



CHILD PROTECTION & SAFEGUARDING POLICY

Last Review: January 2016
Committee: Curriculum
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Next Review: June 2017

Rationale

Sir William Romney's School fully recognises its responsibilities for child protection. Our policy applies to all staff, governors and volunteers working in the school.

The main elements to our policy:

- Ensuring we practice safe recruitment in line with Government guidance by using at least one NCSL accredited recruiter on all interview panels and by checking the suitability of staff and volunteers to work with children and ensuring any unsuitable behaviour is reported and managed using the Allegations Management procedures.
- Raising awareness of child protection issues and equipping children with the skills needed to keep them safe.
- Developing and then implementing procedures for identifying and reporting cases, or **suspected cases, of abuse by referring to the Children's Helpdesk.**
- Supporting pupils who have been abused in accordance with his/her agreed child protection plan.
- Establishing a safe environment in which children can learn and develop.

Other relevant policies and procedures:

- This policy should be read in conjunction with the Safer Working Protocols.

This policy has been developed in accordance with the principles established by the Children's Acts 1989 and 2004; the Education Act 2002, and in line with government publications: 'Working Together to Safeguard Children' 2013, Revised Safeguarding Statutory Guidance 2' Framework for the Assessment of Children in Need and their Families' 2000, 'What to do if you are Worried a Child is Being Abused' 2003. The guidance reflects, 'Keeping Children Safe in Education' 2015.

This policy also links to the following policies and procedures:

Attendance, Behaviour, Curriculum, Trips and Visits, Anti-bullying, Health and Safety, Lettings, Recruitment, Conduct & Procedures guidance, Whistleblowing, Medical, ESafety, Drugs and Alcohol, Complaints, Confidentiality, Healthy Living, Sex and Relationships, Single Equality Scheme.

Aims

We recognise that because of the day to day contact with children, school staff are well placed to observe the outward signs of abuse. The school will therefore:

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to.
- Ensure children know that there are adults in the school whom they can approach if they are worried.
- Include opportunities in the Personal Development curriculum for children to develop the skills they need to recognise and stay safe from abuse.

We will follow the procedures set out by the Local Safeguarding Children Board and take account of guidance issued by the Department for Education to:

- Ensure we have a designated senior person for child protection (Designated Safeguarding Lead) who has received appropriate training and support for this role and is part of the Senior Leadership Team.
- On appointment the DSL will undertake interagency training and an update course every two years.

- Ensure we have a nominated governor responsible for safeguarding who has received appropriate training.
- Ensure that we have a Prevent Single Point of Contact who will be the lead with regards to protecting students from radicalisation.
- Ensure every member of staff - including temporary and supply staff and volunteers - and governing body knows the name of the designated senior person responsible for child protection and their role and have received a Safeguarding Induction within the first 7 days of employment.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the designated senior person responsible for child protection.
- **Ensure that all staff are familiar with the School's Safer Working Protocols** and that they have signed a summary of these to that effect.
- Ensure that parents have an understanding of the responsibility placed on the school and staff for child protection by setting out its obligations in the school prospectus.
- Notify social services if there is an unexplained absence of more than two days of a pupil who is on a Child Protection Plan.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters.
- Keep written records of concerns about children.
- Develop and then follow procedures where an allegation is made against a member of staff or volunteer, including supply and agency workers, contractors or governors.
- Ensure safe recruitment practices are always followed.
- Ensure that all staff and volunteers are made aware of the conduct and procedure guidance.
- Ensure that Child Protection policies and procedures are reviewed annually and that the Safeguarding Policy is available on the school website.
- Ensure that all staff have child protection and e-safety training, updated as appropriate.
- **Ensure that all staff have read part 1 of Keeping Children Safe in Education.**

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self worth. They may feel helplessness, humiliation and some sense of blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school their behaviour may be challenging and defiant or they may be withdrawn. The school will endeavour to support the pupil through:

- The content of the curriculum.
- The school ethos which promotes a positive, supportive and secure environment and gives pupils a sense of being valued.
- The school behaviour policy which is aimed at supporting vulnerable pupils in the school. The school will ensure that the pupil knows that some behaviour is unacceptable but they are valued and not to be blamed for any abuse which has occurred.
- Liaison with other agencies that support the pupil such as social services, Child and Adult Mental Health Service, education welfare service and educational psychology service.
- Ensuring that, where a pupil who has a Child Protection Plan leaves, their information is transferred to the new school immediately and that the child's social worker is informed. Any child protection concerns will also be passed on to the new school by the DSL.

