

CHILD PROTECTION & SAFGUARDING

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GROVE Neurodivergent Mentoring & Education LTD.

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Registered in England & Wales.

RECORD OF UPDATES:

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GROVE Neurodivergent Mentoring & Education (hereafter “GROVE”) is committed to providing services at the highest standard, in a safe and happy environment. Everything we do is guided by our values:

NEURO-AFFIRMING

CONNECTION

COMMUNITY

GROWTH

This policy applies to all staff (employed, contractors, consultants, volunteers and other personnel that is associated with GROVE – together “**Staff**”), as well as any third parties who enter into business or voluntary relationships with GROVE.

CONTACT IN CASE OF CONCERN:

- If someone is in **immediate danger** please phone **999 first** then follow the GROVE procedures.
- **GROVE CEO/DSL:** Jessica Garner safeguarding@gr0ve.org (staff must follow GROVE procedures).
- The **NSPCC** helpline is available to *anyone* who has a concern about a child. Email help@nspcc.org.uk or phone 0808 800 5000.
- **Childline** offers free, confidential advice and support whatever the child or young person’s worry, whenever they need help. Email childline.org.uk or telephone 0800 1111.
- You can also contact the child’s local **Children’s Social Services/Child Protection Services** and speak to the local authority designated officer (LADO). Find the details for the local council here: [Find your local council - GOV.UK \(www.gov.uk\)](http://www.gov.uk)
- You can contact the police for non-emergencies on **101**.

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Additional Policies/Procedures of Relevance: <ul style="list-style-type: none"> • CP and Safeguarding Procedure • Privacy Policy • Data Protection Policy • Online Safety • Staff Code of Conduct • Staff Handbook: Induction, training, supervision, quality assurance, session guide and support • User Code of Conduct • Safer Recruitment • Photography and Sharing Images • Equality, Diversity and Inclusion • Allegations Against Staff and Whistleblowing • Complaints 	

Note this document relates to children and young people. Our 'Vulnerable Adult Safeguarding' policy is available on our website.

1. Key Terminology:

Safeguarding means the action that is taken to promote the welfare of children and protect them from harm. Safeguarding means:

- protecting children from abuse and maltreatment
- preventing harm to children's health or development
- ensuring children grow up with the provision of safe and effective care
- taking action to enable all children and young people to have the best outcomes.

Child protection refers to part of the safeguarding process. It focuses on protecting individual children identified as suffering or likely to suffer significant harm. This includes child protection procedures which detail how to respond to concerns about a child.

Staff refers to all those working for or on behalf of GROVE in either a paid or voluntary capacity.

Child/children/young people includes everyone under the age of 18.

Parent refers to birth parents and other adults who are in a parent or carer role.

User refers to the children, young people and adults (usually family members) who employ GROVE for our services.

Online refers to someone using a device to gain access to the internet.

GROVE refers to GROVE Neurodivergent Mentoring & Education.

2. GROVE'S Values, Vision, Policy Purpose, Scope and Policy Statement

GROVE'S VALUES & VISION:

**NEURO-AFFIRMING
CONNECTION
COMMUNITY
GROWTH**

GROVE is a safe community for neurodivergent children and young people to connect through shared interests and experiences. We support our children and young people's personal growth by fostering a positive and authentic autistic identity through neuro-affirming programmes of mentoring and education.

PURPOSE & SCOPE OF THIS POLICY SUMMARY:

As an online service provider, we understand that there are limitations as to what we can do in terms of safeguarding however GROVE believes that everyone has a responsibility to promote the welfare of children and young people, to keep them safe and to practice in a way that protects them in whatever way they can. We value, listen to and respect the children and young people we work with. The purpose of this policy is to summarise how we will:

- protect children, young people and adults who receive GROVE's services from harm;
- ensure that all children, young people and adults have an equal right to be safe from all types of harm or abuse, irrespective of age, disability, sex, sexual orientation, gender reassignment, religion or belief and race;
- provide staff, children, young people and their families, with the overarching principles that guide our approach to child protection and safeguarding;
- ensure that staff and volunteers understand their responsibilities and have the knowledge, skills and confidence to: *Recognise, Respond, Report, Record, Refer* any abuse, neglect or other allegations and / or any concerns relating to the welfare of a child or young person;
- develop and implement effective online safety (see Data Protection and Online Code of Conduct for further information);
- to state the ongoing training that GROVE will undertake to ensure that safeguarding protocols are up-to-date and

understood by all;

- manage any allegations against staff appropriately;
- build a safeguarding culture where staff, children, young people and their families, treat each other with respect and are comfortable about sharing concerns.

GROVE works with 8-17 year-olds directly but we are employed by adults who may be neurodivergent and therefore vulnerable themselves (an individual aged 18 or over who has vulnerabilities which include those with protected characteristics) we make it our duty to promote the welfare and safety of all users whether they are under or over the age of 18.

GROVE's policies relate to all users, staff and situations in both the UK and internationally.

Irrespective of the differing laws, regulations and cultural expectations from one country to another even where English law and regulation does not apply, we shall operate as if English laws and regulations do apply.

GROVE'S policies and procedures will be audited and reviewed at least annually.

In addition to this policy, safeguarding and child protection is supported by the following procedures/policies:

- Vulnerable Adult Safeguarding Policy & Procedures
- CP and Safeguarding Procedures
- Online Safety & Code of Conduct
- Staff Code of Conduct
- Staff Handbook: Induction, training, supervision, quality assurance, session guide and support
- User Code of Conduct
- Safer Recruitment
- Photography and Sharing Images
- Data Protection
- Equality, Diversity and Inclusion
- Allegations Against Staff and Whistleblowing
- Complaints

3. Legislation and Guidance

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children and young people in England. Key documents include:

- [Working Together to Safeguard Children \(2018\)](#)
- [Keeping Children Safe in Education](#)
- [After-school clubs, community activities, and tuition - safeguarding guidance for providers \(publishing.service.gov.uk\)](#)
- [Equality Act 2010 \(legislation.gov.uk\)](#)
- [The Children Act 1989 and 2004 amendment](#)
- [Sexual Offences Act 2003 \(legislation.gov.uk\)](#)
- [Safeguarding Vulnerable Groups Act 2006 \(legislation.gov.uk\)](#)
- [What to do if you're worried a child is being abused: advice for practitioners](#)
- [Part 3 of the Children and Families Act 2014](#)
- [Regulated activity with adults in England](#)
- [Regulated activity with children in England](#)
- [Self-harm: assessment, management and preventing recurrence \(nice.org.uk\)](#)
- [NSPCC](#)

4. Roles and Responsibilities

As per our Safer Recruitment policy all staff will have an Enhanced DBS check with children's barred list check before any contact with a user and this will be checked on an annual basis. This will be available for viewing upon request.

Designated Safeguarding Lead: J. GARNER

Training Record: *Certificates available for viewing upon request.*

1. Designated Safeguarding Lead, March 2023
2. Prevent Awareness and Referrals training, March 2023
3. Safer Recruitment training, September 2023
4. Safeguarding Vulnerable Adults, September 2023

Overall Responsibility

- Undergo training in line with the expectations set out in the latest version of Keeping Children Safe in Education (KCSIE).
- Ensure that GROVE's child protection and safeguarding policy is reviewed regularly (at least annually) and made available to the public.
- Keep up to date with local and national initiatives, announcements, guidance and legislation and share this with other staff as appropriate.
- Maintain high professional standards and help set a good example to staff.
- Recruit and select staff and volunteers safely, ensuring all necessary checks are made (see Safer Recruitment Policy).
- Foster a culture where all staff are vigilant for the signs of potential harm and work collaboratively to safeguard children.

Supporting Staff

- Support all staff to understand and fulfil their safeguarding duties.
- Ensure that all staff have access to (and understand) GROVE's child protection and safeguarding policy.
- Ensure that all staff know what to do if they have any safeguarding concerns.
- Support staff who have made safeguarding referrals.
- Ensure that staff are trained and competent in completing safeguarding logs, including delivering training when required to do so.
- Ensure that there are effective induction processes in place to ensure that new staff are aware of the policies, procedures and expectations around safeguarding.
- Ensure that all staff understand that children can abuse other children (often referred to as child-on-child abuse) and what to do if they have concerns that this is happening.
- Ensure that staff are aware that there is a specific legal duty that states that if they discover that an act of Female Genital Mutilation (FGM) appears to have been carried out on a girl under the age of 18, they must report this to the DSL and police.
- Identify any gaps in the skills and knowledge of individuals, groups and the whole staff.
- Plan and deliver CPD sessions regarding safeguarding.
- Keep up to date with developments regarding online safety and share any updates with staff so that they are aware of any developing trends or new information.
- Ensure GROVE has effective complaints and whistleblowing measures in place.
- Where appropriate training cannot be offered internally, identify external providers and courses to address the needs of staff.

Supporting Users - Children/Young People/Adults

- Know how safeguarding issues can affect people socially, emotionally and educationally, and support other staff to understand this.
- Encourage a culture of listening to children/young people and taking account of their wishes and feelings.
- Foster an environment in which users feel able to share any problems or concerns that they have related to safeguarding.
- Identify and implement measures to ensure that users who may struggle to communicate are able to share their concerns and problems.

Managing Referrals and Record Keeping:

- Keep detailed and accurate records as required to fulfil the role of designated safeguarding lead effectively. Ensure that all records related to child protection and safeguarding are stored securely and confidentially and can only be accessed by those who need them.
- Refer cases of potential abuse and neglect to the local authority in line with local and national protocols.
- Make referrals to the police when there is the possibility that a crime may have been committed.
- Ensure that referrals are made to the Channel programme where there are concerns about radicalisation.

