



Safeguarding and Child Protection Policy **(Including Procedures for handling Allegations Against Staff)**

Evelina Hospital School is committed to providing a safe and secure environment for children, staff and visitors and promoting a climate where children and adults will feel confident about sharing any concerns which they may have about their own safety or the well-being of others. We aim to safeguard and promote the welfare of children by protecting them from maltreatment; preventing impairment of children's mental and physical health or development; ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and taking action to enable all children to have the best outcomes.

The School's Child Protection (CP) policy draws upon duties conferred by the Children Acts 1989 and 2004, The Children and Families Act 2014, S175 of the 2002 Education Act, The Education (Independent School Standards) Regulations 2014 (for independent schools), and the guidance contained in [Working Together to Safeguard Children](#), the DfE's statutory guidance [Keeping children safe in education](#), Ofsted Guidance and procedures produced by the London Safeguarding Children Board (LSCB) and the Southwark Safeguarding Children Board (SSCP). We also have regard to the advice contained in DfE's [What to do if you're worried a child is being abused](#) and [Information Sharing – Advice for practitioners](#). The policy is applicable to all on and off-site activities undertaken by pupils whilst they are the responsibility of the School.

We will ensure that those staff who work directly with children read at least Part one and those staff who do not work directly with children read either Part one or Annex A (a condensed version of Part one) of DfE guidance [Keeping children safe in education](#). This will depend on the assessment of which guidance will be most effective for the staff to safeguard and promote the welfare of children.

We will also ensure that mechanisms are in place to assist staff to understand and discharge their role and responsibilities as set out in Part one (or Annex A if appropriate) of the guidance.

POLICY AIMS

The purpose of this policy is to:

- Identify the names of responsible persons in the school and explain the purpose of their role
- Outline the role of the governing body
- Describe what should be done if anyone in the school has a concern about the safety and welfare of a child who attends the school
- Identify the particular attention that should be paid to those children who fall into a category that might be deemed "vulnerable"
- Set out expectations in respect of training
- Ensure that those responsible for recruitment are aware of how to apply safeguarding principles in employing staff
- Set out expectations of how to ensure children are safeguarded when there is potential to come into contact with non-school staff, e.g. volunteers, contractors etc.
- Outline how allegations against / concerns raised in relation to staff will be handled
- Set out expectations regarding record keeping
- Clarify how children will be kept safe through the everyday life of the school
- Outline how the implementation of this policy will be monitored

This policy is consistent with all other policies adopted by the Governors and should in particular be read in conjunction with the following policies relevant to the safety and welfare of children: The Staff Code of Conduct; Data Protection Policy; Health and Safety Policy, SEND Policy; Admissions Policy; Accessibility Plan; Equality Information and Objectives; Guys and St Thomas' Trust (GSTT) Safeguarding Policy; E-Safety Policy; Sex and Relationships Education Policy; Behaviour Policy; Positive Handling Policy and Guidelines for safe working on the ward and in dialysis.

COVID-19

We note the DfE's updated contingency framework [Managing coronavirus \(COVID-19\) in education and childcare settings](#), [Contingency framework: education and childcare settings \(publishing.service.gov.uk\)](#) which includes the new thresholds at which we might consider seeking public health advice and taking further action to reinforce measures already in place, updates to the circumstances in which local health protection teams or directors of public health might recommend us introduce some additional measures, and annexed guidance for managing cases. We note in particular the sections of the Guidance on *Safeguarding and Designated Safeguarding Leads* and *Vulnerable children and young people under Other considerations where attendance has been restricted*. We also note the Government's updated [Actions for schools during the coronavirus outbreak - GOV.UK \(www.gov.uk\)](#) and [Special schools and other specialist settings: coronavirus \(COVID-19\) - GOV.UK \(www.gov.uk\)](#)

RESPONSIBILITIES AND IMMEDIATE ACTION

Safeguarding and promoting the welfare of children in our school is the responsibility of the whole school community. All adults working in this school (including visiting staff, volunteers and students on placement) are required to report instances of actual or suspected child abuse or neglect to the Designated Safeguarding Lead (DSL) or to a Deputy Designated Safeguarding Lead (DDSL).

The Designated Safeguarding Lead is: Laura Perrett

The Deputy Designated Safeguarding Leads are: Anne Hamilton, Fiona Dyson and Simone Byrne

The Designated Safeguarding Lead, who is a member of the school's leadership team takes lead responsibility for safeguarding and child protection (including online safety) and works with the mental health leads where safeguarding concerns are linked to mental health, provides advice and support to other staff on child welfare and child protection matters, takes part in strategy discussions and inter-agency meetings, and/or supports other staff to do so, and contributes to the assessment of children. Whilst the activities of the DSL can be delegated to appropriately trained deputies, the ultimate lead responsibility for child protection remains with the DSL, this lead responsibility should not be delegated. During term time the DSL (or a deputy) will always be available (during school hours) for staff in the school to discuss any safeguarding concerns, which may include availability via phone and/or other media in exceptional circumstances.

DSL is also the first point of contact for external agencies that are pursuing Child Protection investigations and co-ordinates the school's representation at CP conferences and Core Group meetings (including the submission of written reports for conferences). When an individual concern/incident is brought to the notice of the Designated Safeguarding Lead, they will be responsible for deciding upon whether or not this should be reported to other agencies as a

safeguarding issue. Where there is any doubt as to the seriousness of this concern, or disagreement between the Designated Safeguarding Lead and the member of staff reporting the concern, advice will be sought from the Deputy Designated Safeguarding Lead, or the LA's Strategic Lead Officer for safeguarding in education services.

If a child is in immediate danger or is at risk of harm, a referral will be made to Southwark Multi Agency Safeguarding Hub ([MASH](#)) (or its equivalent in another LA if the child resides in a different LA) and/or the police immediately.

Although all staff should be aware of the process for making referrals to children's social care and for statutory assessments that may follow a referral, along with the role they might be expected to play in such assessments, the DSL (and any deputies) are most likely to have a complete safeguarding picture and be the most appropriate person to advise on the response to safeguarding concerns. The DSL or a deputy will always be available to discuss safeguarding concerns. If in exceptional circumstances, the DSL (or deputy) is not available, this should not delay appropriate action being taken. Staff should consider speaking to a member of the senior leadership team and/or take advice from local children's social care. In these circumstances, any action taken should be shared with the DSL (or deputy) as soon as is practically possible.

THE ROLE OF THE GOVERNING BODY

The Governing Body will ensure that they comply with their duties under legislation and that the policies, procedures and training in the school are effective and comply with the law at all times. Governors are expected to receive appropriate training on safeguarding at induction that is updated regularly. In addition, they should receive information (for example, via emails, e-bulletins and newsletters) on safeguarding and child protection at least annually so that they can demonstrate knowledge of their responsibilities relating to the protection of children, young people and vulnerable adults.

The Governing Body will ensure that the school contributes to inter-agency working in line with statutory guidance [Working Together to Safeguard Children](#) and that the school's safeguarding arrangements take into account the procedures and practice of the local authority as part of the inter-agency safeguarding procedures set up by the Southwark Safeguarding Children Board (SSCP).

The Governing Body has formally adopted this policy and will review its contents annually or sooner if any legislative or regulatory changes are notified to it by the designated governor or the Headteacher.

