



Safeguarding Policy and Procedures

Tower Hamlets Education Business Partnership (THEBP) is the leading education charity that bridges the gap between students and the world of work, providing fair and equal opportunities that enable students to broaden their horizons, igniting a determination to fulfil their aspirations.

Our goal is to end poverty of opportunity through education and through partnerships with businesses. We work with employers to help students build confidence and skills. We want all young people to learn more, do more, and become more, because it is our firm belief that an educated community will become a thriving community.

A **child** is defined as anyone who has not reached their 18th birthday. Children therefore means '**children and young people**'.

The THEBP Board of Trustees takes seriously their responsibility to safeguard and promote the welfare of children and to work together with other agencies to ensure adequate arrangements within our organisation support schools with their responsibilities. THEBP is committed to keeping children safe in all the experiences we arrange.

- We work with schools to ensure their safeguarding procedures are followed.
- We support businesses/organisations to support to keep children safe when they are working with them.
- We support volunteers to keep their work safe and know what to do if a child tells them something or they are worried about the child.
- We follow up-to-date THEBP safeguarding procedures in our head office.

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Table of Contents

Safeguarding Policy and Procedures	1
1. Purpose of Policy and Procedures	3
2. Relevant legislation.....	3
3. Introduction.....	3
4. Staff Responsibilities	3
5. Code of Conduct.....	4
6. Complaints	4
7. Risk assessment	4
8. Confidentiality policy	4
9. Reporting concerns, suspicions and allegations	4
10. General principles in relation to accusations about child abuse	4
11. Safe recruitment and selection	5
12. Appointment of volunteers to work with young people	5
13. Induction and training for staff and volunteers.....	6
14. Code of Conduct for staff and volunteers when working with children.....	6
15. E-Safety.....	7
16. Lone working	8
17. Procedures for reporting child protection concerns, suspicions and allegations	8
18. Support for staff and volunteers.....	10
Appendix 1 - Contact Details.....	11
Appendix 2 - Understanding and identifying abuse and neglect.....	12
Appendix 3 - FGM – Female Genital Mutilation.....	16
Appendix 4 - Indicators of Vulnerability to Radicalisation	18
Appendix 5 - Prevent Safeguarding.....	20

1. Purpose of Policy and Procedures

1.1. This Child Protection Policy and Procedures provides a secure framework for the THEBP workforce in safeguarding and promoting the welfare of those children and young people who use our brokered services. The policy aims to ensure that:

- All young people are safe and protected from harm.
- Other elements of provision and policies are in place to enable young people to feel safe and adopt safe practices.
- Staff and volunteers are aware of the expected behaviours and legal responsibilities in relation to safeguarding and promoting the welfare of children and young people.
- The Child Protection Policy of the young person's school is followed in the first instance.

1.2. This policy establishes procedures and good practice within THEBP, to ensure that each person and organisation can demonstrate an understanding of the duty to safeguard and promote the welfare of children and young people including those who are vulnerable. It provides evidence of how this will be implemented within our organisation and within multi-agency working arrangements.

This document states THEBP's policy in relation to Child Protection and gives guidance on:

- What THEBP staff or volunteers should do, if they think a child they are working with has been abused or makes an allegation.
- What the organisation will do to ensure employees, whether paid staff or volunteers, do not pose a risk to children.
- How THEBP procedures fit with procedures in schools and other local agencies.

2. Relevant legislation

2.1. This policy is informed by the 'Working Together to Safeguard Children' guidance, DfE (2015), 'Keeping Children Safe in Education' guidance, DfE (2015), 'Work-Related Learning and the Law' guidance, DfES (2006), relevant legislation and Acts including The Children Act 2004, The Human Rights Act 1998, the United Nation's Convention on the Rights of the Child, the Criminal Justice and Court Services Act 2000, the Protection of Children Act 1999, the Rehabilitation of Offenders Act 1974, Disqualification under the Childcare Act 2006 and the Safeguarding Vulnerable Groups Act 2006. We have also consulted guidance provided by Tower Hamlets Safeguarding Board to inform this policy.

3. Introduction

3.1. THEBP's Director, Helen Sanson, is the Designated Child Protection Officer (DCPO). The deputy DCPO is the Senior Project Manager for the Learn More team.

3.2. The following information is to clarify the safeguarding procedures of THEBP in relation to THEBP's responsibility for the welfare of students they work with.

