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SAFEGUARDING AND CHILD PROTECTION POLICY

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Elite Mentors

Safeguarding and Child Protection Policy

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INTRODUCTION

Safeguarding and protecting children means creating a safe, supportive environment where every child is protected from harm, abuse, and neglect. Elite mentors have a responsibility to remain vigilant, listen to children, and recognise any signs of concern. They must follow clear safeguarding policies, report issues promptly, and act in the best interests of the child at all times. By promoting respect, trust, and wellbeing, mentors help ensure every child feels safe, valued, and supported.

Purpose of the Policy

The Centre is committed to safeguarding and promoting the welfare, health (including mental health), and safety of all pupils. We aim to create and maintain an open, secure, caring, and supportive environment in which every child feels safe and valued. This commitment includes:

- Proactively educating pupils about safeguarding and how to protect themselves.
- Ensuring robust systems and procedures are in place to safeguard pupils effectively.
- Acting at all times in the best interests of the child.

Staff Responsibilities

All staff members share responsibility for safeguarding and are expected to:

- Contribute to maintaining a safe and supportive environment in which all children can learn and thrive.

- Understand how to respond appropriately if a child discloses abuse or neglect.
- Recognise and act upon concerns relating to the behaviour or conduct of any adult within the Centre.
- Maintain an appropriate level of confidentiality while ensuring that safeguarding concerns are shared with relevant professionals when necessary.
- Identify pupils who may benefit from Early Help intervention.
- Report any safeguarding concerns promptly to the Designated Safeguarding Lead (DSL) or Deputy DSL.
- Be familiar with the local Early Help procedures and understand the Centre's role within them.
- Understand the process for referring concerns to Children's Social Care and be prepared to contribute to statutory assessments where required.

Definition of Safeguarding

For the purposes of this policy, safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment.
- Preventing impairment of children's health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking appropriate action to enable all children to achieve the best possible outcomes.

Everyone who works with children and their families has a responsibility to safeguard their welfare. To fulfil this responsibility effectively, all professionals must adopt a child-centred approach, ensuring that the best interests of the child are paramount at all times.

No single professional can have a complete understanding of a child's needs and circumstances. To ensure that children and families receive the right help at the right time, all individuals who come into contact with them must play

a role in identifying concerns, sharing relevant information appropriately, and taking prompt action where necessary.

This policy and its procedures apply to all teaching and non-teaching staff, residential and pastoral staff, support staff, peripatetic and contract staff, ancillary staff, volunteers, non-centre-based staff, and any other adults working at the Centre. Throughout this document, references to “staff” or “members of staff” apply to all such individuals unless otherwise stated.

The term **DSL** refers to the Designated Safeguarding Lead. This Safeguarding Policy, together with the Code of Conduct, applies to all pupils and adults at the Centre.

Definitions and Terminology

- **Children:** Any person under the age of 18.
- **DSL (Designated Safeguarding Lead):** The named individual within the Centre responsible for safeguarding leadership and coordination.
- **Designated Officer:** The person appointed by the local authority to manage allegations made against adults working with children.
- **KCSIE:** *Keeping Children Safe in Education*, the statutory safeguarding guidance for schools and colleges.

Related Documentation

This policy should be read alongside the most current versions of the following statutory and guidance documents:

National Guidance:

- The Education (Independent School Standards) Regulations 2014
- Keeping Children Safe in Education (KCSIE, September 2019)

- Working Together to Safeguard Children (July 2018)
- Prevent Duty Guidance
- Disqualification under the Childcare Act
- What to do if you are worried a child is being abused – Advice for practitioners

This policy is reviewed and updated annually, incorporating feedback from staff. It is distributed to all staff and volunteers and is published on the Centre’s website. The policy is based on *Keeping Children Safe in Education (2019)*, and all references to national guidance relate to the versions listed above. The Centre will always use the relevant statutory guidance as the benchmark for safeguarding practice and decision-making.

Internal Policies:

- Safer Recruitment Policy
- Risk Assessment Policy
- Complaints Policy

Safer Recruitment

The Centre is committed to fostering a strong culture of safer recruitment as a fundamental part of its safeguarding strategy. All statutory requirements relating to the suitability of staff and volunteers who work with children are rigorously followed.

The purpose of the Safer Recruitment Policy is to deter, identify, and reject individuals who may pose a risk to pupils or who are otherwise unsuitable to work with children. Robust recruitment and selection procedures are in place to ensure that only appropriate candidates are appointed.

The aims of the Centre’s recruitment policy are to:

- Recruit the most suitable staff based on merit, ability, qualifications, and suitability for the role.
- Ensure that all applicants are treated fairly, consistently, and transparently throughout the recruitment process.
- Promote equality of opportunity and prevent discrimination on any grounds, including race, colour, nationality, ethnic or national origin, religion or belief, sex, sexual orientation, marital or civil partner status, disability, or age.
- Ensure compliance with all relevant legislation and statutory guidance, including Keeping Children Safe in Education (KCSIE), Prevent Duty Guidance, and guidance issued by the Disclosure and Barring Service (DBS).
- Fulfil the Centre's commitment to safeguarding and promoting the welfare of children and young people by undertaking all required pre-employment checks.

Further details are available in the Centre's Safer Recruitment Policy.

Types of Abuse

The term *abuse* is used as a broad descriptor covering a range of safeguarding concerns. Staff must remain vigilant to indicators of abuse and neglect in order to identify children who may require support or protection. Safeguarding issues rarely occur in isolation; multiple concerns may overlap.