The Governing Body has nominated *Susan Rankin Reid* as a lead to take leadership responsibility for the school's safeguarding arrangements.

Concerns about and allegations of abuse made against the Headteacher will be referred to the chair of governors who will liaise with the LA's designated officer (LADO) and partner agencies and will attend any strategy meetings called in respect of such an allegation against the Headteacher. As a good practice, the Headteacher will provide termly report to the Governing Body outlining details of any safeguarding issues that have arisen during the term and the outcome of any cases identified. These reports will respect all issues of confidentiality and will not therefore identify any person(s) by name.

Also as a good practice, the nominated governor will meet on a regular basis with the DSL to monitor the school's safeguarding arrangements and both the volume and progress of cases where a concern has been raised to ensure that the school is meeting its duties in respect of safeguarding.

Types of child abuse and neglect

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children.

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

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

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

Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Safeguarding incidents and/or behaviours can be associated with factors outside the school or college and/or can occur between children outside of these environments. All staff, but especially the DSL and DDSLs will be considering whether children are at risk of abuse or exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children

can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation and serious youth violence. This is known as [Contextual Safeguarding](#), which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare.

In addition to these types of abuse and neglect, members of staff will also be alert to following specific safeguarding issues:

Mental Health

We are aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Our staff members however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that our staff members are aware of how these children's experiences can impact on their mental health, behaviour and education. If staff have a mental health concern about a child that is also a safeguarding concern, this will be shared with the DSL with a view to referring to appropriate agencies following the referral procedures. We also note the DfE's advice and guidance on [Mental Health and Behaviour in Schools](#).

Child Criminal Exploitation (CCE)

CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity in exchange for something the victim needs or wants, and/or for the financial or other advantage of the perpetrator or facilitator and/or through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.

CCE can include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country (county lines), forced to shoplift or pickpocket, or to threaten other young people. Some of the indicators of CCE are: children who appear with unexplained gifts or new possessions; children who associate with other young people involved in exploitation; children who suffer from changes in emotional well-being; children who misuse drugs and alcohol; children who go missing for periods of time or regularly come home late; and children who regularly miss school or education or do not take part in education. Any possible CCE case will be shared with the DSL with a view to referring to appropriate agencies following the referral procedures.

Child Sexual Exploitation (CSE)

CSE is a type of sexual abuse in which children are sexually exploited for money, power or status. Children or young people may be tricked into believing they are in a loving, consensual relationship. They might be invited to parties and given drugs and alcohol. They may also be groomed online. Some indicators of children being sexually exploited are: going missing for periods of time or regularly coming home late; regularly missing school or education or not taking part in education; appearing with unexplained gifts or new possessions; associating with other young people involved in exploitation; having older boyfriends or girlfriends; suffering from sexually transmitted infections; mood swings or changes in emotional wellbeing; drug and alcohol misuse and displaying

inappropriate sexualised behaviour. A child under the age of 13 is not legally capable of consenting to sex (it is statutory rape) or any other type of sexual touching. Sexual activity with a child under 16 is also an offence. It is an offence for a person to have a sexual relationship with a 16 or 17 year old if that person holds a position of trust or authority in relation to the young person. Non consensual sex is rape whatever the age of the victim. If the victim is incapacitated through drink or drugs, or the victim or his or her family has been subject to violence or the threat of it, they can not be considered to have given true consent and therefore offences may have been committed. Child sexual exploitation is therefore potentially a child protection issue for all children under the age of 18.

Further information on signs of a child's involvement in sexual exploitation is available in Home Office guidance: [Child sexual exploitation: guide for practitioners](#).

Where it comes to our notice that a child under the age of 13 is, or may be, sexually active, whether or not they are a pupil of this school, this will result in an immediate referral to Children's Services. In the case of a young person between the ages of 13 and 16, an individual risk assessment will be conducted in accordance with the [London Child Protection Procedures](#). This will determine how and when information will be shared with parents and the investigating agencies.

Consensual and non-consensual sharing of nudes and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery)

Creating and sharing nudes and semi-nudes of under-18s (including those created and shared with consent) is illegal. Sharing nudes and semi-nudes covers the incidents where:

- A person under the age of 18 creates and shares nudes and semi-nudes of themselves with a peer under the age of 18
- A person under the age of 18 shares nudes and semi-nudes created by another person under the age of 18 with a peer under the age of 18 or an adult
- A person under the age of 18 is in possession of nudes and semi-nudes created by another person under the age of 18.

When such an incident involving nudes and semi-nudes comes to a member of staff's attention, this will be shared with the designated safeguarding lead with a view to referring to appropriate agencies following the referral procedures. Further information and advice on nudes and semi-nudes is available in the non-statutory guidance produced by the UK Council for Internet Safety (UKCIS) [Sharing nudes and semi-nudes: advice for education settings working with children and young people](#). We also note the DfE's [Searching Screening and Confiscation Advice](#) for schools.

Serious violence

All staff will be made aware of indicators, which may signal that children are at risk from, or are involved with serious crime. These may include increased absence from school, a change in friendships or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs and may be at risk of criminal exploitation. We are aware that there is a range of risk factors which increase the likelihood of involvement in serious violence, such as being male, having been frequently absent or permanently excluded from school, having experienced child maltreatment and having been involved in offending, such as theft or robbery. We are also aware that fear and a need for self-protection is a key motivation for children to carry a weapon – it affords a child a feeling of power. Neighbourhoods with high levels of deprivation and social exclusion generally have the highest rates

of gun and knife crime. Children are more likely to carry knives and other weapons than guns. All staff will be aware of the associated risks and will share any concerns about or knowledge of such children immediately with the DSL. Further advice on these is available in the Home Office documents [Advice to schools and colleges on gangs and youth violence](#) and [Criminal exploitation of children and vulnerable adults: county lines](#).

County lines

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs using dedicated mobile phone lines or other form of “deal line”. This activity can happen locally as well as across the UK – no specified distance of travel is required. Children and vulnerable adults are exploited to move, store and sell drugs and money. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including schools (mainstream and special), further and higher educational institutions, pupil referral units, children’s homes and care homes. Children are also increasingly being targeted and recruited online using social media. Children can easily become trapped by this type of exploitation as county lines gangs can manufacture drug debts which need to be worked off or threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network. Some specific indicators that may be present where a child is criminally exploited through involvement in county lines are children who: go missing and are subsequently found in areas away from their home; have been the victim or perpetrator of serious violence (e.g. knife crime); are involved in receiving requests for drugs via a phone line, moving drugs, handing over and collecting money for drugs; are exposed to techniques such as ‘plugging’, where drugs are concealed internally to avoid detection; are found in accommodation that they have no connection with, often called a ‘traphouse or cuckooing’ or hotel room where there is drug activity; owe a ‘debt bond’ to their exploiters; have their bank accounts used to facilitate drug dealing.

