



# **Wigston Academies Trust**

## **DRAFT POLICY AND PROCEDURES ON SAFEGUARDING/CHILD PROTECTION FOR SCHOOLS**

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Next Review Date: November 2018

Date Approved by Directors:

Signed by Chair of Directors:

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## Named staff and contacts

- Designated Safeguarding Lead:  
Mr I Cox - Vice Principal
- Deputy Designated Safeguarding Leads:  
Mr M Wilson - Headteacher  
Mrs A Miller – Senior Vice Principal  
Mrs A Pollon – Senior Assistant Principal (College)  
Mr P Leatherland - Vice Principal  
Mr D Mumford - Vice Principal  
Mr M Billingham - Vice Principal (College)  
Mrs M Newby - Assistant Principal  
Miss N Davies - Assistant Principal (College)  
Mrs L Gathercole - Assistant Principal (SENCO)  
Mr C Tongue - Assistant Principal  
Mrs S Bishop - Assistant Principal
- Prevent Single Point of Contact (SPOC):  
Mr I Cox - Vice Principal  
Mrs A Pollon – Senior Assistant Principal (College)
- Designated Teacher for Children in Care:  
Mr M Wilson - Headteacher  
Mrs A Pollon - Assistant Principal (College)
- Nominated Safeguarding Governor  
Mrs S Lamb – Director of Trust  
Mrs N Green – College
- Safeguarding and Improvement Unit contacts:

### **LADO/Allegations**

Mark Goddard, Karen Browne Tel: 0116 305 7597

### **Safeguarding Development Officers:**

Simon Genders [simon.genders@leics.gov.uk](mailto:simon.genders@leics.gov.uk) Tel: 0116 305 7750

Ann Prideaux [ann.prideaux@leics.gov.uk](mailto:ann.prideaux@leics.gov.uk) Tel: 0116 305 7317

### **First Response Children's Duty (Priority 1 referrals)**

Telephone 0116 3050005

First Response Children's Duty  
Room 100B, Pen Lloyd Building  
County Hall,  
Glenfield  
LE3 8RF

**Online Referral Forms (Social Care and ‘Request for Services’ forms)**  
<http://lrsb.org.uk/childreport>

**CSE Consultation Line**  
Tel: 0116 3059521

**Early Help queries and consultation line**  
Tel: 0116 3059521

**CHANNEL referral (extremism/radicalization)**  
Tel: 101  
Prevent engagement team: [prevent.team@leicestershire.pnn.police.uk](mailto:prevent.team@leicestershire.pnn.police.uk)

**United Against Violence and Abuse Helpline (UAVA)**  
Tel: 0808 802 0028

**Leicester City Children and Young People’s Service**  
Duty and Advice Service  
1 Grey Friars  
Leicester  
LE1 5PH

Email: [das-team@leicester.gov.uk](mailto:das-team@leicester.gov.uk)  
Telephone 0116 4541004

# 1 Introduction

1.1 Wigston Academies Trust fully recognises the contribution it can make to protect children and support young people in the Trust. The aim of the policy is to safeguard and promote our young people's welfare, safety and health by fostering an honest, open, caring and supportive climate. The young people's welfare is of paramount importance.

1.2 This policy is consistent with:

- the legal duty to safeguard and promote the welfare of children and young people, as described in section 175 of the Education Act 2002 [or section 157 of the Education Act 2002 for independent school and academies] and the Statutory guidance "Keeping children safe in education – Statutory guidance for schools and colleges", September 2016 and "Working Together to Safeguard Children" 2015.
- the Leicestershire & Rutland Local Safeguarding Children Board (LCSB) Procedures, which contain procedures and guidance for safeguarding children;

1.3 There are four main elements to our Child Protection Policy:

- **Prevention** (e.g. positive school atmosphere, teaching and pastoral support to young people, safer recruitment procedures);
- **Protection** (by following agreed procedures, ensuring staff are trained and supported to respond appropriately and sensitively to Child Protection concerns);
- **Support** (to young people and school staff and to children who may have been abused);
- **Working with parents** (to ensure appropriate communications and actions are undertaken).

1.4 This policy applies to all staff, governors and visitors to WAT. We recognise that child protection is the responsibility of all staff. We will ensure that all parents and other working partners are aware of our child protection policy by mentioning it in our prospectus, displaying appropriate information in our reception and on the website and by raising awareness at meetings with parents.

## 1.5 Extended school activities

Where the Governing Body provides services or activities directly under the supervision or management of WAT staff, the WAT's arrangements for child protection will apply. Where services or activities are provided separately by another body, the Governing Body will seek assurance in writing that the body concerned has appropriate policies and procedures in place to safeguard and protect young people and there are arrangements to liaise with WAT on these matters where appropriate.

## **2 Safeguarding Commitment**

2.1 WAT adopts an open and accepting attitude towards children as part of its responsibility for pastoral care. Staff encourage young people and parents to feel free to talk about any concerns and to see the trust as a safe place when there are difficulties. Young people's worries and fears will be taken seriously and children are encouraged to seek help from members of staff.

2.2 WAT will therefore:

- Establish and maintain an ethos where young people feel secure and are encouraged to talk, and are listened to;
- Ensure that young people know that there are adults in the trust whom they can approach if they are worried or are in difficulty;
- Include in the curriculum activities and opportunities for PSHE/Citizenship which equip young people with the skills they need to stay safe from abuse (including online), and to know to whom they can turn for help;
- Ensure every effort is made to establish effective working relationships with parents and colleagues from other agencies;
- Operate safer recruitment procedures and make sure that all appropriate checks are carried out on new staff and volunteers who will work with young people, including identity, right to work, enhanced DBS criminal record and barred list (and overseas where needed) references, and prohibition from teaching or managing in schools (s.128);

### **2.3 Safeguarding in the Curriculum**

Young people are taught about safeguarding in the trust. The following areas are among those addressed in PSHE and in the wider curriculum:

Bullying/Cyberbullying

Child Sexual Exploitation (CSE), Including Online

Domestic violence / Relationships / Consent

Drugs, alcohol and substance abuse

E Safety / Internet safety

Preventing Extremism and Radicalisation (see Appendices 5 and 6)

Female Genital Mutilation (FGM) (see Appendix 7)

Fire and water safety

Honour Based Violence issues (HBV) e.g forced marriage

Prevent Agenda

Road safety

Self-Harm

Stranger danger

### **3 Roles and Responsibilities**

#### **3.1 General**

All adults working with or on behalf of young people have a responsibility to safeguard and promote their welfare. This includes a responsibility to be alert to possible abuse and to record and report concerns to staff identified with child protection responsibilities within the trust.

The names of the Designated Safeguarding Leads for the current year are listed at the start of this document.