3.3. This information is to be reviewed and updated on an annual basis.

4. Staff Responsibilities

4.1. The THEBP Senior Management Team ensures that the policy and procedures are kept up to date and are applied consistently. The overall responsibility for this area lies with the Director.

4.2. All staff and volunteers have a responsibility to safeguard the welfare of children with whom we work and to respond to concerns about child abuse.

4.3. All staff should read this policy and ensure that they are clear about what they should do if they have such a concern or if a child discloses abuse to them.

5. Code of Conduct

5.1. The THEBP Code of Conduct sets out requirements for staff to support each other in working effectively together. In addition, THEBP staff and volunteers should follow [additional guidelines](#) when working with children. These are included in the guidance attached to this policy.

6. Complaints

6.1. THEBP recognises the right of children and their parents or carers to be able to express any concerns they might have about the behaviour of THEBP staff or volunteers. It is THEBP's policy to ensure that all complaints are taken seriously and dealt with swiftly and in confidence.

6.2. Separate guidance on complaints procedures is available [here](#). There is also separate guidance on management of allegations of abuse against staff or volunteers.

7. Risk assessment

7.1. THEBP recognises that risk assessment is an important factor in keeping children safe. We aim to incorporate risk assessment procedures into our everyday working practices.

7.2. THEBP office risk assessment is reviewed and updated at least annually.

8. Confidentiality policy

8.1. THEBP respects the rights of children to privacy and confidentiality but recognises that in certain circumstances confidentiality must be breached because of safeguarding concerns and the need for possible intervention.

9. Reporting concerns, suspicions and allegations

9.1. THEBP will take seriously any concern about children's welfare and well-being and will support any child, staff member or volunteer in raising any safeguarding concern or suspicions. This support will continue whilst concerns are being investigated.

9.2. The guidance attached to this policy gives instructions on the procedure to be followed by staff or volunteers if a disclosure of abuse is made or if they have concerns or suspicions relating to a child's welfare.

9.3. See also separate guidance on THEBP's complaints procedures, [here](#).

10. General principles in relation to accusations about child abuse

10.1. Abuse will not go away if it is hidden. An abused child can only be supported if the appropriate agencies know about the abuse. As a result, if any member of staff or volunteer is disclosed sensitive information by a child, there is a duty to protect the child by sharing the information with the right person.

10.2. If a child starts to talk about abuse, do not ask searching questions in case someone suggests at a later stage that the evidence has been prompted or rehearsed. This is important if a child abuse case comes to court as suggestions that the evidence has been prompted could make it more difficult to convict the abuser.

- 10.3. It is important to treat children who talk about abuse – or “disclose” abuse – with gentleness, care and honesty, respecting what they say. Any child who has been abused will have suffered emotional damage and will be very vulnerable. It will require courage to talk about the abuse and what the child says may not be clear. Generally children reporting abuse are telling the truth.
- 10.4. Information about abuse should only be shared on a “need to know” basis, and staff or volunteers with sensitive information about a child should not talk to other members of the team, or to anyone else, about the issue.

11. Safe recruitment and selection

- 11.1. THEBP’s recruitment policy aims to ensure that appointments will only be made if the appointing THEBP staff member is satisfied from the information provided, and gained through the selection process, that the applicant offers no risk of harm to children and young people.
- 11.2. If any member of staff or volunteer offered work at THEBP is found to have convictions, cautions, reprimands or warnings that indicate a potential risk to children, it is THEBP’s policy that an open and measured discussion will take place on this subject, involving the applicant, before a recruitment decision is taken. In the case of volunteers facilitating THEBP programmes in schools, permission will be sought to consult with the Head of School or LADO within Tower Hamlets’ Children’s Services Directorate to deem their suitability for the position. If any member of staff or volunteer is found to have withheld relevant information that indicates a potential risk to children, the employment will be terminated with immediate effect.

