



Child Protection and Safeguarding Policy

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Child Protection and Safeguarding Policy

1. Introduction

Kew Learning has a statutory and moral duty to ensure that we function with a view to safeguarding and promoting the welfare of children, young people accessing education in the UK, and to cooperate with outside agencies. This policy relates to all students under our care regardless of gender, age, ethnicity, nationality, religion or disability. All children and young people have the right to protection from any kind of abuse and the right to exist in a safe and friendly environment whilst in the care of Kew Learning.

This policy is mandatory for all staff and Host families to read and recommended for parents to have awareness. The core purpose of Kew Learning is to help students make the most of their lives through learning in the UK and we are committed to working proactively with school staff, learners, and host families and outside agencies to provide an environment in which every student is free from harm or abuse.

The safety and welfare of children, or Child Protection, means protecting children from physical, emotional or sexual abuse or neglect.

This policy is in line with the requirements of the Association of Education and Guardianship of International Students (AEGIS) and National Minimum Boarding Standards.

We ensure that we lead from the top by ensuring that our director has the appropriate safeguarding knowledge and involvement in the procedures we have in place. This includes having oversight of arrangements.

Where there is a safeguarding concern, Kew Learning will ensure the child's wishes and feelings are taken into account when determining what action to take and what services to provide. We provide clear information for students in the student handbook. We check that students understand the information and are comfortable about how they can raise a concern. We explain how concerns will be treated seriously, and that students can safely express their views and give feedback.

The Company is based at:

Wickham House, Upper Teddington Road, Kingston upon Thames KT1 4DY

Designated Staff Member

Min You – Kew Learning Pastoral Lead

office@kewlearning.co.uk

Mobile: 07504690511

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2. Terminology

“Safeguarding” is the protection of children from maltreatment, preventing the impairment of children’s health/development and ensuring that children grow up in circumstances consistent with the provision of safe and effective care. Working together to safeguard children (HM Government 2019)

“Child Protection” is a part of safeguarding and promoting welfare to protect specific children, who are suffering or are at risk of suffering significant harm.

Staff refers to all those working for or on behalf of Kew Learning, full time or part time, in either a paid or voluntary capacity.

Child, Student refers to all young people who have not yet reached their 18th birthday.

Parent refers to birth parents and other adults who are in a parenting role, for example stepparents or adoptive parents.

3. Policy Statement

Safeguarding and promoting the welfare of children is everyone’s responsibility. Everyone who meets children has a role to play in safeguarding children. In order to fulfil this responsibility effectively, Kew Learning requires all staff and host family members to make sure their approach is always a child-centred one. This means that they should consider, at all times, what is in the best interests of the child. No individual can have a full picture of a child’s needs and circumstances. If children are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action. To ensure this happens, close liaison with Parents, Agents and partner schools will always take place to ensure the safety of the child.

This policy should be used in conjunction with the following documents which can all be found on the Gov.uk website under the Safeguarding heading and Kew Learning policies are available on the website www.kewlearning.co.uk or are available in hard copy on request.

- . Complaints Policy
- . Bullying E-Safety & Social Policy
- . GDPR & Data Protection Policy
- . Missing Child Policy
- . Whistleblowing Policy
- . Anti-Radicalisation Policy
- . Emergency Procedures
- . Keeping Children Safe in Education 2023
- . Working Together to Safeguard Children 2023
- . Child abuse concerns 2015

In Pursuit of this aim, Kew Learning undertakes the following:

- . To have a designated Child Protection Co-ordinator (**Yi Chi**), that has received Child Protection Training and has the responsibility for reporting Child Protection concerns raised by staff/ students or hosts to the DSL. Kew Learning will record any allegations/concerns and refer them where appropriate to the relevant Children's Services Duty team in their area. You can also contact our Designated Safeguarding Lead, **Min You** for further advice and guidance if you are not sure whether your referral is a child protection issue or Child in need matter.
- . To ensure that all guardianship personnel receive Child protection Safeguarding Awareness Training and to make them and the students in our care aware of the need to report allegations and suspicions of child abuse to a person they feel comfortable with, which will then be passed onto to the Designated Safeguarding Lead, **Min You**.
- . To promote an environment of trust, openness and clear communication between students, school and Kew Learning staff and our Host Families, so that student welfare, safety and pastoral care recognised as the top priority.
- . To ensure that all guardianship personnel and personnel offering outsourced services, who come into direct contact with students in our care, are recruited using safe recruitment practices and are formally screened through the Disclosure and Barring service.
- . Staff, homestays and volunteers are required to read Keeping Children Safe in Education Part 1 (for staff, volunteers and homestays that work with children) or Annex A (for those members of staff who do not work directly with children).

KCSIE 2023 :

https://assets.publishing.service.gov.uk/media/64f0a68ea78c5f000dc6f3b2/Keeping_children_safe_in_education_2023.pdf

Annex A:

<https://www.gov.uk/government/publications/guidance-on-the-preparation-of-integrated-care-strategies/annex-a-people-and-organisations-to-consider-involving>

- . To maintain links with the appropriate Agencies who have a statutory responsibility to deal with child welfare and child protection concerns. If you have any reason to believe that a child in your care is suffering from any form of abuse or neglect, then please report it immediately in confidence to the DSL – **Min You**.