#### **3.2 Governing Body**

In accordance with the Statutory guidance *Keeping Children Safe in Education (September 2016)*, the Governing Body (i.e. board of trustees, members, directors, local governing body) will ensure that:

- The trust has a child protection/safeguarding policy, procedures and training in place which are effective and comply with the law at all times. The policy is made available publicly.
- The trust operates safer recruitment practices, including appropriate use of references and checks on new staff and volunteers. Furthermore, the Principal, a nominated Governor and other staff involved in the recruitment process have undertaken Safer Recruitment Training.
- There are procedures for dealing with allegations of abuse against members of staff and volunteers. (See Appendix 2).
- There is a senior member of the leadership team who is designated to take lead responsibility for dealing with child protection (the “Designated Safeguarding Lead”) and there is always cover for this role with appropriate arrangements for before/after school and out of term time activities.
- The Designated Safeguarding Lead undertakes effective Local Authority training (in addition to basic child protection training) and this is refreshed every two years. In addition to this formal training, their knowledge and skills are updated at regular intervals (at least annually) via safeguarding e-briefings, etc.
- The Principals, and all other staff and volunteers who work with young people (including early years practitioners within settings on the trust site), undertake appropriate training which is regularly updated at least annually; and that new staff and volunteers who work with young people are made aware of the trust’s arrangements for child protection and their responsibilities (including this policy and Part 1 of Keeping Children Safe in Education). The Local Authority Induction leaflet, “Safeguarding in Education Induction – Child Protection Information, Safer Working Practice” will be used as part of this induction.

- Any deficiencies or weaknesses brought to the attention of the Governing Body will be rectified without delay.
- Chair of governors (or, in the absence of a Chair, the Vice Chair) deals with any allegations of abuse made against the Principal, in liaison with the Local Authority Allegations Manager (LADO).
- Effective policies and procedures are in place and updated annually including a behaviour “code of conduct” for staff and volunteers – “Guidance for Safer Working Practice for those who work with children in education settings, October 2015”. Information is provided to the Local Authority (on behalf of the LSCB) through the Annual Safeguarding Return.
- There is an individual member of the Governing Body who will champion issues to do with safeguarding young people and child protection within the trust, liaise with the Designated Safeguarding Lead, and provide information and reports to the Governing Body.
- The school contributes to inter-agency working in line with statutory guidance “Working Together to Safeguard Children” 2015 including providing a co-ordinated offer of Early Help for children who require this. This Early Help may be offered directly through school provision or via referral to an external support agency (e.g. Supporting Leicestershire Families). Safeguarding arrangements take into account the procedures and practice of the local authority and the Local Safeguarding Children Board (LSCB).

### **3.3 Principal**

The Principal will ensure that:

- The policies and procedures adopted by the Governing Body are effectively implemented, and followed by all staff;
- Sufficient resources and time are allocated to enable the Designated Safeguarding Lead and other staff to discharge their responsibilities, including taking part in strategy discussions and other inter-agency meetings, and contributing to the assessment of young people;
- Allegations of abuse or concerns that a member of staff or adult working at WAT may pose a risk of harm to a child or young person are notified to the Local Authority Designated Officer;
- All staff and volunteers feel able to raise concerns about poor or unsafe practice in regard to young people, and such concerns are addressed sensitively and effectively in a timely manner. The NSPCC whistle blowing helpline number is also available (0800 028 0285).
- All staff are made aware that they have an individual responsibility to pass on safeguarding concerns and that if all else fails to report these directly to Children’s Social Care (Children’s Services) or the Police.



### 3.4 **Designated Safeguarding Lead (DSL)**

The responsibilities of the Designated Safeguarding Lead are found in Annex B of “Keeping children safe in education” and include:

- Provision of information to the LSCB/Local Authority on safeguarding and child protection in compliance with section 14B of the Childrens Act 2004.
- Liaison with the Governing Body and the Local Authority on any deficiencies brought to the attention of the Governing Body and how these should be rectified without delay.
- Management and referral of cases of suspected abuse to Specialist Services First Response Children’s Duty (and/or Police where a crime may have been committed).
- Act as a source of support, advice and expertise within the trust.
- To attend and contribute to child protection conferences when required.
- Be alert to the specific needs of children in need, those with educational needs and young carers.
- Ensure each member of staff has access to and understands the trust’s child protection policy especially new or part-time staff who may work with different educational establishments.
- Ensure all staff have induction training covering child protection and staff behaviour and are able to recognise and report any concerns immediately they arise and give Part 1 of “Keeping children safe in education” to all staff.
- Keep detailed, accurate and secure written records of concerns and referrals;
- Obtain access to resources and effective training for all staff and attend refresher training courses every two years. Keep up to date with new developments in safeguarding by accessing briefing and journals at least annually.
- Where young people leave the trust, ensure their child protection file is handed to the Designated Safeguarding Lead and signed for in the new school/college as soon as possible.
- Maintain and monitor child protection records, including monitoring and acting upon individual concerns, patterns of concerns (e.g. children who repeatedly go missing) or complaints, in accordance with the section on “Records, Monitoring and Transfer” below.

## 4 Records, Monitoring and Transfer

- 4.1 Well-kept records are essential to good child protection practice. All staff are clear about the need to record and report concerns about a child or young people within the trust. The Designated Safeguarding Lead is responsible for such records and for deciding at what point these records should be passed over to other agencies.
- 4.2 Records relating to actual or alleged abuse or neglect are stored apart from normal student or staff records. Normal records sometimes have markers to show that there is sensitive material stored elsewhere. This is to protect individuals from accidental access to sensitive material by those who do not need to know.
- 4.3 Child protection records are stored securely, with access confined to specific staff, e.g. Designated Safeguarding Leads and the Principal.
- 4.4 Child protection records are reviewed regularly to check whether any action or updating is needed. This includes monitoring patterns of complaints or concerns about any individuals and ensuring these are acted upon.
- 4.5 When young people transfer school their safeguarding records are also transferred. Safeguarding records will be transferred separately from other records and best practice is to pass these directly to a Designated Safeguarding Lead in the receiving school (or Sixth Form/FE college), with any necessary discussion or explanation and to obtain a signed and dated record of the transfer. In the event of a child moving out of area and a physical handover not being possible then the most secure method should be found to send the confidential records to a named Designated Safeguarding Lead and a photocopy kept. Files requested by other agencies e.g. Police should be copied.

