

# Thornton Primary School



## Safeguarding Policy

Updated September 2016 approved by Governors Autumn 2016

# SAFEGUARDING POLICY FOR SCHOOLS AND EDUCATION SERVICES

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## PART ONE: SAFEGUARDING POLICY

Ratified by the Governing Body      September 29<sup>th</sup> 2016

To be reviewed (annually)      September 29<sup>th</sup> 2017

Version number:

### 1. INTRODUCTION

1.1 Safeguarding is defined as –

- Protecting children from maltreatment;
- Preventing impairment of children's health or development;
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- Taking action to enable all children to have the best life chances by accessing services as early as possible.

1.2 Thornton Primary School is committed to safeguarding and promoting the welfare of all its pupils/students. We believe that:

- All children/young people have the right to be protected from harm;
- Children/young people need to be safe and to feel safe in school;
- Children/young people need support that matches their individual needs, including those who may have experienced abuse;
- All children/young people have the right to speak freely and voice their values and beliefs;
- All children/young people must be encouraged to respect each other's values and support each other;
- All children/young people have the right to be supported to meet their emotional, and social needs as well as their educational needs – a happy, healthy, sociable child/young person will achieve better educationally;
- Schools can and do contribute to the prevention of abuse, victimisation, bullying (including homophobic, bi-phobic, trans-phobic and cyber-bullying), exploitation, extreme behaviours, discriminatory views and risk taking behaviours; and

- All staff and visitors have an important role to play in safeguarding children and protecting them from abuse.

1.3 Thornton Primary School will fulfil their local and national responsibilities as laid out in the following documents:-

- The most recent version of [Working Together to Safeguard Children](#) (DfE)
- The most recent version of [Keeping Children Safe in Education: Statutory guidance for schools and colleges](#) (DfE Sept 2016)
- [The Procedures of Birmingham Safeguarding Children Board](#)
- [The Education Act 2002](#) s175
- [Mental Health and Behaviour in Schools: Departmental Advice](#) (DfE 2014)

## 2. OVERALL AIMS

2.1 This policy will contribute to safeguarding our pupils/students and promoting their welfare by:

- Working in the best interests of the child to create a culture of vigilance.
- Clarifying standards of behaviour for staff and pupils/students;
- Contributing to the establishment of a safe, resilient and robust ethos in the school, built on mutual respect and shared values;
- Introducing appropriate work within the curriculum;
- Encouraging pupils/students and parents to participate;
- Alerting staff to the signs and indicators that all might not be well;
- Developing staff awareness of the causes of abuse;
- Developing staff awareness of the risks and vulnerabilities their pupils/students face;
- Addressing concerns at the earliest possible stage; and
- Reducing the potential risks pupils/students face of being exposed to violence, extremism, exploitation, discrimination or victimisation.

2.2 This policy will contribute to supporting our pupils/students by:

- Identifying and protecting the vulnerable;
- Identifying individual needs where possible; and
- Designing plans to meet those needs.

2.3 This policy will contribute to the protection of our pupils/students by:

- Including appropriate work within the curriculum;
- Implementing child protection policies and procedures; and
- Working in partnership with pupils/students, parents and other agencies.

## 3. KEY PRINCIPLES

3.1 These are the key principles of safeguarding, as stated by Birmingham Safeguarding Children Board -

- Always see the child first.
- Never do nothing.
- Do with, not to, others.
- Do the simple things better.
- Have conversations, build relationships.
- Outcomes not outputs.

3.2 In addition the Board has identified the following key safeguarding messages for schools

- Every child is entitled to a rich and rounded curriculum.
- Schools operate with public money: this should be spent wisely, targeting resources on the evidenced needs of children at school now. Assurance and audit are important aspects of this.
- Governance is corporate and decisions are collective, but individual governors can and should take the lead on specific aspects of school life such as safeguarding.
- When issues arise, head teachers should speak out, addressing them internally where possible and escalating them when this is unsuccessful.

#### **4. KEY PROCESSES**

4.1 All staff should be aware of the guidance issued by Birmingham Safeguarding Children Board in [Right Service Right Time](#), [Early Help](#), and Birmingham City Council Whistleblowing and Serious Misconduct Policy.

#### **5. EXPECTATIONS**

5.1 All staff and visitors will:

- Be familiar with this safeguarding policy;
- Understand their role in relation to safeguarding;
- Be subject to Safer Recruitment processes and checks, whether they are new staff, supply staff, contractors, volunteers etc.;
- Be involved, where appropriate, in the implementation of individual education programmes, Early Help Assessments and support plans, child in need plans and interagency child protection plans;
- Be alert to signs and indicators of possible abuse (See Appendix 1 for current definitions and indicators);
- Record concerns on CPOMs (online system) or in the case of visitors/staff without a school email address, on the reporting forms found in the Safeguarding folders (available in every teaching room) and give the record to the Designated Safeguarding Lead (DSL) (*Sue Simmons*), or a deputy DSL (*Cathy Grace, Michelle Easthope, Shanti Devi*); and
- Deal with a disclosure of abuse from a child in line with the guidance in Appendix 2 - you must inform the Designated Safeguarding Lead immediately, and provide a written account as soon as possible.
- Ensure verbal conversations are promptly recorded on CPOMs and/or in writing.

- 5.2 All staff will receive annual safeguarding training and update briefings as appropriate. Key staff will undertake more specialist child protection training as agreed by the Governing Body. The DSL and DDSs will attend training every two years (or more often). New staff will receive induction training from the DSL or DDS. All staff will receive training in new and evolving risks to young people.