- Use our procedures to manage any allegations against staff and volunteers appropriately.
- Make referrals to the Disclosure and Barring Service when a member of staff has been dismissed due to posing a risk of harm to a child.
- Make referrals to the Local Authority Designated Officer (LADO) in cases where there is a concern or allegation about a staff member.
- Understand the implications of the Data Protection Act 2018 and the UK Data Protection Regulation (GDPR) and offer staff training on this when required.
- Understand and support others to follow GROVE procedures when recording concerns and keeping records.

All Staff:

- All staff will sign a declaration at the beginning of their employment and annually thereafter (or in January, whichever comes sooner) to state that they have read all necessary documentation, understood their duty to safeguard children, young people and adults and will comply with GROVE's policies and procedures
- As part of this, all staff agree to comply with:
 - Part 1 of Keeping Children Safe in Education (KCSIE).
 - Annex B of KCSIE (about specific safeguarding issues).
 - Our policies:
 - This Child Protection and Safeguarding Policy summary
 - Online Safety
 - Staff Code of Conduct
 - User Code of Conduct
 - Safer Recruitment
 - Photography and Sharing Images
 - Data Protection
 - Equality, Diversity and Inclusion
 - Allegations Against Staff and Whistleblowing
 - Complaints
 - Our procedures: Overview as follows:
 - What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals
 - The importance of reassuring victims that they are being taken seriously and that they will be supported
 - The importance of never promising confidentiality to a user as it might be necessary to share information with others to keep them safe. Staff should note that:
 - the Data Protection Act (DPA) 2018 and UK GDPR does not prevent the sharing of information if this is necessary to keep children safe;
 - concerns about sharing information should not compromise the process of protecting children, young people and adults from harm.
 - All GROVE induction, training, supervision, quality assurance and support requirements

Training:

The **DSL** should undergo training to provide them with the knowledge and skills required to carry out the role and this should be updated at least every two years. This must include Prevent awareness and safer recruitment training.

New staff will undergo an *Induction* that will help them understand their responsibilities and have the knowledge, skills and confidence to: *Recognise, Respond, Report, Record, Refer* any abuse, neglect or other allegations and / or any concerns relating to the welfare of a child, young person or adult. This will include all areas noted in policy and procedure and will take place before the member of staff has direct contact with any user.

All staff will receive appropriate, regularly updated safeguarding and child protection training. This will be delivered through staff updates, 121 meetings and formal training as required.

Recognise, Respond, Report, Record, Refer

5. SEN, Disability and Mental Health Difficulties:

GROVE NEURODIVERGENT MENTORING & EDUCATION LTD
Company Number: 14550180
Registered Address: 86-90 Paul Street, London, England, EC2A 4NE.

SEND

(Source - [Children with special educational needs and disabilities \(SEND\) | NSPCC Learning](#))

GROVE staff recognise that disabled children and young people are at an increased risk of being abused compared with their non-disabled peers (Jones et al, 2012) and are also less likely to receive the protection and support they need when they have been abused (Taylor et al, 2014).

Adults who work with children and young people with SEND should be aware of the additional needs children may have that could mean they are more vulnerable to abuse and/or less able to speak out if something isn't right.

Some children may be vulnerable because they:

- have additional communication needs
- they do not understand that what is happening to them is abuse
- need intimate care or are isolated from others
- are dependent on adults for care.

The online world has opened up many opportunities for children with SEND and can be a positive place where they can chat to friends, play games or find support.

However, children with SEND can be particularly vulnerable to [online grooming](#), especially being manipulated by somebody they know (Katz, El Asam and Internet Matters, 2019).

Getting to know a child or young person with SEND and finding the best way to communicate with them is a positive way of building a child's self-esteem. This can show the child that there is someone they can trust and communicate with and help them feel confident about letting someone know if they experience something that makes them feel uncomfortable.

GROVE staff are suitability trained so wherever possible we do not mistake the indicators of harm, neglect and/or abuse as signs of a child or young person's SEND.

Mental Health, Self-harm and Suicide

(Source - <https://learning.nspcc.org.uk/child-health-development/child-mental-health>)

In **England** the Department for Education (DfE)'s [statutory guidance for schools](#), highlights that child mental health problems may be an indicator that a child has experienced abuse or neglect.

GROVE offers mentoring for wellbeing **not** mental health support or therapeutic service. This must be clearly communicated to users in order to ensure the GROVE service chosen is appropriate for need. Parents will be required to sign a Parental Agreement prior to the service beginning in acknowledgement.

Using aspects of the Childline continuum as a *guide (bearing in mind this is not necessarily entirely transferable to neurodivergent CYP)* if staff feel that the child or young person is unwell or in crisis, or is in any other way concerned that we are not able to provide the child or young person with appropriate service and/or support then GROVE reserves the right to withdraw our offer of service without notice. Please see our Booking Terms and Conditions.

It's important to remember that a person's mental health changes continuously – so staff will refer to this continuum, their own experience and their 'gut' instinct regularly.

Unwell

- Struggles to access and/or engage with services
- May have suicidal thoughts
- Relies on unhealthy coping strategies
- May already have a mental health diagnosis

In crisis

- Has made recent suicide attempts
- Mental health symptoms are unmanageable
- Has escalating self-harming behaviours

Suicide and Self Harm

(Source - [Overview | Self-harm: assessment, management and preventing recurrence | Guidance | NICE](#) and [7.1.17 Suicide and Self Harm Policy \(proceduresonline.com\)](#))

In this guideline, self-harm is defined as intentional self-poisoning or injury, irrespective of the apparent purpose.

Although acts of self-harm and attempted suicide do not necessarily involve an intention to die, there is a strong association

between self-harm, attempted suicide and subsequent death by suicide. Self-harm is always a sign of something being seriously wrong. Every child or young person who self-harms must be taken seriously and GROVE's CP and Safeguarding Procedure must be followed.

With the best interest of the child receiving the right care, support and service in this instance, GROVE reserves the right to withdraw our offer of service without notice. Please see our Terms and Conditions.

Identifying Factors Indicating Risks for Potential and Actual Harm

Factors which indicate risk of self-harm or suicide include:

- Previous threats, attempts or acts of self-harm or suicide;
- Preoccupation with or idealisation of self-harm or suicide;
- History of self-harm or suicide within the family;
- Ongoing and presenting psychological or emotional functioning, including marked changes in presentation such as depression, mood deterioration (or elevation), high levels of anxiety or unrest, impulsivity;
- Psychological and psychiatric history;
- Stressors present in a child or young person's life, including current events and occurrences;
- Lack of individual coping strategies and internal mechanisms to deal with distressing or traumatic events;
- Withdrawal, isolation, separation or alienation from networks such as family, peers, social groups and school;
- Excessive involvement in high risk activities such as reckless actions endangering life, substance use etc.;
- At discharge from a Psychiatric inpatient unit services.

Identifying the Opportunities for Potential and Actual Harm

Opportunities for potential and actual harm include:

- Whether there is a plan to self-harm or suicide;
- Where there are means available to carry out self-harm or suicide;
- A significant event or incident occurred with which the child has not coped well with or, in the past has self-harmed as a response to such an event;
- Other factors present which could increase the possibility or desire to follow through with self-harm or suicide, such as access to substances of drugs, involvement with others who self-harm;
- Lack of or reduced contact and monitoring from regular supports;
- Comments indicating an intention to self-harm or suicide.

6. Safeguarding Children from Black, Asian and Minoritised Ethnic Communities

(Source - [Safeguarding children from Black, Asian and minoritised ethnic communities | NSPCC Learning](#))

Many children and young people who come from Black, Asian and minoritised ethnic communities experience racism, bias, stereotyping or cultural misunderstanding as they grow up. It might happen at an individual, institutional or societal level and might be displayed consciously or unconsciously.

This can result in some children being more likely to come to the attention of child protection services, while other children are less likely to receive effective support (Nuffield Foundation, 2020).

When we talk about people from Black, Asian and minoritised ethnic communities we're referring to a wide range of people from a variety of backgrounds with different individual experiences, including different experiences of racism. This includes groups such as Gypsy, Traveller and Roma communities.

To make sure children from Black, Asian and minoritised ethnic communities get the help and support they need, the adults working or volunteering with them and their families need to:

- understand the challenges they face
- build trusting relationships
- take appropriate action to help keep children safe
- use a strength-based approach to empower parents and carers from Black, Asian and minoritised ethnic communities to take steps to keep their children safe.

Understanding racism, bias and stereotypes

Everyone has beliefs and prejudices about other people that are formed with or without our conscious awareness.

Unconscious bias might take the form of:

- racist stereotypes
- confirmation bias (seeking or favouring information that confirms your existing beliefs)
- judging people according to first impressions.

This might result in people making harmful generalisations about specific communities, or generalising all ethnic minorities as having similar traits, practices and beliefs. This in turn is likely to result in children and families not receiving the appropriate level of support and protection.

Unconscious bias

If adults working or volunteering with children are unaware that they have unconscious bias or do not act to mitigate it, this may have a negative impact on their ability to identify and respond appropriately to child abuse (IICSA, 2020).

Unconscious bias might also lead practitioners to interpret behaviour differently depending on the ethnicity of the person displaying it. For instance, if a child from a Black, Asian and minoritised ethnic communities shows fear around a family member, this may be interpreted as a cultural expression of respect rather than an indicator of abuse (SCRA, 2017).

Practitioners might also have unconscious bias about who experiences different types of abuse, for example by connecting specific abuse types with specific groups of people. Without acknowledging and challenging these perceptions, practitioners might overlook the risk to children who do not fit the stereotype.

Adultification

Adultification is a form of bias where children from Black, Asian and minoritised ethnic communities are perceived as being more 'streetwise', more 'grown up', less innocent and less vulnerable than other children. This particularly affects Black children, who might be viewed primarily as a threat rather than as a child who needs support (Davis 2022; Davis and Marsh, 2020; Georgetown Law Center on Poverty and Inequality, 2019).