## 5 Support to students and school staff

### 5.1 Support to students

The trust recognises that young people who are abused or who witness violence may find it difficult to develop a sense of self-worth and view the world in a positive way. For such young people the trust may be one of the few stable, secure and predictable components of their lives. Other young people may be vulnerable because, for instance, they have a disability, are in care, or are experiencing some form of neglect. WAT seeks to remove any barriers that may exist in being able to recognise abuse or neglect in pupils experiencing Special Educational Needs or Disability. We will seek to provide such young people with the necessary support and to build their self-esteem and confidence.

- 5.2 **Peer on peer abuse** – the trust recognises that young people sometimes display abusive behaviour themselves and that such incidents or allegations must be referred on for appropriate support and intervention. Such abuse will not be tolerated or passed off as ‘banter’ or ‘part of growing up’. This abuse could for example include sexual assaults, initiation/hazing type

violence, all forms of bullying, aggravated sexting and physical violence experienced by both boys and girls. These concerns are supported by other WAT policies. Where specific risks are identified, a risk assessment will be undertaken in order to ensure the safety of all staff and pupils.

- 5.3 **Sexting** – WAT will always respond if informed that students have been involved in “sexting” (youth produced sexual imagery). The UK Council for Child Internet Safety (UKCCIS) guidance, “Sexting in schools and colleges: responding to incidents and safeguarding young people” will be used to guide the trust’s response on a case by case basis. The key points being:
- Inform the Principal/DSL as soon as possible
  - Support the victim as appropriate and in accordance with their best interests
  - Inform all parents of involved children unless by doing so you put a child at risk
  - Images will not be viewed by trust staff
  - If the trust is to deal with the matter, involve parents in ensuring the images are deleted
  - If there is evidence of exploitation or the targeting of a vulnerable student, inform the police.
- 5.4 **Children Missing from Education** – the trust recognises the entitlement that all children have to education and will work closely with the local authority to share information about pupils who may be missing out on full time education or who go missing from education. The local authority will also be informed where children are to be removed from the school register a) to be educated outside the school system; b) for medical reasons; c) because they have ceased to attend; d) because they are in custody; d) because they have been permanently excluded.
- 5.5 **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. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Staff training includes raising awareness of this issue and any concerns are passed to a DSL who will make a risk assessment and refer to Local Authority First Response Children’s Duty if appropriate.
- 5.6 **So-called “honour-based” violence (HBV)** encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM) (see Appendix 7), forced marriage, and practices such as breast ironing. All forms of so-called HBV are abuse (regardless of the motivation) and concerns will be passed to a DSL for onward referral as required.
- 5.7 **Private fostering arrangements** - Where a child under 16 (or 18 with a disability) is living with someone who is not their family or a close relative for 28 days or more, staff inform the Designated Safeguarding Lead so that a referral to Children’s Social Care for a safety check, can be made. (A close relative includes step-parent, grandparents, uncle, auntie or sibling).
- 5.8 Complaints or concerns raised by parents or young people will be taken seriously and followed up in accordance with the school’s complaints process.
- 5.9 Support for Staff

As part of their duty to safeguard and promote the welfare of children and young people staff may hear information, either from the child/young person as part of a disclosure or from another adult that will be upsetting. Where a member of staff is distressed as a result of dealing with a child protection concern, he/she should in the first instance speak to the Designated Safeguarding Lead about the support they require. The Designated Safeguarding Lead should seek to arrange the necessary support.

## **6 Working with parents/carers**

The trust will:

- Ensure that parents/carers have an understanding of the responsibility placed on the trust and staff for child protection by setting out its obligations in the prospectus.
- Undertake appropriate discussion with parents/carers prior to involvement of Children & Family Services Children's Social Care or another agency, unless to do so would place the child at risk of harm or compromise an investigation.

## **7 Other Relevant Policies**

7.1 The Governing Body's statutory responsibility for safeguarding the welfare of young people goes beyond simply child protection. The duty is to ensure that safeguarding permeates all activity and functions. This policy therefore complements and supports a range of other policies, for instance:

- Anti-Bullying (including Cyberbullying)
- Behaviour Management
- Equal Opportunities
- Esafety
- Extended school activities
- First aid and the administration of medicines
- Health and Safety
- Physical Interventions/Restraint (DfE Guidances "Use of Reasonable Force" and "Screening, searching and confiscation")
- Racist incidents
- Sex and Relationships Education
- Site Security
- Special Educational Needs
- Toileting/Intimate care
- Trips and visits
- Work experience and extended work placements

The above list is not exhaustive but when undertaking development or planning of any kind the trust will consider the implications for safeguarding and promoting the welfare of young people.

## **8 Recruitment and Selection of Staff**

- 8.1 The trust's safer recruitment processes follow the Statutory Guidance: *Keeping Children Safe in Education September 2016, Part Three: Safer Recruitment*.
- 8.2 The trust will provide all the relevant information in references for a member of staff about whom there have been concerns about child protection / inappropriate conduct. Cases in which an allegation has been proven to be unsubstantiated, unfounded, false or malicious will not be included in employer references. A history of repeated concerns or allegations which have all been found to be unsubstantiated, malicious etc. will also not be included in a reference.
- 8.3 The trust has an open safeguarding ethos regularly addressing safeguarding responsibilities during staff meetings and fostering an ongoing culture of vigilance. All new staff and volunteers receive a safeguarding induction and are briefed on the code of conduct for adults working with children. The Leicestershire County Council Induction leaflet is given to all staff and is the basis for the safeguarding induction.
- 8.4 In line with statutory requirements, every interview panel for WAT staff will have at least one member (teacher/manager or governor) who has undertaken safer recruitment training.
- 8.5 Staff and volunteers who provide early years or later years childcare and any managers of such childcare are covered by the disqualification regulations of the Childcare Act 2006 and are required to declare relevant information – see statutory guidance: Disqualification under the Childcare Act 2006 (February 2015).

## APPENDIX 1

### PROCEDURE TO FOLLOW IN CASES OF POSSIBLE, ALLEGED OR SUSPECTED ABUSE, OR SERIOUS CAUSE FOR CONCERN ABOUT A CHILD

#### Contents

<b>A</b>	<b>General</b>	
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<b>C</b>	<b>Designated Safeguarding Lead – main procedural steps</b>	

#### **A. General**

- 1) The Local Safeguarding Children Board Procedures contain the inter-agency processes, protocols and expectations for safeguarding young people. (Available on LSCB website [www.lrsb.org.uk](http://www.lrsb.org.uk) : The Designated Safeguarding Lead is expected to be familiar with these, particularly the referral processes.
- 2) It is important that all parties act swiftly and avoid delays.
- 3) Any person may seek advice and guidance from the First Response Children’s Duty Professionals Consultation Line, particularly if there is doubt about how to proceed. Any adult, whatever their role, can take action in his/her own right to ensure that an allegation or concern is investigated and can report to the investigating agencies.
- 4) Written records, dated and signed, must be made to what has been alleged, noticed and reported, and kept securely and confidentially.
- 5) In many cases of concern there will be an expectation that there have already been positive steps taken to work with parents and relevant parties to help alleviate the concerns and effect an improvement for the child. This is appropriate where it is thought a child may be in need in some way, and require assessment to see whether additional support and services are required. An example might be where it is suspected a child may be the subject of neglect. In most cases the parents’ knowledge and consent to the referral are expected, unless there is reason for this not being in the child’s interest. However, there will be circumstances when informing the parent/carer of a referral that might put the child at risk, and in individual cases advice from Children’s Social Care will need to be taken.