Abuse

Abuse is a form of maltreatment. A child may be abused or neglected through the infliction of harm or by a failure to prevent harm. Abuse may occur within a family, institutional, or community setting, by individuals known to the child or, more rarely, by strangers. Abuse may take place entirely online or may be facilitated by technology. It can be perpetrated by adults or by other children.

Physical Abuse

Physical abuse involves causing physical harm to a child, including actions such as hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating, or otherwise inflicting injury.

Physical harm may also result where a parent or carer fabricates or deliberately induces illness in a child.

Possible indicators of physical abuse include:

- Injuries to areas of the body where accidental injury is unlikely (e.g., thighs, back, abdomen).
- Respiratory difficulties resulting from drowning, suffocation, or poisoning.
- Untreated or inadequately treated injuries.
- Bruising resembling hand or finger marks or caused by an object.
- Burns (including cigarette burns), human bite marks, scalds, or unexplained scarring.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child resulting in severe and adverse effects on their emotional development. It may involve conveying to a child that they are worthless, unloved, inadequate, or valued only insofar as they meet another person's needs.

It may include silencing a child, preventing them from expressing views, mocking their communication, or imposing age-inappropriate expectations. Emotional abuse may also involve overprotection, restricting social interaction, exposing a child to the ill-treatment of others, serious bullying (including cyberbullying), or exploitation and corruption.

Emotional abuse is often present alongside other forms of abuse but may occur independently.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. This may involve physical contact (including assault by penetration such as rape or oral sex) or non-penetrative acts (such as touching or kissing).

It also includes non-contact activities, such as:

- Involving children in the production or viewing of sexual images.
- Encouraging sexually inappropriate behaviour.
- Grooming a child in preparation for abuse.

Sexual abuse may occur online or offline. It can be perpetrated by adults or by other children. Peer-on-peer sexual abuse is a specific safeguarding concern within educational settings.

Possible indicators of sexual abuse include:

- Pregnancy.
- Sexually transmitted infections.
- Pain, itching, bleeding, bruising, or discharge in the genital or anal areas.
- Urinary infections.
- Difficulty walking or sitting.
- Persistent sore throats or stomach aches.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, resulting in serious impairment of health or development. Neglect may begin during pregnancy (e.g., through maternal substance misuse).

After birth, neglect may include failure to:

- Provide adequate food, clothing, or shelter.
- Protect a child from harm or danger.
- Provide appropriate supervision.
- Ensure access to necessary medical care or treatment.
- Respond appropriately to a child's emotional needs.

Possible indicators of neglect include:

- A child who is significantly underweight, overweight, or whose weight is deteriorating.
- Inadequate clothing for weather conditions.
- Persistent absence or lateness without explanation.
- Being regularly left alone or responsible for younger siblings inappropriately.

Peer-on-Peer Abuse

Staff must remain alert to safeguarding concerns involving abuse between children. This may include:

- Bullying, including cyberbullying.
- Physical harm (e.g., hitting, kicking, biting, hair pulling).
- Sexual violence or sexual harassment.
- Sexting (youth-produced sexual imagery).
- Initiation or hazing-type violence and rituals.
- “Upskirting” (taking images under a person’s clothing without consent).

Honour-Based Violence (HBV)

Honour-Based Violence refers to incidents or crimes committed to protect or defend the perceived honour of a family or community. It may involve practices such as Female Genital Mutilation (FGM), Forced Marriage, or breast ironing.

Such abuse often involves extended family or community pressure. If staff have concerns that a child may be at risk of Honour-Based Violence, they must inform the DSL immediately.

Female Genital Mutilation (FGM)

FGM involves the partial or total removal of female external genitalia for non-medical reasons and is illegal in the UK. Under the Female Genital Mutilation Act 2003, teachers have a mandatory duty to report to the police (via 101) if, in the course of their professional duties, they discover that FGM appears to have been carried out on a girl under 18. All other concerns must be referred to the DSL.

Forced Marriage (FM)

Forced marriage is a criminal offence in England and Wales. It occurs when one or both individuals do not consent to the marriage and coercion, threats, or violence are used.

Breast Ironing

Breast ironing (also known as breast flattening) involves pressing or massaging a pubescent girl's breasts with hard or heated objects to delay development. It is a harmful practice often carried out under the belief that it will protect the girl from harassment, early pregnancy, or forced marriage. It constitutes abuse and must be treated as a safeguarding concern.

Behavioural Signs of Abuse and Neglect

Changes in a child's behaviour may indicate that they are experiencing abuse or neglect. While these signs do not necessarily confirm abuse, they should prompt further consideration and, where appropriate, discussion with the Designated Safeguarding Lead (DSL).

A child who is being abused may:

- Display aggressive, disruptive, or attention-seeking behaviour.
- Become withdrawn, anxious, angry, disinterested, or show reduced creativity.
- Appear frightened of certain adults.
- Seem sad, depressed, or socially isolated.
- Experience sleep difficulties.
- Exhibit age-inappropriate sexual knowledge or sexualised behaviour.
- Refuse to change for physical education or avoid physical activities.
- Develop eating difficulties or disorders.
- Engage in self-harm.
- Refuse to attend school or run away from home.
- Demonstrate low self-esteem or lack of confidence.
- Misuse drugs or alcohol.

Children with Special Educational Needs and/or Disabilities (SEND)

Children with special educational needs and/or disabilities are statistically at greater risk of abuse, including peer-on-peer abuse. Recognising abuse in this group can present additional challenges, including:

- Assumptions that behavioural changes, mood variations, or injuries are solely related to a child's disability without further investigation.

- The possibility that children with SEND may be disproportionately affected by bullying or abuse without displaying obvious outward signs.
- Communication barriers that may make disclosure or identification of abuse more difficult.