12. Appointment of volunteers to work with young people

- 12.1. All volunteers applying to work with children or young people must complete the following application procedures:
 - Complete a Disclosure and Barring Service Certificate application form where necessary. In deciding whether a DBS check is required, THEBP will consider whether the volunteer will be taking part in ‘regulated’ activity, i.e. when contact with young people will take place frequently (once a month or more) or intensively (on three or more days in a 30-day period). In these instances, a DBS check would be needed. Volunteers having contact with children on an ad hoc or irregular basis for short periods of time will not be required to complete a DBS check, although the school should ensure that they are always under the supervision of a member of school staff when on school premises.
 - Attend a standard training session, telephone briefing, induction or event briefing prior to volunteering.
- 12.2. An appointment will only be made if the THEBP Project Manager is satisfied from the information provided that the applicant offers no risk of harm to children and young people.
- 12.3. If a DBS Certificate has not been received in time for a volunteer to start, the Headteacher/School Coordinator of any school with which that person is due to work will be informed. The Headteacher/School Coordinator will decide if the person in question may work with children on school premises and under the supervision of an adult who has received clearance. No volunteer (i.e. a mentor) may meet with or take a child off the school site until an enhanced Disclosure Check and Barred List check has been completed.

13. Induction and training for staff and volunteers

- 13.1. It is THEBP's policy to offer appropriate briefings for all new staff and volunteers on THEBP's Safeguarding Policy and Procedures as part of their induction or training programme.
- 13.2. All volunteers are required to attend a training/briefing session relevant to their particular scheme. This will include guidance on safeguarding, child protection and potential scenarios when working with children and young people.
- 13.3. All volunteers and coordinators will attend an Induction Session or Launch Event at the school where their scheme takes place. This will include an introduction to the key contacts at the school, an overview of health and safety procedures and a reminder of safeguarding procedures.
- 13.4. All volunteers will be given access to the relevant volunteer handbook which includes guidance on:
 - Safeguarding and child protection scenarios;
 - Appropriate reporting systems for welfare concerns;
 - How to respond to safeguarding and welfare disclosures.

14. Code of Conduct for staff and volunteers when working with children

14.1. Staff and volunteers should always:

- Treat everyone with respect and dignity and be sensitive to individual beliefs, faiths, religions and sexuality of those they are supporting.
- Always put the welfare of each child first.
- Act as an excellent role model – keep conversation and actions appropriate to the situation.
- Build balanced relationships based on mutual trust which empowers children to share in the decision making process.
- Respect a child's right to privacy and be careful with the information that they share.
- Show understanding and sensitivity when dealing with emotional issues.
- Provide an environment that encourages children and adults to feel comfortable and confident in challenging any attitudes or behaviours that may be discriminatory in any way.
- Provide an opportunity and environment for children to talk to others about any concerns they may have.
- Remember that others may misinterpret your behaviour and actions regardless of how well intentioned they may be.
- Avoid inappropriate physical contact.
- Always work in an open, group environment – avoid private or unobserved situations and encourage open communication with no secrets.
- Volunteer mentors working with children on a one-to-one basis should always meet with their mentee in a public space.
- Always let someone know they are with a child – if in school, sign in at reception.

14.2. Disclosure of information:

People working in schools are uniquely placed to notice signs and symptoms of abuse, and to support children living in such situations. However, you may only see the child once a week; it is therefore vital that information is quickly passed on to the school.

- Never promise confidentiality.
- Take any allegations, suspicions or concerns about abuse that a child/young person makes seriously (including those made against staff or volunteers) and report them following [appropriate procedures](#).
- Tell the child that they have made the right decision to tell you and reassure them they are not to blame.
- Report any concerns as soon as possible to the relevant contacts; the school coordinator, a teacher, the Designated Child Protection Officer in the school or at THEBP, or the company coordinator.
- Write an account of the facts as heard, using the child's own words and including anything that is relevant.
- Write an account of the actions taken by themselves.
- Report any concerns that they themselves have, no matter how small they think they might be.

14.3. Staff and volunteers should never:

- Permit or accept abusive and discriminatory behaviour (i.e. bullying, racial harassment, taunting, rude or abusive language)
- Have inappropriate physical, verbal or online contact with a child.
- Allow or encourage others (staff, volunteers or children) to engage in inappropriate behaviour or contact.
- Use inappropriate or demeaning language.
- Engage in a sexual relationship with a child (consenting or not), whether inside or outside work.
- Make sexually suggestive comments.
- Give personal money to a child.
- Give gifts to a child, no matter how small.
- Invite a child to individual homes.
- Use alcohol, drugs or other substances when working/volunteering with children.
- Deliberately put yourself or others in compromising or potentially dangerous situations.
- Promote their religious or political ideas or beliefs.
- Believe 'it could never happen to me' or trivialise abuse.
- Ignore this code of conduct, even if they happen to encounter a child when not on site or involved with a project.