#### **B. Individual Staff/Volunteers/Other Adults – main procedural steps**

- 1) When a child makes a disclosure, or when concerns are received from other sources, do not investigate, ask leading questions, examine young people, or promise confidentiality. Young people making disclosures should be reassured and if possible at this stage should be informed what action will be taken next.
- 2) As soon as possible write a dated, timed and signed note of what has been disclosed or noticed, said or done and report to the Designated Safeguarding Lead in the trust immediately. Do not hold on to disclosed information. Pass on the written record. (Appendix 3 – available in WAT staffrooms.)

- 3) If the concern involves the conduct of a member of staff or volunteer, a visitor, a governor, a trainee or another young person or child the, the Principal must be informed.
- 4) If the allegation is about the Principal, the information should normally be passed to the Chair of Governors or the Local Authority Allegations Manager (LADO).
- 5) If this has not already been done, inform the child (or other party who has raised the concern) what action you have taken.

**C. Designated Safeguarding Lead – main procedural steps**

- 1) Begin a case file which will hold a record of communications and actions to be stored securely (see Section on Records, Monitoring and Transfer).
- 2) Where initial enquiries do not justify a referral to the investigating agencies, inform the initiating adult and monitor the situation. If in doubt, seek advice from the First Response Professionals Consultation line.
- 3) Share information confidentially with those who need to know.
- 4) Where there is a child protection concern requiring immediate, same day, intervention from Children's Social Care (Priority 1), the First Response Children's Duty should be contacted by phone. Written confirmation should be made within 24 hours on the LSCB Agency Referral Form to Children's Social Care. All other referrals should be made using the online form (see link <http://lrsb.org.uk/childreport>).
- 5) If the concern is about young people using sexually abusive behaviour, refer to Appendix 8.
- 6) If it appears that urgent medical attention is required arrange for the child to be taken to hospital (normally this means calling an ambulance) accompanied by a member of staff who must inform medical staff that non-accidental injury is suspected. Parents must be informed that the child has been taken to hospital.
- 7) Exceptional circumstances: If it is feared that the child might be at immediate risk on leaving school, take advice from the First Response Professionals Consultation line (for instance about difficulties if the school day has ended, or on whether to contact the police). Remain with the child until the Social Worker takes responsibility. If in these circumstances a parent arrives to collect the child, the member of staff has no right to withhold the child, unless there are current legal restrictions in force (e.g. a restraining order). If there are clear signs of physical risk or threat, First Response Children's Duty should be updated and the Police should be contacted immediately.

## **APPENDIX 2**

### **PROCESS FOR DEALING WITH ALLEGATIONS AGAINST STAFF (INCLUDING PRINCIPALS) AND VOLUNTEERS**

These procedures should be followed in all cases in which there is an allegation or suspicion that a person working with young people has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children

Relevant documents:

- DfE “Keeping children safe in education: Statutory guidance for schools and colleges” September 2016 (part 4: Allegations of abuse made against teachers and other staff).

#### **1) Individual Staff/Volunteers/Other Adults who receive the allegation:**

- i. Write a dated, timed and signed note of what has been disclosed or noticed, said or done. (Appendix 3 – available in WAT staffrooms.)
- ii. Report immediately to the Principal.
- iii. Pass on the written record.
- iv. If the allegation concerns the conduct of the Principal, report immediately to the Chair of Governors. Pass on the written record. (If there is difficulty reporting to the Chair of Governors, contact the Allegations Manager (LADO), Safeguarding and Improvement Unit as soon as possible.)

#### **2) Principal (or Chair of Governors)**



- i. If there is no written record, write a dated and timed note of what has been disclosed or noticed, said or done.
- ii. Before taking further action notify and seek advice from the Allegations Manager, (LADO) Safeguarding and Improvement Unit on the same day.
- iii. You may be asked to clarify details or the circumstances of the allegation, but this must not amount to an investigation.
- iv. Report to First Response Children's Duty if the Allegations Manager so advises or if circumstances require a referral concerning a child.
- v. Ongoing involvement in cases:
  - Liaison with the Allegations Manager (LADO).
  - Co-operation with the investigating agency's enquiries as appropriate.
  - Consideration of employment issues and possible disciplinary action where the investigating agencies take no further action.
  - Possible referral to the DBS or NCTL depending on the outcome.

**APPENDIX 3** (available in WAT staffrooms)

**Wigston Academies Trust  
Child Protection Referral**

This referral should be completed by the person who received the initial disclosure.

Name of Young Person: \_\_\_\_\_

D. O B: \_\_\_\_\_ Tutor Group: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date/Time of Disclosure: \_\_\_\_\_

Place of Disclosure: \_\_\_\_\_

Context of Disclosure: \_\_\_\_\_

Name of Adult to Whom Disclosure Made: \_\_\_\_\_

Other Persons Present:

Outline of Disclosure: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*(PTO for additional detail)*

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

*Please forward to Designated Safeguarding Lead*



## **APPENDIX 4**

### TIGER-TOTS NURSERY

Please see Tiger-Tots Pre-school policies:

Child Protection.

Personal Care Policy.

Staff Behaviour Policy.

Policies can be found on the Tiger Tots area of the Wigston College website:

<http://www.wigstoncollege.org/community/tiger-tots/policies/>

## **APPENDIX 5**

### **Safeguarding students who are vulnerable to extremism and radicalisation**

WAT recognises the duties placed on us by the Counter Terrorism Bill (July 2015) to prevent our students being drawn into terrorism.

These include:

- Assessing the risk of students being drawn into terrorism (See Appendix 6)
- Working in partnership with relevant agencies under the LSCB procedures
- Appropriate staff training
- Appropriate online filtering.

WAT is committed to actively promoting the fundamental British values of democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs; the students are encouraged to develop and demonstrate skills and attitudes that will allow them to participate fully in and contribute positively to life in modern Britain.

There is a current threat from terrorism in the UK and this can include the exploitation of vulnerable young people, aiming to involve them in terrorism or to be active in supporting terrorism.