Staff must remain vigilant and ensure that safeguarding concerns are not overlooked or misattributed.

Indicators of Abuse or Neglect in Parents or Responsible Adults

Certain behaviours displayed by parents or carers may raise safeguarding concerns. These may include:

- Placing unrealistic expectations on a child's academic or physical performance.
- Providing inconsistent, implausible, or contradictory explanations for injuries.
- Displaying indifference towards, or overt rejection of, the child.
- Denying or blaming the child for problems at home or school.
- Describing the child as worthless, burdensome, or in consistently negative terms.
- Refusing professional support or intervention for the child's difficulties.
- Demonstrating significant social or emotional isolation.

Grooming

Grooming is the process by which an individual prepares a child, significant adults, and the wider environment for abuse. Grooming can occur online or offline and may be carried out by individuals of any gender or age, whether known to the child or not. Many children do not recognise that they have been groomed or that the behaviour constitutes abuse.

Possible indicators that a child may be experiencing grooming include:

- Increased secrecy, particularly regarding online activity.
- Relationships with significantly older individuals.
- Visiting unusual locations to meet friends.
- Possessing unexplained new items (e.g., clothes or mobile phones).
- Access to drugs or alcohol.
- Going missing from home or school.
- Sudden behavioural changes.
- Sexual health concerns.
- Expressions of self-harm, suicidal ideation, depression, or feelings of worthlessness.

In older children, signs of grooming may resemble typical adolescent behaviour; however, unexplained or concerning changes should be carefully assessed.

Signs of Online Abuse

A child may be experiencing online abuse if they:

- Spend significantly more or less time online than usual.
- Appear withdrawn, distressed, or angry after internet use.
- Are secretive about online contacts or activities.
- Have numerous new contact details on digital devices.

Concerning Behaviour by Adults/Sex offenders

While these behaviours do not automatically indicate abuse, they warrant vigilance:

- Excessive affection or preferential treatment towards a particular child.
- Spending unnecessary time alone with a child outside the classroom or school.
- Isolating a child from peers.
- Giving gifts or money, toys, cards without clear justification.
- Communicating inappropriately via text, email, or social media.
- Engaging in flirtatious or sexually suggestive behaviour.
- Isolating a child from school.

How Institutional Grooming May Occur

Institutional grooming refers to behaviours used by perpetrators to build trust with a child in order to exploit or abuse them. It often follows a pattern and may involve the following actions:

- **Targeting vulnerable individuals:** Offenders may focus on children who appear vulnerable, isolated, lacking confidence, or who may need emotional support or attention.
- **Building the child's trust:** The individual may try to gain the child's confidence by allowing behaviour that is normally not permitted by parents or the Centre, such as breaking rules or sharing inappropriate content, to encourage secrecy.
- **Gaining the trust of others:** Perpetrators may appear friendly, helpful, and popular with children, parents, and colleagues. By building a positive reputation, they reduce suspicion and increase access to children.

- **Becoming important to the child:** This may involve giving gifts, offering extra help, showing favouritism, or providing special attention, which can make the child feel valued and dependent on the adult.
- **Isolating the child:** The offender may try to spend time alone with the child or gradually weaken the child's relationships with friends, family, or other trusted adults.
- **Introducing inappropriate behaviour:** Physical contact may begin with seemingly harmless actions such as friendly touches, hugs, or playful behaviour, and may gradually become more inappropriate.
- **Maintaining secrecy and control:** The perpetrator may use their position of authority or trust to make the child feel they must keep the relationship secret or that they have no choice but to comply.

Understanding these behaviours helps staff recognise warning signs and take appropriate steps to protect children.

Grooming for Radicalisation

There are no single indicators of vulnerability to radicalisation; however, a combination of factors may increase risk, including:

- Significant behavioural change.
- Social isolation or rejection.
- Exposure to extremist influences or literature.
- Conflict with family regarding beliefs or lifestyle.
- Experiences of discrimination or hate crime.
- Identity confusion or personal crisis.
- Poverty
- Confused identity
- Victim or witness to race or hate crimes.
- Changes in behaviour.

Child Criminal Exploitation (CCE)

Child Criminal Exploitation is commonly associated with “county lines” activity, where children are coerced into transporting drugs or money between areas.

Indicators may include:

- Increased absence from school.
- Association with older individuals or gangs.
- Sudden decline in academic performance.
- Unexplained injuries.
- Significant changes in wellbeing.
- Possession of unexplained gifts or money.

Early Help

Where appropriate, Early Help intervention may prevent concerns from escalating. The DSL will usually coordinate inter-agency support and may designate a lead professional where required.

Early Help may be particularly appropriate for children who:

- Have disabilities or special educational needs.
- Are young carers.
- Show signs of anti-social or criminal behaviour.
- Frequently go missing.
- Misuse drugs or alcohol.
- Are at risk of exploitation or radicalisation.
- Experience challenging family circumstances.
- Show early signs of abuse or neglect.

All Early Help cases must be reviewed regularly, and referral to Children’s Social Care should be considered if concerns escalate.

Children in Need

Under the Children Act 1989, a Child in Need is one who is unlikely to achieve or maintain a reasonable standard of health or development without the provision of services, or whose health or development is likely to be significantly impaired without such support, or who is disabled.

Children assessed as being in need will have been evaluated by Children's Social Care under Section 17 of the Act.

Children Suffering or Likely to Suffer Significant Harm

Local authorities are required under Section 47 of the Children Act 1989 to investigate where there is reasonable cause to suspect a child is suffering, or is likely to suffer, significant harm.

Investigations may relate to abuse, neglect, exploitation, Female Genital Mutilation, Honour-Based Violence, radicalisation, or other serious safeguarding concerns. The Centre will cooperate fully with any such enquiries.