15. E-Safety

15.1. THEBP has a duty of care to support a safe learning environment for students. This includes ensuring safety when using IT equipment or any other media device.

- 15.2. Students are provided with written guidance on safe and responsible use of IT, while on THEBP's premises.
 - 15.3. All IT users are encouraged to adopt safe and responsible use of IT, both within THEBP's premises and outside.
 - 15.4. THEBP will obtain signed permission from parents/carers and/or the appropriate school representative to be able to use students' images in our publications, e.g. the website or newsletter.
 - 15.5. Where students are freely searching the internet, staff, volunteers and partners are expected to be vigilant in monitoring the content of the websites they visit.
 - 15.6. Staff, volunteers, partners and students must immediately report the receipt of any communication that makes them feel uncomfortable, is offensive, discriminatory, threatening or bullying in nature and must not respond to any such communications.
 - 15.7. Any digital communication between staff, students, parents/carers, volunteers and any other partner/stakeholder (e.g. email) must be professional in tone and content.
 - 15.8. THEBP staff should ensure that no reference should be made in social media to students or their parents/carers.
 - 15.9. THEBP Staff Handbook includes a section on safe and responsible use of IT, both within THEBP's premises and outside.
 - 15.10. Additional guidance on online safety will be sought from Online Compass as appropriate.
16. **Lone working**
- 16.1. Staff, volunteers and partners should only be alone with a child if their specified role, such as mentoring requires it, and then ensure that someone else is always aware of where they are.
17. **Procedures for reporting child protection concerns, suspicions and allegations**
- 17.1. **What to do if a child discloses abuse on school premises and during the school day, or
If a child discloses abuse away from school premises and during the school day,
or
If a child discloses abuse on school premises and outside the school day:**
- If a child says that he or she has been abused, either physically, emotionally, sexually or by neglect, the member of THEBP staff or volunteer should:
- React calmly so as not to frighten the child/young person – give them your **full** attention.
 - Be aware of your non-verbal messages.
 - Don't make promises that you cannot keep.
 - Keep responses short, simple, slow and gentle.
 - Don't stop a child who is talking freely about what happened – let them use their own words.
 - Observe and **listen** but don't ask for more information.
 - Tell them that they are not to blame.
 - Tell the child that they have done the right thing by telling you.

- If you have difficulty in understanding the child's communication method, reassure them that you will find someone who can help.
- Think carefully about who you need to share this information with - **do not confront the perpetrator.**
- Tell them what you are going to do next.
- Remember it is **not** your job to prove or disprove what the child tells you, merely to listen and make a record of the conversation as soon as possible.
- Tell the school's Designated Child Protection Officer (DCPO) **and** THEBP's Designated Child Protection Officer about what the child has said on the same day, making sure the child is in a safe place with support while you do this. In the absence of these staff, inform a THEBP Senior Manager.
- Record, in writing on THEBP's record form, all the details of what was said, using the exact wording used by the child. Do not try to interpret any of the information yourself. Date and sign the record. Give a copy to the school's designated person and one to THEBP's Designated Child Protection Officer, keep a password protected copy for yourself.

17.2. All notes and reports must contain the following, using THEBP or the school's form for reporting concerns about a child

- Date of the incident.
- Date and time of the record being made.
- Name and date of birth of the child or children concerned.
- A factual account of what happened, a record of what was seen and heard using the child's own words where possible.
- The location where the incident or disclosure took place.
- A note of any other people involved, e.g. as witnesses.
- Action taken and any future plans, e.g. monitor and review.
- Any other agencies that were informed.
- Printed name of the person making the record.
- Signature of the person making the record.
- Job title of the person making the record.

17.3. What to do if you have other concerns or suspicions or know of an allegation relating to a child's welfare.

- Act immediately – do not delay; in an emergency get medical help.
- Keep a detailed written record of the incident and your concerns.
- If an allegation has been made against a member of school staff, the school's Headteacher and Designated Child Protection Officer must be informed immediately. Once this has happened, THEBP's Designated Child Protection Officer should be informed.
- If an allegation has been made against a volunteer or member of THEBP staff, the school's Designated Child Protection Officer must be informed immediately. Once this

has happened, THEBP's Director and Designated Child Protection Officer should be informed.