WAT seeks to protect children and young people against the messages of all violent extremism including but not restricted to those linked to Islamist Ideology, Far Right / Neo Nazi / White Supremacist ideology etc. Concerns should be referred to the Single Point Of Contact (SPOC) (usually a Designated Safeguarding Lead or Principal) who have local contact details for Prevent and Channel referrals. They will also consider whether circumstances require Police to be contacted

## APPENDIX 6

### **Radicalisation and Extremism Risk Assessment**

Wigston Academies Trust

	<b>Yes/No</b>	<b>Evidence</b>
Does the trust have a policy?	Yes	Appendix 5 of Wigston Academies Trust Policy and Procedures on Safeguarding/Child Protection.
Does the trust work with outside agencies on radicalisation and extremism e.g. Channel?	Yes	Contact details for Prevent and Channel referrals available as necessary. Work with Police and Children's Social Care.
Have staff received appropriate training?	Yes	DSLs and WAT staff received WRAP training through DSLs (August 2016).
Has the trust got a trained Prevent lead?	Yes	DSLs. NDa and NRi have completed the "Channel General Awareness Module" through the College of Policing & Metropolitan Police Service.
Do staff know who to discuss concerns with? (Single point of contact - SPOC)	Yes	DSLs as per Page 3 of Wigston Academies Trust Policy and Procedures on Safeguarding/Child Protection.
Is suitable filtering of the internet in place?	Yes	All internet usage is filtered and overseen by Wigston Academies Trust IT support.
Do children know who to talk to about their concerns?	Yes	Students can speak to any member of WAT staff, including their tutor, Safeworker, DoL, school counsellor, school nurse, mentor.
Are there opportunities for children to learn about radicalisation and extremism?	Yes	PSHE lessons.
Have any cases been reported?	Yes	Referral by SPOC (College) for advice from Channel referral number.
Are individual pupils risk assessed?	Yes	If appropriate.
What factors make the school community potentially vulnerable to being radicalised?		Our local PCSOs are not aware of any risk factors in the community and the trust has strong links with the local PCSOs. We are aware that

(e.g. EDL local base, extreme religious views promoted locally, tensions between local communities, promotion of radical websites by some pupils/parents)	students' access to the internet outside of school is a risk.						
<p>Comment on the trust's community, locality and relevant history.  The local community which the school serves consists predominantly of White British families. The community is made up of low paid employment.</p>							
Risk evaluation	<table border="1"> <tr> <td data-bbox="367 474 626 548"><b>Low</b></td> <td data-bbox="626 474 1393 548">Way Forward.</td> </tr> <tr> <td data-bbox="367 548 626 621">Medium</td> <td data-bbox="626 548 1393 621">Wigston Academies Trust will continue to raise staff awareness of safeguarding pupils/students, who are vulnerable to extremism and radicalisation and ensure that extremism and radicalisation are addressed in the curriculum.</td> </tr> <tr> <td data-bbox="367 621 626 787">High</td> <td data-bbox="626 621 1393 787"></td> </tr> </table>	<b>Low</b>	Way Forward.	Medium	Wigston Academies Trust will continue to raise staff awareness of safeguarding pupils/students, who are vulnerable to extremism and radicalisation and ensure that extremism and radicalisation are addressed in the curriculum.	High	
<b>Low</b>	Way Forward.						
Medium	Wigston Academies Trust will continue to raise staff awareness of safeguarding pupils/students, who are vulnerable to extremism and radicalisation and ensure that extremism and radicalisation are addressed in the curriculum.						
High							

Date completed: November 2016

Signed.....

## **APPENDIX 7**

### **Female Genital Mutilation**

Section 5B of the Female Genital Mutilation Act 2003 and section 74 of the Serious Crime Act 2015 places a mandatory duty on teachers along with social workers and healthcare professionals to report to the police where they discover that FGM appears to have been carried out on a girl under 18 or where a girl discloses that she has undergone FGM. The trust's response to FGM will take into account the government guidance, "Multi-agency statutory guidance on female genital mutilation" April 2016. Staff will also follow the established safeguarding procedure by reporting any such concerns to the Designated Safeguarding Lead and a report must also be made to the Police.

There will be a considered safeguarding response towards any girl who is identified as being at risk of FGM (eg there is a known history of practising FGM in her family, community or country of origin) which may include sensitive conversations with the girl and her family, sharing information with professionals from other agencies and/or making a referral to Children's Social Care. If the risk of harm is imminent there are a number of emergency measures that can be taken including police protection, an FGM protection order and an Emergency Protection Order.



## **APPENDIX 8**

### **Leicestershire County Council Guidance for Schools Working with Children and Young People who Display Sexually Abusive Behaviour.**

#### **Identifying Sexually Abusive Behaviour**

The NSPCC Information Briefing on “Children and Young People who display sexually harmful behaviour” acknowledges that in the first instance it can be very difficult to define what sexually abusive behaviour is primarily because sexual behaviour in young people and children can be seen on a continuum from mutually agreed experimentation, through to serious incidents such as sexual assault.

Retrospective studies have shown that between 25-35% of all alleged sexual abuse involves young perpetrators, and that the majority of these are adolescent males, but young children and females also commit abuse.

Research by Morrison (1999) has shown that sexually abusive behaviour needs to be understood in the context of early life and family experiences. The majority of children and young people exhibiting sexually abusive behaviour have been or are continuing to suffer from some form of abuse. They may use sexually abusive behaviour to experience having power or control over others, or they may use this type of behaviour as a means of finding comfort and/or pleasure. Again, research suggests that the younger the child/young person using sexually abusive behaviour the more likely that the child/young person is a victim of abuse and it is his or her way of responding to their own experience.

It is recognised that children and young people who use sexually abusive behaviour do not necessarily go onto become adult sexual offenders. However, Abel et. al (1985) suggests that 50% of adult sexual offenders admit to having started their sexual offending as adolescents.

The earlier sexually abusive behaviour is identified, the better the chance of effective intervention.

## Expected and Concerning Sexual Behaviours

AGES	(EXPECTED)	(CONCERNING)
<b>0-5 years</b>	Intense curiosity about others' bodies and bathroom activities. Masturbation from infancy/pre-school continues as a self-soothing behaviour, generally are indiscreet. Behaviour is exploratory. May show genitalia to others in a curiosity seeing way. Children at this stage respond quickly to re-direction.	Curiosity becomes obsessive pre-occupation. Exploration becomes re-enactment of specific adult sexual activity. Behaviour involves coercion toward other or injury to themselves. Cannot be re-directed – “stuck” behaviour makes them feel less anxious.
<b>0-10 years (Latency)</b>	Continue to touch and fondle their own genitals, evolving to masturbation. More secretive about self-touching/curiosity. Seeking turns to game-play (I'll show you mine... show me yours”), play doctor”.	Sexual penetration. Genital kissing. Oral copulation. Simulated intercourse. Putting objects inside self/others.
<b>10-12 years (Pre-adolescence)</b>	Masturbation continues. Some same gender sexual experiences and viewing of other's bodies, especially of the gender they are attracted to. Interest in pornographic materials. Sexual activity with peers, which includes, but is not limited to kissing, fondling.	Sexual play with younger children, behaviour involves coercion, bribes, and threats. Pre-occupation/obsessive quality.

