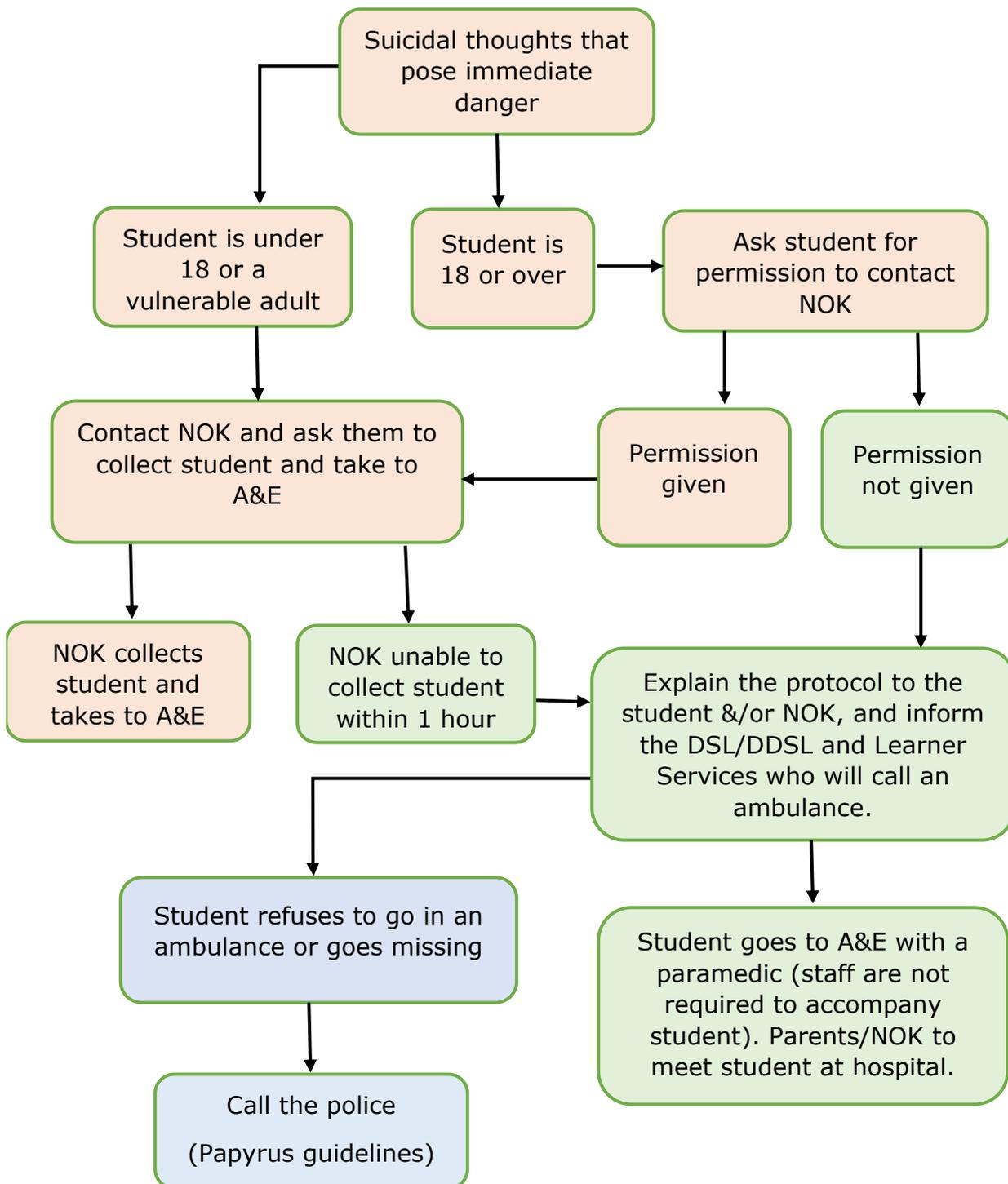
How did they find this information out?

When did they find this information out?

Who else have you shared this information with?

Appendix 3

Protocol for dealing with Mental Health concerns that require immediate medical attention



Following the above protocol, students must be invited to a Fitness to Study Meeting prior to them returning to College.