- If an allegation has been made against the THEBP Director, THEBP's Chair of Trustees must be informed immediately.
- If concerns or allegations do not relate to school staff, the school's Headteacher and Designated Child Protection Officer must be informed immediately. Once this has happened, THEBP's Designated Child Protection Officer should be informed.
- If no one else is available and you think the child is in potential or actual danger, contact Social Services.

17.4. Allegations against a member of THEBP staff or volunteer

If an allegation is made against a member of staff or volunteer, THEBP's Allegations Policy will be followed and an investigation conducted. THEBP reserves the right to restrict a staff member or volunteer from any contact with young people once an allegation has been made (justified or not), whilst an investigation is being conducted. Appropriate support, including access to an external person to speak with, will be provided for staff or volunteers who are subject to any investigations.

18. Support for staff and volunteers

- 18.1. THEBP staff or volunteers who are told about abuse by a child may need guidance, emotional support and assurance that they have acted in the right way. Staff may seek this support from THEBP's Designated Child Protection Officer.
- 18.2. Support will be provided for staff reporting other concerns and risks to children or suspicions about other members of staff, school staff or volunteers.

Appendix 1 - Contact Details

In an emergency, contact the Police – Dial 999

Organisation	Name	Contact details
THEBP Designated Child Protection Officer	Helen Sanson	020 7655 0305
THEBP Deputy Designated Child Protection Officer	Senior Project Manager - Learn More team	020 7655 0300
Children's Social Care Services	Multi-Agency Safeguarding Hub (MASH) Out of Office Hours (5pm - 9am)	020 7364 5006 020 7364 4079
Children's Social Care Services	Emergency Duty Team (5pm – 9am)	020 7364 5006
Local Authority Designated Officer	James Gilley	020 7364 3506 or james.gilley@towerhamlets.gov.uk
NSPCC	24 Hour Helpline	0808 800 5000
Ofsted		08456 404 040
Tower Hamlets Safeguarding Children Board	Monawara Bakht	020 7364 2063 lscb@towerhamlets.gov.uk
Child Abuse Investigation Team (CAIT)	Police	020 8217 6484
ChildLine		0800 1111 (textphone 0800 400 222)

Appendix 2 - Understanding and identifying abuse and neglect

Abuse and neglect are forms of maltreatment—a person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Child welfare concerns may arise in many different contexts, and can vary greatly in terms of their nature and seriousness. Children may be abused in a family or in an institutional or community setting, by those known to them or by a stranger, including via the internet. In the case of female genital mutilation, children may be taken out of the country to be abused. They may be abused by an adult or adults, or another child or children. An abused child will often experience more than one type of abuse, as well as other difficulties in their lives. Abuse and neglect can happen over a period of time, but can also be a one-off event. Child abuse and neglect can have major long-term impacts on all aspects of a child's health, development and well-being.

The warning signs and symptoms of child abuse and neglect can vary from child to child. Disabled children may be especially vulnerable to abuse, including because they may have an impaired capacity to resist or avoid abuse. They may have speech, language and communication needs which may make it difficult to tell others what is happening. Children also develop and mature at different rates so what appears to be worrying for a younger child might be normal behaviour for an older child. Parental behaviours may also indicate child abuse or neglect, so you should also be alert to parent-child interactions which are concerning and other parental behaviours. This could include parents who are under the influence of drugs or alcohol or if there is a sudden change in their mental health. By understanding the warning signs, you can respond to problems as early as possible and provide the right support and services for the child and their family. It is important to recognise that a warning sign doesn't automatically mean a child is being abused.

There are a number of warning indicators which might suggest that a child may be being abused or neglected.

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

- Children whose behaviour changes –they may become aggressive, challenging, disruptive, withdrawn or clingy, or they might have difficulty sleeping or start wetting the bed;
- Children with clothes which are ill-fitting and/or dirty;
- Children with consistently poor hygiene;
- Children who make strong efforts to avoid specific family members or friends, without an obvious reason;
- Children who don't want to change clothes in front of others or participate in physical activities;
- Children who are having problems at school, for example, a sudden lack of concentration and learning or they appear to be tired and hungry;
- Children who talk about being left home alone, with inappropriate carers or with strangers;
- Children who reach developmental milestones, such as learning to speak or walk late, with no medical reason;
- Children who are regularly missing from school or education;
- Children who are reluctant to go home after school;
- Children with poor school attendance and punctuality, or who are consistently late being picked up;
- Parents who are dismissive and non-responsive to practitioners' concerns;
- Parents who collect their children from school when drunk, or under the influence of drugs;
- Children who drink alcohol regularly from an early age;
- Children who are concerned for younger siblings without explaining why;
- Children who talk about running away;
- and
- Children who shy away from being touched or flinch at sudden movements.