4. Statement of Aims, Principles & Practice

This Statement is available to all personnel, agents, parents, students and host families

Our aims are to ensure

- . that our personnel fully meet the standards and requirements of current safeguarding and child protection legislation and practice in respect of the care of international students while studying in the UK
- . that we maintain the highest standards of care, safety and supervision in respect of the pastoral, social, cultural and educational welfare and wellbeing of international students while studying in the UK

Our key principals are

- . To promote the highest possible standards of care to international students
- . To provide a strict code of practice and protocols to which our personnel are expected to adhere, including duties of information sharing between principal parties, accommodation, induction, safeguarding and child protection training, pastoral and educational support, emergency procedures, complaints and grievances
- . To make accessible to all our personnel, via our website, newsletters and other forms of correspondence and office, support, guidance and up-to-date information, as and when appropriate
- . To provide networking opportunities through phone conversations, video meetings and other forms of communications

Our Code of Practice

- . To promote and provide best and legal practice in the guardianship and hosting of all international students at schools, colleges and universities
- . To respect and support the rights, religion and customs of the international students
- . To uphold the stated ethos and values of the school at all times
- . To comply with the 1989 & 2004 Children Act and meet the requirements of the most recent versions of the Department for Education Working Together to Safeguard Children 2 & Keeping Children Safe in Education 3
- . To ensure all international students have 24-hour emergency contact with their guardians in the UK
- . To put in place arrangements which maintain appropriate contact with the international student, the overseas parent and homestay and to ensure all appropriate records are up to date
- . To provide both pastoral and educational support as outlined in any literature and agreements
- . To adhere to grievance procedures
- . To have appropriate insurance and to comply with UK legislation

- . To respect the business practices of others and uphold strong business ethics
- . To ensure that all publicity and information is accurate, conveying realistic expectations of the level of service and accommodation offered

5. Types of Abuse

"Abuse" includes any form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

Abuse can include:

- . **Physical abuse**, for example beating or punching.
- . **Emotional abuse**, for example rejection and denial of affection.
- . **Sexual abuse**, for example sexual assault or encouraging a child to view pornographic material.
- . **Neglect**, for example failing to provide adequate food, clothing and shelter.

6. Signs of Abuse

Government advice 'What to do if you are worried a child is being abused' gives the following examples as potential 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 and/or with consistently poor hygiene.
- . Children who make strong efforts to avoid specific family members or friends, without an obvious reason.
- . Children who do not 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/or children who shy away from being touched or flinch at sudden movements.

7. Abuse Indicators

Physical abuse is 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. N.B: Some situations where children stop communication suddenly (known as “traumatic mutism”) can indicate maltreatment.

Physical Abuse Indicators may include the following (this is not designed to be used as a checklist):

- . Patterns of bruising; inconsistent account of how bruising or injuries occurred
- . Finger, hand or nail marks, black eyes
- . Bite marks
- . Round burn marks, burns and scalds
- . Lacerations, wealds
- . Fractures
- . Bald patches
- . Symptoms of drug or alcohol intoxication or poisoning
- . Unaccountable covering of limbs, even in hot weather
- . Fear of going home or parents being contacted
- . Fear of medical help
- . Fear of changing for PE
- . Inexplicable fear of adults or over-compliance
- . Violence or aggression towards others including bullying
- . Isolation from peers

Emotional abuse is 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.

Emotional Abuse Indicators may include the following (this is not designed to be used as a checklist):

- . Over-reaction to mistakes, continual self-deprecation
- . Delayed physical, mental, emotional development
- . Sudden speech or sensory disorders
- . Inappropriate emotional responses, fantasies
- . Neurotic behaviour: rocking, banging head, regression, tics and twitches
- . Self-harming, drug or solvent abuse
- . Fear of parents being contacted
- . Running away
- . Compulsive stealing
- . Masturbation
- . Appetite disorders - anorexia nervosa, bulimia
- . Soiling, smearing faeces

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.

Sexual Abuse Indicators may include the following (this is not designed to be used as a checklist):

- . Sexually explicit play or behaviour or age-inappropriate knowledge
- . Anal or vaginal discharge, soreness or scratching
- . Reluctance to go home
- . Inability to concentrate, tiredness
- . Refusal to communicate
- . Thrush
- . Persistent complaints of stomach disorders or pains
- . Eating disorders, for example anorexia nervosa and bulimia
- . Attention seeking behaviour e.g. self-mutilation, substance abuse
- . Aggressive behaviour including sexual harassment or molestation
- . Unusually compliant
- . Regressive behaviour, Enuresis, soiling

- . Frequent or open masturbation, touching others inappropriately
- . Depression, withdrawal, isolation from peer group
- . Reluctance to undress for PE or swimming
- . Bruises, scratches in genital area

Neglect is 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 caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Neglect indicators may include the following (this is not designed to be used as a checklist):

- . Hunger, tiredness or listlessness
- . Child dirty or unkempt
- . Poorly or inappropriately clad for the weather
- . Poor school attendance or often late for school with poor concentration
- . Affection or attention seeking behaviour
- . Untreated illnesses/injuries
- . Pallid complexion
- . Stealing or scavenging compulsively
- . Failure to achieve developmental milestones, for example growth, weight
- . Failure to develop intellectually or socially
- . Neurotic behaviour

Child Criminal Exploitation (CCE)

Some specific forms of CCE can include children being forced or manipulated into transporting drugs or money through county lines, working in cannabis factories, shoplifting, or pickpocketing. They can also be forced or manipulated into committing vehicle crime or threatening/committing serious violence to others.