Designated Safeguarding Team

The Designated Safeguarding Lead on the Senior Leadership Team is the Headteacher. He has lead responsibility and management oversight for child protection and safeguarding. He is also the Prevent Single Point of Contact for the school. The DSL is supported by a Deputy Safeguarding Leads: Fran Philips. The following staff are also safeguarding trained and are members of the Safeguarding team: Mikala Gately, Moira Bannatyne and Louise Kimber.

Students subject to a Child in Need or Child Protection Plan will have an allocated Key Worker who will attend case monitoring meetings and will be the main point of contact in school for this child.

The Nominated Governor for Safeguarding and Child Protection at the school is Mr Stephen Hirst. The Nominated Governor is responsible for liaising with the DSL over all matters regarding child protection and safeguarding issues. This is a strategic role and they will not be involved in concerns about individual students.

The Role of the Designated Safeguarding Lead

- To ensure that all staff know that the Designated Safeguarding Lead is responsible (and in their absence, the Deputy Designated Safeguarding Lead) for Child Protection issues.
- To refer promptly all cases of suspected child abuse to the local Social Care Department or the Police Child Protection Team. If a parent arrives to collect the child before the social worker has

arrived then it must be remembered that we have no right to prevent the removal of the child. However, if there are clear signs of physical risk or threat, the Police should be called.

- To organise regular training on Child Protection within the school.
- To co-ordinate action where child abuse is suspected.
- To facilitate and support the development of a whole school policy on Child Protection.
- To attend case conferences or nominate an appropriate member of staff to attend on his/her behalf.
- Maintain records of case conferences and other sensitive information in a secure confidential file **and to disseminate information about the child only on a “need to know basis”**.
- To pass on records and inform the key worker when a child who is on the Child Protection register leaves the school. The custodian of the register must also be informed.
- To raise staff awareness and confidence on child protection procedures and to ensure new staff are aware of these procedures.
- To keep up to date with current practice by participating in training opportunities wherever possible.
- Liaise with other agencies that support the pupil such as Social Care, Child and Adult Mental Health Service, Education Welfare Service and Educational Psychology Service.

Procedure where abuse is suspected/alleged:

Safeguarding incidents could happen anywhere and staff should be alert to any concerns being raised in the school. **Any member of staff who by virtue of a child’s behaviour or appearance becomes suspicious of abuse, or is told that abuse has taken place, should immediately inform the designated person. All staff may raise concerns directly with Children’s Social Care Services. In the event of doing so the school’s DSL should be informed.**

If a child begins to talk about an abusive incident, s/he should be allowed to speak, and be listened to carefully. Time should be taken to gain an understanding of what the child is trying to say. No promise of confidentiality should be made.

The designated person (or trained member of staff) should accurately and legibly record the concern **and the child’s comments in writing, using the child’s words wherever possible.**

The designated person should contact the Local Authority Children’s Helpdesk Tel: 01452 426565

Procedures for investigating allegations of child abuse against a professional

Anyone hearing an allegation by any pupil of inappropriate behaviour by a member of staff which might be construed as child abuse, or who receives a similar complaint from a parent or guardian, or otherwise becoming aware of any incident that might suggest possible abuse of a child or children by a member of staff, must report the matter immediately to the Headteacher, the designated person or the Nominated Governor.

A contemporaneous log of events and telephone calls must be maintained from this initial report onwards.

In all cases the designated person or nominated governor must immediately brief the Headteacher, who must in turn contact the Local Authority Designated Officer for Allegations (LADO). Where necessary, a Strategy Meeting will be urgently convened to plan any further appropriate action.

If the complaint has been made against the Headteacher, responsibility for following the Allegations Management procedures will fall to the Designated Teacher, who should contact the Governor with Child Protection responsibilities or the Chair of Governors who in turn should immediately contact the LADO on 01452 426994.

Care should be taken to ensure that other staff and governors are only informed if necessary as it is important to ensure enough governors are able to participate in a disciplinary process should this be required.