Children who have been adultified might also be perceived as having more understanding of their actions and the consequences of their actions. For example, an analysis of case reviews found that practitioners assumed Black boys who were involved in gangs would be able to protect themselves from harm, even after they had been reported missing from home or care. This resulted in the practitioners not acting to protect the boys from sexual exploitation, youth violence and drug and alcohol misuse (Bernard and Harris, 2019).

Overlooking child protection concerns

Having conscious or unconscious bias can lead to professionals not taking child protection concerns about children from Black, Asian and minoritised ethnic communities as seriously as they might do for children from other communities. Professionals might dismiss certain behaviours or practices as being part of that community's culture and as a result not take the necessary protective action (IICSA, 2020).

Some practitioners might worry about being perceived as culturally insensitive or racist if they raise concerns about children in Black, Asian and minoritised ethnic communities. This can also lead to them ignoring child protection concerns (IICSA, 2020; SCRA, 2017).

Criminal justice system

Data shows that Black and mixed-race children are disproportionately represented within the youth justice system (Ministry of Justice and Youth Justice Board for England and Wales, 2021).

There are many complex reasons for this disparity between groups of children (Lammy Review, 2017). One reason might be that Black and mixed-race children are sometimes adultified and held to a more mature standard of behaviour than their peers. This might lead to children receiving a criminal justice response from the adults around them, rather than a child protection response (Davis and Marsh, 2020).

There are higher than average rates of school exclusion amongst children from some communities – particularly those from Black Caribbean, Gypsy, Traveller and Roma backgrounds; whilst there are lower than average rates amongst other communities. These include Chinese, Indian and Bangladeshi communities (Department for Education (DfE), 2020). Being excluded from school can lead to long-term negative outcomes for a child, including:

- criminal exploitation
- exposure to anti-social behaviour
- mental health issues

- behavioural issues (SecEd, 2018).

Anti-discriminatory practice

There are steps you can take to mitigate conscious and unconscious bias.

Make sure the needs of each individual child remain paramount. All children are vulnerable and need protection and support.

Improving communication

All children and young people can find it hard to tell someone if something isn't right. But for children and adults from Black, Asian and minoritised ethnic communities there may be additional barriers to asking for help.

Fear of speaking out

Speaking out about experiencing abuse doesn't always lead to getting the necessary support. Some adults who experienced sexual abuse in childhood have reported being shunned by their communities after disclosing the abuse. The risk of being cut off from family and support networks can deter children from asking for help (IICSA, 2020).

Children might also worry that they won't be believed or will be blamed for the abuse.

Honour and reputation

Some communities place high importance on female honour, linked to virginity and marriage. Girls who have been sexually abused might worry that family and community members would consider them to be "damaged", or that they will be blamed for behaving in a way that is perceived to be immodest or provocative.

Boys might feel ashamed if their culture places value on male strength, or has a strong belief that only girls experience sexual abuse. Some adults who experienced sexual abuse in childhood have reported that they felt unable to speak out about their experiences because they felt they needed to uphold their family's honour (IICSA, 2020).

Children may also be worried that speaking out about abuse will result in their community's reputation being damaged. This may be because they have experienced racist stereotyping in the past (IICSA, 2020), or because there is a strong sense of honour in their community (Community Care, 2020a).

In any community, people might believe that problems should be dealt with in the community or their families. This can make people less likely to report concerns about abuse to child protection services and feel wary about bringing in 'outsiders' such as the police.

Taboos around sex and relationships

Within some communities and cultures, there are taboos around discussing sex, relationships and abuse, either within families or the wider community. This might include topics such as:

- puberty and periods
- what healthy relationships look like
- anything related to sex or sexual relationships.

Not all communities have the language to describe sexual abuse or the language they use might not distinguish between consensual sexual activity and abuse.

If these issues are not discussed openly, children might have less understanding of what is abuse and what is not. They might also feel less able to speak out if something happens to them they're not comfortable with.

Adults who have been raised in communities where sex, relationships and abuse aren't spoken about might also be unaware of how to identify or raise concerns about abuse.

Different perceptions about abuse

Some communities may have different perceptions of what constitutes child abuse. Children may not realise they are being abused, for example if they are growing up in a culture that routinely uses physical punishment. Or they may feel that there is no point in speaking out because the adults around them are unlikely to stop the abuse.

Adults might not realise some practices are illegal in the UK, particularly if their culture considers that practice to be protective. An example of this is the harmful practice of breast ironing or breast flattening, a practice which aims to delay the development of girls' breasts to ostensibly protect them from harassment, rape, abduction and early forced marriage and keep them in education (National FGM Centre 2021).

Cultural awareness

Being aware of different cultures can help practitioners identify and understand risks to children's safety. But focusing too much

on community-specific risks might mean overlooking other forms of abuse and neglect. Keep an open and inquisitive mind. Don't compare their culture to other cultures or your own. Ways to do this can include:

- acknowledging and challenging any preconceptions you have about the community you are working with
- asking about the community's cultural traditions and values

7. LGBTQIA+ Children and Young People

(Source - [Safeguarding LGBTQ+ children and young people | NSPCC Learning](#))

Best practice for protecting LGBTQIA+ children and young people

All children and young people have the right to be protected and kept safe from abuse and neglect.

LGBTQIA+ children and young people face the same risks as all children and young people, but they are at greater risk of some types of abuse. For example, they might experience homophobic, biphobic or transphobic bullying or hate crime. They might also be more vulnerable to or at greater risk of sexual abuse, online abuse or sexual exploitation (Barnardo's and Fox, 2016; McGeeney et al, 2017; Xu and Zheng, 2014).

Adults who work with LGBTQIA+ children and young people need to understand the challenges they might experience and know what action to take to support and help keep them safe.

Adversities faced by LGBTQIA+ children and young people

People's perceptions of, or ideas about, LGBTQIA+ young people's identity can make children more vulnerable to negative experiences or interactions. These might include:

- experiencing homophobia, biphobia and transphobia (The Children's Society, Victim Support and National Police Chiefs Council, 2018; LGBT Health & Wellbeing et al, 2018; McDermott, Hughes and Rawlings, 2018; Scottish Government, 2021)
- feeling the pressure of sexual and gender norms (McDermott, Hughes and Rawlings, 2018; Scottish Government, 2021)
- having to manage their sexual and gender identity across different life areas (for example, coming out at school but not at home) (McDermott, Hughes and Rawlings, 2018)
- feeling isolated or 'different' from their family and friends (The Children's Society, Victim Support and National Police Chiefs Council, 2018; LGBT Health & Wellbeing et al, 2018)
- feeling like they can't express their identity because they're worried about people's responses (LGBT Health & Wellbeing et al, 2018)
- having complicated or negative feelings about their gender identity or sexuality (McDermott, Hughes and Rawlings, 2018)
- experiencing gender dysphoria (NHS, 2021).

Homelessness

LGBTQIA+ young people are more likely to become homeless than their non- LGBTQIA+ peers. This might be because of:

- parental rejection
- being subject to physical, emotional or sexual abuse from family members
- family violence

(Albert Kennedy Trust (AKT), 2015).

If they are homeless, LGBTQIA+ young people are more likely to experience targeted violence and be exposed to sexual exploitation. For example, perpetrators might offer a child a safe space to stay in order to sexually exploit or abuse them (The Children's Society, Victim Support and National Police Chiefs' Council, 2018).

Mental health

Puberty can be a distressing and sometimes traumatic time for LGBTQIA+ children and young people as their body and hormones start to change. They might start to have new or confusing feelings about their gender or sexuality. This can be particularly distressing if young people don't have anyone to talk about things with or don't feel supported.

Research suggests that LGBTQIA+ children and young people might be at higher risk than their non-LGBTQ+ peers of:

- self-harm
- experiencing suicidal thoughts and feelings
- anxiety

- depression

(McDermott, Hughes and Rawlings, 2018; LGBT Health & Wellbeing, Scottish Trans, Equality Network, LGBT Youth Scotland and Stonewall Scotland, 2018; Becerra-Culqui, 2018).

Isolation or barriers to speaking out

There are some factors that might mean LGBTQIA+ children and young people feel less able to speak out about any worries or negative experiences they're having.

Barriers include:

- worrying that telling someone will 'out' them before they're ready
- fearing that it will make the bullying or abuse worse
- thinking no one will believe them
- feeling they are to blame for what they're experiencing
- worrying that adults will think their gender identity or sexuality is to blame for their experience of abuse

(Bradlow et al, 2017; The Children's Society, Victim Support and National Police Chiefs Council, 2018; Stonewall and Childnet International, 2021).

Young people who are questioning or exploring their sexuality or gender identity might have confusing or difficult feelings. They might worry they will face discrimination if they come out or not feel able to talk to anyone about what they're going through. All of this can cause mental distress (Becerra-Culqui et al, 2018).

Risks of harm

Evidence suggests that LGBTQIA+ children and young people might be at increased risk of some forms of harm.

Child sexual exploitation

LGBTQIA+ relationships are underrepresented in educational resources and the media (Barnardo's and Fox, 2016). This means there are fewer examples of relevant, healthy relationships available to LGBTQIA+ young people. If LGBTQIA+ young people are not taught about healthy and unhealthy relationships, it might be easier for an abuser to groom them into believing an abusive relationship is normal.

If LGBTQIA+ young people are unable to get information about sex and relationships from school or family, they might seek advice and support from people in adult spaces, such as gay clubs. This is particularly true of young people who live in rural areas or in communities where their gender identity or sexuality is not accepted. Adult spaces don't have the same safeguarding and child protection measures in place as spaces specifically for children. Children might be pressured or coerced into doing something they don't want to do, particularly if they are already isolated and don't have anywhere else to turn for support (Barnardo's and Fox, 2016).