## **6. THE DESIGNATED SAFEGUARDING LEAD**

- 6.1 Our Designated Safeguarding Lead (DSL) on the senior leadership team is Sue Simmons. She has lead responsibility and management oversight and accountability for child protection and will be responsible for coordinating all child protection activity.
- 6.1.1 The deputy DSLs are Cathy Grace, Michelle Easthope and Shanti Devi and will support the DSL within the role and deputise when the DSL is not on-site.
- 6.2 The Designated Safeguarding Lead will lead regular case monitoring reviews of vulnerable children. These reviews must be evidenced by minutes and recorded in case files.
- 6.3 When the school has concerns about a child, the Designated Safeguarding Lead will decide what steps should be taken.
- 6.4 Child protection information will be dealt with in a confidential manner. Staff will be informed of relevant details only when the Designated Safeguarding Lead feels their having knowledge of a situation will improve their ability to deal with an individual child and/or family. A written record will be made of what information has been shared with whom, and when.
- 6.5 Safeguarding records will be stored securely in a central place separate from academic records. Individual files will be kept for each child: the school will not keep family files. Files will be kept for at least the period during which the child is attending the school, and beyond that in line with current data legislation and guidance. Thornton Primary School uses the online recording system – CPOMS. All records are entered onto CPOMS and relevant documents are scanned and attached to children's files. Any hard copies of documents are stored in the Safeguarding Folders located in the DSL's (headteacher's) office.
- 6.6 Access to these records by staff other than by the Designated Safeguarding Lead will be restricted, and a written record will be kept of who has had access to them and when.
- 6.7 Parents will be aware of information held on their children and kept up to date regarding any concerns or developments by the appropriate members of staff. General communications with parents will be in line with any home school policies and give due regard to which adults have parental responsibility.
- 6.8 **Do not disclose to a parent any information held on a child if this would put the child at risk of significant harm.**
- 6.9 If a pupil/student moves from our school, child protection records will be forwarded on to the Designated Safeguarding Lead at the new school, with due regard to their confidential nature and in line with current government guidance on the transfer of such

records. Direct contact between the two schools may be necessary, especially on transfer from primary to secondary schools. We will record where and to whom the records have been passed and the date.

- 6.10 If sending by post, pupil records will be sent by “Special/Recorded Delivery”. For audit purposes a note of all pupil records transferred or received should be kept in either paper or electronic format. This will include the child’s name, date of birth, where and to whom the records have been sent and the date sent and/or received.
- 6.11 If a pupil/student is permanently excluded and moves to a Pupil Referral Unit, child protection records will be forwarded on to the relevant organisation.
- 6.12 Where a vulnerable young person is moving to a Further Education establishment, consideration should be given to the student’s wishes and feelings on their child protection information being passed on in order that the FE establishment can provide appropriate support.
- 6.13 When a Designated Safeguarding Lead resigns their post or no longer has child protection responsibility, there should be a full face to face handover/exchange of information with the new post holder.
- 6.13.1 In exceptional circumstances when a face to face handover is unfeasible, the Head Teacher will ensure that the new post holder is fully conversant with all procedures and case files.

## **7. THE GOVERNING BODY**

- 7.1 The Governing Body is the accountable body for ensuring the safety of the school.
- 7.2 The Governing Body will ensure that:
- The school has a safeguarding policy in accordance with the procedures of Birmingham Safeguarding Children Board;
  - The school operates “safer recruitment” procedures and ensures that appropriate checks are carried out on all new staff and relevant volunteers;
  - At least one senior member of the school’s leadership team acts as a Designated Safeguarding Lead;
  - The Designated Safeguarding Lead attends appropriate refresher training every two years;
  - The Head Teacher and all other staff who work with children undertake training on an annual basis with additional updates as necessary;
  - Temporary staff and volunteers are made aware of the school’s arrangements for child protection and their responsibilities;
  - The school remedies any deficiencies or weaknesses brought to its attention without delay; and
  - The school has procedures for dealing with allegations of abuse against staff/volunteers.
- 7.3 The Governing Body reviews its policies/procedures annually.

- 7.4 The Nominated Governor for safeguarding at the school is Rachel Turley. The Nominated Governor is responsible for liaising with the Head Teacher and Designated Safeguarding Lead over all matters regarding safeguarding and child protection issues. The role is strategic rather than operational – they will not be involved in concerns about individual pupils/students.
- 7.5 The Nominated Governor will liaise with the Head Teacher and Designated Safeguarding Lead to produce a report at least annually for governors.
- 7.6 The Nominated Governor will liaise with the Head Teacher and Designated Safeguarding Lead to produce the annual Section 175 self-assessment, and ensure this is submitted on time to the Local Authority.
- 7.7 A member of the Governing Body (usually the Chair) is nominated to be responsible for liaising with the local authority in the event of allegations of abuse being made against the Head Teacher.

## **8. A SAFER SCHOOL CULTURE**

### **Safer Recruitment and Selection**

- 8.1 The school pays full regard to 'Keeping Children Safe in Education'. Safer Recruitment practice includes scrutinising applicants, verifying identity and academic or vocational qualifications, obtaining professional and character references, checking previous employment history and ensuring that a candidate has the health and physical capacity for the job. It also includes undertaking interviews and undertaking appropriate checks through the Disclosure and Barring Service (DBS).
- 8.2 All recruitment materials will include reference to the school's commitment to safeguarding and promoting the wellbeing of pupils.
- 8.3 1: Sue Simmons 2: Cathy Grace 3: Michelle Easthope 4: Hameeda Ahmed have undertaken appropriate training in Safer Recruitment. One of the above will be involved in **all** staff / volunteer recruitment processes and sit on the recruitment panel.

### **Staff Support**

- 8.4 We recognise the stressful and traumatic nature of safeguarding and child protection work. We will support staff by providing an opportunity to talk through their anxieties with the Designated Safeguarding Lead and to seek further support as appropriate.