Children can become trapped by this type of exploitation, as perpetrators can threaten victims (and their families) with violence or entrap and coerce them into debt. They may be coerced into carrying weapons such as knives or begin to carry a knife for a sense of protection from harm from others. As children involved in criminal exploitation often commit crimes themselves, their vulnerability as victims is not always recognised by adults and professionals, (particularly older children), and they are not treated as victims despite the harm they have experienced. They may still have been criminally exploited even if the activity appears to be something they have agreed or consented to.

It is important to note that the experience of girls who are criminally exploited can be very different to that of boys. The indicators may not be the same, however professionals should be aware that girls are at risk of criminal exploitation too. It is also important to note that both boys and girls being criminally exploited may be at higher risk of sexual exploitation.

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power, sexual gratification 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.

Child sexual exploitation indicators may include the following (this is not designed to be used as a checklist):

- . 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
- . Children who regularly miss school or education or don't take part in education

Child Criminal Exploitation (CCE) and Child Sexual Exploitation (CSE)

We know that different forms of harm often overlap, and that perpetrators may subject children and young people to multiple forms of abuse, such as criminal exploitation (including county lines) and sexual exploitation.

In some cases the exploitation or abuse will be in exchange for something the victim needs or wants (for example, money, gifts or affection), and/or will be to the financial benefit or other advantage, such as increased status, of the perpetrator or facilitator.

Children can be exploited by adult males or females, as individuals or in groups. They may also be exploited by other children, who themselves may be experiencing exploitation – where this is the case, it is important that the child perpetrator is also recognised as a victim.

Whilst the age of the child may be a contributing factor for an imbalance of power, there are a range of other factors that could make a child more vulnerable to exploitation, including, sexual identity, cognitive ability, learning difficulties,

communication ability, physical strength, status, and access to economic or other resources.

Some of the following can be indicators of both child criminal and sexual exploitation

where children:

- appear with unexplained gifts, money or new possessions
- associate with other children involved in exploitation
- suffer from changes in emotional well-being
- misuse alcohol and other drugs
- go missing for periods of time or regularly come home late, and
- regularly miss school or education or do not take part in education.

Children who have been exploited will need additional support to help keep them in education.

Child Sexual Exploitation (CSE) can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse. It can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence.

Some additional specific indicators that may be present in CSE are children who:

- have older boyfriends or girlfriends; and
- suffer from sexually transmitted infections, display sexual behaviours beyond expected sexual development or become pregnant.

Further information on signs of a child's involvement in sexual exploitation is available in Home Office guidance:

<https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners>

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 any type of schools (including special schools), 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.

A number of the indicators for CSE and CCE as detailed above may be applicable to where children are involved in county lines. Some additional 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 'trap house 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.

Further information on the signs of a child's involvement in county lines is available in guidance published by the

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/863323/HOCCountyLinesGuidance - Sept2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/863323/HOCCountyLinesGuidance_-_Sept2018.pdf)

Modern Slavery and the National Referral Mechanism

Modern slavery encompasses human trafficking and slavery, servitude and forced or compulsory labour. Exploitation can take many forms, including: sexual exploitation, forced labour, slavery, servitude, forced criminality and the removal of organs.

Further information on the signs that someone may be a victim of modern slavery, the support available to victims and how to refer them to the NRM is available in Statutory Guidance. <https://www.gov.uk/government/publications/modern-slavery-how-to-identify-and-support-victims>

Children and the court system

Children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. There are two age appropriate guides to support children 5-11-year olds

(<https://www.gov.uk/government/publications/young-witness-booklet-for-5-to-11-year-olds>) and 12-17 year olds

(<https://www.gov.uk/government/publications/young-witness-booklet-for-12-to-17-year-olds>).

The guides explain each step of the process, support and special measures that are available. There are diagrams illustrating the courtroom structure and the use of video links is explained.

Making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. The Ministry of Justice has launched an online child arrangements information tool (<https://helpwithchildarrangements.service.justice.gov.uk/>) with clear and concise information on the dispute resolution service. This may be useful for some parents and carers.

Domestic Abuse is defined as any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse: Psychological, physical, sexual, financial and emotional. Where there is Domestic Abuse in a family, the children/young people will always be affected; the longer the violence continues, the greater the risk of significant and enduring harm, which they may carry with them into their adult life and relationships.

This definition, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group. Schools and Host Families are ideally placed to offer appropriate support, alongside other agencies, whether families are in crisis, or whether there are early signs of potential abuse.

Helplines: <http://www.nationaldomesticviolencehelpline.org.uk>

Advice: <http://www.nhs.uk/Livewell/abuse/Pages/domestic-violence-help.aspx>

<http://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/domestic-abuse>

'Honour' based violence encompasses crimes which have been committed to protect or defend the honour of the family and or the community, including Female Genital Mutilation, forced marriage and practices such as breast ironing. Kew Learning recognises that all cases of honour-based violence fall under the safeguarding and child protection umbrella and will be treated accordingly.

Child-on-child abuse can manifest in many different ways, including but not limited to on-line bullying, sexting, banter, initiation rituals and inappropriate or harmful sexualised behaviours. In most instances, the conduct of children and young people towards each other will be covered by the school behaviour policy. However, some

allegations may be of such a serious nature that they may raise safeguarding concerns. Kew Learning recognise that children are capable of abusing their peers. It will not be passed off as 'banter' or 'part of growing up'. Child-on-child abuse is most likely to include, but may not be limited to:

- ☞ bullying (including cyberbullying, prejudice-based and discriminatory bullying)
- ☞ abuse in intimate personal relationships between children (sometimes known as 'teenage relationship abuse')
- ☞ physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse)
- ☞ sexual violence,⁹ such as rape, assault by penetration and sexual assault; (this may include an online element which facilitates, threatens and/or encourages sexual violence)
- ☞ sexual harassment,¹⁰ such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse
- ☞ 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
- ☞ consensual and non-consensual sharing of nude and semi-nude images and/or videos¹¹ (also known as sexting or youth produced sexual imagery)
- ☞ upskirting,¹² which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm, and
- ☞ initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

Mental Health

All staff should be 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. Education staff, however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. Schools and colleges can access a range of advice to help them identify children in need of extra mental health support, this includes working with external agencies.