The adults around a child can sometimes assume that it's normal for LGBTQIA+ young people to have sex at a younger age as part of exploring their identity. This means the adults might not consider being involved in underage sexual activity as a possible sign of abuse, and do not take appropriate action to protect the child. Similarly, professionals might not always consider the possibility that an adult woman is sexually exploiting a girl (Barnardo's and Fox, 2016).

Online abuse

The internet can be a great place of advice, support and community for young LGBTQIA+ people. However, there are also risks associated with using the internet.

LGBTQIA+ children might use adult dating apps to meet other LGBTQIA+ people, especially if they can't find inclusive offline spaces or communities nearby. These apps are designed for adults and are not moderated in the same way as platforms designed specifically for children. This means the young people using them might encounter sexual content which could be harmful, and are likely to come into contact with adults who are looking for a sexual relationship (Internet Matters, 2021). There is some evidence to suggest that LGBTQIA+ children and young people are more likely to meet a partner or ask someone out online (McGeeney et al, 2017). The research suggests this could be because young people find it hard to meet other openly LGBTQIA+ people in their community, or because they don't want to come out to people in their offline lives (McGeeney et al, 2017). This research also showed that gay and lesbian young people were significantly more likely to meet up with someone offline who they had first met online and who was not who they said they were (McGeeney et al, 2017).

Online grooming could happen to any child or young person. But if an LGBTQIA+ child or young person hasn't come out, or feels

that their gender identity or sexuality needs to be kept secret, perpetrators can take advantage of this to prevent the child from telling anyone about the relationship or to coerce them into meeting offline without telling anyone else.

Any young person might become involved in sending or receiving sexual photos or messages online. They might do this consensually, or they could feel pressured by their peers or adults. Once an image is shared online, young people have no control over how other people might use it. Some adults online might target LGBTQ+ young people to groom or blackmail them into sending explicit images or videos of themselves (Internet Matters, 2021).

Children and young people might also encounter non-sexual harmful content on the internet.

They might seek information about a range of LGBTQIA+ issues online, particularly if they don't have any other sources of information. While doing so, they might come across inaccurate material, hate comments or content that isn't age appropriate. All of these can cause children distress (Government Equalities Office, 2018; Ofsted and Brown, 2021).

Children might see anti-LGBTQ+ posts or homophobic, biphobic and transphobic comments even if they aren't specifically looking for information about LGBTQIA+ issues. These can be distressing whether or not the child or young person is directly being targeted (Internet Matters, 2021).

Bullying

Homophobic, biphobic and transphobic (HBT) bullying is based on prejudice or negative attitudes about gay, lesbian bisexual or transgender people. This can include name calling, using offensive language and negative stereotyping. Bullying can happen anywhere.

HBT bullying can affect children who have come out as LGBTQIA+, who are questioning their gender identity or sexuality or who don't conform to gender stereotypes and are seen as 'different' (Scottish Government, 2021). It might also affect children and young people who have LGBTQIA+ family members.

Some children have reported experiencing HBT bullying, verbal assault and physical assault in school because of their gender identity or sexuality. This can leave them feeling unsafe in school environments (Government Equalities Office, 2018; Ofsted, 2021; Scottish Government, 2021).

Children and young people who experience HBT bullying can be more likely to have suicidal thoughts and feelings, or self-harm (McDermott, Hughes and Rawlings, 2017).

Taking an intersectional approach

LGBTQIA+ children, like all children, have diverse identities. As well as experiencing prejudice or bias related to their gender identity or sexuality, they might experience challenges relating to other parts of their identity, such as:

- ethnicity
- disability
- mental health
- having been in care
- where they live, how much money they have and how much access they have to education.

The way these challenges interact is known as intersectionality.

For example, a child may be growing up in a culture which does not accept their sexuality or gender identity. It can be difficult for children to cope with this and it can have a negative impact on their welfare.

GROVE staff recognise the additional risks and vulnerability factors for LGBTQIA+ children and young people. We are aware that LGBTQIA+ children and young people might not want to come out to everyone in their life. Sharing a child or young person's gender identity or sexuality might put them at extra risk. We will only share information about a child or young person's sexuality or gender identity if they give you permission, or if it's relevant to a child protection concern.

For example, we might have to tell someone about a young person's sexuality or gender identity if:

- they are experiencing homophobic, biphobic or transphobic bullying

- they are using adult dating apps
- there is a concern they might have been groomed or coerced into a sexual relationship
- there is a concern they might be experiencing sexual abuse or exploitation
- they are experiencing or are at risk of homelessness because their family are unsupportive of their gender identity or sexuality

8. Looked After Children

(Source - [Looked after children | NSPCC Learning](#))

A child who has been in the care of their local authority for more than 24 hours is known as a looked after child. Looked after children are also often referred to as children in care, a term which many children and young people prefer.

Each UK nation has a slightly different definition of a looked after child and follows its own legislation, policy and guidance. But in general, looked after children are:

- living with foster parents
- living in a residential children's home or
- living in residential settings like schools or secure units.

Scotland's definition also includes children under a supervision requirement order. This means that many of the looked after children in Scotland are still living at home, but with regular contact from social services.

There are a variety of reasons why children and young people enter care.

- The child's parents might have agreed to this – for example, if they are too unwell to look after their child or if their child has a disability and needs respite care.
- The child could be an unaccompanied asylum seeker, with no responsible adult to care for them.
- Children's services may have intervened because they felt the child was at significant risk of harm. If this is the case the child is usually the subject of a court-made legal order.

A child stops being looked after when they are adopted, return home or turn 18. However local authorities in all the nations of the UK are required to support children leaving care at 18 until they are at least 21. This may involve them continuing to live with their foster family.

Most children in care say that their experiences are good and that it was the right choice for them (Biehal et al, 2014). But more needs to be done to ensure that all looked after children are healthy and safe, have the same opportunities as their peers and can move successfully into adulthood.

Impact of being looked after

Looked after children come from a range of different backgrounds and have varied experiences of care. Each child has their own different and specific sets of needs. However research can give us an insight into how their experiences before and during care makes them a particularly vulnerable group of young people.

GROVE staff recognise the additional risks and vulnerability factors for looked after children and young people.

9. Signs of Harm, Abuse and Neglect:

There are various types of abuse and neglect that may be experienced by children and young people. These are commonly broken down into physical, sexual and emotional abuse, and neglect. In addition, there are other variations of abuse, such as sexual exploitation, female genital mutilation and abuse associated with culture and belief. Experiencing abuse and neglect can have a serious and long-term impact on a child's wellbeing.

This section explains the different types of child abuse that users could experience, along with a definition of each. This includes

neglect, sexual abuse, physical abuse and emotional abuse.

It should be noted that the signs of abuse within this policy are intended as examples; the lists are not exhaustive. Equally, just because a child, young person or adult is demonstrating one or more of the signs indicated, it does not necessarily mean that they are being abused. GROVE staff are trained to act on any 'gut-feeling' or potential sign on the basis of 'if in doubt, refer'.

General signs of abuse

Some of the signs of abuse are the same, regardless of the type of abuse that the child is experiencing. Examples include (but are not limited to):

- changes in behaviour, such as angry outbursts, aggressive behaviour or becoming withdrawn or anxious;
- changes in eating habits;
- sleep problems or experiencing nightmares;
- continence problems, such as bed-wetting or soiling themselves;
- appearing afraid of particular individuals or making excuses to avoid people;
- self-harming;
- suicidal thoughts;
- knowing about topics and issues that are not appropriate for their age;
- not receiving adequate or timely medical care or treatment for injuries;
- frequent absences from school;
- lacking social skills and/or having few friends;
- running away from home or going missing.

Neglect

Neglect is the failure to meet a child's basic needs. Neglect is the most common form of child abuse and often takes place at the same time as other types of abuse.

Neglect can be difficult to recognise but it is important to be aware of and act on any indicators of neglect. Examples include a failure to:

- provide adequate food, clothing and shelter;
- receive appropriate medical and dental care;
- ensure that a child is accessing regular education;
- provide supervision that is appropriate to their age and stage of development;
- meet their emotional needs – for example, to feel safe and loved.
- The potential signs of neglect include (but are not limited to):
- being unclean or 'smelly';
- being hungry frequently;
- losing weight or being underweight;
- wearing inappropriate clothing;
- reports of a child being left alone or unsupervised for a period of time that is unsuitable for their age or stage of development;
- untreated injuries, medical conditions or dental issues;
- poor language, communication or social skills;
- not having many friends;
- regularly complaining of tiredness;
- not asking for medical help, e.g. when they have fallen over on the playground.

Physical abuse

Physical abuse is abuse that causes physical harm to a child. It may involve hitting, shaking, throwing, burning/scalding, drowning, suffocating, poisoning or otherwise. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Bruising and cuts are common on children, but it is important to view all injuries in a wider context and to be aware that some injuries may have been inflicted, rather than being accidental.

The indicators of physical abuse include (but are not limited to):

- unexplained marks or bruising, or an explanation which is inconsistent with the injury;
- multiple bruises;
- burns, e.g. from a cigarette or mirroring the shape of an object;
- scalds;
- bite marks;
- broken skin;
- physically flinching from physical contact or touch;
- not wanting to get changed.

Emotional abuse

Emotional abuse is the emotional maltreatment of a child which causes adverse effects on the child's emotional development. It may involve telling a child that they are worthless or unloved, inadequate, or making them feel that they are not valued.

Emotional abuse may also include:

- not giving the child opportunities to express their views, deliberately silencing them, or belittling what they say or how they communicate;
- age or developmentally inappropriate expectations being imposed on children that are inappropriate for their age of stage of development;
- serious bullying (including cyber-bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.
- Emotional abuse can be hard to identify due to there being no physical signs. It should be recognised that a child who appears well looked after could still be suffering from emotional abuse.

Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone. The indicators of emotional abuse may include (but are not limited to):

- rocking;
- sulking;
- hair twisting;
- being unable to play;
- experiencing sudden speech disorders;
- being fearful of making a mistake;
- being withdrawn, anxious or depressed;
- self-harm;
- being fearful of a parent being spoken to about their changes in behaviour.

Sexual abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities. It can take the form of physical contact and/or non-contact activities.

Physical contact includes assault by penetration (for example, rape or oral sex) or non-penetrative acts, such as masturbation, kissing, rubbing, and touching outside of clothing.

Non-contact activities includes children looking at, or being involved 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.

Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse can be perpetrated by men, women or other children. The sexual abuse of children by other children is a specific safeguarding issue (also known as child-on-child abuse) and there is a separate section about this later in this policy.

Upskirting The Voyeurism (Offences) Act 2019, which is commonly known as the Upskirting Act, came into force in 2019. Upskirting is where someone takes a picture under a person's clothing (not necessarily a skirt) without their permission and/or knowledge, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.

Children of any gender can be victims of sexual abuse. Any child reporting sexual abuse needs to be taken seriously and listened to. Signs of sexual abuse include (but are not limited to):

- pain or itching in the genital area;
- stomach pains;
- discomfort sitting down or walking;
- sexually transmitted diseases;
- bruising or bleeding in the genital area;
- vaginal discharge or infection;
- pregnancy;
- having inappropriate sexual knowledge for their age;
- sexual drawings or language;
- bed-wetting;
- having secrets which they say they cannot tell anyone;
- having unexplained money suddenly;
- not being allowed to have friends.

Specific Safeguarding Issues

Child Sexual Exploitation (CSE)

Child Sexual Exploitation is a form of sexual abuse. It occurs when 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 activity. An abuser will gain the trust of a child or control them through blackmail or violence.

CSE can happen in person or online. A child exploited online may be forced to:

- distribute sexual images of themselves;
- film or livestream sexual activities;
- engage in sexual conversations.

The indicators of potential CSE can include (but are not limited to):

- going missing;
- not attending school;
- having sexual knowledge that is inappropriate for their age;
- using drugs or alcohol;
- having unexpected gifts or money that they will not explain the source of;
- concerns regarding sexual health;
- becoming isolated from family and friendship groups;
- struggling with trust;
- declining emotional wellbeing.

Child Criminal Exploitation (CCE)

Child Criminal Exploitation is a form of abuse 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 criminal activity.

This can include children being involved in transporting drugs or money (county lines), working in cannabis factories, shoplifting or pickpocketing, as well as being forced or manipulated into committing crime, such as vehicle crime or threatening/committing serious violence to others. Children can be trapped in this kind of exploitation by being threatened with violence or coerced into debt. Children may also be coerced into carrying weapons, or may begin carrying a knife for protection from others.

The indicators of potential CCE can include (but are not limited to):

- going missing or travelling for unexplained reasons;
- not attending school;
- using drugs or alcohol;
- being involved with gang activity or exhibiting signs of this, such as wearing clothing/accessories or using slang associated with gangs;
- having unexpected gifts or money that they will not explain the source of;
- committing 'petty' crime, such as shoplifting;
- carrying a weapon;
- becoming isolated from family and friendship groups;
- unexplained injuries and refusal to seek medical help;
- declining emotional wellbeing.

Serious violence

Children and young people can be involved with, and be at risk from, serious violent crime. This can be linked to Child Criminal Exploitation but can also occur separately. The indicators of potential serious violent crime can include (but are not limited to):

- regular or increased absence from school;
- decline in academic performance or behaviour;
- change in friendships or relationships, often involving older individuals or groups;
- signs of self-harm;
- being involved with gang activity;
- signs of assault or unexplained injuries;

- significant change in wellbeing;
- any potential indicators of CCE.

Domestic abuse

Domestic abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional abuse. It can be an isolated incident or a series of incidents and children can be victims. They may see, hear or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse).

The indicators of potential domestic abuse can include (but are not limited to):

- becoming anxious, withdrawn or depressed;
- sleep difficulties;
- bed-wetting;
- complaining of physical symptoms, such as tummy aches;
- behavioural issues, such as aggression or behaving in a much younger manner than their actual age;
- low sense of self-worth or self-esteem;
- self-harm;
- alcohol or drug abuse.

Female Genital Mutilation (FGM)

Female Genital Mutilation involves procedures that intentionally alter/injure the female genital organs for non-medical reasons. The school understands that staff have a mandatory duty to report to the police if they believe an act of FGM has been carried out on a girl under the age of 18. Failure to do this could result in disciplinary action for staff. The signs of FGM include (but are not limited to):

- being absent from school;
- not taking part in PE lessons;
- appearing to be in pain or have restricted movements;
- regularly going to the toilet for prolonged amounts of time;
- unauthorised absence from school, especially holidays planned to countries which are known to practise FGM.

GROVE follows the Section 5B(11) of the Female Genital Mutilation Act 2003, inserted under section 74 of the [Serious Crime Act 2015](#), and specifies that if staff suspect that FGM has been carried out on a child under 18 years of age, they have a statutory duty to report this to the police. Statutory guidance on Female Genital Mutilation can be found here:

[Multi-agency statutory guidance on female genital mutilation - GOV.UK](#)

Forced marriage

It is a criminal offence to force a person to marry in England and Wales. Young men and women can be at risk in affected ethnic groups. Forced marriage is distinct from arranged marriages.

Evidence shows that the issue of forced marriage affects certain sectors of communities. It typically affects girls in the age range of 14-16 years old. However, it can affect boys. One sign of forced marriage is a lengthy absence which is often unexplained.

Any member of staff with concerns regarding forced marriage should report this immediately to the DSL, who should raise the concern with the police.

Child-on-child abuse

GROVE understands that abuse can take place from one child to another child. Child-on-child abuse can take a number of forms including (but not limited to):

- bullying, including discriminatory bullying and cyberbullying;
- physical abuse;
- sexual harassment, including online sexual harassment;
- causing someone to engage in sexual activity without consent;
- upskirting;
- consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth-produced sexual imagery).

Sexual violence and sexual harassment can occur between two or more children of any age and sex. It can occur also through a group of children sexually assaulting or sexually harassing a single child or group of children. Sexual violence and sexual harassment exist on a continuum and may overlap; they can be both physical and verbal and can occur online and/or face to face.

Staff should take a zero tolerance approach to sexual violence and sexual harassment. It is never acceptable and should not be tolerated. It should never be passed off as “banter”, “just having a laugh”, “a part of growing up” or “boys being boys”. Failure to do so can lead to a culture of unacceptable behaviour, an unsafe environment and encourage people to falsely believe that it is acceptable.

Radicalisation and extremism

The Department for Education defines extremism, radicalisation and terrorism as follows:

Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Terrorism is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

There is no single way of identifying an individual who is likely to be susceptible to a radical ideology. All GROVE staff must be aware of changes in child or young person’s behaviour which could indicate that they may be at risk. Staff should use their professional judgement in identifying users who might be at risk of radicalisation and always act proportionately and seek support if they are concerned.

The requirement for all staff, volunteers and governors to adhere to and understand their duties to prevent radicalisation is set out in the Prevent guidance which was published in 2015 and is updated regularly:

[Statutory guidance on the Prevent duty](#)

GROVE will use training to ensure that staff understand the risk and understand how to deal with these issues.

Signs of radicalisation include (but are not limited to):

- being unwilling to listen to different points of view;
- becoming obsessive about conspiracy theories;
- changes in appearance and clothing;

- converting to a new religion;
- changes in hobbies or pastimes;
- becoming secretive;
- spending a lot of time online or on the phone;
- changing friends or becoming isolated;
- showing an interest in extremist organisations;
- accessing extremist content online;
- expressing unusual views;
- making discriminatory comments;
- becoming unwilling to engage with people from different groups, religions, etc.

10. Responding, Reporting and Referring

If a member of staff is concerned about a pupil's welfare

There may be occasions when staff may suspect that a child may be at risk without unequivocal evidence.

The signs they have noticed may be due to a variety of factors and staff are encouraged and supported to ask the child if they are OK, if there is anything the child would like to talk to them about and if they can help in any way.

Staff should use open, appropriate open questions which do not lead the child in any particular direction but invite the child to talk about anything if they wish to.

Staff should follow the procedures as outlined in our CP and Safeguarding Procedure to record and refer these early concerns. The DSL will decide how to act.

In case of disclosure to a member of staff

GROVE staff will follow the procedures as outlined in our internal CP and Safeguarding Procedure. In summary, these are:

- call 999 in an emergency
- be privy to information on a need-to-know basis only
- not discuss any issues with friends or family
- at an appropriate time, tell the child that they must pass the information on to people on a 'need to know' basis only
- allow the child to speak freely
- remain calm
- give reassuring nods or words of comfort
- under no circumstances start their own investigation or ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the pupil's mother think about it; (however, it is reasonable to ask questions to clarify understanding and to support a meaningful referral if that is required, e.g. 'when did this happen', 'where did this happen?')
- tell the child what will happen next;
- report concerns to the DSL as quickly as possible (or directly to Child Services if the child has made an allegation against the DSL)
 - By telephone
 - By email if telephone contact is not possible
 - Immediately when there is evidence of physical or sexual abuse
 - In all other instances within 12 hours
- write up their conversation as soon as possible using the GROVE CPD and Safeguarding Procedure
- seek support from the DSL for yourself if they are distressed or need to debrief

Notifying parents

We will discuss any concerns about a child with their parents in the event of a concern, suspicion or disclosure.

With a child's safety and welfare at heart there may be times when we need to make a referral without consultation with parents if we believe that notifying parents could increase the risk to the child or exacerbate the problem. In this instance, advice will be sought first from Children's Social Care and the child will receive a clear and supportive explanation as to what action is being taken and why this needs to happen.

Making a referral to Children's Social Care

The DSL will make a referral to Children's Social Care (and if appropriate the Police) if it is believed that a child is suffering or is likely to suffer significant harm.