## **9. OUR ROLE IN THE PREVENTION OF ABUSE**

- 9.1 We will provide opportunities for pupils/students to develop skills, concepts, attitudes and knowledge that promote their safety and well-being.

### **The Curriculum**

- 9.2 Relevant issues will be addressed through the PSHE curriculum, for example self-esteem, emotional literacy, assertiveness, power, healthy relationship education (previously known as sex and relationship education SRE), online safety (formally known as e-safety) and bullying.



- 9.3 Relevant issues will be addressed through other areas of the curriculum, for example, circle time, English, History, Drama, Art.

#### **Other Areas of Work**

- 9.4 All our policies which address issues of power and potential harm, for example bullying, discrimination, equal opportunities, handling, positive behaviour, will be linked to ensure a whole school approach.
- 9.5 Our safeguarding policy cannot be separated from the general ethos of the school, which should ensure that pupils/students are treated with respect and dignity, taught to treat each other with respect, feel safe, have a voice, and are listened to.

### **10. SAFEGUARDING PUPILS/STUDENTS WHO ARE VULNERABLE TO RADICALISATION**

- 10.1 Since 2010, when the Government published the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism. There have been several occasions both locally and nationally in which extremist groups have attempted to radicalise vulnerable children and young people to hold extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation.
- 10.2 Thornton Primary School values freedom of speech and the expression of beliefs and ideology as fundamental rights underpinning our society's values. Both pupils/students and teachers have the right to speak freely and voice their opinions. However, freedom comes with responsibility and free speech that is designed to manipulate the vulnerable or that leads to violence and harm of others goes against the moral principles in which freedom of speech is valued. Free speech is not an unqualified privilege; it is subject to laws and policies governing equality, human rights, community safety and community cohesion.
- 10.3 The current threat from terrorism in the United Kingdom may include the exploitation of vulnerable people, to involve them in terrorism or in activity in support of terrorism. The normalisation of extreme views may also make children and young people vulnerable to future manipulation and exploitation. Thornton Primary School is clear that this exploitation and radicalisation should be viewed as a safeguarding concern and that protecting children from the risk of radicalisation is part of the school's safeguarding duty.
- 10.4 Definitions of radicalisation and extremism, and indicators of vulnerability to radicalisation are in Appendix 4.
- 10.5 Thornton Primary School seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right/Neo- Nazi/White Supremacist ideology, Domestic Terrorism, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.

### **Risk Reduction**

- 10.6 The school governors, the Head Teacher/Designated Safeguarding Lead will assess the level of risk within the school and put actions in place to reduce that risk. Risk assessment may include consideration of the school's RE curriculum, SEND policy, assembly policy, the use of school premises by external agencies, integration of pupils by gender and SEN, anti-bullying policy and other issues specific to the school's profile, community and philosophy.
- 10.7 This risk assessment will be reviewed as part of the annual s175 return that is monitored by the local authority and the local safeguarding children board.

### **Response**

- 10.8 With effect from 1<sup>st</sup> July 2015 all schools are subject to a duty to have "due regard to the need to prevent people being drawn into terrorism" (section 26, Counter Terrorism and Security Act 2015). This is known as The Prevent Duty.
- 10.9 There is no single way to identify an individual who is likely to be susceptible to an extremist ideology. Specific background factors may contribute to vulnerability and these are often combined with specific needs for which an extremist group may appear to provide answers, and specific influences such as family, friends and online contacts. The use of social media has become a significant feature in the radicalisation of young people.  
More information on these factors is in Appendix 4.
- 10.10 Our school, like all others, is required to identify a Prevent Single Point of Contact (SPOC) who will be the lead within the organisation for safeguarding in relation to protecting individuals from radicalisation and involvement in terrorism: this will normally be the Designated Safeguarding Lead. The SPOC for Thornton Primary School is Sue Simmons (Head Teacher).The responsibilities of the SPOC are described in Appendix 5.
- 10.11 Staff of Thornton Primary School will be alert to changes in a child's behaviour or attitude which could indicate that they are in need of help or protection.
- 10.12 Thornton Primary School will monitor online activity with the school to ensure that inappropriate sites are not accessed by pupils of staff. This is best done by the use of specialist online monitoring software, which in this school is called Policy Central.
- 10.12 When any member of staff has concerns that a pupil/student may be at risk of radicalisation or involvement in terrorism, they should speak with the SPOC.
- 10.13 Numerous factors can contribute to and influence the range of behaviours that are defined as violent extremism, but most young people do not become involved in extremist action. For this reason the appropriate interventions in any particular case may not have any specific connection to the threat of radicalisation, for example they may address mental health, relationship or drug/alcohol issues.

### **Channel**

- 10.14 Channel is a multi-agency approach to provide support to individuals who are at risk of being drawn into terrorist related activity. It is led by the West Midlands Police Counter-Terrorism Unit, and it aims to:

- Establish an effective multi-agency referral and intervention process to identify vulnerable individuals;
- Safeguard individuals who might be vulnerable to being radicalised, so that they are not at risk of being drawn into terrorist-related activity; and
- Provide early intervention to protect and divert people away from the risks they face and reduce vulnerability.

10.15 The Channel programme focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's participation in the programme is entirely voluntary at all stages.

10.16 Schools have a duty to cooperate with the Channel programme in the carrying out of its functions, and with the Police in providing information about an individual who is referred to Channel (Section 38, Counter Terrorism and Security Act 2015).

Further guidance about duties relating to the risk of radicalisation is available in the Advice for Schools on [The Prevent Duty](#).

## **11. SAFEGUARDING PUPILS/STUDENTS WHO ARE VULNERABLE TO EXPLOITATION, FORCED MARRIAGE, FEMALE GENITAL MUTILATION OR TRAFFICKING**

11.1 Our safeguarding policy above, and the school's values, ethos and behaviour policies, provide the basic platform to ensure children and young people are given the support to respect themselves and others, stand up for themselves and protect each other.