Responding to Disclosures

Safeguarding is the responsibility of all staff. If a child discloses abuse, neglect, or any concern about their safety, staff must respond carefully and appropriately to support the child and ensure the information is handled correctly.

Staff should:

- **Listen carefully and remain calm.** Give the child your full attention and take what they say seriously. Your reaction should be calm and supportive so the child feels safe to continue speaking.

- **Allow the child to speak freely.** Do not interrupt, rush, or pressure the child to provide more information. Let them explain in their own words and at their own pace.
- **Reassure the child.** Let the child know that they have done the right thing by telling someone. Use simple, supportive, and age-appropriate language to help them feel safe and understood.
- **Avoid asking leading questions.** Do not ask questions that suggest an answer or ask “why” questions, as these may make the child feel blamed. Only ask gentle clarification questions if necessary, such as *what happened, when it happened, or where it happened.*
- **Do not promise confidentiality.** Explain to the child that you may need to share the information with appropriate professionals whose role is to help keep them safe.
- **Explain what will happen next.** Tell the child that you will pass the information to the Designated Safeguarding Lead (DSL) or appropriate safeguarding staff, who will decide what action needs to be taken.
- **Record and report the concern.** As soon as possible after the conversation, make a clear and accurate record of what the child said and report it to the Designated Safeguarding Lead following the Centre’s safeguarding procedures.

Responding in this way helps ensure that the child feels supported and that the concern is handled in a safe and professional manner.

Recording

A written record of the disclosure must be made as soon as possible, using the child’s own words where appropriate (clearly indicated in quotation marks).

Concerns should be reported immediately to the DSL or Head of Centre. Documentation must be stored securely with restricted access.

Referrals to Statutory Agencies

Where a child is at risk of harm, a referral must be made immediately to Children's Social Care or the police. Any member of staff may make a referral and must not delay if senior staff are unavailable.

Parental consent is not required where seeking consent would place the child at risk or compromise an investigation.

Where a child is not at immediate risk but may meet the threshold for a Child in Need assessment, referral should be made via the appropriate local authority process.

Confidentiality

Staff must never promise absolute confidentiality. They should explain that information will only be shared with individuals who have a legitimate need to know in order to safeguard the child. All information must be handled sensitively and in accordance with data protection and safeguarding requirements.

Role of the Designated Safeguarding Lead (DSL) and Deputy DSL

The **Designated Safeguarding Lead (DSL)** is the senior staff member responsible for all child protection and safeguarding matters at Elite Mentors. They must be part of the senior leadership or management team, and their role and responsibilities should be clearly included in their job description.

Deputy DSLs (DDSLs) are appointed to support the DSL and act in their absence, ensuring safeguarding responsibilities are always covered.

Support for the DSL

The DSL is given the necessary **time, training, resources, and administrative support** to perform their role effectively. This includes:

1. Advising staff on child welfare and safeguarding concerns.
2. Participating in strategy meetings and multi-agency discussions.
3. Supporting staff to contribute to assessments and safeguarding procedures.

Key Responsibilities of the DSL

The DSL's work is organised into **four main areas**:

1. Managing Referrals
2. Working with Others
3. Training
4. Raising Awareness

1. Managing Referrals

The DSL ensures that any safeguarding concerns are referred promptly and appropriately. This includes:

- **Local Authority Children’s Social Care:** Referring cases of suspected abuse or neglect.
- **Supporting Staff:** Helping staff who are making referrals or raising concerns.
- **Channel Programme:** Referring cases of potential radicalisation and supporting staff in the process.
- **Disclosure and Barring Service (DBS):** Reporting any staff member who has left or been dismissed due to risk or harm to a child, in cooperation with HR.
- **Police:** Reporting cases where a criminal offence may have been committed.

Step-by-Step Summary for Referrals

- Receive concern from staff, child, or parent.
- Assess urgency and seriousness of the concern.
- Decide the appropriate agency for referral (Social Care, Police, Channel, DBS).
- Support staff in completing referral forms or providing statements.
- Maintain a confidential record of the concern and actions taken.
- Follow up to ensure the child’s safety and that actions are progressing.

This step-by-step approach ensures that safeguarding concerns are handled **quickly, clearly, and safely**, keeping the child’s welfare as the top priority.

2. Working with Others

The DSL will:

- Liaise with the Head of Centre to keep them informed of safeguarding issues, particularly ongoing enquiries under Section 47 of the [Children Act 1989](#) and police investigations.
- Liaise, where appropriate, with the local authority Designated Officer (LADO) in cases involving allegations against staff.
- Work closely with pastoral staff, school nurses, IT staff, SENCOs, and other relevant personnel regarding safeguarding matters, including online safety.
- Act as a central source of support, advice, and expertise for all staff.

3. Training

- The DSL and any deputies must undertake appropriate safeguarding training, including inter-agency working, to ensure they have the knowledge and skills required for their role. This training must be refreshed at least every two years.
- In addition, the DSL should complete Prevent awareness training beyond the standard training provided to all staff.

4. Raising Awareness

The DSL is responsible for:

- Ensuring that safeguarding and child protection policies are known, understood, and applied appropriately by all staff.
- Ensuring that the Safeguarding and Child Protection Policy is reviewed at least annually and that procedures are regularly updated in consultation with the proprietor or governing body.

- Ensuring that safeguarding policies are publicly available and that parents are aware that referrals to Children’s Social Care or the police may be made where concerns arise.
- Engaging with local safeguarding partners to remain informed of current procedures, policies, and training opportunities.