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

Modern Slavery and the National Referral Mechanism

Modern slavery encompasses human trafficking and slavery, servitude and forced or compulsory labour. Exploitation can take many forms, including: sexual exploitation, forced labour, slavery, servitude, forced criminality and the removal of organs.

Further information on the signs that someone may be a victim of modern slavery, the support available to victims and how to refer them to the NRM is available in Statutory Guidance. [Modern slavery: how to identify and support victims - GOV.UK](https://www.gov.uk/government/publications/modern-slavery-how-to-identify-and-support-victims)
<https://www.gov.uk/government/publications/modern-slavery-how-to-identify-and-support-victims>

Any concerns, disclosures or allegations of child-on-child abuse in any form should be referred to the Designated Safeguarding Lead. Where a concern regarding child-on-child abuse has been disclosed to the DSL, advice and guidance will be sought from the Local Safeguarding Partnership or LADO and where it is clear a crime has been committed or there is a risk of crime being committed the Police will be contacted.

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 adult staff, homestays and volunteers may have acted in a way that:

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

Low-level concerns are part of a spectrum of behaviour. This includes:

- . inadvertent or thoughtless behaviour
- . behaviour that might be considered inappropriate depending on the circumstances
- . behaviour which is intended to enable abuse.

Examples of such behaviour could include, but are not limited to:

- . being over friendly with children
- . having favourites
- . taking photographs of children on their mobile phone, contrary to school policy
- . engaging with a child on a one-to-one basis in a secluded area or behind a closed door, or
- . humiliating children.

Sharing low-level concerns

All low-level concerns are shared initially with the DSL, and then the DSL should inform Kew Learning General Manager of all the low-level concerns and in a timely fashion according to the nature of each particular low-level concern.

If Kew Learning General Manager is in any doubt as to whether the information which has been shared about a member of staff as a low-level concern in fact meets the harm threshold, they should consult with their LADO.

Recording low-level concerns

All low-level concerns should be recorded in writing. The record should include details of the concern, the context in which the concern arose, and action taken. The name of the individual sharing their concerns should also be noted, if the individual wishes to remain anonymous then that should be respected as far as reasonably possible.

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

References

Low-level concerns should not be included in references unless they relate to issues which would normally be included in a reference, for example, misconduct or poor performance.

Responding to low-level concerns

Once the DSL has received the low level concern, she will (not necessarily in the below order but in an appropriate sequence according to the nature and detail of the particular concern shared with them):

- . speak to the person who raised the concern (unless it has been raised anonymously)
- . speak to any potential witnesses (unless advised not to do so by the LADO)
- . speak to the individual about whom the low level concern has been raised (unless advised not to do so by the LADO)
- . review the information and determine whether the behaviour:
 - (i) is entirely consistent with their staff code of conduct and the law;
 - (ii) constitutes a low level concern;
 - (iii) is not serious enough to consider a referral to the LADO – but may merit consulting with and seeking advice from the LADO;
 - (iv) when considered with any other low-level concerns that have previously been raised about the same individual, could now meet the threshold of an allegation and should be referred to the LADO
 - (v) in and of itself meets the threshold of an allegation and should be referred to the LADO;

The DSL will always seek advice from the LADO where they are in any doubt whatsoever.

While responding to any incident, the DSL will make appropriate notes of:

- . all internal conversations – including with the person who initially shared the low level concern (where this has been possible), the adult about whom the concern has been shared (subject to the above), and any relevant witnesses (subject to the above)
- . all external conversations – for example, with the LADO (where they have been contacted);
- . the action taken and the rationale for the decision taken.

Sexting is the sending of an indecent image and can be illegal. A person under 16 is committing an offence if they send an indecent image of themselves and someone passing this on is also distributing an indecent image of a child. Kew Learning seeks to protect children from sexting and the significant impact it can have.

Upskirting 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 cause the victim humiliation, distress or alarm. It is now a criminal offence.

Advice for children and young people is available at:

<http://www.thinkuknow.co.uk>

<https://www.childline.org.uk/explore/onlinesafety/pages/sexting.aspx>

Advice for adults involved in the safeguarding of Young People is available at:

<http://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/sexting>

Radicalisation is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups. The process of radicalisation is different for every individual and is a process, not a one-off event; it can take place over an extended period or within a very short time frame.

It is important that staff and volunteers are able to recognise possible signs and indicators of radicalisation. Children and young people may be vulnerable to exposure or involvement with groups or individuals who advocate violence as a means to a political or ideological end. They can be drawn into violence or they can be exposed to the messages of extremist groups by many means. These can include family members or friends, direct contact with members' groups and organisations or, increasingly, through the internet, including through social media sites. This can put children and young people at risk of being drawn into criminal activity and has the potential to cause significant harm.