11.2 Our school keeps itself up to date on the latest advice and guidance provided to assist in addressing specific vulnerabilities and forms of exploitation.

11.3 Our staff are supported to recognise warning signs and symptoms in relation to specific issues, and include such issues in an age appropriate way in their curriculum see appendices.

11.4 Our school works with and engages our families and communities to talk about such issues.

11.5 Our staff are supported to talk to families about sensitive concerns in relation to their children and to find ways to address them together wherever possible.

11.6 Our Designated Safeguarding Lead(s) know where to seek and get advice as necessary.

11.7 Our school brings in experts and uses specialist material to support the work we do.

### **Reporting of Female Genital Mutilation**

11.8 With effect from October 2015 all schools are subject to a mandatory reporting requirement in respect of female genital mutilation. When a teacher discovers that an act of FGM appears to have been carried out on a girl aged under 18, that teacher has a

statutory duty to report it to the police. Failure to report such cases will result in disciplinary sanctions.

- 11.9 When a teacher at Thornton Primary School has reasons to suspect that an act of FGM has been carried out on a pupil/student, or is at risk of such s/he will discuss the situation with the Designated Safeguarding Lead, who will consult children's social care before a decision is made as to whether the mandatory reporting duty applies.

## **12. CHILDREN WHO GO MISSING FROM EDUCATION**

- 12.1 A child going missing from education is a potential indicator of abuse or neglect, including sexual exploitation, FGM, forced marriage or travelling to conflict zones. School staff will be alert to these safeguarding concerns when a pupil/student goes missing for an extended period, or on repeat occasions.

- 12.2 The school must notify the local authority of any pupil/student who fails to attend school regularly after making reasonable enquiries, or has been absent without the school's permission for a continuous period of 10 days or more. The school (regardless of designation) must also notify the local authority of any pupil/student who is to be deleted from the admission register because s/he –

- Has been taken out of school by their parents and is being educated outside the school system (e.g. home education);
- Has ceased to attend school and no longer lives within a reasonable distance of the school at which s/he is registered (moved within the city, within the country or moved abroad but failed to notify the school of the change);
- Displaced as a result of a crisis e.g. domestic violence or homelessness;
- Has been certified by the school medical officer as unlikely to be in a fit state of health to attend school before ceasing to be of compulsory school age, and neither s/he nor his/her parent has indicated the intention to continue to attend the school after ceasing to be of compulsory school age;
- Is in custody for a period of more than four months due to a final court order and the proprietor does not reasonably believe that s/he will return to the school at the end of that period; or
- Has been permanently excluded.

- 12.3 Our school will demonstrate that we have taken reasonable enquiries to ascertain the whereabouts of children that would be considered 'missing'.

## **13. WHAT WE DO WHEN WE ARE CONCERNED**

- 13.1 Where risk factors are present but there is no evidence of a significant risk then our DSL advises us on early help and preventative work that can be done within school to engage the pupil into mainstream activities and social groups. The DSL may well be the person who talks to and has conversations with the pupil/student's family, sharing the school's concern about the young person's vulnerability and how the family and school can work together to reduce the risk.

- 13.2 In this situation, we will utilise the Right Services Right Time (RSRT) model to consider the needs of the family and in discussion with the parent and the young person (as far as possible) –

The DSL may decide to:

- Monitor the situation after taking appropriate action to address the concerns.
- Undertake an Early Help assessment to try to meet the needs of the child and family through a multi-agency approach.
- Seek advice from the Children’s Advice and Support Service (CASS) formerly known as MASH Front door so that a strategic overview can be maintained and any themes or common factors can be recognised.
- Notify Children’s Social Care via a referral to the Multi-Agency Safeguarding Hub (MASH).