Safeguarding Files

Where a pupil leaves the Centre, the DSL must ensure that their safeguarding file is transferred securely and separately from the main pupil file to the receiving Institute, school or college as soon as possible. Confirmation of receipt must be obtained.

The DSL should also consider whether additional relevant information should be shared in advance to ensure appropriate support is in place upon the child’s arrival at the new setting. This should normally be done with parental knowledge unless doing so would place the child or parent at increased risk.

Availability

During term time, the DSL or a deputy will be available during school hours to discuss safeguarding concerns. While availability will normally be in person, in exceptional circumstances it may be via telephone or other secure communication methods, as defined by the Head of Centre.

The DSL is responsible for ensuring appropriate safeguarding cover for out-of-hours or out-of-term activities.

Youth-Produced Sexual Imagery

“Youth-produced sexual imagery” refers to the creation, possession, or sharing of sexual images or videos by children under the age of 18. This term is preferred over “sexting” as it clearly describes the behaviour and avoids ambiguity.

Legal Context:

- Under the **Sexual Offences Act 2003** and the **Protection of Children Act 1978**, it is **illegal for anyone to create, possess, or share sexual images of anyone under 18**, even if the image was created or shared by the child themselves.
- The **NSPCC** provides guidance for schools and staff on how to respond safely to incidents involving youth-produced sexual imagery, emphasising safeguarding and the welfare of the child above all.

Key Points for Staff:

1. Any incident involving sexual images of children must be treated as a **serious safeguarding concern**.
2. Staff **must not** view, forward, or copy the images.
3. The **Designated Safeguarding Lead (DSL)** should be informed **immediately**.
4. The DSL will follow local safeguarding procedures, which may include contacting **children’s social care** or the **police**, as advised by the NSPCC guidance.
5. Support should be provided to the children involved, including potential victims and those who created or shared the imagery, ensuring their safety and wellbeing.

This approach ensures that all incidents are handled **legally, safely, and with the child’s best interests at the centre**.

Covered by This Policy

- A child creating and sharing sexual imagery of themselves with another child.
- A child sharing sexual imagery created by another child.
- A child in possession of sexual imagery created by another child.

Not Covered by This Policy

- Adults sharing sexual imagery of children (this constitutes child sexual abuse and must be reported to the police).
- Sharing of adult pornography.
- Exchange of sexual text messages without imagery.

Responding to Disclosure

All staff must understand how to recognise and respond to disclosures involving youth-produced sexual imagery.

If an incident comes to a staff member's attention:

- It must be referred to the DSL immediately.
- The DSL will conduct an initial review with appropriate staff.
- Parents will be informed at an early stage unless this would place the child at greater risk or compromise a police or social care investigation.
- A referral to Children's Social Care and/or the police will be made immediately if a child is at risk of harm.

Handling Incidents Involving Youth-Produced Sexual Imagery

- Any incident should be **reported to the DSL immediately**.
- The DSL will **review the situation** with appropriate staff and follow guidance from “**Sexting in Schools and Colleges**” (NSPCC/UK Government).
- **Interviews with children** involved may be conducted if appropriate.
- **Parents/guardians** should be informed early, unless doing so could increase risk or interfere with a police/social care investigation.
- If there is any concern that a child is **at risk of harm**, the DSL must **contact Children’s Social Care and/or the police immediately**.

This ensures incidents are managed **safely, legally, and in the child’s best interest**.

Volunteer DBS Checks

- Volunteers at Elite Mentors can apply for an **enhanced DBS check**, which includes a check against the **barred list**, at **no cost**.
- For **unpaid homestay arrangements**, the DBS application must clearly indicate that the role is voluntary.
- The Centre may also choose to request **enhanced DBS checks** for anyone aged **16 or older** living in a homestay household where pupils are accommodated.

This ensures that all adults and relevant household members have been **safeguarded** and vetted before having contact with learners.

Peer-on-Peer Abuse

Peer-on-peer abuse is any form of abuse or harmful behaviour carried out by one child towards another. This can include bullying, sexual harassment or exploitation, physical violence, and other forms of emotional or psychological harm. It should always be taken seriously and addressed promptly.

1. Recognise Signs

- Repeated bullying or harassment
- Physical injuries
- Emotional distress, withdrawal, anxiety, panic
- Decline in school attendance or performance
- Changes in behaviour or appearance
- Risky behaviour (drugs, alcohol, unsafe sexual behaviour)

2. Assess the Situation

- Is the behaviour repeated or planned?
- Is there a power imbalance (age, size, social status)?
- Is there evidence of coercion or intent to harm?

3. Immediate Action

- Ensure the child is safe
- Do **not** investigate alone
- Reassure the child; stay calm and listen

4. Report

- Notify the **Designated Safeguarding Lead (DSL)** immediately
- If child is in immediate danger → contact **Children's Social Care** or **Police**

5. DSL Steps

- Gather facts discreetly; interview involved children if safe
- Follow safeguarding procedures
- Involve parents unless it increases risk to the child
- Record all actions and outcomes

6. Support

- Provide emotional support to victims and appropriate guidance to perpetrators
- Monitor and review to prevent recurrence