PREVENT is part of the UK's counter terrorism strategy, it focuses on supporting and protecting vulnerable individuals who may be at risk of being exploited by radicalisers and subsequently drawn into terrorist related activity. PREVENT is not about race, religion or ethnicity, the programme is to prevent the exploitation of susceptible people. Schools and Homestays can play an important part in safeguarding children from the risk of radicalisation. Effective early help relies on all staff being vigilant and aware of the nature of the risk for children and young people, and what support may be available.

Potential indicators of radicalisation include:

- . Use of inappropriate language
- . Possession of violent extremist literature
- . Changes in behaviour, language, clothing or appearance
- . The expression of extremist views
- . Advocating violent actions and means
- . Association with known extremists
- . Seeking to recruit others to an extremist ideology

In the case of any concerns please contact the DSL – Min You – office@kewlearning.co.uk

Female Genital Mutilation (FGM) is a form of physical abuse involves female genital mutilation by way of female circumcision, excision or infibulation. The Prohibition of Female Circumcision Act 1985 makes FGM an offence, except on specific physical and mental health grounds and it is an offence to take a girl out of the UK for the purpose of FGM.

The age at which FGM is carried out varies enormously according to the community. The procedure may be carried out shortly after birth, during childhood or adolescence, just before marriage or during a woman's first pregnancy. FGM is extremely harmful and has short- and long-term effects on physical and psychological health.

FGM is internationally recognised as a violation of the human rights of girls and women, and is illegal in most countries, including the UK.

There are a number of factors in addition to a girl's or woman's community or country of origin that could increase the risk that she will be subjected to FGM:

- . The position of the family and the level of integration within UK society – it is believed that communities less integrated into British society are more likely to carry out FGM.
- . Any girl born to a woman who has been subjected to FGM must be considered to be at risk of FGM, as must other female children in the extended family.

- . Any girl who has a sister who has already undergone FGM must be considered to be at risk of FGM, as must other female children in the extended family.
- . Any girl withdrawn from Personal, Social and Health Education or Personal and Social Education may be at risk as a result of her parents wishing to keep her uninformed about her body and rights. The age at which girls undergo FGM varies enormously according to the community. The procedure may be carried out when the girl is new-born, during childhood or adolescence, at marriage or during the first pregnancy. However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at a higher risk.

It is believed that FGM happens to British girls in the UK as well as overseas (often in the family's country of origin). Girls of school age who are subjected to FGM overseas are thought to be taken abroad at the start of the school holidays, particularly in the summer holidays, in order for there to be sufficient time for her to recover before returning to her studies.

There can also be clearer signs when FGM is imminent:

- . It may be possible that families will practice FGM in the UK when a female family elder is around, particularly when she is visiting from a country of origin.
- . A professional may hear reference to FGM in conversation, for example a girl may tell other children about it.
- . A girl may confide that she is to have a 'special procedure' or to attend a special occasion to 'become a woman'.
- . A girl may request help from a teacher or another adult if she is aware or suspects that she is at immediate risk.
- . Parents state that they or a relative will take the child out of the country for a prolonged period.
- . A girl may talk about a long holiday to her country of origin or another country where the practice is prevalent.
- . Parents seeking to withdraw their children from learning about FGM.

It is important that professionals look out for signs that FGM has already taken place so that:

- . the girl or woman affected can be supported to deal with the consequences of FGM
- . enquiries can be made about other female family members who may need to be safeguarded from harm.
- . criminal investigations into the perpetrators, including those who carry out the procedure, can be considered to prosecute those breaking the law and to protect others from harm.

There are a number of indications that a girl or woman has already been subjected to FGM:

- . A girl or woman may have difficulty walking, sitting or standing and may even look uncomfortable.
- . A girl or woman may spend longer than normal in the bathroom or toilet due to difficulties urinating. A girl may spend long periods of time away from a classroom during the day with bladder or menstrual problems.
- . A girl or woman may have frequent urinary, menstrual or stomach problems.
- . There may be prolonged or repeated absences from school or college.
- . A prolonged absence from school or college with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return could be an indication that a girl has recently undergone FGM.
- . A girl or woman may be particularly reluctant to undergo normal medical examinations.
- . A girl or woman may confide in a professional.
- . A girl or woman may ask for help but may not be explicit about the problem due to embarrassment or fear.

8. Designated Staff with Responsibility of Safeguarding

Staff Training

It is important that all staff have training to enable them to recognise the possible signs of abuse and neglect and to know what to do if they have a concern. New staff will receive training during their induction. All staff, including the office staff, local coordinators and homestays (main host) will receive training that is updated every year to a minimum of level 1.

Minimum Safeguarding Training

Designated Safeguarding Lead will hold a minimum of Safeguarding Level 3. This is renewed every three years. Lastly, we advise our host families to undertake Safeguarding Level 1 training as a minimum.

Definitions of each level can be found below.

Level One: Introduction or Induction

In general, a 'Level One,' 'Introduction' or 'Induction' to safeguarding training course should entail how to recognise the signs of abuse, respond to a disclosure, report your concerns, and record information.

Level Two: Advanced Safeguarding

A 'Level Two' or 'Advanced Safeguarding' goes into detail about the procedures of safeguarding, scenarios and what happens after a referral. 'Advanced' or 'Level Two' safeguarding training will have material as it is devised for someone who has day to day or frequent contact with children or vulnerable people.

Level Three: Designated Safeguarding Lead

Level three is often used to refer to the training of Designated Safeguarding Lead. This training is far more detailed on handled a wider range and taking charge of safeguarding issues.