Peer on peer / child on child abuse

Children are capable of abusing their peers. This can happen both inside and outside of school and online and take different forms, such as bullying (including cyberbullying, prejudice-based and discriminatory bullying); abuse in intimate relationships between peers; physical abuse (such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm, which may include an online element that facilitates, threatens and/or encourages physical abuse; violence, particularly pre-planned, forcing other children to use drugs or alcohol, initiation/hazing type violence and rituals), emotional abuse (blackmail or extortion, threats and intimidation) sexual violence, such as rape, assault by penetration and sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, consensual and non-consensual sharing of nudes and semi-nudes, images and/or videos (also known as sexting or youth produced sexual imagery), sexual abuse (indecent exposure, indecent touching or serious sexual assaults, forcing other children to watch pornography or take part in sexting) and sexual exploitation (causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party, having an older boyfriend/girlfriend, associating with unknown adults or other sexually exploited children, staying out overnight, photographing or videoing other children performing indecent acts) and upskirting, which typically involves taking a picture under a person’s clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification or to cause the victim humiliation, distress or alarm. Although it is more likely that girls will be victims and boys perpetrators, all peer on peer abuse is unacceptable and will be taken seriously. We do not tolerate these or pass them off as ‘banter’, ‘just having a laugh’ or ‘part of growing up’.

The school has a strong commitment to an anti-bullying policy and will consider all coercive acts and peer on peer abuse within a Child Protection context. We recognise that some pupils will sometimes negatively affect the learning and wellbeing of other pupils and their behaviour will be dealt with under the school's behaviour policy. As a school, we will minimise the risk of allegations against other pupils by providing a developmentally appropriate PSHE syllabus which develops pupils' understanding of acceptable behaviour and keeping themselves safe, having systems in place for any pupil to raise concerns with staff, knowing that they will be listened to, believed and valued, delivering targeted work on assertiveness and keeping safe to those pupils identified as being at risk, developing robust risk assessments and providing targeted work for pupils identified as being a potential risk to other pupils. It is important that all our staff recognise the indicators and signs of peer on peer abuse and know to identify it and respond to reports. Any possible peer on peer abuse case will be shared with the DSL with a view to referring to appropriate agencies following the referral procedures. We also note the DfE's advice and guidance on [Preventing and Tackling Bullying](#).

Sexual harassment, online sexual abuse and sexual violence

Sexual harassment, online sexual abuse and sexual violence (including sexualised language) is unacceptable in our school and we have appropriate sanctions in place. We understand that sexual harassment, online sexual abuse and sexual violence are happening in and around the school, even when there are no specific reports. We work actively to prevent sexual harassment, online sexual abuse and sexual violence through a whole-school approach that includes an effective behaviour policy, pastoral support and a carefully planned relationships, sex and health education curriculum, which specifically addresses sexual harassment, online abuse, sexual violence and issues of consent. We will ensure that children are taught about safeguarding risks, including online risks and will support pupils to understand what constitutes a healthy relationship, both online and offline. Our staff members have been made aware and have appropriate knowledge of *Part 5: Child on child sexual violence and sexual harassment* of DfE guidance [Keeping children safe in education](#). All pupils are supported to report concerns about harmful sexual behaviour freely. We will take concerns seriously and deal with them swiftly and appropriately and will ensure pupils are confident that this is case. We will be alert to factors that increase vulnerability or potential vulnerability such as mental ill health, domestic abuse, children with additional needs, and children from groups at greater risk of exploitation and/or of feeling unable to report abuse (for example, girls and LGBT children). We will identify and address any barriers that can prevent a pupil from making a disclosure, for example communication needs. Staff will share any concerns about or knowledge of such incidents immediately with the DSL with a view to ensuring that support systems are in place for victims. Where necessary, we will work with relevant external agencies to address the issue, which may include a referral to MASH and reporting to the police. We will keep comprehensive records of all allegations.

Sexual violence and sexual harassment between children

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. It can occur online and offline (both physically and verbally). It is more likely that girls will be the victims of sexual violence and sexual harassment and more likely it will be perpetrated by boys. Children who are victims of sexual violence and sexual harassment will find the experience stressful and distressing. This will affect their educational attainment. We will handle reports of sexual violence and harassment between children, both on and outside school premises, in line with *Part 5: Child on child sexual violence and sexual harassment* of DfE guidance [Keeping children safe in education](#) and train our staff members accordingly (including teachers delivering

relationships, sex and health education). Staff will share any concerns about or knowledge of such incidents immediately with the DSL with a view to ensuring that support systems are in place for victims (and alleged perpetrators). We take these incidents seriously and ensure that victims are protected, offered appropriate support and every effort is made to ensure their education is not disrupted. Where necessary, we will work with relevant external agencies to address the issue, which may include a referral to MASH and reporting to the police.

On one hand, we need to safeguard the victim (and the wider pupil/student body) and on the other hand provide the alleged perpetrator with an education, safeguarding support as appropriate and implement any disciplinary sanctions. Harmful sexual behaviours in young children may be (and often are) a symptom of either their own abuse or exposure to abusive practices and or materials. We will take advice, as appropriate, from children's social care, specialist sexual violence services and the police. If the alleged perpetrator moves to another educational institution (for any reason), we will make the new educational institution aware of any ongoing support needs and where appropriate, potential risks to other children and staff. The designated safeguarding lead will take responsibility to ensure this happens as well as transferring the child protection file.

Domestic abuse

Domestic violence and abuse is any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial and emotional. Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and child/adolescent to parent violence and abuse. Anyone can be a victim of domestic abuse, regardless of gender, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home. All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Experiencing domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. If members of staff have a concern about or knowledge of any domestic abuse incidents, they will share it immediately with the DSL with a view to referring to appropriate agencies. Information is available about [Domestic abuse and how to get help in Southwark](#). Southwark Council's support and service provider Solace (020 7593 1290, southwark@solacewomensaid.org) offer free and confidential support for women and men aged 16 or over who are survivors of domestic abuse.

Violence Against Women and Girls (VAWG)

VAWG is defined as any act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life. VAWG is the umbrella term which brings together multiple forms of serious violence such as crimes committed in the name of 'honour'; domestic abuse; female genital mutilation (FGM); forced marriage; sexual violence, abuse, exploitation and rape; stalking; harassment; trafficking for sexual exploitation; prostitution. If members of staff have a concern about or knowledge of any VAWG incidents, they will share it immediately with the DSL with a view to referring to appropriate agencies. We also note [Southwark's VAWG Strategy](#).

So-called 'honour-based' abuse (HBA) (including Female Genital Mutilation and Forced Marriage)

HBA includes incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrators. All forms of HBA are abuse (regardless of the motivation) and will be handled and escalated as such. If members of staff have a concern about or knowledge of a child that might be at risk of HBA or who has suffered from HBA, they will share it immediately with the DSL with a view to referring to appropriate agencies.

Female Genital Mutilation (FGM)

FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death. FGM is a deeply embedded social norm, practised by families for a variety of complex reasons. It is often thought to be essential for a girl to become a proper woman, and to be marriageable. The practice is not required by any religion. FGM is an unacceptable practice for which there is no justification. It is child abuse and a form of violence against women and girls.

FGM is prevalent in 30 countries. These are concentrated in countries around the Atlantic coast to the Horn of Africa, in areas of the Middle East like Iraq and Yemen, it has also been documented in communities in Colombia, Iran, Israel, Oman, The United Arab Emirates, The Occupied Palestinian Territories, India, Indonesia, Malaysia, Pakistan and Saudi Arabia. It has also been identified in parts of Europe, North America and Australia.

FGM is illegal in the UK. It is estimated that approximately 60,000 girls aged 0-14 were born in England and Wales to mothers who had undergone FGM and approximately 103,000 women aged 15-49 and approximately 24,000 women aged 50 and over who have migrated to England and Wales are living with the consequences of FGM. In addition, approximately 10,000 girls aged under 15 who have migrated to England and Wales are likely to have undergone FGM.