Four main categories of abuse and neglect

There are four main categories of abuse and neglect: physical abuse, emotional abuse, sexual abuse and neglect. Each has its own specific warning indicators, which you should be alert to. Working Together to Safeguard Children (2015) statutory guidance sets out full descriptions.

Physical abuse

Physical abuse is deliberately physically hurting a child. It might take a variety of different forms, including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child. Physical abuse can happen in any family, but children may be more at risk if their parents have problems with drugs, alcohol and mental health or if they live in a home where domestic abuse happens. Babies and disabled children also have a higher risk of suffering physical abuse.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Physical abuse can also occur outside of the family environment.

Some of the following signs may be indicators of physical abuse:

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

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development. Although the effects of emotional abuse might take a long time to be recognisable, practitioners will be in a position to observe it, for example, in the way that a parent interacts with their child. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities

Sexual abuse

Sexual abuse is any sexual activity with a child.

You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong. Sexual abuse can have a long-term impact on mental health.

Sexual abuse 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 clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch 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 commit acts of sexual abuse, as can other children.

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

- Children who display knowledge or interest in sexual acts inappropriate to their age;

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

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them

Child sexual exploitation doesn't always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Some of the following signs may be indicators of sexual exploitation:

- Children who appear with unexplained gifts or new possessions;
- Children who associate with other young people involved in exploitation;
- Children who have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant;
- 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 don't take part in education.

Neglect

Neglect is a pattern of failing to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter. It can also happen speedily over a matter of weeks. It is likely to result in the serious impairment of a child's health or development. Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action. However, while you may be concerned about a child, neglect is not always straightforward to identify.

Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

Some of the following signs may be indicators of neglect:

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care;
and
- Parents who fail to seek medical treatment when their children are ill or are injured.

These definitions and indicators are not meant to be definitive, but only serve as a guide to assist you. It is important too, to remember that many children may exhibit some of these indicators at some time,

and that the presence of one or more should not be taken as proof that abuse is occurring. There may well be other reasons for changes in behaviour such as a death or the birth of a new baby in the family or relationship problems between parents/carers. In assessing whether indicators are related to abuse or not, the authorities will always want to understand them in relation to the child's development and context.

Appendix 3 - FGM – Female Genital Mutilation

Female Genital Mutilation is child abuse and as such is dealt with under THEBP's Safeguarding policy. All staff are expected to adhere to and follow this policy.

The UK Government advice and guidance on FGM that states: "FGM is considered child abuse in the UK and a grave violation of the human rights of girls and women. In all circumstances where FGM is practised on a child it is a violation of the child's right to life, their right to their bodily integrity, as well as their right to health. The UK Government has signed a number of international human rights laws against FGM, including the Convention on the Rights of the Child."

The World Health Organisation definition of FGM:

Definition of FGM:

"Female Genital Mutilation (FGM) comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural or non-therapeutic reasons."

(World Health Organisation - 1997)

FGM is classified into four major types:

1. Clitoridectomy: partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals).
2. Excision: partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are "the lips" that surround the vagina).
3. Infibulation: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris.
4. Other: all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area.

Girls may be at risk during any time of the year. However, there is a possibility that they may be at more risk of FGM during school summer holidays. During this period families may take their children abroad for the procedure. Many girls may not be aware that they may be at risk of undergoing FGM. FGM is practised in the Middle East and 28 African countries. UK communities that are most at risk of FGM include Kenyans, Somalis, Sudanese, Sierra Leoneans, Egyptians, Nigerians and Eritreans. However women from non-African communities that are at risk of FGM include Yemeni, Kurdish, Indonesian and Pakistani women.

In order to protect our children and young people it is important that key information is known by THEBP staff.