(Adapted from: Cunningham & Macfarlane: “when children Molest Children”, 1991)

### **What happens when a child or young person is suspected or identified as having used sexually abusive behaviour**

Where a child or young person in school is considered to have used sexually abusive behaviour, it should be identified as a Child Protection concern. As such, Social Care need to be contacted, to pass on details of the concern, and to seek advice on how to proceed without interfering with any future investigation. Social Care (in conjunction with the Police) will make a decision as to whether or not the behaviour described meets the criteria of sexually abusive behaviour requiring intervention. If the behaviour reported is deemed to meet these criteria, they will initiate an enquiry. To inform this process a Strategy Meeting/Discussion will take place which will enable professionals involved to plan and co-ordinate the enquiry. A representative from the school may be invited to this meeting to share information.

If the conclusion of the enquiry is that the child or young person has used sexually abusive behaviour, a further decision is needed to decide whether or not he or she is also a Child in Need of Protection him/herself. If the enquiry reveals that they are victims of abuse themselves, or are at risk of abuse, they will be considered to be a Child in Need of Protection, and consequently a Child Protection Conference should take place.

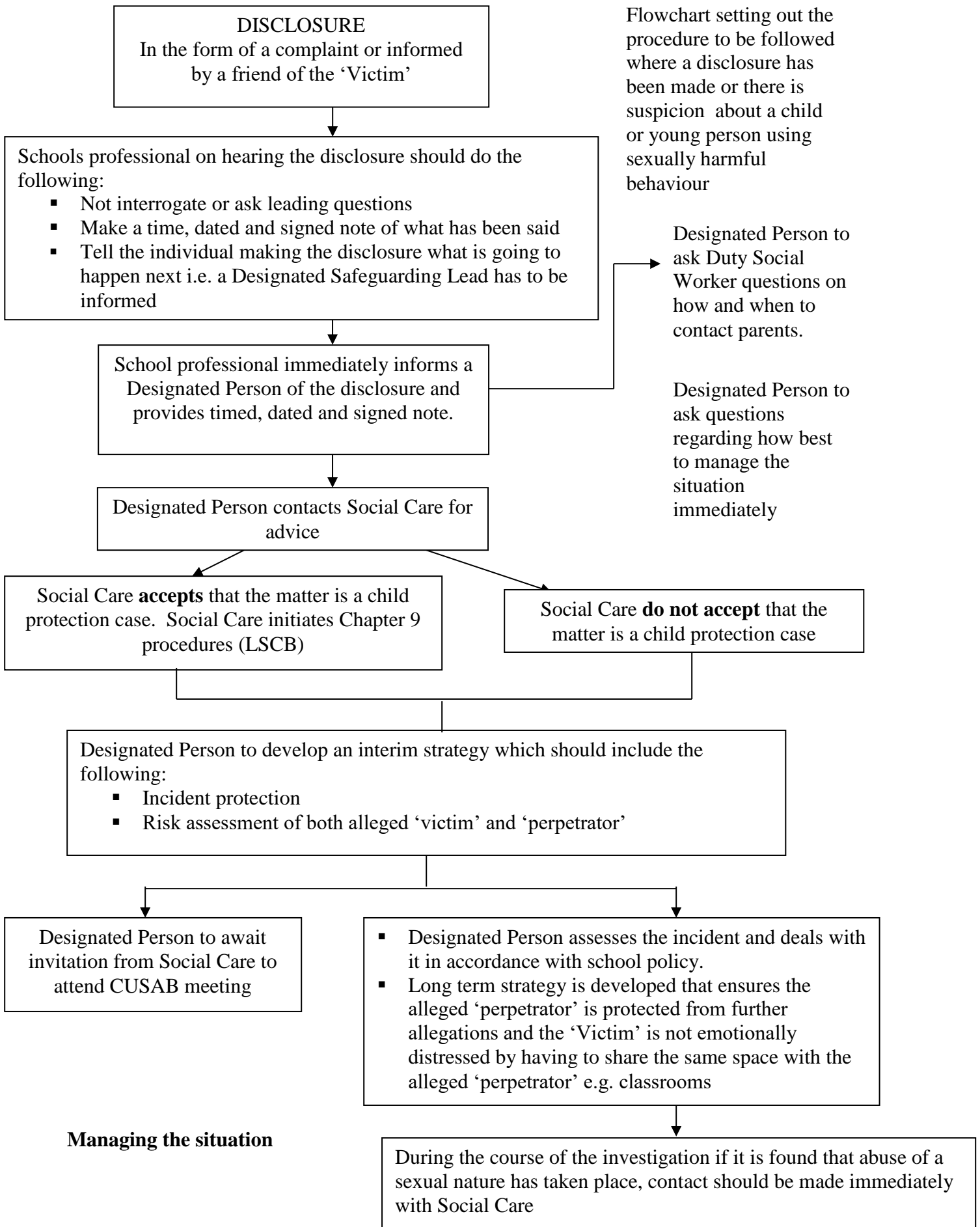
This Conference will need to consider a Child Protection Plan for the child or young person, as well as co-ordination of an assessment of their sexually abusive behaviour.

Where it is deemed that the child or young person does not meet the criteria to necessitate a Child Protection Conference, a Multi-agency Assessment and Planning Meeting (CUSAB Meeting) will be called instead, to plan and co-ordinate the roles of the various agencies and individuals contributing to the assessment of the child/young person. In both cases, a representative of the school should be invited to attend, to share information that can support the decision making process.

### **The response of schools to a child or young person using sexually abusive behaviour**

Where a suspicion or concern has been raised by a member of staff within the school about a child or young person using sexually abusive behaviour, or details regarding such behaviour have come to the attention of the school as a result of an agency making contact, the challenges for schools remain the same, that of supporting any investigation being undertaken by Social Care/Police, as well as balancing the needs of the alleged 'perpetrator' and the needs of the 'victim'. Added to this, the school should also be seeking to minimise any risk from the perpetrator to other children or young people within in the school setting.

Flowchart setting out the procedure to be followed where a disclosure has been made or there is suspicion about a child or young person using sexually harmful behaviour



Designated Person to ask Duty Social Worker questions on how and when to contact parents.