Maintaining records of safeguarding issues

It is essential that accurate records be kept where there are concerns about the welfare of a child. **These records should then be kept in secure, confidential files, which are separate from the child’s school records.** It is important to recognise that current regulations do not authorise or require the disclosure to parents of any written information relating to Child Protection. When there is suspicion of significant harm to a child and a referral is made, as much information as possible should be given about the nature of the suspicions, the child and the family. Use of previous records (if available) may prove to be particularly useful in this respect.

Reports may be needed for Child Protection Case conferences or the criminal/civil courts. Consequently records and reports should be:

- factual (no opinions);
- non-judgemental (no assumptions);
- clear;

- accurate;
- relevant.

The designated person is responsible for collating all appropriate information on individual children, including a confidential record of all pupils who have a Child Protection Plan and making sure that records are passed on when a child transfers school/setting in any circumstances. Since May 2000, when a child transfers schools/settings, the Head Teacher must send to the new school/setting (maintained or independent):

- The completed statutory transfer form.
- All educational records relating to the child, including copies of the pupil reports and any information regarding child protection concerns.

If school/setting is unclear where a pupil is moving, the Headteacher should follow the Missing Children Protocol (via the Education Welfare Service) and should upload records onto the National database as advised. Equally school/setting should also check the Missing Children database for pupils arriving with no records from previous schools/settings or where the previous school/setting is not known. The designated person should monitor attendance patterns and refer to the Educational Welfare Officer for the school/setting where appropriate, collate the appropriate information for reports to be presented at Child Protection Conferences, maintain records and manage the education contribution to the Child Protection Plan recommended at the Child Protection Conference.

S/he should also maintain up to date written records of visits from other agencies.

Following recommendation from several Serious Case Reviews undertaken by the Safeguarding Board, all records should be typed (where possible), dated and signed and should follow in a clear chronological order. Care should be taken when storing records in both paper and electronic form. Child Protection records will contain personal data and their use must comply with the Data Protection Act 1998. This gives responsibilities to keep information accurate, relevant and secure and to ensure that there is a justification for holding the information.

Making a child protection referral

Any suspicions of abuse should be discussed with the DSL who, where appropriate, will pass on the information to the Local Authority. Where appropriate, parents/carers will be informed of the referral. However, the welfare of the child is paramount, and the referral will only be discussed where the child is not placed at risk of harm. Where the DSL decides not to make a referral, an offer of Early Help should be put in place to support the child. Other agencies may be contacted as part of an integrated support plan.

Involving parents and carers

In general, child protection concerns will be raised with parents/carers before approaching other agencies, and consent will be sought to make a referral to another agency. There may be occasions when the school will not inform parents/carers before making a referral if by contacting them this may increase the risk of significant harm to the child.

Confidentiality

Child protection information will be dealt with in a confidential manner. Staff will be informed of relevant details only when the DSL feels that their having knowledge of a situation will improve their ability to deal with an individual child and/or family. Communication between staff on Child Protection issues should be undertaken in a confidential manner.

Recruitment and training of staff

When recruiting new members of staff, the school follows the ‘Safeguarding Children: safer recruitment in Education guidelines’. The school ensures that DBS checks are undertaken, and all interview panels have at least one safeguarding trained member of staff present.

Newly appointed staff will have initial training in Child Protection as part of their induction programme. Regular updates and training are provided for all staff. Designated Child Protection staff will attend refresher courses every two years.

Governors and Volunteers

Enhanced DBS checks are in place for Governors and volunteers.

E-Safety

All students should be made aware of the potential risks with regard to electronic media, such as the **internet and mobile phones. Students are made aware of these dangers through the school’s PSHE programme, and assemblies.** (See anti bullying policy).

Radicalisation

We have considered the context of the Prevent Agenda in response to and in line with government **guidance and forms part of the government’s counter terrorism strategy which seeks to:**

- Respond to the ideological challenge of terrorism and aspects of extremism, and the threat faced from those who promote these views.
- Provide practical help to prevent people from being drawn into terrorism and ensure they are given appropriate advice and support.
- Work with a wide range of sectors where there are risks of radicalisation which need to be addressed, including education, criminal justice, faith, charities, the internet and health.

All schools are required by law to teach a broad and balanced curriculum which promotes the spiritual, moral and cultural development of students and prepares them for the opportunities, responsibilities and experiences of life.