Indications that FGM has taken place:

- Prolonged absences with noticeable behaviour change – especially after a return from holiday
- A girl may spend longer than normal in the bathroom or toilet due to difficulties urinating
- A girl may spend long periods of time away from the class during the day with bladder or menstrual problems.

Indications that a child may be at risk of FGM:

- The family comes from a community that is known to practise FGM - especially if there are elderly women present.
- In conversation a child may talk about FGM.
- A child may express anxiety about a special ceremony.
- The child may talk or have anxieties about forthcoming holidays to their country of origin.
- Parent/Guardian requests permission for authorised absence for overseas travel or you are aware that absence is required for vaccinations.
- If a woman has already undergone FGM – and it comes to the attention of any professional, consideration needs to be given to any Child Protection implications e.g. for younger siblings, extended family members and a referral made to Social Care or the Police if appropriate.
- Any girl withdrawn from Personal, Social Health and Citizenship Education may be at risk as a result of her parents wishing to keep her uninformed about her body and rights.

If we have concerns that children in our school community are at risk or have been victims of Female Genital Mutilation then we refer to Tower Hamlets' Children's Social Care.

We may ask children to tell you about their holiday. Sensitively and informally ask the family about their planned extended holiday ask questions like:

- Who is going on the holiday with the child?
- How long they plan to go for and is there a special celebration planned?
- Where are they going?
- Are they aware that the school cannot keep their child on roll if they are away for a long period?
- Are they aware that FGM is illegal in the UK even if performed abroad?

This policy will be updated whenever there is a change to any safeguarding legislation or Ofsted inspection practice, or any regulatory body's requirement or recommendation.

Appendix 4 - Indicators of Vulnerability to Radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.

Extremism is defined by the Government in the Prevent Strategy as:

Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

Extremism is defined by the Crown Prosecution Service as:

The demonstration of unacceptable behaviour by using any means or medium to express views which:

- Encourage, justify or glorify terrorist violence in furtherance of particular beliefs
- Seek to provoke others to terrorist acts
- Encourage other serious criminal activity or seek to provoke others to serious criminal acts
- Foster hatred which might lead to inter-community violence in the UK

There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.

Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that volunteers/members of staff are able to recognise those vulnerabilities.

Indicators of vulnerability include:

- Identity Crisis – the young person is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
- Personal Crisis – the young person may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
- Personal Circumstances – migration; local community tensions; and events affecting the student / pupil’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
- Unmet Aspirations – the young person may have perceptions of injustice; a feeling of failure; rejection of civic life;
- Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
- Special Educational Need – the young person may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.

More critical risk factors could include:

- Being in contact with extremist recruiters
- Accessing violent extremist websites, especially those with a social networking element
- Possessing or accessing violent extremist literature
- Using extremist narratives and a global ideology to explain personal disadvantage
- Justifying the use of violence to solve societal issues
- Joining or seeking to join extremist organisation
- Significant changes to appearance and / or behaviour
- Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis

Appendix 5 – Prevent Safeguarding (protecting children and young people from Radicalisation and Extremism)

The Risk

Exposure of children to extremist ideology can hinder their social development and educational attainment alongside posing a very real risk that they could support or partake in an act of violence. Currently a number of young girls and boys have been persuaded to leave the country against the wishes of their families, or behind their backs, putting themselves in extreme danger in situations of which they have little prior understanding or appreciation and from which return will be extremely difficult.

Radicalisation of young people can be compared to grooming for sexual exploitation.

“Safeguarding vulnerable people from radicalisation is no different from safeguarding them from other forms of harm.” Home Office – The Prevent Strategy

Why might a young person be drawn towards extremist ideology?

It appears a decision by a young person to become involved in violent extremism:

- May begin with a search for answers to questions about identity, faith and belonging
- May be driven by the desire for ‘adventure’ and excitement
- May be driven by a desire to enhance the self-esteem of the individual and promote their ‘street cred’
- Is likely to involve identification with a charismatic individual and attraction to a group which can offer Identity, social network and support
- Is likely to be fuelled by a sense of grievance that can be triggered by personal experiences of racism or discrimination

Recognising Extremism - early indicators may include:

- Showing sympathy for extremist causes
- Glorifying violence
- Evidence of possessing illegal or extremist literature
- Advocating messages similar to illegal organisations such as “Muslims Against Crusades” or other non-proscribed extremist groups such as the English Defence League.
- Out of character changes in dress, behaviour and peer relationships
- Secretive behaviour

The Power of Social Media / Internet Grooming:

There are also very powerful narratives, programmes and networks that young people can come across online or through social media so involvement with particular groups may not be outwardly apparent and those at risk may be encouraged not to draw attention to themselves.