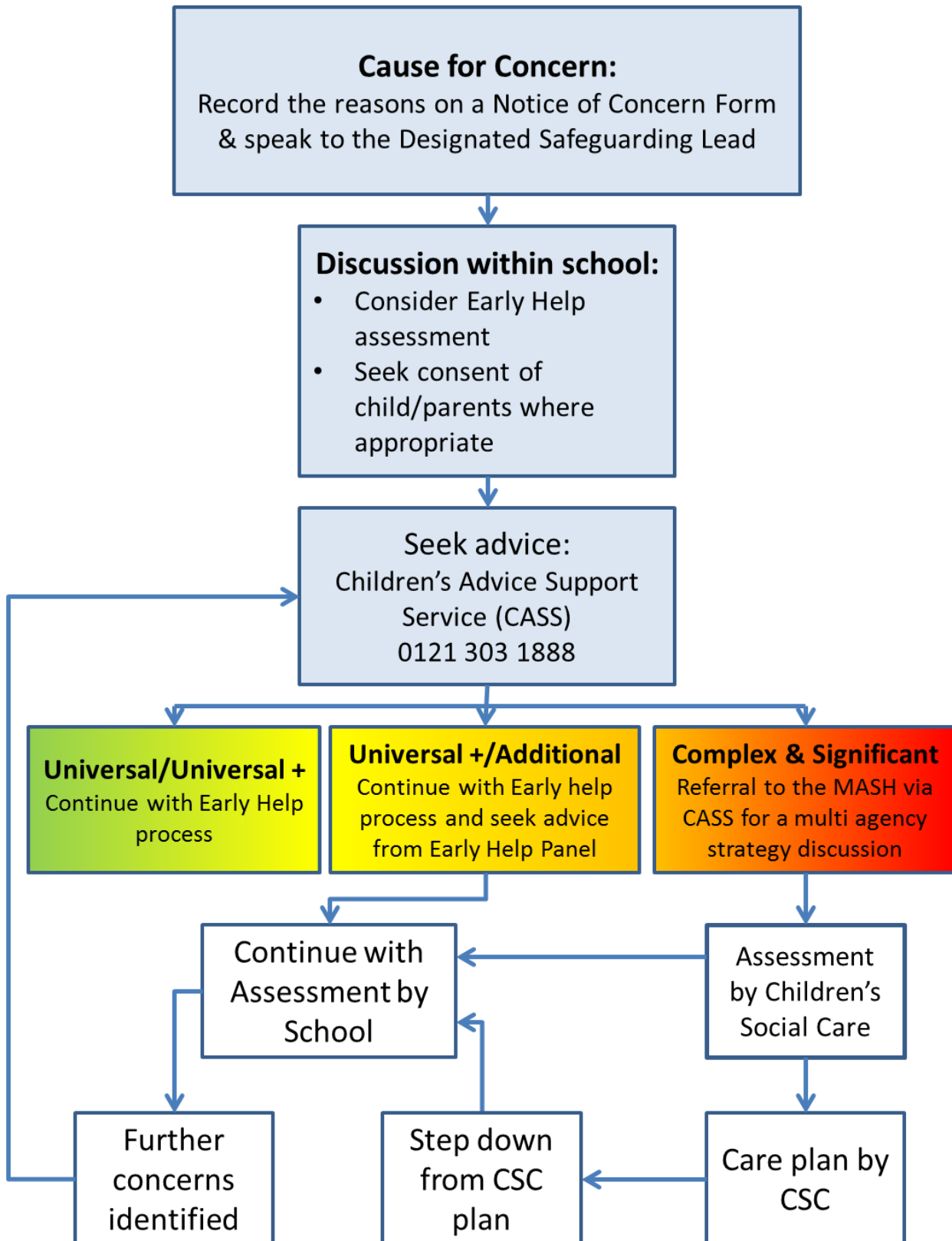
- 13.3 If it is felt the child’s needs fall into the RSRT categories of Universal + of Additional Need the DSL will also offer and seek advice about undertaking an early help assessment (such as the family Common Assessment Framework (fCAF) and consider, if this does not have an impact on the situation making a referral to children's social care. The local Early Help Panel can assist us.

Our local Early Help Panel is: Hodge Hill

- 13.4 If the concerns about the pupil/student are deemed ‘Complex and Significant’ meeting the criteria within RSRT, they will be referred to the MASH. This includes concerns about a child/young person who is affected by the behaviour of a parent or other adult in their household.

## PART TWO – THE KEY PROCEDURES

### RESPONDING TO CONCERNS ABOUT A CHILD



## **14. INVOLVING PARENTS/CARERS**

- 14.1 In general, we will discuss any child protection concerns with parents/carers before approaching other agencies, and will seek their consent to making a referral to another agency. Appropriate staff will approach parents/carers after consultation with the Designated Safeguarding Lead. However there may be occasions when the school will contact another agency **before** informing parents/carers because it considers that contacting them may increase the risk of significant harm to the child.
- 14.2 Parents/carers will be informed about our safeguarding policy through our school website. They can also obtain copies via the school reception.

## **15. MULTI-AGENCY WORK**

- 15.1 We work in partnership with other agencies in the best interests of the children. The school will, where necessary, liaise with the school nurse and doctor, and make referrals to children's social care. Referrals should be made by the Designated Safeguarding Lead to the Children's Advice Support Service (CASS) - 0121 303 1888. Where the child already has a safeguarding social worker, the request for service should go immediately to the social worker involved, or in their absence to their team manager.
- 15.2 We will co-operate with any child protection enquiries conducted by children's social care: the school will ensure representation at appropriate inter-agency meetings such as integrated support plan meetings initial and review child protection conferences, and core group meetings.
- 15.3 We will provide reports as required for these meetings. If the school is unable to attend, a written report will be sent. The report will, wherever possible, be shared with parents/carers at least 24 hours prior to the meeting.
- 15.4 Where a pupil/student is subject to an inter-agency child protection plan or a multi-agency risk assessment conference (MARAC) meeting, the school will contribute to the preparation, implementation and review of the plan as appropriate.

## **16. OUR ROLE IN SUPPORTING CHILDREN**

- 16.1 We will offer appropriate support to individual children who have experienced abuse, who have abused others or who act as Young Carers in their home situation.
- 16.2 An individual support plan will be devised, implemented and reviewed regularly for these children. This plan will detail areas of support, who will be involved, and the child's wishes and feelings. A written outline of the individual support plan will be kept in the child's safeguarding record.
- 16.3 Children and young people who abuse others will be responded to in a way that meets their needs as well as protecting others within the school community through a multi-agency risk assessment. We will ensure that the needs of children and young people who abuse others will be considered separately from the needs of their victims.

- 16.4 We will ensure the school works in partnership with parents / carers and other agencies as appropriate.

## **17. RESPONDING TO AN ALLEGATION ABOUT A MEMBER OF STAFF**

*See also Birmingham Safeguarding Children Board Procedures on [Allegations against Staff and Volunteers](#).*

- 17.1 This procedure should be used in any case in which it is alleged that a member of staff, governor, visiting professional or volunteer 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 in a way that indicates s/he is unsuitable to work with children.

- 17.2 Although it is an uncomfortable thought, it needs to be acknowledged that there is the potential for staff in school to abuse children.

- 17.3 All staff working within our organisation must report any potential safeguarding concerns about an individual's behaviour towards children and young people immediately. Allegations or concerns about colleagues and visitors must be reported direct to the Head Teacher unless the concern relates to Head Teacher. If the concern relates to the Head Teacher, it must be reported immediately to the Chair of the Governing Body, who will liaise with the Local Authority Designated Officer Team in children's social care and they will decide on any action required.

- 17.4 If the safeguarding concern relates to the proprietor of the setting then the concern must be made directly to the Local Authority LADO team.