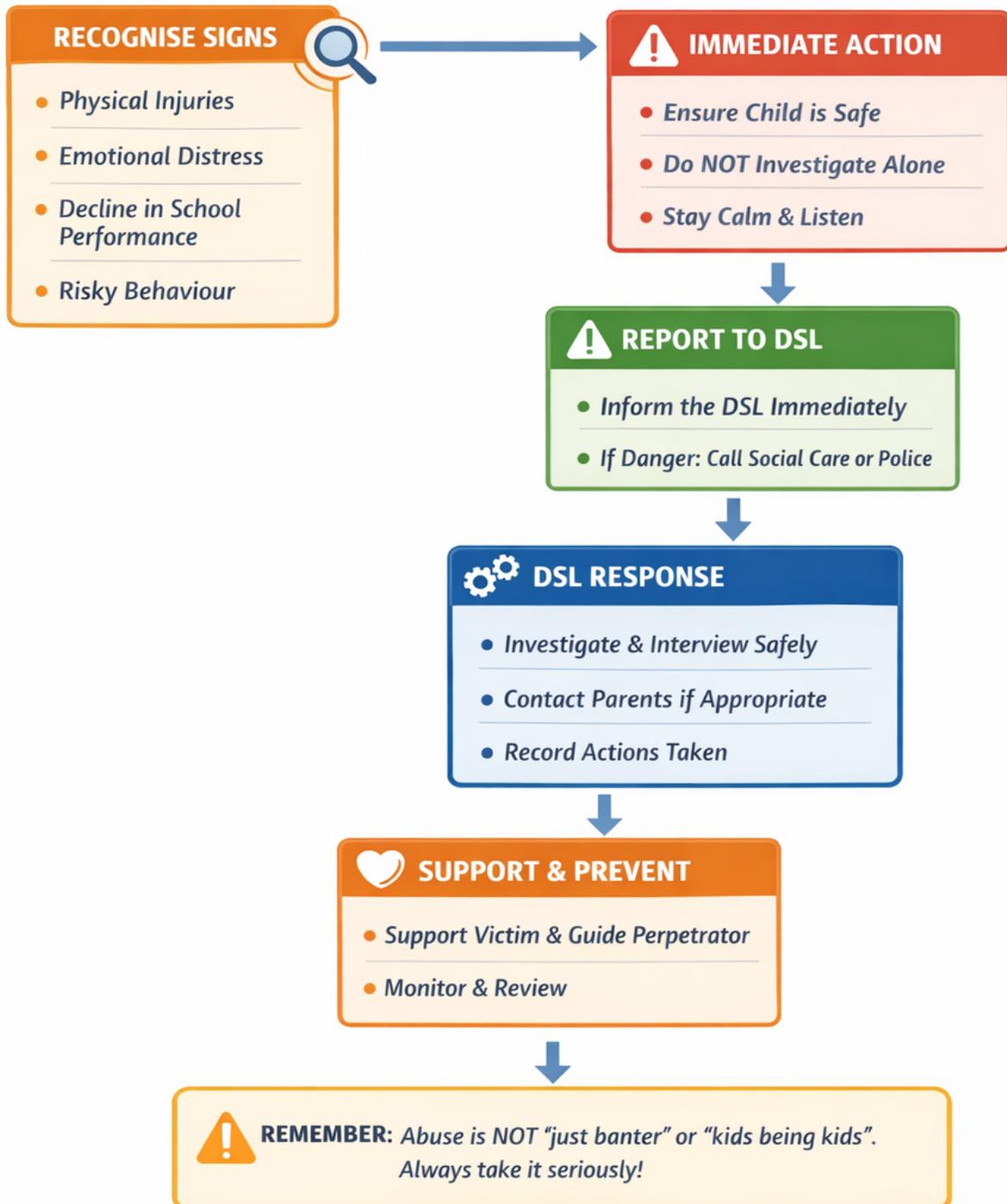
Reminder:

- Abuse is abuse – do not dismiss as “banter” or “kids being kids”
- Any concerns, even minor, should be reported promptly

Peer-on-Peer Abuse: Staff Guidance



Abuse by one child towards another (bullying, sexual, physical, emotional, or online).



Sexual Violence and Sexual Harassment Between Children

Overview:

Sexual violence and sexual harassment are forms of peer-on-peer abuse. They can occur **between any children**, regardless of age, gender, or sexual orientation, and can happen **online or offline**.

Definitions:

- **Sexual Violence:** Includes offences under the Sexual Offences Act 2003.
- **Sexual Harassment:** Unwanted sexual conduct, including comments, jokes, gestures, or physical contact, online or offline.
- **Upskirting:** Taking photos under someone's clothing without consent (Voyeurism Act 2019).

Key Points:

- Such behaviour is **never acceptable** and must not be tolerated.
- Early intervention is essential to **prevent escalation**.
- Schools should provide **education and training** on consent, healthy relationships, gender equality, and power dynamics.
- Encourage **open discussion forums** where children can speak about concerns.
- Disclosures should be handled **sensitively**, following safeguarding procedures.
- Conduct **risk and needs assessments** for children affected by sexual violence or harassment.
- Consider **age, developmental stage, and power imbalance** in every case.
- Children with **SEN or LGBT+ identities** may be more vulnerable and need extra support.
- Incidents **off-site** are also subject to safeguarding measures.

Response Steps for Staff:

1. **Recognise:** Identify any signs of sexual harassment or violence.
2. **Ensure Safety:** Protect all children involved.
3. **Report:** Notify the **Designated Safeguarding Lead (DSL)** immediately.
4. **Document & Support:** Follow procedures, involve parents where safe, and provide emotional support.

Upskirting (Voyeurism Act 2019)

- **Definition:** Taking a photo or video under someone's clothing **without their consent**, intending to view their genitals or buttocks.
- **Purpose:** Done for sexual gratification or to cause **humiliation, distress, or alarm** to the victim.
- **Criminal Offence:** Upskirting is illegal under the **Voyeurism Act 2019**.
- **Vulnerable Groups:**
 - Children with **Special Educational Needs (SEN)** may face barriers in recognizing or reporting abuse.
 - Children who are **LGBT+ or perceived to be LGBT** may be more at risk of being targeted.
- **Staff Responsibility:** Be vigilant, identify potential risks, and **report immediately** to the Designated Safeguarding Lead (DSL).