The designated senior member of staff with lead responsibility for child or young person's safeguarding issues is **Min You** – Designated Safeguarding Lead.

Min You can be contacted 24/7 on her mobile 07535527756. Other Team members will cover this role in urgent cases should Min You be unavailable.

Min You is the designated contact and is responsible for:

- . Overseeing the referral of cases of suspected abuse or allegations to Children and Families Services Department of the relevant local authority
- . Providing advice and support to other staff on issues relating to child and vulnerable adult protection
- . Ensuring the maintenance of accurate records of any child or vulnerable adult protection referral, complaint or concern (even where that concern does not lead to a referral)
- . Ensuring that all students who may be vulnerable are aware of what to expect in the way of support from Kew Learning and how to access this support
- . Ensuring that parents and carers of children, young people within the care of Kew Learning are aware of the Child Protection Policy
- . Liaising with the Local Authority Services, Local Safeguarding Children's Boards and other appropriate agencies
- . Ensuring appropriate liaison arrangements are in place with schools which accommodate the children, young people and to put in place individually focussed transition arrangements
- . Ensuring that staff receive appropriate training in safeguarding issues and are aware of Kew Learning Policy and Procedures.

Designated Staff Member

Min You – Kew Learning Pastoral Lead

office@kewlearning.co.uk

Mobile: 07504690511

Office: 02039689890

9. Dealing with Disclosure of Abuse and Procedure for Reporting Concerns

Designated members of staff dealing with reports should consider the following:

Staff should not investigate concerns or allegations themselves as this could contaminate evidence in any future criminal case but should report them immediately to the Designated Person.

In an urgent situation when designated staff members are unavailable, consideration should also be given to contacting the police, if the member of staff to whom the concerns are reported considers the circumstances to constitute an emergency.

In the case of a child living with a host family, it should be recognised that their

If a child, young person or vulnerable adult tells a member of staff or Host Family member about possible abuse:

- . Inform the individual that you must pass the information on, but that only those that need to know about it will be told. Inform them who you will report the matter to.
- . Listen carefully and stay calm.
- . Do not interview the individual, but question normally and without pressure, in order to be sure that you understand what they are telling you.
- . Do not put words into the individual's mouth or ask leading questions.
- . Reassure the individual that by telling you, they have done the right thing.
- . Note the main points carefully.
- . Make a detailed note of the date, time, place, what the individual said, did and your questions etc.
- . Report the issue as a matter of urgency to a designated staff member (contact details are provided for out of normal working hours support), providing them with a copy of any notes you have made.

home or care provider may be implicated in an allegation of abuse. In view of this, the consent of the individual should be requested to inform the relevant Children Services Department. If it is judged that there is significant risk to the immediate safety of the individual, the Designated Person should inform the relevant authorities, including the Police, even if consent has been withheld. They should explain to the individual that their "duty of care" responsibilities require this course of action.

10. Statement of Principles & Practice for Safeguarding Concern

This Statement is available to all personnel, agents, parents, students and host families.

Responding to a Safeguarding Concern

Where a child is at immediate risk of serious harm, any adult present should call 999. Thereafter, our Designated Safeguarding Lead should be contacted as soon as is reasonably practicable.

Where there is a safeguarding concern but no immediate risk of serious harm, the adult who has heard or witnessed this concern should consult with our Designated Safeguarding Lead as soon as practicable and by no later than the end of that same day.

Where any child makes a disclosure relating to harm or abuse to an adult, it is important for that adult to:

- . listen calmly and carefully, showing that their views are taken seriously
- . provide an appropriate and honest level of reassurance
- . avoid interrogating children and asking probing, intrusive and/or leading questions
- . avoid making false promises regarding secrets and confidentiality with the child (because any concern of abuse/harm must be shared with our Designated Safeguarding Lead and any subsequent safeguarding referral)
- . make a confidential written record of the discussion either during the discussion or immediately afterwards. The record should include the key details of the disclosure together with any relevant times, dates, places and people concerned. Audio and video recordings of children making disclosures should be avoided
- . refer all relevant information to our Designated Safeguarding Lead as soon as practicable afterwards, and by no later than the end of the day

Upon receipt of any safeguarding concern, an our Designated Safeguarding Lead shall consult with any other relevant persons and will make any appropriate referrals to the relevant authorities, such as the applicable Local Authority Children's Services department.

11. Safeguarding Concerns – Flow Chart

Kew Learning ensures that we work closely with our local Authority and work together in the most effective way. With any concerns we may have regarding a child we liaise closely with:

The Kingston and Richmond Safeguarding Children Partnership (KRSCP) and Multi-Agency Safeguarding Hub (MASH)

Tel: Kingston - 020 8547 5008 (or 020 8770 5000 out of hours)