## **18. CHILDREN WITH ADDITIONAL NEEDS**

- 18.1 Thornton Primary School recognises that while all children have a right to be safe, some children may be more vulnerable to abuse, for example those with a disability or special educational need, those living with domestic violence or drug/alcohol abusing parents, etc.

- 18.2 When the school is considering excluding, either fixed term or permanently, a vulnerable pupil and/or a pupil/student who is the subject of a child protection plan or where there is an existing child protection file, we will call a multi-agency risk-assessment meeting prior to making the decision to exclude. In the event of a one-off serious incident resulting in an immediate decision to exclude, the risk assessment *must* be completed prior to convening a meeting of the Governing Body.

## **19. CHILDREN IN SPECIFIC CIRCUMSTANCES**

### **Private Fostering**

- 19.1 Many people find themselves looking after someone else's child without realising that they may be involved in private fostering. A private fostering arrangement is one that is made privately (that is to say without the involvement of a local authority) for the care



of a child under the age of 16 (under 18, if disabled) by someone other than a parent or immediate relative. If the arrangement is to last, or has lasted, for 28 days or more it is private fostering.

19.2 The Children Act 1989 defines a relative as a grandparent, brother, sister, uncle or aunt (whether of full blood or half blood or by marriage or civil partnership), or a step parent.

19.3 People become involved in private fostering for all kinds of reasons. Examples of private fostering include –

- Children who need alternative care because of parental illness;
- Children whose parents cannot care for them because their work or study involves long or antisocial hours;
- Children sent from abroad to stay with another family, usually to improve their educational opportunities;
- Unaccompanied asylum seeking and refugee children;
- Teenagers who stay with friends (or other non-relatives) because they have fallen out with their parents;
- Children staying with families while attending a school away from their home area.

19.5 There is a mandatory duty on the school to inform the local authority of a private fostering. The local authority has a duty to check that the young person is being properly cared for and that the arrangement is satisfactory.

#### **Other Specific Circumstances**

19.6 Guidance on children in specific circumstances is in Birmingham Safeguarding Children Board's procedures as listed below:

[Bullying](#)

[Children Missing from Care, Home and Education](#)

[Children and Families that Go Missing](#)

[Child Sexual Exploitation](#)

[Domestic Violence and Abuse](#)

Drugs inc [Children of Parents who Misuse Substances](#)

[Fabricated or Induced Illness](#)

Faith Abuse and [Honour Based Violence](#)

Violence Against Women and Girls

[Female Genital Mutilation](#)

[Forced Marriage](#)

[Children Affected by Gang Activity](#)

[Children of Parents with Mental Health Problems](#)

[Children Living away from Home](#)

[Children of Parents with Learning Difficulties](#)

[Disabled Children](#)

[E-Safety – Children Exposed to Abuse through the Digital Media](#)

[Peer Abuse – Children and Young People who Abuse Others](#)

[Sexually Harmful Behaviour](#)

[Trafficked Children](#)

[Underage Sexual Activity](#)

[UKCCIS Guidance: Sexting in schools and colleges, responding to incidents, and safeguarding young people. \(2016\)](#)

[Safeguarding Children and Young People against Radicalisation and Violent Extremism](#)

#### **19.7 USEFUL CONTACTS AND LINKS**

- Birmingham Safeguarding Board [www.lscbbirmingham.org.uk](http://www.lscbbirmingham.org.uk) 0121 464 2612
- Birmingham Multi-Agency Safeguarding Hub (MASH) - 0121 303 1888
- Birmingham Against FGM [www.bafgm.org](http://www.bafgm.org)
- NSPPC [www.nspcc.org.uk](http://www.nspcc.org.uk) 0808 800 5000
- Child Exploitation and Online Protection Centre <https://ceop.police.uk/>
- Please see Appendix 3 for School Contact Flow Chart.

## 19. 8 FLOW CHART FOR RAISING SAFEGUARDING CONCERNS ABOUT A CHILD

**Designated Safeguarding Lead:**  
Sue Simmons  
(Headteacher)

**Deputy DSLs:** Cathy Grace (Assistant Head), Michelle Easthope (Assistant Head), Shanti Devi (Pastoral Manager)

**Link Governor:**  
Rachel Turley

Concern recorded on CPOMS

Concern put in writing on a Safeguarding concern form

The local authority Designated Officer for concerns about adults is: Micho Mayo  
Contact details:  
[Micho.h.mayo@birmingham.gov.uk](mailto:Micho.h.mayo@birmingham.gov.uk)  
0121 675 1699

Hand concern form to DSL or Deputy DSL

Designated Safeguarding Lead reviews concern form and makes a decision about next steps

**Discuss**

Decision made to monitor the concern.

Class teacher asked to monitor child and feedback to the Designated Safeguarding Lead within an agreed timescale

Decision made to discuss the concern informally with the parents/carers

Once discussed with parents Designated Safeguarding Lead decides to discuss with parents, monitor or refer to social care.

Designated Safeguarding Lead refers to social care.

Decision made to refer the concern to social care

**Monitor**

**Refer**

*In exceptional circumstances, concerns may be referred directly to children's social care*

Designated Safeguarding Lead records actions on CPOMS system.