REPORTING

The safeguarding policy of a school or other institution or organisation should include clear procedures that staff should follow to raise concerns if they think a child is at risk from extremist narratives or being radicalised.

These should involve reporting to the Designated Child Protection lead as they would for any other child protection issue. But unlike other CP issues, the external reporting of Prevent concerns is

usually to the Social Inclusion Panel rather than IPST. This is because Prevent interventions are voluntary and preventative.

How to respond?

If you have concerns about a child or group of children being violent, or being drawn into violent extremism, or being vulnerable to this, you should respond as we would to all vulnerable children and follow the procedures below.

1. Talk to the family and other professionals working with the young person about the concerns and get their views. (Unless the family is implicated in potential extremism in which case you would contact the Social Inclusion Panel first).
2. Seek consent to complete a Common Assessment Framework form to get a holistic perspective on the situation. Determine if there are additional needs and if so how these could be met.
3. Contact other relevant agencies and engage them in a Team Around the Child (TAC) approach to supporting the young person and their family with a diversionary programme of support.
4. If the concerns persist and the TAC approach does not seem to be having a positive impact, or if you need advice or it appears the young person is already exposed to or involved with extremist organisations, refer the case to the Social Inclusion Panel (SIP) using the CAF form.

If in doubt: REFER to SIP

In Tower Hamlets the SIP is the panel which performs the function of “Channel” for those under 18 (Channel is the multi-agency discussion and planning for cases requiring Prevent interventions). The Chair of SIP is Liz Vickerie, liz.vickerie@towerhamlets.gov.uk, Tel: 020 7364 6448.

For Adults (those 18 or over), cases should be referred to the Safeguarding Adults Panel (SAP). Contact the Prevent Project Manager, Nojmul Hussain, nojmul.hussain@towerhamlets.gov.uk, Tel: 020 7634 4691.

If at any stage you are concerned that a child or young person is at imminent risk of harm you should also contact the Child Protection Duty Line / IPST / MASH on 020 7364 3444.

If you suspect someone is actually engaged in terrorist activity, you should also contact the police or the anti-terrorist hotline immediately on 0800 789 321.

Referral route for safeguarding concerns related to Radicalisation or Extremism

- Showing sympathy for extremist causes
- Glorifying violence
- Evidence of possessing illegal or extremist literature/videos
- Advocating messages similar to extreme organisations; e.g. Muslims Against Crusades or EDL
- Changes in behaviour, dress, social groups, interests e.g. withdrawing from previous friendships / activities / being secretive

Any member of staff with concerns about a student's vulnerability to extremism or risk of radicalisation should make a clear written record of the concerns they have heard and/or witnessed.

They should speak to the **Designated Lead for Safeguarding** in their organisation

The issue should be discussed with the family and a Common Assessment Framework (CAF) form should be completed (unless the family are implicated in the issue or to do so might put the child at risk).

Explore the concerns and context: sources of information, friendship groups, interests, access to IT and other relevant background and protective factors.

Low level concerns can be managed by your organisation and the family.
Record of concerns and actions logged securely (using CAF review form for reviews.) Regular discussion with Designated Safeguarding Lead until resolved or referred on.

Concerns either require advice or additional support or are not responding to previous actions or are cases where parents /family are implicated.
Use the CAF* to refer to the **Social Inclusion Panel (SIP)**
020 7364 1965
IF IN DOUBT REFER

Imminent risk of harm to the child – contact:

Children's Social Care / IPST
020 7364 3444
as well as SIP

Imminent threat of harm to others – contact:

Police 999
or Terrorist Hotline
0800 789 321

**Although involving the family is best practice, you may share information (using a CAF) with other agencies (e.g. SIP) without consent and, if necessary, without the family's participation under the Crime and Disorder legislation which allows for information sharing to prevent crime.*

If in doubt SHARE and REFER to SIP.

*The **Social Inclusion Panel (SIP)** will advise on next steps and provide interventions. PREVENT interventions are voluntary so the family will be consulted and involved prior to further action.*