The child (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the child or create undue delay.

Keeping Children Safe in Education 2021 also emphasises that **all** staff should be aware of the process for making referrals to Children's Social Care and for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) that may follow a referral, along with the role they might be expected to play in such assessments. Please refer to our CP and Safeguarding Procedure.

Submitting child protection referrals

All child protection referrals should be made to the relevant team for where the child lives. This can be found through a postcode search:

ENGLAND [Report child abuse to a local council - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

WALES [Sign In - WLGA](#)

SCOTLAND [Report child abuse - mygov.scot](https://mygov.scot)

NORTHERN IRELAND [Local councils in Northern Ireland | nidirect](#)

If staff are ever concerned that a child is in immediate danger, they will contact the Police by dialling 999.

Staff reporting directly to child protection agencies

Staff should ordinarily follow the reporting procedures outlined in our CP and Safeguarding Procedure.

Any member of staff may therefore refer their concerns directly to Children's Social Care and/or the Police if:

- the situation is an emergency and the DSL is unavailable;
- they are convinced that a direct report is the only way to ensure the child's safety;
- for any other reason they make a judgement that a direct referral is in the best interests of the child.

In any of those circumstances, staff may make direct child protection referrals and share information without being subject of censure or disciplinary action. However, staff should inform the DSL at the earliest opportunity that they have made a direct referral unless in their judgement doing so would increase the risk of harm to the child.

During external investigation, we may:

- suspend any session until further notice; and
- suspend any staff until further notice;
- suspend any part of our services until further notice.

11. Early Help

(Source: [Early help \(or early intervention\) | NSPCC Learning](#))

Early help, also known as early intervention, is support given to a family when a problem first emerges. It can be provided at any stage in a child or young person's life.

Statutory guidance in each nation of the UK highlights the importance of providing early intervention, rather than waiting until a child or family's situation escalates (Department for Education (DfE), 2018; Department of Health, Social Services and Public Safety, 2017; Scottish Government, 2021; Wales Safeguarding Procedures Project Board, 2020).

Early help services can be delivered to parents, children or whole families, but their main focus is to improve outcomes for children. For example, services may help parents who are living in challenging circumstances provide a safe and loving environment for their child. Or, if a child is displaying risk-taking behaviour, early help practitioners might work with the child and their parents to find out the reasons for the child's behaviour and put strategies in place to help keep them safe. Providing timely support is vital. Addressing a child or family's needs early on can reduce risk factors and increase protective factors in a child's life (Early Intervention Foundation (EIF), 2021).

Protective factors can reduce risk to a child's wellbeing. They include:

- developing strong social and emotional skills
- having a strong social support network for the family – including support for good parental mental health
- income support, benefits and advice
- good community services and facilities

(EIF, 2021; Cleaver, Unell and Aldgate, 2011).

It is more effective to provide early help when problems first arise than to intervene later (DfE, 2018; EIF, 2021).

Early intervention can also prevent further problems from developing – for example, as part of a support plan for a child and their family when a child returns home from care (DfE, 2018).

Types of early help

Early help can take many forms, such as:

- home visiting programmes
- school-based programmes
- mentoring schemes

(EIF, 2021).

Early help services should be part of a continuum of support which enables practitioners to respond to the different levels of need children and families may experience (DfE, 2018). It's important that early help services are holistic, looking at the wider needs of the family and how to provide appropriate support.

Why early help is important

Early help can offer children the support needed to reach their full potential (EIF, 2021). It can improve the quality of a child's home and family life, enable them to perform better at school and support their mental health (EIF, 2021).

Research suggests that early help can:

- protect children from harm
- reduce the need for a referral to child protection services
- improve children's long-term outcomes

(Haynes et al, 2015).

Early help can also support a child to develop strengths and skills that can prepare them for adult life (EIF, 2021).

Identifying a child or young person who may benefit from early help

Signs that a child or young person may benefit from early help include:

- displaying disruptive or anti-social behaviour
- being bullied or bullying others
- having poor attendance at school
- being involved in, or at risk of, offending
- having poor general health
- having anxiety, depression or other mental health issues
- misusing drugs or alcohol
- having a particularly challenging relationship with parents or appearing to be unusually independent from their parents
- experiencing difficulties at home, such as domestic abuse, parental substance abuse or parental mental health problems

(Department for Education (DfE), 2018).

Some groups of children may be more likely to need early help than their peers. These include children who:

- have been excluded from school

- have special educational needs
- are disabled
- are in care
- are leaving or preparing to leave care
- are young carers
- are young parents (or about to become young parents)
- are experiencing housing issues

(DfE, 2018).

Recording concerns

We will record any concerns we may have about a child, to build up an overview of the child's lived experience so patterns of potentially abusive behaviour can be identified. These records will be reviewed by the DSL who will consider all the available information and decide whether a referral to the local child protection services is necessary.

How to make a referral for early help

If the DSL thinks a child may be at risk of abuse or neglect, we will follow our CP and Safeguarding Procedure immediately. If the DSL thinks the child and their family may benefit from co-ordinated support from more than one agency, we may request an early help assessment. An early help assessment is where a lead practitioner (such as a GP, family support worker, school nurse, teacher, health visitor, and/or special educational needs co-ordinator) makes an assessment of the child's needs. It can only happen with the consent of the child (if they are able to give consent) and their parent or carer.

How we will make a referral for assessment

Initially we will contact the NSPCC Helpline on [0808 800 5000](tel:08088005000) or by emailing help@nspcc.org.uk. Their trained professionals will talk with us regarding our concerns and give us expert advice. If NSPCC recommend a referral for assessment then we will contact the relevant child protection service for the user.

12. Online Safety

Please see our User Code of Conduct, Terms and Conditions, Staff Online Safety and Data Protection and Privacy policies for further information.

13. Prevent

All staff will complete Prevent training. The DSL will complete both the Awareness and Referrals training and all other staff will complete the Awareness course.

- Prevent is simply part of our safeguarding duty. It's the same as any safeguarding work that we do
- Prevent is about helping people make better choices and staying safe. The aim is to support a person that is vulnerable to being radicalised so that they are not drawn into terrorism or terrorism-related activity
- We encourage staff to trust their instinct and to complete training and understand procedures to be confident that they know what to do if they spot a concern.

14. Photography, Recording, Images

All of our online sessions are recorded and monitored for safeguarding and quality assurance purposes. The recordings are retained for as per our Privacy Policy and Data Protection Policy.

The recordings may be reviewed by GROVE's CEO for the purpose of investigating any reports/allegations of misconduct made and also for quality assurance.

These recordings may be accessed by UK law enforcement or other relevant child protection agencies or local authorities where a criminal offence or an abuse may have occurred.

All intellectual property rights and the ownership of the recordings are properties of GROVE.

Please see our Terms and Conditions, Privacy Policy, Staff and User Online Safety and Data Protection Policy for further information.

15. About Staff: Reporting a Concern About a Member of Staff, Managing Allegations Against a Member of Staff, Whistleblowing

This part of the policy has two sections covering the two levels of concerns and allegations:

1. Concerns / allegations that may meet the harm threshold.
2. Concerns / allegations that do not meet the harm threshold – referred to for the purposes of this guidance as ‘low-level concerns’.

1. Concerns or allegations that may meet the harm threshold:

This part of the guidance is about managing cases of concerns/allegations that might indicate a person would pose a risk of harm if they continue to work in their present position, or in any capacity with children. In this part (section one) of the guidance reference is made to ‘allegation’ for ease. This part of the guidance should be followed where it is alleged that anyone working for or with GROVE:

- behaved in a way that has harmed a child, or may have harmed a child and/or
- possibly committed a criminal offence against or related to a child, and/or
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children, and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

The harm test is explained in the Disclosure and Barring service Guidance: Making barring referrals to the DBS and Section 31(9) of the Children Act 1989 as amended by the Adoption and Children Act 2002. The last bullet point above includes behaviour that may have happened outside of school or college, that might make an individual unsuitable to work with children, this is known as transferable risk.

The initial response to an allegation:

Where a child has been harmed, that there may be an immediate risk of harm to a child or if the situation is an emergency, we will contact the relevant local authority children’s social care and as appropriate the police immediately.

There are two aspects to consider when an allegation is made:

1. Looking after the welfare of the child - the designated safeguarding lead (or a deputy) is responsible for ensuring that the child is not at risk and referring cases of suspected abuse to the local authority children’s social care as described previously.
2. Investigating and supporting the person subject to the allegation - the case manager should discuss with the LADO, the nature, content and context of the allegation, and agree a course of action.

When dealing with allegations, we will:

- apply common sense and judgement
- deal with allegations quickly, fairly and consistently, and
- provide effective protection for the child and support the person subject to the allegation.

Before contacting the LADO the case manager (the CEO/DSL unless the allegation is about them) will conduct basic enquiries to establish the facts to help the LADO determine whether there is any foundation to the allegation.

If there is cause to suspect a child is suffering, or is likely to suffer significant harm, a strategy discussion involving the police and/or local authority children's social care will be convened in accordance with the statutory guidance Working Together to Safeguard Children.

Where the initial discussion leads to no further action, the case manager and the LADO should:

- record the decision and justification for it, and
- agree on what information should be put in writing to the individual concerned

Where further enquiries are required to enable a decision about how to proceed, the LADO and case manager should discuss how and by whom the investigation will be undertaken. The LADO will provide advice and guidance when considering allegations against adults working with children. The LADO's role is not to investigate the allegation, but to ensure that an appropriate investigation is carried out, whether that is by the police, local authority children's social care, or a combination of these.

The case manager should monitor the progress of cases to ensure that they are dealt with as quickly as possible in a thorough and fair process. Wherever possible, the first review should take place no later than four weeks after the initial assessment. Dates for subsequent reviews, ideally at fortnightly (and no longer than monthly) intervals, should be set at the review meeting if the investigation continues.