We note a new duty that was introduced on 31 October 2015 that requires teachers, which includes qualified teachers or persons who are employed or engaged to carry out teaching work in schools and other institutions to report 'known' cases of FGM in girls aged under 18 to the police. The duty applies to any teacher who is employed or engaged to carry out 'teaching work', whether or not they have qualified teacher status, in maintained schools, academies, free schools, independent schools, non-maintained special schools, sixth form colleges, 16-19 academies, relevant youth accommodation or children's homes in England. The duty does not apply in relation to suspected cases – it is limited to 'known' cases (i.e. those which are visually identified or disclosed to a professional by the victim). The duty does not apply in cases where the woman is over 18 at the time of the disclosure/discovery of FGM (even if she was under 18 when the FGM was carried out). Further information on this duty can be found in the document [Mandatory Reporting of Female Genital Mutilation – procedural information](#).

Forced marriage

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any

other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some perpetrators use perceived cultural practices as a way to coerce a person into marriage. We note The Forced Marriage Unit's [statutory guidance](#) and especially Chapter 7 on page 32 of the [Multi-agency guidelines](#), which is specifically aimed at teachers, lecturers and other members of staff within schools, colleges and universities. Any possible forced marriage case will be shared with the DSL with a view to referring to appropriate agencies following the referral procedures.

Preventing Radicalisation

The Counter-Terrorism and Security Act 2015 places a duty on specified authorities, including local authorities and childcare, education and other children's services providers, in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism ('the Prevent duty'). Young people can be exposed to extremist influences or prejudiced views, in particular those via the internet and other social media. Schools can help to protect children from extremist and violent views in the same ways that they help to safeguard children from drugs, gang violence or alcohol.

Examples of the ways in which people can be vulnerable to radicalisation and the indicators that might suggest that an individual might be vulnerable:

- Example indicators that an individual is engaged with an extremist group, cause or ideology include: spending increasing time in the company of other suspected extremists; changing their style of dress or personal appearance to accord with the group; their day-to-day behaviour becoming increasingly centred around an extremist ideology, group or cause; loss of interest in other friends and activities not associated with the extremist ideology, group or cause; possession of material or symbols associated with an extremist cause (e.g. the swastika for far right groups); attempts to recruit others to the group/cause/ideology; or communications with others that suggest identification with a group/cause/ideology.
- Example indicators that an individual has an intention to use violence or other illegal means include: clearly identifying another group as threatening what they stand for and blaming that group for all social or political ills; using insulting or derogatory names or labels for another group; speaking about the imminence of harm from the other group and the importance of action now; expressing attitudes that justify offending on behalf of the group, cause or ideology; condoning or supporting violence or harm towards others; or plotting or conspiring with others.
- Example indicators that an individual is capable of contributing directly or indirectly to an act of terrorism include: having a history of violence; being criminally versatile and using criminal networks to support extremist goals; having occupational skills that can enable acts of terrorism (such as civil engineering, pharmacology or construction); or having technical expertise that can be deployed (e.g. IT skills, knowledge of chemicals, military training or survival skills).

The examples above are not exhaustive and vulnerability may manifest itself in other ways. There is no single route to terrorism nor is there a simple profile of those who become involved. For this reason, any attempt to derive a 'profile' can be misleading. It must not be assumed that these characteristics and experiences will necessarily lead to individuals becoming terrorists, or that these indicators are the only source of information required to make an appropriate assessment about vulnerability. We see the Prevent duty as part of our school's wider safeguarding obligations and note the revised [Prevent duty guidance: for England and Wales](#), especially paragraphs 57-76.

Channel is a voluntary, confidential support programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism that uses existing collaboration between local authorities, the police, statutory partners (such as the education sector, social services, children's and youth services and offender management services) and the local community.

We will refer children at risk of harm as a result of involvement or potential involvement in extremist activity to Southwark Multi Agency Safeguarding Hub ([MASH](#)). The MASH will share the referral details of new referrals with the Prevent lead police officer and LA Prevent coordinator at the point the referral is received. The referral will then be processed through the MASH multi agency information sharing system and parallel to this the Prevent police officer will be carrying out initial screening checks. The Prevent police officer will make a referral to the Channel Practitioner if there are sufficient concerns. The individual referred will be discussed at the Channel panel to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support required. A representative from our school will attend the Channel panel if and when we are asked to help with this assessment.

Private Fostering

Private fostering is when a child under the age of 16 (under 18 if disabled) is cared for by someone who is not their parent or a 'close relative'. This is a private arrangement made between a parent and a carer, for 28 days or more. Close relatives are defined as step-parents, grandparents, brothers, sisters, uncles or aunts (whether of full blood, half blood or by marriage). Great grandparents, great aunts, great uncles and cousins are not regarded as close relatives.

The law requires that the local authority should be notified if anyone is looking after someone else's child for 28 days or more. The purpose of the council's involvement is to support the child and private foster family (and wherever possible the biological parent/s) with any issues arising. These may be practical issues such as benefits, housing, immigration or emotional issues such as keeping contact with biological family, maintaining cultural identity.

If we become aware of a child in a private fostering arrangement within Southwark, we will notify the council's Multi Agency Safeguarding Hub ([MASH](#)) by emailing MASH@southwark.gov.uk or calling **020 7525 1921**. Advice about whether there is a need to notify the council, can be obtained by calling **07539 346808** or sending an email to privatefosteringadvice@southwark.gov.uk. In the case of a non-Southwark child, we will notify the relevant LA.

REFERRALS

Where there is a safeguarding concern, we take into account the child's wishes and feelings when determining what action to take and what services to provide. We have systems in place for children to express their views and give feedback. We acknowledge that children who are affected by abuse or neglect may demonstrate their needs and distress through their words, actions, behaviour, demeanour, school work or other children. Ultimately, all our systems and processes operate with the best interests of the child at heart.

Evelina Hospital School has children on roll who are resident in a large number of local authorities across the whole of the UK and even from abroad. The children on roll are also largely first and foremost patients of the Evelina London Children's Hospital, though some may be siblings of

patients. Therefore, the external referral processes need to follow the most appropriate route for each child and their local authority.

For children in Southwark, the routine the school will follow is set out below. This will be very similar to other local authorities. However, where a child is already known to social services and has a named person within the hospital in communication with those professionals, it may be more appropriate to pass on a concern to them, rather than to contact the local authority. In each case the referral will be clear from the Concern Form and will be monitored and reviewed by the Safeguarding team in school.

REFERRALS

Referrals to services regarding concerns about a child or family typically fall into three categories:

- Early Help Services;
- Child in need - Section 17 (Children Act 1989) referrals;
- Child protection - Section 47 (Children Act 1989) referrals.

[The Southwark Safeguarding Board Multi Agency Threshold Guide](#) sets out the different levels of need and detailed guidance about how concerns within these different levels should be responded to by Southwark agencies.