Contact Details  
Social Care Referrals:  
M.A.S.H 0121 303 1888  
**Emergency Duty: 0121 675 4806**  
Prevent/Channel Referrals:101  
[prevent@west-midlands.police.uk](mailto:prevent@west-midlands.police.uk)

# APPENDICES

## **DEFINITIONS AND INDICATORS OF ABUSE**

### **1. NEGLECT**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers); or
- Ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

The following may be indicators of neglect (this is not designed to be used as a checklist):

- Constant hunger;
- Stealing, scavenging and/or hoarding food;
- Frequent tiredness or listlessness;
- Frequently dirty or unkempt;
- Often poorly or inappropriately clad for the weather;
- Poor school attendance or often late for school;
- Poor concentration;
- Affection or attention seeking behaviour;
- Illnesses or injuries that are left untreated;
- Failure to achieve developmental milestones, for example growth, weight;
- Failure to develop intellectually or socially;
- Responsibility for activity that is not age appropriate such as cooking, ironing, caring for siblings;
- The child is regularly not collected or received from school; or
- The child is left at home alone or with inappropriate carers.

### **2. PHYSICAL ABUSE**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

The following may be indicators of physical abuse (this is not designed to be used as a checklist):

- Multiple bruises in clusters, or of uniform shape;
- Bruises that carry an imprint, such as a hand or a belt;

- Bite marks;
- Round burn marks;
- Multiple burn marks and burns on unusual areas of the body such as the back, shoulders or buttocks;
- An injury that is not consistent with the account given;
- Changing or different accounts of how an injury occurred;
- Bald patches;
- Symptoms of drug or alcohol intoxication or poisoning;
- Unaccountable covering of limbs, even in hot weather;
- Fear of going home or parents being contacted;
- Fear of medical help;
- Fear of changing for PE;
- Inexplicable fear of adults or over-compliance;
- Violence or aggression towards others including bullying; or
- Isolation from peers.

### **3. SEXUAL ABUSE**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

The following may be indicators of sexual abuse (this is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge;
- Anal or vaginal discharge, soreness or scratching;
- Reluctance to go home;
- Inability to concentrate, tiredness;
- Refusal to communicate;
- Thrush, persistent complaints of stomach disorders or pains;
- Eating disorders, for example anorexia nervosa and bulimia;
- Attention seeking behaviour, self-mutilation, substance abuse;
- Aggressive behaviour including sexual harassment or molestation;
- Unusual compliance;
- Regressive behaviour, enuresis, soiling;
- Frequent or open masturbation, touching others inappropriately;
- Depression, withdrawal, isolation from peer group;
- Reluctance to undress for PE or swimming; or
- Bruises or scratches in the genital area.

#### **4. SEXUAL EXPLOITATION**

Child sexual exploitation occurs when a child or young person, or another person, receives “something” (for example food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of the child/young person performing sexual activities, or another person performing sexual activities on the child/young person.

The presence of any significant indicator for sexual exploitation should trigger a referral to children’s social care. The significant indicators are:

- Having a relationship of concern with a controlling adult or young person (this may involve physical and/or emotional abuse and/or gang activity);
- Entering and/or leaving vehicles driven by unknown adults;
- Possessing unexplained amounts of money, expensive clothes or other items;
- Frequenting areas known for risky activities;
- Being groomed or abused via the Internet and mobile technology; and
- Having unexplained contact with hotels, taxi companies or fast food outlets.

#### **5. EMOTIONAL ABUSE**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may also involve seeing or hearing the ill-treatment of another person. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment.

The following may be indicators of emotional abuse (this is not designed to be used as a checklist):

- The child consistently describes him/herself in very negative ways – as stupid, naughty, hopeless, ugly;
- Over-reaction to mistakes;
- Delayed physical, mental or emotional development;
- Sudden speech or sensory disorders;
- Inappropriate emotional responses, fantasies;
- Neurotic behaviour: rocking, banging head, regression, tics and twitches;
- Self-harming, drug or solvent abuse;

- Fear of parents being contacted;
- Running away;
- Compulsive stealing;
- Appetite disorders - anorexia nervosa, bulimia; or
- Soiling, smearing faeces, enuresis.

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

## **6. RESPONSES FROM PARENTS**

Research and experience indicates that the following responses from parents may suggest a cause for concern across all four categories:

- Delay in seeking treatment that is obviously needed;
- Unawareness or denial of any injury, pain or loss of function (for example, a fractured limb);
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development;
- Reluctance to give information or failure to mention other known relevant injuries;
- Frequent presentation of minor injuries;
- A persistently negative attitude towards the child;
- Unrealistic expectations or constant complaints about the child;
- Alcohol misuse or other drug/substance misuse;
- Parents request removal of the child from home; or
- Violence between adults in the household;
- Evidence of coercion and control.

## **7. DISABLED CHILDREN**

When working with children with disabilities, practitioners need to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as the shin, might be of concern on a non-mobile child;
- Not getting enough help with feeding leading to malnourishment;
- Poor toileting arrangements;
- Lack of stimulation;
- Unjustified and/or excessive use of restraint;
- Rough handling, extreme behaviour modification such as deprivation of medication, food or clothing, disabling wheelchair batteries;
- Unwillingness to try to learn a child’s means of communication;
- Ill-fitting equipment. for example callipers, sleep boards, inappropriate splinting;
- Misappropriation of a child’s finances; or
- Inappropriate invasive procedures.



## 8. SIGNS AND SYMPTOMS OF FEMALE GENITAL MUTILATION

FGM typically takes place between birth and around 15 years old; however, it is believed that the majority of cases happen between the ages of 5 and 8.

Risk factors for FGM include:

- low level of integration into UK society
- mother or a sister who has undergone FGM
- girls who are withdrawn from PSHE
- visiting female elder from the country of origin
- being taken on a long holiday to the country of origin
- talk about a 'special' procedure to become a woman

Symptoms of FGM

FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out-of-school to visit an 'at-risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM.