In many cases, an inquiry can be resolved quickly and without the need for suspension. The CEO will decide on whether the individual should continue to work with GROVE, based on consultation with the LADO who will provide relevant information received from the police or local authority children's social care on whether they have any objections to the member of staff continuing to work during the investigation of the case.

Based on advice from the school or college's HR provider and/or a risk analysis drawn up with the LADO, the following alternatives should be considered by the case manager before suspending a member of staff:

- redeployment within the school or college so that the individual does not have direct contact with the child or children concerned
- providing an assistant to be present when the individual has contact with children
- redeploying to alternative work in the school or college so the individual does not have unsupervised access to children
- moving the child or children to classes where they will not come into contact with the member of staff, but this decision should only be made if it is in the best interests of the child or children concerned and takes account of their views. It should be made clear that this is not a punishment and parents have been consulted

These alternatives allow time for an informed decision regarding the suspension, this will, however, depend upon the nature of the allegation. The case manager should consider the potential permanent professional reputational damage to employees that can result from suspension where an allegation is later found to be unfounded, unsubstantiated, malicious, or false.

If immediate suspension is considered necessary, the case manager should record the rationale and justification for such a course of action. This should also include what alternatives to suspension have been considered and why they were rejected. Where it has been deemed appropriate to suspend the person, written confirmation should be given within one working day, giving as much detail as appropriate for the reasons for the suspension. It is not acceptable for an employer to leave a person who has been suspended without any support. The person should be informed at the point of their suspension who their named contact is within the organisation and provided with their contact details. Local authority children's social care or the police may give their view to the LADO but they cannot require the case manager to suspend a member of staff or remove a volunteer,

although the case manager should give appropriate weight to their views. The power to suspend is vested in the governing body or proprietor who are the employers. However, where a strategy discussion, or initial assessment, concludes that there should be enquiries by local authority children's social care, and/or an investigation by the police, the LADO should canvass police and local authority children's social care for views about whether the accused member of staff should be suspended from contact with children. Police involvement does not make it mandatory to suspend a member of staff; this decision should be taken on a case-by-case basis having undertaken a risk assessment about whether the person poses a risk of harm to children.

Supporting those involved

The welfare of a child is paramount and this will be the prime concern in terms of investigating an allegation against a person in a position of trust.

However, when an allegation or safeguarding concern is being investigated it is likely to be a very stressful experience for the adult subject to the investigation, and potentially for their family members. It is important that GROVE offers appropriate welfare support at such a time and recognises the sensitivity of the situation. Information is confidential and should not ordinarily be shared with other staff or with children or parents who are not directly involved in the investigation.

We will endeavour to:

- manage and minimise the stress caused by the allegation
- inform the individual as soon as possible, explaining the likely course of action, guided by the LADO, and the police where necessary
- advise the individual to contact their trade union representative, or a colleague for support
- appoint a named representative to keep the person informed about the progress of the case
- provide access to counselling or medical advice where appropriate. For staff in schools maintained by the local authority this may include support via the local authority's occupational health arrangements, and,
- not prevent social contact with work colleagues and friends, when staff are suspended, unless there is evidence to suggest this may prejudice the gathering of evidence.

Parents or carers of the child or children involved should be:

- formally told about the allegation as soon as possible.¹²⁸ The case manager should consult the LADO and where involved local authority children's social care and/or the police on what information can be disclosed
- kept informed about the progress of the case, only in relation to their child - no information can be shared regarding the staff member, and,
- made aware of the requirement to maintain confidentiality and unwanted publicity about any allegations made against staff whilst investigations are in progress as set out in section 141F of the Education Act 2002.

Confidentiality and information sharing

In an allegations management meeting or during the initial assessment of the case, the agencies involved should share all relevant information they have about the person who is the subject of the allegation, and about the alleged victim.

Where the police are involved, wherever possible GROVE should ask the police to obtain consent from the individuals involved to share their statements and evidence for use in the employer's disciplinary process. This should be done as their investigation proceeds and will enable the police to share relevant information without delaying the conclusion of their investigation or any court case.

Local authority children's social care should adopt a similar procedure when making enquiries to determine whether the child or children named in the allegation are in need of protection or services, so that any information obtained in the course of those enquiries which is relevant to a disciplinary case can be passed to the employer without delay.

The school and college must make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

We will subscribe to The Education Act 2011 amended the Education Act 2002, to introduce reporting restrictions. These provisions made it an offence (except in the limited circumstance expressly permitted by the legislation), for any person to

publish any material that may lead to the identification of a teacher in a school¹²⁹ who has been accused by, or on behalf of, a child from the same school (where that identification would identify the teacher as the subject of the allegation).

In deciding what information is disclosed, careful consideration should be given to the provisions of the Data Protection Act 2018, the law of confidence and, where relevant, the Human Rights Act 1998.

The reporting restrictions apply until:

- the point that the accused person is charged with a relevant offence, or
- the Secretary of State or the General Teaching Council publishes information about an investigation or decision in a disciplinary case arising from the allegation.

The reporting restrictions are disapplied if the individual to whom the restrictions apply effectively waives their right to anonymity by going public themselves or by giving their written consent for another to do so or if a court lifts the reporting restrictions in response to a request to do so.

The legislation prevents the “publication” of material by any person that may lead to the identification of the teacher who is the subject of the allegation. “Publication” includes “any speech, writing, relevant programme or other communication in whatever form, which is addressed to the public at large or any section of the public.” This means that a parent who, for example, published details of the allegation on a social networking site would be in breach of the reporting restrictions (if what was published could lead to the identification of the teacher by members of the public).

In circumstances where schools need to make parents aware about an allegation, they should make parents and others aware that there are restrictions on publishing information.

In accordance with the Authorised Professional Practice published by the College of Policing in May 2017, the police will not normally provide any information to the press or media that might identify an individual who is under investigation, unless and until the person is charged with a criminal offence. In exceptional cases where the police wish to depart from that rule, for example an appeal to trace a suspect, they must apply to a magistrates’ court to request that reporting restrictions be lifted.

The case manager should take advice from the LADO, the police and local authority children’s social care to agree the following:

- who needs to know and exactly what information can be shared
- how to manage speculation, leaks and gossip
- what, if any, information can be reasonably given to the wider community to reduce speculation and
- how to manage press interest if, and when, it should arise.

Allegation outcomes

The definitions that should be used to determine the outcome of an allegation are set out below:

Substantiated: there is sufficient evidence to prove the allegation.

Malicious: there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive or cause harm to the person subject of the allegation.

False: there is sufficient evidence to disprove the allegation.

Unsubstantiated: there is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

Unfounded: to reflect cases where there is no evidence or proper basis which supports the allegation being made.

Outcomes will range from taking no further action, to dismissal or a decision not to use the person’s services in future.

If the allegation is substantiated and:

- the person is dismissed; resigns, or otherwise ceases to provide his or her services, or
- the employer ceases to use the person's services.

In the case of a member of teaching staff at any school, sixth form college, or 16- 19 academy, the case manager must consider whether to refer the matter to the TRA to consider whether the individual should be prohibited from teaching.

There is a legal requirement for employers to make a referral to the DBS where they consider an individual has engaged in conduct that harmed (or is likely to harm) a child; or if a person otherwise poses a risk of harm to a child (paragraph 348 for further information).

Following a criminal investigation or a prosecution:

The police should inform the LADO and the employer immediately when:

- a criminal investigation and any subsequent trial is complete
- it is decided to close an investigation without charge, or
- it is decided not to continue to prosecute after the person has been charged.

In those circumstances, during the joint assessment meeting the LADO should discuss with the case manager whether any further action, including disciplinary action, is appropriate and, if so, how to proceed. The information provided by the police and/or local authority children's social care should also inform that decision. The options will depend on the circumstances of the case and the consideration should take into account the result of the police investigation or the trial, as well as the different standard of proof required in disciplinary and criminal proceedings.

Unsubstantiated, unfounded, false or malicious allegations:

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

If an allegation is shown to be deliberately invented or malicious, GROVE reserves the right to terminate the user's service contract with immediate effect.

Returning to work:

Where it is decided on the conclusion of a case that a person who has been suspended can return to work, the case manager should consider how best to facilitate that.

Most people will benefit from some help and support to return to work after a stressful experience. Depending on the individual's circumstances, a phased return and/or the provision of a mentor to provide assistance and support in the short term may be appropriate.

Managing the situation and exit arrangements:

'Settlement agreements' (sometimes referred to as compromise agreements), by which a person agrees to resign if the employer agrees not to pursue disciplinary action and both parties agree a form of words to be used in any future reference, should not be used, where there are allegations that indicate the person is a risk or poses a risk of harm to children or deemed not suitable to work with children. Such an agreement will not prevent a thorough police and/or school or college investigation where that is appropriate.

Investigations should not cease if the person leaves, resigns or ceases to provide their services. It is important that every effort is made to reach a conclusion in all cases of allegations bearing on the safety or welfare of children, including any in which the person concerned refuses to cooperate.

Wherever possible, the accused should be given full opportunity to answer the allegation and make representations about it. The process of recording the allegation and any supporting evidence and reaching a judgement about whether it can be substantiated or otherwise on the basis of all the information available, should continue even if the accused does not cooperate.

The person concerned should be notified of the conclusion of the allegations and sanctions that might be posed.

Other than where allegations are false, malicious, unsubstantiated, or unfounded, the outcome should be made clear when providing references to prospective employers. This is particularly important where the person moves into another position involving working with children.

It is not appropriate to reach a settlement/compromise agreement if the person subject to the allegation resigns or their services cease to be used. However, in limited circumstances schools and colleges sometimes use settlement agreements to end the employment relationship on agreed terms, but not where there is an allegation that the individual poses a risk to children.