We work to:

- Raise awareness.
- Provide information.
- Enable learners to make a positive contribution.
- Safeguard young people.

Students participate in a curriculum that promotes active learning and develops critical personal thinking skills.

We have considered this agenda in this school's context. The Designated Safeguarding Lead has attended the Home Office training. In this community, it is unlikely that radicalisation through religion will occur. We understand, however, that vulnerable children, no matter what their background, are susceptible to radicalisation through an exposure to social media. We know that the majority of our students use various forms of social media and access the internet, sometimes with little control on the level of access. Our responsibility is to identify these vulnerable students who display the indicators highlighted by the Prevent training. In this community, acts of terrorism would be more **likely to come from a 'lone-wolf' style attack from a student or ex-student** with expertise, a motive and the means to carry this out.

Monitoring and Evaluation

Our Safeguarding and Child Protection procedures will be monitored and evaluated by:

- Annual safeguarding audit.
- Governing Body visits to the school.
- Scrutiny of attendance, behaviour and incident logs.
- Surveys of students, staff and parents.
- Risk assessments.

For any further guidance and information, please refer to the Safeguarding Children Handbook: www.gscb.org.uk/handbook and the Supplementary Information in Appendix 3.

Safeguarding is what we do for all children; Child Protection is what we do for children who have been harmed or are at significant risk of being harmed.

Appendix

1. Definitions and Indicators of Abuse.
2. SWR offer of Early Help.
3. Supplementary Information.
4. Keeping Children Safe in Education (Part 1): **N.B: all staff need to sign to confirm they have read this.** This is a separate document to this policy. (Safeguarding folder in teachershared).
5. Safer Working Protocols: **N.B: all staff need to sign to confirm they have read this.** This is a separate document to this policy. (Safeguarding folder in teachershared).
6. Safeguarding Record Log: to be completed for all concerns and passed to DSL. This is separate document to this policy. (Safeguarding folder in teachershared).

APPENDIX 1

Definitions and Indicators of Abuse

Child abuse can be categorised as follows:

1. Physical Abuse.
2. Sexual Abuse.
3. Emotional Abuse.
4. Physical Neglect.
5. Grave Concern/at risk - this is not a distinct category but is dealt with separately. A child can be at risk from any combination of the four categories.

These different types of abuse require different approaches. A child suffering from physical abuse may be in immediate and serious danger. Action should, therefore, be taken immediately. With other forms of abuse there is a need to ensure that adequate information is gathered. There is also a need to make sure that grounds for suspicion have been adequately investigated and recorded. The need to collate information must be balanced against the need for urgent action. If there are reasonable grounds for suspicion then a decision to monitor the situation should only be taken after consultation. A situation that should cause particular concern is that of a child who fails to thrive without any obvious reason. In such a situation a medical investigation will be required to consider the causes. Each of the five categories will now be explored in more detail.

1) Physical Abuse

This involves physical injury to a child, including deliberate poisoning, where there is definite knowledge or a reasonable suspicion, that the injury was inflicted or knowingly not prevented. Typical signs of Physical Abuse are:

- bruises and abrasions - especially about the face, head, genitals or other parts of the body where they would not be expected to occur given the age of the child. Some types of bruising are particularly characteristic of non-accidental **injury especially when the child's explanation does not match the nature of injury or when it appears frequently.**
- slap marks – these may be visible on cheeks or buttocks.
- twin bruises on either side of the mouth or cheeks - can be caused by pinching or grabbing, sometimes to make a child eat or to stop a child from speaking.
- bruising on both sides of the ear – this is often caused by grabbing a child that is attempting to run away. It is very painful to be held by the ear, as well as humiliating and this is a common injury.
- grip marks on arms or trunk - gripping bruises on arm or trunk can be associated with shaking a child. Shaking can cause one of the most serious injuries to a child; i.e. a brain haemorrhage as the brain hits the inside of the skull. X-rays and other tests are required to fully diagnose the effects of shaking. Grip marks can also be indicative of sexual abuse.
- black eyes – are mostly commonly caused by an object such as a fist coming into contact with the eye socket. NB. A heavy bang on the nose, however, can cause bruising to spread around the eye but a doctor will be able to tell if this has occurred.
- damage to the mouth – e.g. bruised/cut lips or torn skin where the upper lip joins the mouth.
- bite marks
- fractures
- poisoning or other misuse of drugs – e.g. overuse of sedatives.
- burns and/or scalds – a round, red burn on tender, non-protruding parts like the mouth, inside arms and on the genitals will almost certainly have been deliberately inflicted. Any burns that appear to be **cigarette burns should be cause for concern. Some types of scalds known as 'dipping scalds' are always cause for concern. An experienced person will notice skin splashes caused when a child accidentally knocks over a hot cup of tea. In contrast a child who has been deliberately 'dipped' in a hot bath will not have splash marks.**