Physical Restraint and Seclusion Policy

Definition

- **Physical Restraint:** Using reasonable physical force to prevent, restrict, or subdue a student's movement. The student is **not free to move away**.
- **Seclusion:** Temporarily isolating a student in a room or area where they reasonably believe they cannot leave, used only to prevent imminent harm.

Purpose: Only used to **protect the safety of the student or others**.

When Restraint or Seclusion Should Not Be Used

- **Routine discipline or punishment.**
- **Non-compliance or leaving the classroom,** unless it causes imminent harm.
- **Verbal threats** alone, unless believed to be immediate.
- **Property damage,** unless it risks immediate harm.
- **Prohibited methods:** covering mouth/nose, restricting breathing, hyperextending joints, pressure to neck/chest, prone or supine restraint.

When Restraint or Seclusion May Be Used

- **Imminent risk of physical harm** to the student or others.
- Only when **reasonable and no less restrictive option** is available.
- Decision rests with the **Head of Centre**, considering safety, duty of care, and legal obligations.

Mechanical and Chemical Restraint

- **Mechanical restraint** is not allowed unless prescribed for therapeutic reasons or safe travel.
- **Medication to control behaviour** is not permitted unless treating a medical or mental condition.

During Restraint

- **Use minimum necessary force** for the shortest duration required to prevent harm.
- **Communicate calmly** with the student throughout: explain what is happening and why, and reassure them it will stop once safe.
- **Consider the student's needs and circumstances:**
 - Age, size, gender
 - Any physical, intellectual, sensory, or psychological conditions
 - Previous trauma or medical conditions
 - Likely responses and stress triggers
 - Environment where the restraint occurs
- **Monitor for signs of distress or injury** at all times.
- **Avoid risky techniques:** do not cover mouth/nose, hyperextend joints, apply pressure to neck/chest, or place the student prone or supine unless absolutely necessary and safe.
- **Engage others safely if required:** other trained staff can assist, but the primary staff member remains responsible.

After Restraint or Seclusion

1. **Reporting**

- Notify the **Head of Centre** immediately.
- Inform the **student's parents/guardians** as soon as possible.
- Report externally if required (e.g., WorkSafe, Security Services Unit, Edusafe).

2. **Support**

- Offer support to the **student, parents, staff, and any witnesses**.
- Debrief, counselling, and involvement in behaviour management plans.

3. **Documentation**

- Record full details:
 - Names of students and staff involved
 - Date, time, location
 - Factual account of incident
 - De-escalation methods used
 - Reason for restraint/seclusion
 - Duration and nature of intervention
 - Student's response and outcome
 - Injuries or property damage
 - Post-incident actions and support

Future Planning and Prevention

- **Review the incident:** Evaluate what led to the restraint or seclusion and how it was handled.
- **Update Behaviour Support Plans** if needed to reduce the likelihood of recurrence.
- **Identify staff training needs:** Ensure all staff understand de-escalation techniques and safe restraint methods.
- **Implement preventative strategies:**
 - Increased supervision or support for students at risk
 - Environmental adjustments to reduce triggers

- Regular monitoring of the student's behaviour and wellbeing
- **Student involvement:** Where appropriate, involve the student in discussions about safer ways to manage behaviour.
- **Share lessons learned:** Debrief staff and consider wider Centre policies to improve safety and behaviour management practices.

Whistleblowing

- Staff must raise concerns about child safety or safeguarding, including concerns about colleagues' conduct.
- If necessary, concerns can be reported externally to the Local Authority Designated Officer, following the Whistleblowing Policy.
- Concerns about the Head of Centre should be reported directly to the Chair of the Governing Body.

Anti-Bullying Policy

Definition:

Bullying is repeated, deliberately hurtful behaviour that creates an imbalance of power, making it hard for the victim to defend themselves. It can be physical, verbal, emotional, or online, and may involve social isolation, intimidation, or threats of violence.

Types of Bullying:

- **Cyberbullying:** Using electronic devices, social media, or messaging to frighten, embarrass, or harass.
- **Disability-related:** Targeting a person because of a disability.
- **Emotional:** Exclusion, tormenting, or threatening gestures.
- **Homophobic/Transphobic:** Based on sexuality or gender identity.
- **Physical:** Hitting, kicking, pushing, or other violence.
- **Racist/Cultural/Religious:** Taunts or offensive comments based on race, culture, or religion.
- **Sexual:** Sexualised comments, gestures, or taunts.
- **Verbal:** Name-calling, sarcasm, rumours, or repetitive “banter” causing distress.

Our Approach:

- Bullying is a behaviour choice, and everyone can be encouraged to change.
- We promote inclusion, respect, and diversity, ensuring all students feel safe, valued, and supported.
- All staff and students share responsibility for preventing and addressing bullying.
- Positive strategies are used to manage behaviour, actively challenging fear, humiliation, ridicule, and intimidation.

Low-Level Concerns Policy

Purpose:

- To promote a culture of **openness, trust, and transparency** in all staff interactions.
- To ensure staff understand and follow the **Code of Conduct**.
- To provide a clear way to raise concerns about behaviours that fall short of serious misconduct, including self-reports.
- To handle concerns **promptly, proportionately, and confidentially**, protecting both children and staff.

Definition:

A **low-level concern** is any worry—no matter how minor or vague—that an adult may have acted in a way inconsistent with the Code of Conduct or that causes unease about their behaviour around children. Examples include:

- Slightly unprofessional behaviour that could be misinterpreted.
- Minor lapses in boundaries with children.
- Staff self-reporting actions where their own behaviour may have fallen short.