Safeguarding referrals should be made to Southwark Multi Agency Safeguarding Hub (MASH) via Inter Agency [Referral Form](#) (IARF) and copied to the LA's Schools Safeguarding Coordinator. Prior to any written IARF being sent as a referral to social care, there should be a verbal consultation with the MASH social worker or manager, by calling the duty desk on 020 7525 1921, to ensure that making a referral is an appropriate action. The parent/carer will normally be contacted to obtain their consent before a referral is made. However, if the concern involves, for example alleged or suspected child sexual abuse, Honour Based Abuse, fabricated or induced illness or the Designated Safeguarding Lead has reason to believe that informing the parent at this stage might compromise the safety of the child or a staff member, nothing should be said to the parent/carer ahead of the referral, but a rationale for the decision to progress without consent should be provided with the referral.

When we make a referral, the local authority should make a decision, within one working day of a referral being made, about the type of response that is required and should let us, as the referrer know the outcome. We will follow up if this information is not forthcoming.

If, after a referral, the child's situation does not appear to be improving, we will consider following local escalation procedures to ensure that the concerns have been addressed and, most importantly, that the child's situation improves.

The [Early Help Referral Form](#) will be used to request additional early help for a family when the needs of a child are beyond the level of support that can be provided by universal services. Southwark's [Family Early Help Service](#) Duty number is 020 7525 1922, which will give four options:

- General enquiries and signposting
- Family Early Help Duty Manager for general advice including consultations around potential and new referrals and current casework
- Education, Inclusion and Attendance support and advice including all enforcement activity
- Parenting support and advice and information on parenting course and group work programmes

In circumstances where a child has an unexplained or suspicious injury that requires urgent medical attention, the CP referral process should not delay the administration of first aid or emergency medical assistance. **If a pupil is thought to be at immediate risk because of parental violence, intoxication, substance abuse, mental illness or threats to remove the child during the school day, for example, urgent Police intervention will be requested.**

Where a child sustains a physical injury or is distressed as a result of reported chastisement, or alleges that they have been chastised by the use of an implement or substance, this will immediately be reported for investigation.

All parents applying for places at this school will be informed of our safeguarding responsibilities and the existence of this policy. In situations where pupils sustain injury or are otherwise affected by an accident or incident whilst they are the responsibility of the school, parents will be notified of this as soon as possible.

Evelina Hospital School recognises the need to be alert to the risks posed by strangers or others (including the parents or carers of other pupils) who may wish to harm children in school or pupils travelling to and from school and will take all reasonable steps to lessen such risks.

VULNERABLE PUPILS

Particular vigilance will be exercised in respect of pupils who are subject to Child Protection Plan and any incidents or concerns involving these children will be reported immediately to the allocated Social Worker (and confirmed in writing; copied to the LA's Schools Safeguarding Coordinator). If the pupil in question is a Looked-After child, this will also be brought to the notice of the Designated Person with responsibility for children in public care.

Local authorities should share with our school/setting the fact a child has a social worker, and the DSL will hold and use this information so that decisions can be made in the best interests of the child's safety, welfare and educational outcomes. This will be considered as a matter of routine. There are clear powers to share this information under existing duties on both local authorities and schools and colleges to safeguard and promote the welfare of children. Where children need a social worker, this will inform decisions about safeguarding (for example, responding to unauthorised absence or missing education where there are known safeguarding risks) and about promoting welfare (for example, considering the provision of pastoral and/or academic support, alongside action by statutory services). We acknowledge that children with special educational needs or disabilities (SEND) or certain health conditions can face additional safeguarding challenges. We are aware that additional barriers can exist when recognising abuse and neglect in this group of children. This can include assumptions that indicators of abuse such as behaviour, mood and injury relate to the child's condition without further exploration; these children being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children; the potential for children with SEND or certain medical conditions being disproportionately impacted by behaviours such as bullying – without outwardly showing any signs; and communication barriers and difficulties managing or reporting these challenges. Further information can be found in the DfE's [SEND Code of Practice 0 to 25](#) and [Supporting Pupils at School with Medical Conditions](#).

If a pupil discloses that they have witnessed domestic abuse or it is suspected that they may be living in a household which is affected by family violence, this will be referred to the Designated Safeguarding Lead as a safeguarding issue.

The School also acknowledges the additional need for support and protection of children who are vulnerable by virtue of homelessness, refugee/asylum seeker status, the effects of substance abuse within the family, those who are young carers, mid-year admissions, pupils who are excluded from school and pupils where English is an additional language, particularly for very young children, using the translation service if necessary.

TRAINING

All staff members will receive appropriate safeguarding and child protection training (including online safety) at induction which is regularly updated. In addition, all staff members will receive safeguarding and child protection updates (for example, via email, e-bulletins and staff meetings), as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. All newly recruited staff (teaching and non-teaching) and Governors will be appraised of this policy and will be required to attend relevant LA or Safeguarding Board training. In addition, all new staff and temporary staff will be required to attend an induction session with the Designated Safeguarding Lead or their deputy on their first day in the school.

The Designated Safeguarding Lead (and their Deputies) will attend the LA's dedicated or another appropriate induction course and then refresher training at least every two years. The designated safeguarding lead will also undertake Prevent awareness training. In addition to this formal training, their knowledge and skills will be refreshed (for example, via e-bulletins, meeting other designated safeguarding leads or simply taking time to read and digest safeguarding developments relevant to their role). Designated staff will be encouraged to attend appropriate network meetings and to participate in the [multi-agency training programme](#) organised by the Southwark Safeguarding Children Board (SSCB).

RECRUITMENT

Evelina Hospital School is committed to the principles of safer recruitment and, as part of that, adopts recruitment procedures that help deter, reject and/or identify people who might abuse children. Safe recruitment processes are followed and all staff recruited to the school will be subject to appropriate identity, qualification and health checks. References will be verified and appropriate criminal record checks [Disclosure and Barring Service (DBS) checks], barred list checks and prohibition checks will be undertaken. The level of DBS check required, and whether a prohibition check is required, will depend on the role and duties of an applicant to work in the school, as outlined in Part three of the DfE guidance [Keeping children safe in education](#). We will also have regard to DfE's statutory guidance for schools about the employment of staff disqualified from childcare [Disqualification under the Childcare Act 2006](#), which also contains information about 'disqualification by association'. Staff should not start at the school without a relevant DBS check. Relevant members of staff and governors who are involved in recruitment will undertake the safer recruitment training. The school will ensure that at least one person on any appointment panel has undertaken safer recruitment training in line with staffing regulations.

Evelina Hospital School will only use employment agencies which can demonstrate that they positively vet their supply staff and will report the misconduct of temporary or agency staff to the agency concerned and to the LA. Staff joining Evelina Hospital School on a permanent or temporary basis will be given a copy of this policy. Additionally, the Staff Handbook confirms CP procedures within the School.

VOLUNTEERS

Any parent or other person/organisation engaged by the school to work in a voluntary capacity with pupils will be subjected to all reasonable vetting procedures and Criminal Records Checks. Under no circumstances will a volunteer of whom no checks have been made be left unsupervised or allowed to work in regulated activity.

Volunteers who on an unsupervised basis teach or look after children, or provide personal care on a one-off basis in our school are deemed to be in regulated activity. We will obtain an enhanced DBS certificate (which will include barred list information) for all volunteers who are new to working in regulated activity. Existing volunteers in regulated activity do not have to be re-checked if they have already had a DBS check (which will include barred list information). However, we may conduct a repeat DBS check (which includes barred list information) on any such volunteer should we have any concerns.

The law has removed supervised volunteers from regulated activity. There is no legal requirement to obtain DBS certificate for volunteers who are not in regulated activity and who are supervised regularly and on ongoing day to day basis by a person who is in regulated activity, but an enhanced DBS check without a barred list check may be requested following a risk assessment.