Richmond - 0208 891 7969

Email: lscb-support@kingrichlscb.org.uk

The Kingston and Richmond Local Authority Designated Officer (LADO) – Viv Rimmer

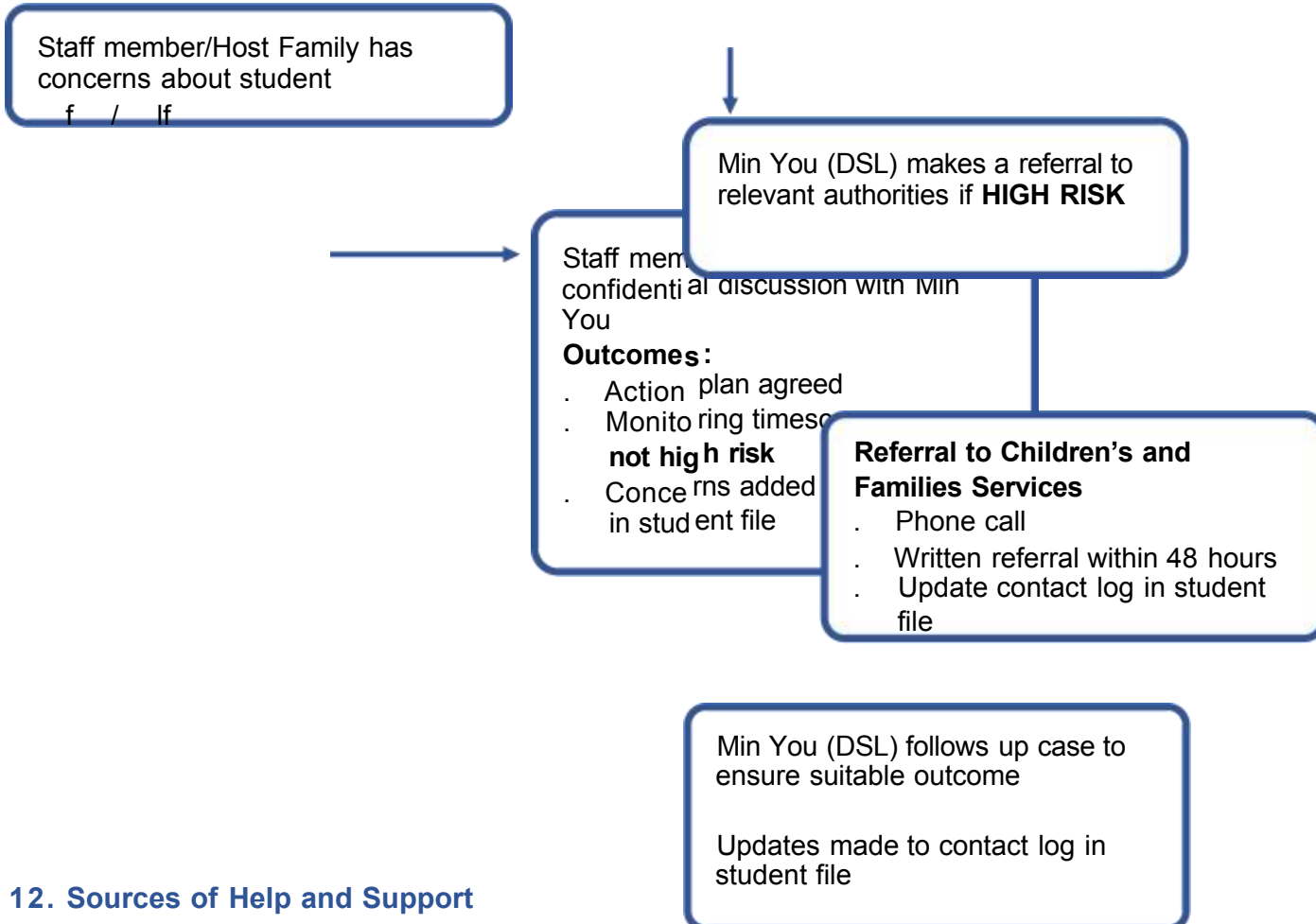
Tel: 020 8547 4609

Email: LADO@achievingforchildren.org.uk

LSPs/LADOs in other areas:

<https://www.safecic.co.uk/your-scb-acpc/55-free-downloads-and-safeguarding-links/61-safeguardingchildren-board-links>

<https://www.childprotectionuk.co.uk/local-safeguarding-children-boards-for-england-and-wales.php>



12. Sources of Help and Support

Wherever possible, potential, alleged or actual victims of abuse should be provided with contact information for organisations that can provide them with further information, advice and support.

These include:

- Childline
Phone: 0800 1111
Email: www.ChildLine.org.uk
- Kingston Samaritans
Tel: 020 8399 6676
Website: www.samaritans.org/branches/kingston-samaritans

Websites aimed at supporting children and young people

- www.bigwhitewall.com
16+ online supportive community
- www.listeningears.org
Young women aged 13-19 years
- <http://www.nhsgo.uk/>
Health information and advice for young people in London
- <http://m.talktofrank.com/>
Info about substances/drugs
- www.youngminds.org
Information and advice
- <https://kooth.com/>
Online counselling available depending on the location of the parent/young person
- www.mind.org.uk
MIND – Mental Health charity
- www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/resources.aspx
Royal College of Psychiatrists info, suggested reading and websites in the young people's section
- <http://www.docready.org>
Helps you get ready for the first time you visit a doctor to discuss your mental health
- <https://www.cwmt.org.uk/resources>
Resources for schools, young people and parents on depression
- www.themix.org.uk/
Offers support to young people under 25
- <https://www.headspace.com/>
Teaches the essentials of meditation and mindfulness
- <https://www.anxietyuk.org.uk/>
Specifically for anxiety
- www.nshn.org.uk/downloads
Specifically for self-harm
- <https://papyrus-uk.org/>
specifically for suicide prevention, you can also call Hopeline UK on 0800 068 4141 or text 07786 209 697
- <https://mermaidsuk.org.uk/>
support specifically for transgender and gender diverse young people
- <https://www.beateatingdisorders.org.uk/>
specifically for eating disorders
- <https://www.time-to-change.org.uk/about-us/what-are-we-doing/children-and-young-people>
- <http://www.rethink.org/living-with-mental-illness/young-people>
- <http://www.thesite.org/>
- <http://www.supportline.org.uk/>
- <http://www.mind.org.uk/information-support/guides-to-support-and-services/children-and-young-people/useful-contacts/>