Where a settlement/compromise agreement is used, schools and colleges should not let it prevent the employer from:

- fulfilling their legal duty to refer cases to the DBS where the referral criteria are met (non-compliance of this duty is a criminal offence), or
- providing a reference to potential employers when requested, or
- considering whether to make a referral to the TRA where the criteria are met

Record keeping

Details of allegations following an investigation that are found to have been malicious or false should be removed from personnel records unless the individual gives their consent for retention of the information.

However, for all other allegations, i.e. substantiated, unfounded and unsubstantiated it is important that the following information is kept on the file of the person accused:

- a clear and comprehensive summary of the allegation
- details of how the allegation was followed up and resolved
- a note of any action taken, decisions reached and the outcome i.e. substantiated, unfounded or unsubstantiated
- a copy provided to the person concerned, where agreed by local authority children's social care or the police, and
- a declaration on whether the information will be referred to in any future reference.

The purpose of the record is to enable accurate information to be given in response to any future request for a reference. It will provide clarification in cases where future DBS checks reveal information from the police about an allegation that did not result in a criminal conviction and it will help to prevent unnecessary re-investigation if, as sometimes happens, an allegation re-surfaces after a period of time.

We have an obligation to preserve records which contain information about allegations of sexual abuse for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry (further information can be found on the IICSA website).

All other records should be retained at least until the accused has reached normal pension age or for a period of 10 years from the date of the allegation if that is longer.

Further information: The Information Commissioner has published guidance on employment records in its Employment Practices Code and supplementary guidance, which provides some practical advice on record retention.

References:

Cases in which an allegation was found to be false, unfounded, unsubstantiated or malicious should not be included in employer references. Any repeated concerns or allegations which have all been found to be false, unfounded, unsubstantiated or malicious should also not be included in any reference.

Substantiated safeguarding allegations that meet the harm threshold should be included in references, provided that the

information is factual and does not include opinions.

Learning lessons:

Throughout the process in handling allegations and at conclusion of a case in which an allegation is substantiated, the LADO should review the circumstances of the case with the case manager to determine whether there are any improvements to be made to the school's or college's procedures to help prevent similar events in the future. This should include issues arising from any decision to suspend the member of staff, the duration of the suspension and whether or not suspension was justified. Lessons should also be learnt from the use of suspension when the individual is subsequently reinstated. The LADO and case manager should consider how future investigations of a similar nature could be carried out without suspending the individual. For all other cases, where the allegation concluded to be either, unfounded, false, malicious or unsubstantiated the case manager (and if they have been involved the LADO) should consider the facts and determine whether any lessons can be learned and if improvements can be made.

Sharing low-level concerns

Please see our CP and Safeguarding Procedure.

In summary:

- If staff have safeguarding concerns or an allegation is made about another member of staff posing a risk of harm to children, they should speak to the DSL (unless it relates to them), in which case they should speak to our Data Protection Officer
- Reports can be made verbally but should be supported by a dated and timed written account of what has been disclosed or noticed, said or done
- Allegations against a former member of staff no longer working with/for GROVE should be referred to the police.

If the concern has been raised via a third party, CEO/DSL should collect as much evidence as possible by speaking:

- directly to the person who raised the concern, unless it has been raised anonymously, and
- to the individual involved and any witnesses.

The information collected will help them to categorise the type of behaviour and determine what further action may need to be taken. This information needs to be recorded in writing along with the rationale for their decisions and action taken.

Non recent allegations:

Where an adult makes an allegation that they were abused as a child, the individual should be advised to report the allegation to the police. Non recent allegations made by a child, should be reported to the LADO in line with the local authority's procedures for dealing with non-recent allegations. The LADO will coordinate with local authority children social care and the police. Abuse can be reported no matter how long ago it happened.

2: Concerns or allegations that do not meet the harm threshold:

Low-level concerns

Concerns about all adults working with or for GROVE will be dealt with promptly and appropriately.

We endeavour to create a culture in which all concerns about adults are shared responsibly and with the right person, recorded and dealt with appropriately.

If implemented correctly, this should:

- enable us to identify inappropriate, problematic or concerning behaviour early
- minimise the risk of abuse, and
- ensure that adults working for/with GROVE are clear about professional boundaries and act within these boundaries,

and in accordance with our ethos and values.

What is a low-level concern?

The term 'low-level' concern does not mean that it is insignificant. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' - that an adult working in or on behalf of the school or college may have acted in a way that:

- is inconsistent with the Staff Code of Conduct, including inappropriate conduct outside of work and
- does not meet the harm threshold or is otherwise not serious enough to consider a referral to the LADO

Such behaviour can exist on a wide spectrum, from the inadvertent or thoughtless, or behaviour that may look to be inappropriate, but might not be in specific circumstances, through to that which is ultimately intended to enable abuse.

Low-level concerns may arise in several ways and from a number of sources. For example: suspicion; complaint; or disclosure made by a child, parent or other adult within or outside of the organisation; or as a result of vetting checks undertaken.

It is crucial that all low-level concerns are shared responsibly with the right person and recorded and dealt with appropriately. Ensuring they are dealt with effectively should also protect those working in or on behalf of schools and colleges from becoming the subject of potential false low-level concerns or misunderstandings.

We will:

- ensuring their staff are clear about what appropriate behaviour is, and are confident in distinguishing expected and appropriate behaviour from inappropriate, problematic or concerning behaviour, in themselves and others
- empowering staff to share any low-level safeguarding concerns
- addressing unprofessional behaviour and supporting the individual to correct it at an early stage
- handling and responding to such concerns sensitively and proportionately when they are raised, and
- helping identify any weakness our safeguarding system.

Sharing low-level concerns

Processes are covered in our internal CP and Safeguarding Procedure.

In summary:

- Share all low-level concerns initially with the DSL;
- If staff are in any doubt as to whether the information which has been shared about a member of staff as a low-level concern in fact meets the harm threshold, they should consult with their LADO;
- Self-refer, where, for example, they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards;
- Reports can be made verbally but should be supported by a dated and timed written account of what has been disclosed or noticed, said or done.

If the concern has been raised via a third party, CEO/DSL should collect as much evidence as possible by speaking:

- directly to the person who raised the concern, unless it has been raised anonymously, and
- to the individual involved and any witnesses.

The information collected will help them to categorise the type of behaviour and determine what further action may need to be taken. This information needs to be recorded in writing along with the rationale for their decisions and action taken.

Recording concerns:

All low-level concerns should be recorded in writing. The record should include details of the concern, the context in which the concern arose, and action taken. The name of the individual sharing their concerns should also be noted, if the individual wishes

to remain anonymous then that should be respected as far as reasonably possible.

These records are kept confidential, held securely and comply with the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR).

Records should be reviewed so that potential patterns of inappropriate, problematic or concerning behaviour can be identified. Where a pattern of such behaviour is identified, the CEO should decide on a course of action and where a pattern of behaviour moves from a low-level concern to meeting the harm threshold, in which case it should be referred to the LADO (as per Part 1).

Consideration should also be given to whether there are wider cultural issues that enabled the behaviour to occur and where appropriate policies could be revised, or extra training delivered to minimise the risk of it happening again.

It is for schools and colleges to decide how long they retain such information, but it is recommended that it is retained at least until the individual leaves their employment.

References:

Low-level concerns should not be included in references unless they relate to issues which would normally be included in a reference, for example, misconduct or poor performance. It follows that a low-level concern which relates exclusively to safeguarding (and not to misconduct or poor performance) should not be referred to in a reference.

Additional employers

Where there have been concerns about a member of staff and they work elsewhere in contact with children (for instance a tutor employed at a school), the CEO and/or DSL will consider the question of passing the concerns to the other employer in consultation with the LADO.

Whistleblowing: *Please see details below in conjunction with our Whistleblowing Policy*

Where staff feel unable to raise a CP&S issue with GROVE or feel that their genuine safeguarding concerns are not being addressed, the NSPCC whistleblowing advice line is available.

Staff can call 0800028 0285 – 8:00 AM to 8:00 PM, Monday to Friday and email: help@nspcc.org.uk

Alternatively, staff can write to: National Society for the Prevention of Cruelty to Children (NSPCC), Weston House, 42 Curtain Road, London EC2A 3NH.

Additional advice and guidance can be found here: <https://www.gov.uk/whistleblowing>

16. Guest Speakers/Presenters:

GROVE will occasionally welcome guest speakers/presenters to share their insights, experiences and perspectives. Our external speakers are briefed in advance with regards to our expectations of what is suitable and advised not to encourage any form of extremism or radicalisation and to adhere to our Equality, Diversity and Inclusion Policy.

Where appropriate, GROVE may request that guest speakers/presenters provide copies of materials they will use in advance of the talk.

GROVE will not permit a guest speaker to have contact with our users without the CEO present and reserves the right to request to see an Enhanced DSB.

17. Working With International Users

At present we offer group services for international users but not yet individual mentoring or tutoring.

GROVE NEURODIVERGENT MENTORING & EDUCATION LTD
Company Number: 14550180
Registered Address: 86-90 Paul Street, London, England, EC2A 4NE.

All aspects of GROVE's safeguarding policy should be followed irrespective of whether users are based in the UK or accesses services from their home overseas.

The procedure for referral through the DSL or any other staff member to local agencies in the town / country the user resides will however need to be adapted.

We will make every effort to effectively refer every case in the normal ways articulated in this policy.

Procedural adaptations:

Step 1:

- Contact the relevant foreign embassy or High Commission of the country in question:
 - London Diplomatic List: [Foreign embassies in the UK - GOV.UK \(www.gov.uk\)](http://www.gov.uk)
- Identify the relevant local / district authority / children's services / safeguarding agency involved to discuss the case concerned.

Step 2:

- Make contact with the relevant children's services / safeguarding authority.
- Request information on the intended response the relevant agency will make.
- Request updates.