Further information on checks on volunteers can be found in part three of the DfE guidance [Keeping children safe in education](#).

Volunteers will be subject to the same code of conduct as paid employees of the school.

Voluntary sector groups that operate within this school or provide off-site services for our pupils or use school facilities will be expected to adhere to this policy or operate a policy which is compliant with the procedures adopted by the Southwark Safeguarding Children Board. Premises lettings and loans are subject to acceptance of this requirement. Where services or activities are provided separately by another body we will seek assurance that the body concerned has appropriate safeguarding and child protection policies and procedures in place (including inspecting these as needed); and ensure that there are arrangements in place to liaise with our school on these matters where appropriate. We will also ensure safeguarding requirements are included in any transfer of control agreement (i.e. lease or hire agreement), as a condition of use and occupation of the premises; and that failure to comply with this would lead to termination of the agreement.

STAFF CODE OF CONDUCT

Please refer to our Staff Code of Conduct Policy for a fuller version.

All staff (paid and voluntary) are expected to adhere to a code of conduct in respect of their contact with pupils and their families. The Teachers' Standards 2012 state that all teachers, including Headteachers, should safeguard children's wellbeing and maintain public trust in the teaching profession as part of their professional duties. We will endeavour to create and embed a culture of openness, trust and transparency in which the school's values and expected behaviour which are set out in the staff code of conduct are constantly lived, monitored and reinforced by all staff.

Children will be treated with respect and dignity and no punishment, detention, restraint, sanctions or rewards are allowed outside of those detailed in the school's Behaviour Management Policy. Whilst it would be unrealistic and undesirable to preclude all physical contact between adults and children, staff are expected to exercise caution and avoid placing themselves in a position where their actions might be open to criticism or misinterpretation. Where incidents occur which might otherwise be misconstrued, or in the exceptional circumstances where it becomes necessary to

physically restrain a pupil for their own protection or others' safety, this will be appropriately recorded and reported to the Headteacher and parents. Any physical restraint used will comply with DfE guidance [*Use of reasonable force in schools*](#).

Except in cases of emergency, first aid will only be administered by qualified First Aiders. If it is necessary for the child to remove clothing for first aid treatment, there will, wherever possible, be another adult present. If a child needs help with toileting, nappy changing or washing after soiling themselves, another adult should be present or within earshot. All first aid treatment and non-routine changing or personal care will be recorded and shared with parents/carers at the earliest opportunity.

Children requiring regular medication or therapies for long-term medical conditions will be made the subject of a Medical Plan that has been agreed with the parents and health authority.

For their own safety and protection, staff should exercise caution in situations where they are alone with pupils. Other than in formal teaching situations; for example during musical instrument tuition, the door to the room in which the 1:1 coaching, counselling or meeting is taking place should be left open. Where this is not practicable because of the need for confidentiality, another member of staff will be asked to maintain a presence nearby and a record will be kept of the circumstances of the meeting. All rooms that are used for the teaching or counselling of pupils will have clear and unobstructed glass panels in the doors.

School staff should be alert to behaviours that may cause 'low-level' concerns such as being over friendly with children, having favourites, taking photographs of children on their mobile phone, engaging with a child on a one-to-one basis in a secluded area or behind a closed door, using inappropriate sexualised, intimidating or offensive language (see below about what a 'low-level' concern is and how to share these concerns). School staff should also be alert to the possible risks that might arise from social contact with pupils outside of the school. Home visits to pupils or private tuition of pupils should only take place with the knowledge and approval of the Headteacher. Visits/telephone calls by pupils to the homes of staff members should only occur in exceptional circumstances and with the prior knowledge and approval of the Headteacher. Any unplanned contact of this nature or suspected infatuations or 'crushes' will be reported to the Headteacher. Staff supervising off-site activities or school journeys will be provided with a school mobile phone as a point of contact for parents and carers.

Staff will only use the school's digital technology resources and systems for professional purposes or for uses deemed 'reasonable' by the Head and Governing Body. Staff will only use the approved school email, school learning platform or other school approved communication systems with pupils or parents/carers and only communicate with them on appropriate school business and will not disclose their personal telephone numbers and email addresses to pupils or parents/carers. Staff will not use personal cameras (digital or otherwise) or camera phones for taking and transferring images of pupils or staff without permission and will not store images at home.

Staff should be aware of the school's whistle-blowing procedures and share immediately any disclosure or concern that relates to a member of staff with the Headteacher or one of the Designated Safeguarding Leads if the Headteacher is not available and nothing should be said to the colleague involved. It should be shared with the Chair of Governors if it relates to the Headteacher.

CONTRACTORS

Building contractors who are engaged by or on behalf of the school to undertake works on site will be made aware of this policy and the reasons for this. Long-term contractors who work regularly in the school during term time will be asked to provide their consent for DBS checks to be undertaken. These checks will be undertaken when individual risk assessments by the Leadership Team deem this to be appropriate. During major works, when large numbers of workers and sub-contractors may be on site during term time, Health and Safety risk assessments will include the potential for contractors or their employees to have direct access to pupils in non-teaching sessions. All contractors and sub-contractors will be issued with copies of the school's code of conduct for staff.

Individuals and organisations that are contracted by the school to work with or provide services to pupils will be expected to adhere to this policy and their compliance will be monitored. Any such contractors will be subject to the appropriate level of DBS check, if any such check is required (for example because the contractor is carrying out teaching or providing some type of care for or supervision of children regularly). Contractors engaging in regulated activity relating to children will require an enhanced DBS check (including children's barred list information). For all other contractors who are not engaging in regulated activity relating to children, but whose work provides them with an opportunity for regular contact with children, an enhanced DBS check (not including children's barred list information) will be required. Contractors for whom an appropriate DBS check has not been undertaken will be supervised if they will have contact with children. Under no circumstances will we allow a contractor in respect of whom no checks have been obtained to work unsupervised, or engage in regulated activity relating to children. We will determine the appropriate level of supervision depending on the circumstances. If an individual working at our school is self-employed, we will consider obtaining the DBS check, as self-employed people are not able to make an application directly to the DBS on their own account.

We will always check the identity of contractors and their staff on arrival at the school.

ALLEGATIONS MADE AGAINST / CONCERNS RAISED IN RELATION TO STAFF

Evelina Hospital School takes seriously all allegations made against and concerns raised in relation to members of staff. We will ensure that we promote an open and transparent culture in which all concerns about all adults working in or on behalf of the school are dealt with promptly and appropriately. Procedures are in place for pupils, parents and staff to share any concern that they may have about the actions of any member staff including supply teachers, volunteers and contractors. All such allegations and concerns will be brought immediately to the attention of the Headteacher or one of the Designated Safeguarding Leads if the Headteacher is not available and nothing should be said to the colleague involved. In cases where the Headteacher is the subject of the allegation or concern, they will be reported to the Chair of Governors, in order that they may activate the appropriate procedures.

There may be two levels of allegation/concern:

1. Allegations that may meet the harms threshold.
2. Allegation/concerns that do not meet the harms threshold – known as 'low level concerns'.