Designated Person to ask questions regarding how best to manage the situation immediately

**Managing the situation**

During the course of the investigation if it is found that abuse of a sexual nature has taken place, contact should be made immediately with Social Care

The situation within the school needs to be managed in such a way that both the alleged ‘victim’ and perpetrator can continue their education and risk to other pupils within the school is sufficiently managed.

### **What support can a school provide to a ‘victim’ of sexually abusive behaviour?**

- Support of his or her emotional well-being;
- The need to feel safe;
- Provide an identified member of staff (not the same person who has been identified to support the perpetrator) who is able to offer pastoral care if or when he or she is feeling upset, worried or if he or she is feeling actively intimidated by the ‘perpetrator’s’ friends;
- Provide an identified member of staff who will take appropriate action in line with existing school policies in the event of bullying or intimidation is used as a means to silence the ‘victim’;
- Communication between school and his or her parents, and information about further sources or support.

### **What support can a school provide to a ‘perpetrator’ of sexually abusive behaviour?**

- Provide an identified member of staff that he or she can speak to ( not the same person who is supporting the victim)
- Make school a “safe” place e.g. identify risky areas;
- Support his or her emotional well-being e.g. identify those situations in the child’s or young person’s life which can put the child or young person under pressure and act as a trigger for sexually abusive behaviour;
- Support the child or young person in taking responsibility for their offending behaviour e.g. not to collude or minimise the behaviour when offering support;
- Try to avoid shaming him or her;
- A managed move to another school may be considered.

Where the ‘victim’ is emotionally distressed and coming into contact with the ‘perpetrator’ impacts on his/her emotional well-being then consideration should be given to excluding the ‘perpetrator’. Exclusion of the ‘perpetrator’ should also be considered where there is sufficient evidence to suggest that the risk that he or she presents to other pupils cannot be effectively managed in the school environment.

## **Support Plans**

### **A good Support Plan should include the following:**

- Identification of any potentially “risky” situations ;
- Methods for monitoring the child or young person during periods that are usually unsupervised;
- Additional educational support e.g. session on positive relationships and boundaries;
- Identification of the support that parent(s)/carer(s) will provide to the child or young person;
- Duration of the Support Plan;
- Identified member or school staff that child or young person can approach if experiencing any difficulties in school

### **Children or young people known to have used sexually abusive behaviour**

There will be occasions when schools will have been made aware of a child or young person who is known to have used sexually abusive behaviour. Where information regarding a child or young person has come from an agency such as the Police, Social Care etc, it is likely that a level of inter-agency work has already been established. In such circumstances the Designated Person should make contact with the key professional responsible to discuss issues of risk management and how the school can best support the intervention programme.

### **Confidentiality**

In all child protection work, the degree of confidentiality is governed by the need to protect the child. Confidentiality may not be maintained if withholding information may prejudice the welfare of a child. It is important to ensure that any information that is passed on is on a strictly need-to-know basis and therefore, concerns about a child or young person should not be a matter of common knowledge unless the designated person and the adult that raised the concern originally, are involved.

In circumstances where a child or young person has used sexually abusive behaviour it is important that key people such as the Principal/Principal, Year Head and the teacher with the best relationship with the child or young person are made aware of the situation. The same key people hold true for the alleged ‘victim’ of abuse.

Information regarding the alleged ‘victim’ and/or ‘perpetrator’ should not be a matter of common knowledge amongst teaching and support staff, nor pupils or parents. The issue of who needs to know should form a natural part of the Incident Protection Plan, the risk assessment and the Support Plan.

Clear guidance is in the LSCB Procedures:-

[www.lrsb.org.uk](http://www.lrsb.org.uk)

## Evaluating sexual behaviour – nursery and primary settings

This checklist can help staff in nursery and primary educational settings make decisions about the sexual behaviour of a specific child or children. It is adapted from the AIM Project guidance document produced by Carol Carson. Consider seeking advice from CSC if any behaviours are problematic or abusive.

### 1. Type of sexual behaviour

Healthy	Age appropriate, mutual and exploratory.
Problematic	Not age appropriate or has some adult knowledge or language.
Abusive	Adult sexual activity, e.g. intercourse, oral sex

### 2. Context of behaviour

Healthy	Open, light hearted, spontaneous.
Problematic	No secrecy or force, but children involved seem uncomfortable.
Abusive	Behaviour is planned or secretive; there are elements of threat, force or coercion. The children targeted seem anxious, fearful, and uncomfortable.

### 3. Response of other children

Healthy	Engaging freely, happy
Problematic	Uncomfortable or unhappy with behaviour but not fearful or anxious. If behaviour is directed at adults, they feel uncomfortable.
Abusive	Uncomfortable, unhappy, fearful, anxious. Could be physically hurt. Could be trying to avoid the other child.

### 4. Relationship between the children

Healthy	Similar age and ability would normally play together. There are no factors to suggest a power imbalance.
Problematic	Children would not normally play together or there may be some factors which suggest one child is more in control than the other.
Abusive	Children would not normally play together or there are clear power differences due to age, size, status, ability, strength etc.

### 5. Frequency of the behaviour

Healthy	Behaviour is age appropriate, ad hoc and not the main focus for the child. The child is interested in other things.
Problematic	Some inappropriate sexual behaviour for age, however child also has interest in other things. Behaviour is intermittent.
Abusive	Frequent incidents and child seems focused on behaviour. It is disproportionate to other aspects of their life. They seem to seek comfort, reassurance or control from the behaviour.

## 6. Persistence of the behaviour

Healthy	Behaviour is age appropriate, ad hoc and not the main focus for the child. The child is interested in other things.
Problematic	Behaviour is recurring and there are some difficulties in distracting and redirecting the behaviour. However child is responsive to some intervention.
Abusive	Child cannot be distracted from the behaviour easily and returns to the behaviour. Focus on the behaviour is disproportionate to other aspects of their life. It appears to be the main way they seek comfort, attention or control.

## 7. Child's emotional response

Healthy	Happy, embarrassed, able to take responsibility for their behaviour and its effects on others (dependent on their age and understanding)
Problematic	Child unresponsive, ashamed, struggles to take responsibility for their behaviour or to show empathy.
Abusive	Child angry, fearful, aggressive, distressed, or conversely passive and lacks an understanding of why people are worried. Cannot take responsibility for their behaviour or show any empathy for others.



## Evaluating sexual behaviour - secondary schools

This checklist can help staff in secondary educational settings make decisions about the sexual behaviour of a specific pupil or pupils. It is adapted from the AIM Project guidance document produced by Carol Carson. Consider seeking advice from CSC if any behaviours are considered to be problematic or abusive.