Reporting Procedure:

- Report concerns immediately to the **DSL** or **Head of Centre**, ideally within 24 hours.
- Self-reports are encouraged and handled with the same care.
- The DSL and Head of Centre will **assess and discuss the concern promptly**.

Assessment and Escalation:

A low-level concern may be **reclassified as an allegation** if:

- It meets the threshold for serious misconduct.
- There is a repeated pattern of concerns.
- Other evidence or information raises the level of concern.
- If needed, advice will be sought from the **Local Authority Designated Officer (LADO)**.

Handling:

- Most low-level concerns are addressed through **management guidance, training, or supervision**.
- Staff involved will be informed once risks are assessed and managed.
- Confidentiality is maintained to protect all parties.

Record Keeping:

- All concerns are logged in a **central confidential file** to monitor trends and patterns.
- Records are retained until normal pension age or 10 years after, if longer.
- **Personnel files or job references are unaffected**, unless a concern escalates to a formal allegation.

Key Principles:

- Encourages **early reporting** to prevent misunderstandings or potential harm.
- Protects both children and staff from risk or false allegations.
- Supports a culture of **responsibility, transparency, and professional behaviour**.

Allegations of Abuse Against Teachers and Staff

Purpose:

- To explain how the Centre handles allegations or concerns about adults working with children.
- Ensures compliance with statutory guidance (**Keeping Children Safe in Education – KCSIE**).
- Protects children, staff, and the integrity of the Centre by providing clear steps and responsibilities.

What is an Allegation?

An allegation arises when an adult is suspected of:

- Behaving in a way that has **harmed, or may harm, a child**.
- Possibly committing a **criminal offence** against or related to a child.
- Acting in a way that **indicates a risk of harm** to children.

Allegations may relate to a **single incident** or a **pattern of behaviour**. Repeated low-level concerns may collectively amount to an allegation.

Responsibilities:

Employers (Centre):

- Must act **promptly, fairly, and transparently**.
- Must safeguard children and support staff under investigation.

Employees & Volunteers:

- Must report any concern about colleagues or themselves.
- Must cooperate with investigations.

Historical Allegations:

- Allegations against former staff must be referred to the **police**.

Steps in Handling Allegations:

1. Initial Reporting & Consultation

- Report the allegation immediately to the **Head of Centre** or **Governing Body**.
- The **Designated Officer (LADO)** is informed **before any investigation starts**.
- Early consultation helps determine the **seriousness**, necessary action, and involvement of authorities.

2. Strategy & Risk Assessment

- If a child may be at risk, a **strategy discussion** is convened by the LADO or police.
- The accused staff member is **not informed until advice is given**.
- **Suspension is not automatic**. Alternatives may include:
 - Temporary redeployment away from the child.
 - Supervised contact.
 - Reassigning children or staff to prevent contact.
- Suspension is used only if **no reasonable alternative exists**.

3. Investigation

- Investigations are conducted by **senior staff or independent investigators**, depending on the complexity.
- Investigations must be **thorough, timely, and impartial**.
- Safeguarding takes priority over other procedures (disciplinary, grievance).

4. Suspension

- Suspension is considered **only when necessary** to protect children or in cases that could lead to dismissal.
- Must be authorised by the **Governing Body**.
- Staff must receive **written confirmation**, support contact details, and information on next steps.

Possible Outcomes of Investigation

- **Substantiated:** Evidence proves the allegation.
- **Malicious:** Allegation is deliberately false.
- **False:** Evidence disproves the allegation.
- **Unsubstantiated:** Insufficient evidence to prove or disprove.
- **Unfounded:** No evidence or basis for the allegation.

Post-Investigation Actions

- **Referral to DBS:** If the staff member poses a risk of harm, they are reported for inclusion on the barred list.
- **Referral to TRA:** For teaching staff, to consider professional prohibition.
- **Return to Work:** Support may include:
 - Phased return.

- Mentoring.
- Managing contact with the child who made the allegation.
- **Malicious Allegations:** Investigated separately; disciplinary action may be taken if appropriate.

Record Keeping

- Keep a **confidential summary** of all allegations, investigations, and outcomes.
- Retain until the staff member reaches **pension age** or **10 years** after the allegation, whichever is longer.
- Malicious allegations are **removed** from personnel records.
- Records help:
 - Provide accurate references.
 - Prevent unnecessary repeated investigations.
 - Support future safeguarding decisions.

Parental Communication

- Parents/carers are informed as appropriate.
- Policy is publicly accessible via the Centre's **website or office**.

Key Principles

- **Child safety is the priority.**
- Allegations are handled **promptly, fairly, and confidentially.**
- Staff under investigation are **supported**, and reputational harm is minimized where allegations are unsubstantiated.
- Decisions are based on **risk assessment**, statutory guidance, and professional judgment.
- **Suspension is a last resort**, and alternatives should be considered first.

Monitoring and Evaluation

Policy Review

- The Centre conducts a **comprehensive review of this policy every year** to assess its effectiveness.
- The review evaluates how well the safeguarding and child protection arrangements are **implemented across the Centre**.
- Any **deficiencies or weaknesses** identified are addressed **immediately**, without waiting for the next scheduled review.
- Staff are **actively encouraged** to provide feedback, share reflections, and contribute to the development and improvement of safeguarding practices.
- Staff input is also sought when reviewing the policy to ensure it remains **practical, relevant, and effective**.

Roles and Responsibilities

- The **Head of Centre** is responsible for the **implementation** of this policy and for monitoring its impact over time.
- The **Governing Body** will review concerns or challenges raised regarding the Centre's safeguarding approach, ensuring accountability and continuous improvement.

End of the policy