2) Sexual Abuse

The involvement of dependent, developmentally immature children and adolescents in sexual activities they do not truly comprehend, to which they are unable to give informed consent or that violate the social taboos of family roles. Typical signs of Sexual Abuse are:

- a detailed sexual knowledge inappropriate to the age of the child;
- behaviour that is excessively affectionate or sexual towards other children or adults;
- attempts to inform by making a disclosure about the sexual abuse often begin by the initial sharing of limited information with an adult. It is also very characteristic of such children that they have an excessive pre-occupation with secrecy and try to bind the adults to secrecy or confidentiality.
- a fear of medical examinations;

- a fear of being alone – this applies to friends/family/neighbours/baby-sitters, etc;
- a sudden loss of appetite, compulsive eating, anorexia nervosa or bulimia nervosa;
- excessive masturbation is especially worrying when it takes place in public;
- promiscuity;
- sexual approaches or assaults - on other children or adults;
- urinary tract infections (UTI), sexually transmitted disease (STD) are all cause for immediate concern in young children, or in adolescents if his/her partner cannot be identified;
- bruising to the buttocks, lower abdomen, thighs and genital/rectal areas. Bruises may be confined to grip marks where a child has been held so that sexual abuse can take place;
- discomfort or pain particularly in the genital or anal areas;
- the drawing of pornographic or sexually explicit images.

3) Emotional Abuse

The severe adverse effect on the behaviour and emotional development of a child caused by persistent or severe emotional ill treatment or rejection. All abuse involves some emotional ill treatment - this category should be used where it is the main or sole form of abuse. The following may be indicators of emotional abuse:

- The child consistently describes him/herself in very negative ways;
- Overreaction to mistakes;
- Delayed physical, mental or emotional development;
- Inappropriate emotional responses, fantasies;
- Neurotic behaviour;
- Fear of parents/ carers being contacted;
- Running away;
- Compulsive stealing;
- Appetite disorders;
- Self-harming, drug or solvent abuse.

4) Physical Neglect

The persistent or severe neglect of a child (for example, by exposure to any kind of danger, including **cold and starvation) which results in serious impairment of the child's health or development**, including non-organic failure to thrive. Persistent stomach aches, feeling unwell, and apparent anorexia can be associated with Physical neglect. However, typical signs of Physical Neglect are:

- Underweight - a child may be frequently hungry or pre-occupied with food or in the habit of stealing food or with the intention of procuring food. There is particular cause for concern where a persistently underweight child gains weight when away from home, for example, when in hospital or on a school trip. Some children also lose weight or fail to gain weight during school holidays when school lunches are not available and this is a cause for concern.
- Inadequately clad - a distinction needs to be made between situations where children are inadequately clad, dirty or smelly because they come from homes where neatness and cleanliness are unimportant and those where the lack of care is preventing the child from thriving.

Physical Neglect is a difficult category because it involves the making of a judgement about the seriousness of the degree of neglect. Much parenting falls short of the ideal but it may be **appropriate to invoke child protection procedure in the case of neglect where the child's development is being adversely affected.**

5) Grave Concern/at risk

This is not a separate category of child abuse as such but covers a number of situations where a child may be at risk. Children whose situations do not currently fit the above categories but where social and medical assessments indicate that they are at significant risk of abuse. Grave concern may be felt where a child shows symptoms of stress and distress (see below) and any of the following circumstances apply:

- there is a known child abuser in the family;
- another child in the family is known to have been abused;
- the parents are involved with pornographic material to an unusual degree;
- there is an adult in the family with a history of violent behaviour;
- the child is exposed to potential risk or exploitation via the Internet e.g. pornographic material or chat rooms.