### 1. Type of sexual behaviour

Healthy	Explicit sexual discussion, jokes. Interest in erotic material and use in masturbation. Consenting mutual behaviours, either non-coital, masturbation or intercourse.
Problematic	Sexual preoccupation/anxiety. Use of hard core pornography. Indiscriminate sexual activity/intercourse. Single occurrences of peeping, frottage, obscene letter/texts.
Abusive	Compulsive, persistent and aggressive sexual behaviours. Use of pornography with sadistic/violent themes. Involvement of significantly younger children. Any use of aggression or violence is of high concern.

### 2. Context of behaviour

Healthy	Mutual informed consent given.
Problematic	Behaviour appears influenced by peers. Touching behaviours (non-penetrative). Isolated incident.
Abusive	Behaviour is planned or secretive; there are elements of threat, force or coercion. Previous concerns or convictions for sexual behaviour.

### 3. Young Person's response

Healthy	Happy, comfortable, perhaps curious; may be embarrassed if found by adults.
Problematic	Embarrassed, ashamed, anxious. Demonstrates remorse and empathy.
Abusive	Lack of empathy, denies responsibility and blames the victim. Anger, aggression, defensive. Little concern about being caught.

### 4. Response of others

Healthy	Happy, comfortable, perhaps curious; may be embarrassed if found by adults.
Problematic	Uncomfortable or irritated, but not fearful or anxious. Feel able to tell someone.
Abusive	Uncomfortable, fearful, anxious, avoidant of the young person.

### 5. Relationship between the young people

Healthy	Within the same peer group and ability group. Would normally socialise together. There are no factors to suggest a power imbalance.
Problematic	Young people may not socialise together. May be some factors which suggest one young person is more in control than the other. May be a naïve attempt at developing a relationship.
Abusive	Young people would not normally socialise with each other or there are clear power differences in the relationship. Young person has very poor social skills or deficits in intimacy skills.

## 6. Persistence of the behaviour

Healthy	Healthy interest in sexual behaviour, but it is not the sole focus of interest in the young person's life.
Problematic	Interest in sexual behaviour is out of balance with other aspects of the young person's life.
Abusive	Young person is obsessed or preoccupied with sexual thoughts or pornography, which may be sadistic and aggressive. The focus on sex is out of balance with other aspects of their life. The behaviour is a way for them to cope with negative emotions.

## 7. Other behavioural problems

Healthy	No other behavioural problems, healthy peer relationships.
Problematic	Young person has poor sexual boundaries and may have difficulties coping with emotions.
Abusive	Young person has a diagnosis of depression or other significant mental health problems. Formal diagnosis of conduct disorder. History of cruelty to animals. Self reported sexual interest in children.

## 8. Background information known

Healthy	No significant family history
Problematic	Parents are angry or show no concern for the victim. Family members include people who are known to be a risk to children.
Abusive	Discontinuity of care/poor attachments. Physical, emotional, sexual abuse; neglect; witnessing domestic violence.

## Checklist for evaluating sexual behaviour - children and young people with special needs

This checklist can help staff in educational settings make decisions about the sexual behaviour of a specific child or young person with special needs. It is adapted from the AIM Project guidance document produced by Carol Carson. Consider seeking advice from CSC if any behaviours are considered to be problematic or abusive.

### 1. Type of sexual behaviour

Healthy	Complex to define due to nature of learning difficulty and gap between chronological and developmental age/stage
Problematic	Behaviours that are self-directed e.g. self-stimulation, compulsive masturbation, indiscriminate arousal. Behaviour includes non-penetrative contact, with young people targeted
Abusive	High level of compulsivity, fetish behaviour, frequent use of internet to obtain sexual images. Use of force/violence to secure compliance. Previous patterns of sexually aggressive behaviours

### 2. Context of behaviour

Healthy	Mutual, both parties free to engage and disengage
Problematic	Behaviour infrequent or isolated incident. Behaviour self-directed. Behaviour restricted to a specific setting
Abusive	Behaviour is planned or secretive; there are elements of threat, force or coercion. Previous concerns or convictions for sexual behaviour

### 3. Young Person's response

Healthy	Happy, comfortable, perhaps curious; may be embarrassed if found by adults
Problematic	Embarrassment or shame related to the behaviour. Is able to understand and retain the reasons why others feel the behaviour is problematic or abusive. Experiences consequences as significant or has some degree of awareness of consequences. Appears highly anxious or confused as to sexual development and/or sexual boundaries
Abusive	Unclear as to the consequences of sexual behaviour, or the consequences appear to have little meaning for them. Reject concerns expressed

### 4. Response of others

Healthy	Happy, comfortable, perhaps curious; may be embarrassed if found by adults
Problematic	Uncomfortable or irritated, but not fearful or anxious. Feel able to tell someone
Abusive	Uncomfortable, fearful, anxious, avoidant of the young person

### 5. Relationship between the young people

Healthy	There should be no significant differences in age or development which would suggest there is a power imbalance
Problematic	One or two particular young people targeted. Young person predominantly associates with children three or more years younger
Abusive	Evidence of targeting on the basis of perceived vulnerability. Clear power differences in the relationship. Young person has poor social skills or deficit in intimacy skills

### 6. Persistence of the behaviour

Healthy	Healthy interest in sexual behaviour, but it is not the sole focus of interest in the young person's life
Problematic	Responds to complaints by stopping or changing behaviour. Intervention has some impact but behaviours may continue
Abusive	Evidence of a high level of sexual compulsivity. Behaviours have persisted despite significant negative consequences

### 7. Other behavioural problems

Healthy	No other behavioural problems, healthy peer relationships
Problematic	No significant history of behavioural problems, generally positive relationships with peers. Access to others is well supervised. OR, young person is isolated in the community or has a very restricted lifestyle. Access to others is poorly supervised
Abusive	Concurrent diagnosis of significant mental health problems. Pattern of problematic sexual behaviours emerging in early childhood and continuing into adolescence. Viewed negatively in community due to sexual behaviours. History of fire setting. Long standing history of severely problematic or challenging behaviours

### 8. Background information known

Healthy	No significant family history. Parents have a positive view of young person's developing sexuality. Positive attachments with parents and carers. Young person has at least one positive friendship. Young person has access to social and leisure pursuits. Young person has access to appropriate sex education
Problematic	Family anxious about young person's developing sexuality and have inappropriate concerns. Family experiencing high levels of stress. Siblings have experienced sexual abuse
Abusive	Young person has experienced sexual, physical or emotional abuse or neglect. Violence in the household. Members of the family, including siblings, have a history of sexual offending. Poor or distorted sexual boundaries in the family. Patterns of discontinuity of care/poor attachments