Allegations that may meet the harms threshold

These procedures are for managing cases of 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 the school and will be used in respect of all cases in which it is alleged that a teacher or member of staff

(including volunteers) in a school or college that provides education for children under 18 years of age including supply teachers, volunteers and contractors has:

- 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 would pose a risk of harm children and/or;
- behaved or may have behaved in a way that indicates they may not be suitable to work with children. This includes behaviour that may have happened outside of school that might make an individual unsuitable to work with children, which is known as transferable risk.

The Local Authority's Designated Officer(s) (LADO) should be informed of all such allegations that come to a school's attention and appear to meet the above criteria. Contact can also be made with LA's Schools Safeguarding Coordinator who will liaise with the LADO. Where we identify 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 Southwark Multi Agency Safeguarding Hub ([MASH](#)) (or its equivalent in another LA if the child resides in a different LA) and/or the police immediately as per the referral process contained in this policy.

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. Some rare allegations will be so serious they will require immediate intervention by children's social care services and/or police. In such cases, referral to the LADO will lead to a Strategy Meeting or Discussion being held in accordance with the DfE guidance and London Safeguarding Children Partnership ([LSCP](#)) procedures. This process will agree upon the appropriate course of action and the time-scale for investigations.

The school has a legal duty to refer to the DBS when an individual is removed from regulated activity (or would have been removed had they not left), and we believe the individual has engaged in relevant conduct in relation to children and/or adults, satisfied the harm test in relation to children and/or vulnerable adults or been cautioned or convicted of a relevant (automatic barring either with or without the right to make representations) offence. The DBS will consider whether to bar the person. Referrals will be made as soon as possible when an individual is removed from regulated activity. Where we dismiss or cease to use the services of a teacher because of serious misconduct, or might have dismissed them or ceased to use their services had they not left first, we will consider whether to refer the case to the Secretary of State, as required by law.

Concerns that do not meet the harms threshold – known as 'low level concerns'

The term 'low-level' concern does not mean that it is insignificant. It means that the behaviour towards a child does not meet the threshold set out above. 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 allegations threshold or is otherwise not considered serious enough to consider a referral to the LADO. **However, as a good practice, we will contact the LADO for consultation to ensure that we follow the appropriate and correct procedures even when the concern seems to be 'low-level'.**

All 'low-level' concerns will be brought immediately to the attention of the Headteacher or one of the Designated Safeguarding Leads if the Headteacher is not available and nothing should be said to the colleague involved. In cases where the Headteacher is the subject of the concern, they will be

reported to the Chair of Governors or chair of the management committee. The full procedures about dealing with allegations of abuse made against teachers and other staff can be found in Part Four of the DfE guidance *Keeping children safe in education*. Southwark guidance is in *Managing child protection allegations against staff* (January 2019).

Joint Chairs of Governors: Susan Rankin Reid and Rebecca Jarvis chair@evelina.southwark.sch.uk
Southwark's LADO is:

**Eva Simcock – Tel: 020 7525 0689; Mob: 07943076608; Email: Eva.Simcock@southwark.gov.uk.
LADO can also be contacted via Qau.Safeguarding@southwark.gov.uk**

There is also a duty system and one of the CP Coordinators in Quality Assurance Unit is on duty each day to deal with LADO issues when DO is not available. Duty telephone number for all LADO enquiries/referrals is **020 7525 3297**

The LA's Strategic Lead Officer for safeguarding in education services is: the Director of Education
Nina Dohel 020 7525 3252

The LA's Schools Safeguarding Coordinator is: Apo ÇAĞIRICI 020 7525 2715

We also note the [Safeguarding information for professionals and the community in Southwark](#) on Southwark Council's website.

RECORDS

Brief and accurate written notes will be kept of all incidents and child protection or child in need concerns discussions and decisions made, and the reasons for those decisions relating to individual pupils. These notes are significant especially if the incident or the concern does not lead to a referral to other agencies. This information may be shared directly with other agencies as appropriate. All contact with parents and external agencies will be logged and these will be kept as CP records. The school will take into account the views and wishes of the child who is the subject of the concern but staff will be alert to the dangers of colluding with dangerous 'secrets'.

Child protection records are not open to pupils or parents. All CP records are kept securely by the Designated Safeguarding Lead and separately from educational records. They may only be accessed by the Designated Safeguarding Lead, their Deputies and the senior managers of the school.

The content of Child Protection Conference or Review reports prepared by the school will follow the headings recommended by Children's Services and will, wherever possible, be shared with the parents/carer in advance of the meeting.

Child Protection records will be sent to receiving schools separately and under a confidential cover when pupils leave the school, as soon as possible, and within 5 days for an in-year transfer or within the first 5 days of the start of a new term, ensuring secure transit and a confirmation of receipt will be obtained.

In addition to the child protection file, the DSL will also consider if it would be appropriate to share any information with the new school or college in advance of a child leaving. For example, information that would allow the new school or college to continue supporting victims of abuse and have that support in place for when the child arrives.

When we receive child protection records from other schools, we will ensure key staff such as the DSL and SENCO are aware as required.

If a pupil is withdrawn from the school having not reached the normal date of transfer; due to a family move or any other reason, all efforts will be made to identify any new address and the school to which they are being admitted and to ensure that their educational records are sent without delay to the child's new school. If the parent/carer fails to provide this information, an urgent referral will be made to the Early Help Service either through the EHS Duty Officer or through the local team manager in order that they might make further enquiries. If this school receives educational records concerning a child who is not registered with us, the records will be returned promptly to the sending school with a note, advising them to refer to their LA's Children's Services Department. **A child's name will only be removed from the School's Admissions Register in accordance with the Pupil Registration Regulations or with the authorisation of the Local Team Manager in the Early Help Service.**

We are mindful of the following Southwark guidance, but also aware that this specific matter does not apply here as we dual register pupils.

We will inform the Local Authority when we are about to add or delete a pupil's name from the school admission register for any reason in line with Southwark's Children Missing Education (CME) Protocol.

When a pupil ceases to be registered at this school and becomes a registered pupil at another school in England or Wales, we will send a Common Transfer File (CTF) to the new school via DfE's secure internet system called school2school.

We will upload CTFs of pupils who have left but their destination or next school is unknown or the child has moved abroad or transferred to a non-maintained school to a searchable area of the school2school website commonly referred to as the 'Lost Pupil Database'. If a pupil arrives in our school and the previous school is unknown, we will search the database for any record of the child. The school will require documentary proof as to the identity of pupils presented for admission. If there is any doubt as to the identity of a pupil, advice will be sought from the local authority and other statutory agencies, as appropriate. We will maintain accurate and up to date records of those with Parental Responsibility and emergency contacts. Pupils will only be released to the care of those with Parental Responsibility or someone acting with their written consent.

We will take actions according to Southwark's Protocol for Children who are Uncollected from School when pupils who ordinarily do not make their own way home are not collected by their parents/carers at the end of the school day or from after school clubs and activities and when any children with Special Educational Needs who are transported from school cannot be dropped-off at their home or meeting point due to the absence of the parent or carer.

While for a mainstream school all additions to or deletions from the school roll will trigger the completion of a Common Transfer File (CTF) which will be downloaded to the appropriate database via the S2S system with particular regard to pupils leaving the school with unknown destination. Within the setting of Evelina Hospital School every effort will be made to ensure that all children are on roll in an appropriate setting and that information is shared swiftly and appropriately with the home school setting.