- <https://www.afcinfo.org.uk/pages/young-people/information-and-advice/looking-after-yourself/emotional-health-service>

Helping others

- <http://www.mind.org.uk/information-support/helping-someone-else/>
- <http://www.rethink.org/living-with-mental-illness/young-people/supporting-a-friend-or-relative-with-their-mental-health>

Medicines info

- www.headmeds.org.uk/
HeadMeds is from Young Minds and is for young people to help make choices about medicine
- www.gosh.nhs.uk/medical-information-0
Great Ormond Street website with useful info

Mental Health Conditions

Information on OCD:

<http://www.ocduk.org/sites/default/files/young-peoples-booklet.pdf>

13. Quick Guides – Keeping Safe

Guidance for the Avoidance of Allegations Against Host Families and Staff

These guidelines are adapted from those offered to staff & Host families within Kew Learning and should be viewed within the context of what constitutes child abuse.

Definitions of abuse can include emotional abuse as well as sexual and physical. Abuse of Trust is a criminal offence whereby any person in a position of responsibility over a 'child' (under 18) who is seen to exploit that position can be prosecuted.

Please note these are guidelines only – your professional judgement within a given situation should also be exercised.

Non-abusive acts (permitted physical contact):

- **Restraint** is permissible as long as it is consistent with legislation and guidance. In general terms you are allowed to use reasonable force to remove a dangerous item from a student or take a student away from a dangerous situation
- **Shepherding** with a hand on back or shoulder
- **Comforting** with a hand on arm, shoulder or back
- **Securing attention** – tapping a student's shoulder

Private Meetings:

- Should be conducted in rooms with visual access and doors should be kept open wherever possible

- . There should be knowledge of another person that the meeting is taking place

Gratuitous physical contact:

- . Must be avoided, and it is unwise to attribute touching to your daily life.

Inappropriate discussions:

- . Must be avoided, and insensitive, disparaging and sarcastic comments are unacceptable
- . Discussion about another student with a student or group of students is unacceptable

Reporting incidents:

- . Following any incident where you feel that your actions or comments have been misconstrued you should discuss the incident with Min You – Pastoral Lead/DSL
- . You should report any crush or infatuation and seek assistance in dealing with the issue before escalation

14. Receiving a Disclosure – A brief Guide

What do I do if a young person tells me about an issue?

DO:

- . Listen carefully and stay calm
- . Do not interview the individual, but question normally and without pressure, in order to be sure that you understand what they are telling you
- . Do not put words into the individual's mouth or ask leading questions
- . Reassure the individual that by telling you, they have done the right thing
- . Inform the individual that you must pass the information on, but that only those that need to know about it will be told. Inform them who you will report the matter to.
- . Note the main points carefully
- . Make a detailed note of the date, time, place, what the individual said, did and your questions etc
- . Report the issue as a matter of urgency to Min You, providing them with a copy of any notes you have made

DO NOT:

- . Investigate concerns or allegations
- . Display shock, horror, anger or disgust
- . Press for details
- . Promise you will do something you may not be able to fulfil

- . Offer to keep it in confidence
- . Take any action beyond that agreed in the procedures

15. Confidentiality and Sharing Information

All staff will understand that child protection issues warrant a high level of confidentiality, not only out of respect for the child and staff involved but also to ensure that being released into the public domain does not compromise evidence.

Staff should only discuss concerns with the Designated Safeguarding Lead. That person will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis.

Record of concern forms and other written information will be stored securely in a locked storage in the safeguarding folder and only made available to relevant individuals.

All relevant information will be stored separately from the child's Individual and academic file and kept in a separate private folder.

The Data Protection Act does not prevent the company's staff from sharing information with relevant agencies, where that information may help to protect a child.

Reporting directly to child protection agencies Staff should follow the reporting procedures outlined in this policy. However, they may also share information directly with children's social care, police or the NSPCC if:

16. Whistleblowing

Whistle blowing is for issues relating to children and young people. The company adheres to the local authority whistle blowing policy and procedures that enable staff to raise concerns relating to:

- . safeguarding
- . crime
- . a miscarriage of justice
- . illegality
- . health and safety
- . environmental or property damage
- . concealing or attempting to cover up any of the above

Reasons for blowing the whistle

Staff will naturally be reticent to report a concern about the conduct of a colleague. However, each individual must take responsibility for ensuring that children are fairly treated. If poor practice is allowed to continue unchecked, it could escalate with serious consequences.

Your action not only protects children, but also deters any suggestion that you have colluded with poor practice that you knew was occurring but chose to ignore.

Whistle blowing can also support the member of staff who is the subject of the concern. Their conduct may result from inexperience or lack of training that can be addressed by the company, or they may be under stress and be relieved when their conduct is questioned.

Staff who deliberately fail children and show no remorse or desire to improve are unlikely to welcome being exposed, but their conduct has to be confronted for the sake of the child.

Refer to the Kew Learning **Whistleblowing Policy** for further details.

IF YOU HAVE ANY CONCERNS, QUERIES OR QUESTIONS:

Please speak to [Min You](#), Kew Learning Pastoral Lead, who is the designated member of staff responsible for such matters.

This Policy is approved and robustly endorsed by KEW LEARNING and is due for review every year.

Signed:  _____

Date: 15 December 2023