The Symptoms of Stress and Distress

When a child is suffering from any one or more of the previous five **'categories of abuse'**, or if the **child is 'at risk'**, **he/she will nearly always suffer from/display signs of stress and distress.**

An abused child is likely to show signs of stress and distress as listed below:

- a lack of concentration and a fall-off in school performance;
- aggressive or hostile behaviour;
- moodiness, depression, irritability, listlessness, fearfulness, tiredness, temper tantrums, short concentration span, acting withdrawn or crying at minor occurrences;
- difficulties in relationships with peers;
- regression to more immature forms of behaviour, e.g. thumb sucking;
- self harming or suicidal behaviour;
- low self esteem;
- wariness, insecurity, running away or truancy - children who persistently run away from home may be escaping from sexual physical abuse;
- disturbed sleep;
- general personality changes such as unacceptable behaviour or severe attention seeking behaviour;
- a sudden change in school performance.

Parental Signs of Child Abuse

Particular forms of parental behaviour that could raise or reinforce concerns are:

- implausible explanations of injuries;
- unwillingness to seek appropriate medical treatment for injuries;
- injured child kept away from school until injuries have healed without adequate reason;
- a high level of expressed hostility to the child;
- grossly unrealistic assumptions about child development;
- general dislike of child-like behaviour;
- **inappropriate labelling of child's behaviour as bad or naughty;**
- leaving children unsupervised when they are too young to be left unattended.

Appendix 2

SWR offer of early Help

The SWR offer of early help addresses the early identification of risk and the prevention of harm to our students. Outlined below are some of the strategies, systems and procedures we have in place to safeguard our students around some specific aspects of safeguarding.

Included within our early support:

- Drugs screening and liaison with the Gloucestershire Drugs Agency staff.
- Referring students to specialist support for bereavement.
- Referral to the School Nurse.
- Social and emotional wellbeing support from the Phoenix Room.
- Liaison with local GPs to support referrals to CYPS.
- Full time Education Welfare Officer.
- Liaison with family support services.
- Liaison with police where welfare enquiries are required.
- Police mentoring support for those presenting anti-social or criminal behaviour.
- Use of the CSE screening tool.
- **Support from the school's** Inclusion Support Workers.
- Multi-agency meetings.
- PSHE lessons covering mental health and substance abuse delivered by specialists who offer follow up support as needed.
- Distribution of Gloucestershire suicide prevention stickers.
- CAFs.
- Anti-bullying team work throughout the year.
- Signposting parents and students to agencies.
- Designated Children in Care member of staff.
- **Chelsea's Choice theatre and other workshops to deliver interactive sessions about CSE and sexting.**
- Police sessions for students and parents about sexting and safe use of the internet.
- Use of the Gloucestershire Healthy Living survey to identify patterns and coordinate intervention linked to demand.

Appendix 3

Supplementary Information

Further guidance about specific safeguarding issues is available from a range of sources, for example the NSPCC website, www.nspcc.org.uk. Government guidance is also available via the hyperlinks below.

Child Sexual Exploitation: (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can **take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups.** What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

Bullying including cyberbullying

Domestic Violence and Abuse

Drugs Advice

Fabricated or Induced Illness

Abuse linked to faith or belief: abuse linked to belief, including belief in witchcraft or possession, is a horrific crime which is condemned by people of all cultures, communities and faiths.

Female genital mutilation (FGM) multi-agency practice guidelines: Female Genital Mutilation (FGM): professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM.

There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.

Forced Marriage

Gangs and Youth Violence: are the product of the high levels of social breakdown and disadvantage found in the communities in which they thrive, but they are also a key driver of that breakdown. Gangs create a culture of violence and criminality that prevents the very things that can help transform those communities; community mobilisation and economic enterprise

Gender based Violence : is violence that is directed against a person on the basis of gender. It constitutes a breach of the fundamental right to life, liberty, security, dignity, equality between women and men, non-discrimination and physical and mental integrity. Gender-based violence reflects and reinforces inequalities between men and women.

Mental Health: problems range from the worries we all experience as part of everyday life to serious long-term conditions. The majority of people who experience mental health problems can get over them or learn to live with them, especially if they get help early on.

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

Radicalisation: is a process by which an individual or group comes to adopt increasingly extreme political, social, or religious ideals and aspirations that (1) reject or undermine the status quo or (2) reject and/or undermine contemporary ideas and expressions of freedom of choice.