The school verifies the identity of pupils through the hospital handover records. If there is any doubt as to the identity of a pupil, advice will be sought from the local authority and other statutory agencies, as appropriate. We will maintain accurate and up to date records of those with Parental

Responsibility and emergency contacts. Pupils will only be released to the care of those with Parental Responsibility or someone acting with their written consent.

SAFETY IN THE SCHOOL

No internal doors to classrooms will be locked whilst pupils are present in these areas.

Entry to School premises will be controlled by doors that are secured physically or by constant staff supervision or video surveillance. Our Headteacher will use their professional judgement about the need to escort or supervise visitors such as children's relatives or other visitors attending a sports day. In the case of individuals visiting the school in a professional capacity e.g. educational psychologists, social workers etc., we will check their ID and be assured that the visitor has had the appropriate DBS check (or the visitor's employers have confirmed that their staff have appropriate checks). They will be logged into and out of the premises and will be asked to wear their identity badges or be issued with school visitor badges. Unidentified visitors will be challenged by staff or reported to the Headteacher or school office. Carelessness in closing any controlled entrance will be challenged.

The presence of intruders and suspicious strangers seen loitering near the school or approaching pupils, will be reported to the Police by calling 101 or 999, depending on the circumstances and the urgency of the case so that if police stops these individuals they can be spoken to about what they were doing and dealt with accordingly. Brief information about the incident will be sent to LA's Schools Safeguarding Coordinator with a view to alerting other local schools in liaison with the police and through appropriate systems.

Parents, carers or relatives cannot take still or video photographic images of pupils in school or on school-organised activities or use their mobile phones within the school spaces. Recording and/or photographing other than for private use would require the consent of the other parents whose children may be captured on film. Without this consent the Data Protection legislation would be breached. If parents do not wish their children to be photographed or filmed and express this view in writing, their rights will be respected.

CURRICULUM

Evelina Hospital School acknowledges the important role that the curriculum can play in the prevention of abuse and in the preparation of our pupils for the responsibilities of adult life and citizenship. It is expected that all curriculum co-ordinators will consider the opportunities that exist in their area of responsibility for promoting the welfare and safety of pupils. As appropriate, the curriculum will be used to build resilience, help pupils to keep safe and to know how to ask for help if their safety is threatened. As part of developing a healthy, safer lifestyle, pupils will be taught, for example:

- to recognise and manage risks in different situations and then decide how to behave responsibly;
- to judge what kinds of physical contact are acceptable and unacceptable;
- to recognise when pressure from others (including people they know) threatens their personal safety and well-being; including knowing when and where to get help;
- to be aware of sexual harassment, online abuse, sexual violence and issues of consent and safeguarding risks, including online risks and what constitutes a healthy relationship, both online and offline via a carefully planned relationships, sex and health education curriculum;
- to use assertiveness techniques to resist unhelpful pressure;
- emotional literacy.

All computer equipment and internet access within the School will be subject to appropriate 'parental controls' and internet safety rules in line with our E-safety Policy.

Evelina Hospital School will work with partners (including the [Agencies Supporting Southwark Programme \(ASSP\)](#); Guys and St Thomas' Trust (GSTT) and Safer Schools Partnership) to promote "Healthy School" status through the curriculum with the aim of:

- Developing a school ethos and environment which encourages a healthy lifestyle for pupils;
- Using the full capacity and flexibility of the curriculum to help pupils to achieve safe and healthy lifestyles;
- Ensuring that food and drink available across the school day reinforce the healthy lifestyle message;
- Providing high quality Physical Education and sport to promote physical activity;
- Promoting an understanding of the full range of issues and behaviours which impact upon lifelong health and well-being.

HEALTHY SCHOOLS LONDON

Evelina Hospital School will work with partners to promote a whole healthy school approach **and achieve the 'Healthy School London' status**, including a focus on the curriculum with the aim of:

- Using the full capacity and flexibility of the curriculum to help pupils to be safe, healthy and happy;
- Developing a school ethos, culture and environment as well as provision for spiritual, moral, social and cultural (SMSC), education that encourages a healthy lifestyle for all children and young people, including the disadvantaged and vulnerable;
- Delivering the new mandatory Relationships & Sex Education (RSE) and Health Education (HE) and/or where delivered, through Personal, Social, Health and Economic (PSHE) & Wellbeing Education – including specifically consent, sexual harassment and sexual violence, including online;
- Providing high quality Physical Education (PE) and sport to promote physical activity;
- Promoting an understanding of the full range of issues and behaviours which impact upon lifelong health and wellbeing, including emotional wellbeing and mental health;
- Working in partnerships with parents/carers, local communities, external agencies and volunteers to support health and wellbeing of all pupils including the most vulnerable and disadvantaged;
- Ensuring that food and drink available across the school day reinforce the healthy lifestyle message.

WORKING IN PARTNERSHIP WITH PARENTS

It is our policy to work in partnership with parents or carers to secure the best outcomes for our children. We will therefore communicate as clearly as possible about the aims of this school.

- We will use clear statements in our brochures and correspondence.
- We will liaise with agencies in the statutory, voluntary and community sectors and locality teams that are active in supporting families.
- We will be alert to the needs of parents/carers who do not have English as their first language and will utilise the translation services as necessary.
- We will distribute the LA's leaflet for parents, [Protecting Children in Education Settings](#)
- We will make available a copy of this policy to any parent who requests it. The policy will also be available through the school's web site.

- We will keep parents informed as and when appropriate.

The Governing Body will monitor the safeguarding arrangements in the school to ensure that these arrangements are having a positive impact on the safety and welfare of children. This will be evaluated on the basis of evidence of:

- the extent to which a positive culture and ethos is created where safeguarding is an important part of everyday life in the school, backed up by training at every level;
- the content, application and effectiveness of safeguarding policies and procedures, and safer recruitment and vetting processes;
- the quality of safeguarding practice, including evidence that staff are aware of the signs that children may be at risk of harm either within the setting or in the family or wider community outside the setting;
- the timeliness of response to any safeguarding concerns that are raised;
- the quality of work to support multi-agency plans around the child.

This policy will be reviewed annually by the Governing Body. Staff meetings with a specific focus on safeguarding will be held once per term and updated guidance from relevant bodies, including the Department for Education, Ofsted, Southwark Safeguarding Children’s Board and others will be circulated to staff then. A safeguarding team will also meet once per term to review safeguarding practices within the school and to oversee any incidents or long standing child protection issues that have arisen since the previous meeting. Updates are received regularly from Southwark’s School’s Safeguarding Co-ordinator and through the forums and training events and it is the duty of the Designated Safeguarding Lead to disseminate this information appropriately. The governing body will be given a report on a termly basis on issues that fall within the scope of this policy. Gathering student voice on the extent to which pupils feel safe in school is a priority for the Evelina Hospital School and this will be done regularly and through staff interaction, reflecting the high staff to pupil ratios and rapid turnover of the school population.

COMPLAINTS

All complaints arising from the operation of this policy will be considered under the school’s complaint procedure, with reference to the LA’s Strategic Lead Officer for safeguarding in education services as necessary.

Susan Rankin Reid/Rebecca Jarvis:	Joint Chairs of Governors	_____	Date:_____
Anne Hamiton:	Headteacher	_____	Date:_____
Laura Perrett:	Designated Safeguarding Lead	_____	Date:_____

Revised May 2022 to reflect changes in personnel

Approved by Governors October 2021