Indications that FGM may have already taken place may include:

- Difficulty walking, sitting or standing and may even look uncomfortable.
- Spending longer than normal in the bathroom or toilet due to difficulties urinating.
- Spending long periods of time away from a classroom during the day with bladder or menstrual problems.
- Frequent urinary, menstrual or stomach problems.
- prolonged or repeated absences from school or college, especially with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return
- Reluctance to undergo normal medical examinations.
- Confiding in a professional without being explicit about the problem due to embarrassment or fear.
- Talking about pain or discomfort between her legs

## DEALING WITH A DISCLOSURE OF ABUSE

**When a child tells me about abuse s/he has suffered, what must I remember?**

- Stay calm.
- Do not communicate shock, anger or embarrassment.
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you.
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed.
- Tell the child that it is not her/his fault.
- Encourage the child to talk but do not ask "leading questions" or press for information.
- Listen and remember.
- Check that you have understood correctly what the child is trying to tell you.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Do not tell the child that what s/he experienced is dirty, naughty or bad.
- It is inappropriate to make any comments about the alleged offender.
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

NB It is not education staff's role to seek disclosures. Their role is to observe that something may be wrong, ask about it, listen, be available and try to make time to talk.

### **Immediately afterwards**

**You must not deal with this yourself.** Clear indications or disclosure of abuse must be reported to children's social care without delay, by the Head Teacher/Principal or the Designated Safeguarding Lead.

Children making a disclosure may do so with difficulty, having chosen carefully to whom they will speak. Listening to and supporting a child/young person who has been abused can be traumatic for the adults involved. Support for you will be available from your Designated Safeguarding Lead or Head Teacher/Principal.

## ALLEGATIONS ABOUT A MEMBER OF STAFF, GOVERNOR OR VOLUNTEER

1. Inappropriate behaviour by staff/volunteers could take the following forms:
  - **Physical**  
For example the intentional use of force as a punishment, slapping, use of objects to hit with, throwing objects or rough physical handling.
  - **Emotional**  
For example intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, and attitudes that discriminate on the grounds of race, gender, disability or sexuality.
  - **Sexual**  
For example sexualised behaviour towards pupils, sexual harassment, inappropriate phone calls, and texts, images via social media, sexual assault and rape.
  - **Neglect**  
For example failing to act to protect a child or children, failing to seek medical attention or failure to carry out an appropriate risk assessment.
2. If a child makes an allegation about a member of staff, governor, visitor or volunteer the Head Teacher should be informed immediately. The Head Teacher should carry out an urgent initial consideration in order to establish whether there is substance to the allegation. The Head Teacher should not carry out the investigation him/herself or interview pupils.
3. The Head Teacher must exercise, and be accountable for, their professional judgement on the action to be taken, as follows –
  - If the actions of the member of staff, and the consequences of the actions, raise credible child protection concerns the Head Teacher will notify the Local Authority Designated Officer (LADO) Team (Tel: 0121 675 1669). The LADO Team will liaise with the Chair of Governors and advise about action to be taken, and may initiate internal referrals within children's social care to address the needs of children likely to have been affected.
  - If the actions of the member of staff, and the consequences of the actions, do not raise credible child protection concerns, but do raise other issues in relation to the conduct of the member of staff or the pupil(s), these should be addressed through the school's own internal procedures.
  - If the Head Teacher decides that the allegation is without foundation and no further formal action is necessary, all those involved should be informed of this conclusion, and the reasons for the decision should be recorded on the child safeguarding file.
4. Where an allegation has been made against the Head Teacher, then the Chair of the Governing Body takes on the role of liaising with the LADO Team in determining the appropriate way forward. For details of this specific procedure see the Section on [Allegations against Staff and Volunteers](#) in the procedures of Birmingham Safeguarding Children Board.

5. Where the allegation is against the sole proprietor the referral should be made to the LADO team directly.

## INDICATORS OF VULNERABILITY TO RADICALISATION

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
2. Extremism is defined by the Government in the Prevent Strategy as:  
Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
3. Extremism is defined by the Crown Prosecution Service as:  
The demonstration of unacceptable behaviour by using any means or medium to express views which:
  - Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
  - Seek to provoke others to terrorist acts;
  - Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
  - Foster hatred which might lead to inter-community violence in the UK.
4. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.
5. Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.
6. Indicators of vulnerability include:
  - Identity Crisis – the student/pupil is distanced from their cultural/religious heritage and experiences discomfort about their place in society;
  - Personal Crisis – the student/pupil may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
  - Personal Circumstances – migration; local community tensions; and events affecting the student/pupil’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
  - Unmet Aspirations – the student/pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;
  - Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement/reintegration;

- Special Educational Need – students/pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.
7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.
8. More critical risk factors could include:
- Being in contact with extremist recruiters;
  - Family members convicted of a terrorism act or subject to a Channel intervention;
  - Accessing violent extremist websites, especially those with a social networking element;
  - Possessing or accessing violent extremist literature;
  - Using extremist narratives and a global ideology to explain personal disadvantage;
  - Justifying the use of violence to solve societal issues;
  - Joining or seeking to join extremist organisations;
  - Significant changes to appearance and/or behaviour; and
  - Experiencing a high level of social isolation resulting in issues of identity crisis and/or personal crisis.

**PREVENTING VIOLENT EXTREMISM -  
ROLES AND RESPONSIBILITIES OF THE SINGLE POINT OF CONTACT (SPOC)**

The SPOC for Thornton Primary School is Sue Simmons, who is responsible for:

- Ensuring that staff of the school are aware that you are the SPOC in relation to protecting students/pupils from radicalisation and involvement in terrorism;
- Maintaining and applying a good understanding of the relevant guidance in relation to preventing students/pupils from becoming involved in terrorism, and protecting them from radicalisation by those who support terrorism or forms of extremism which lead to terrorism;
- Raising awareness about the role and responsibilities of Thornton Primary School in relation to protecting students/pupils from radicalisation and involvement in terrorism;
- Monitoring the effect in practice of the school's RE curriculum and assembly policy to ensure that they are used to promote community cohesion and tolerance of different faiths and beliefs;
- Raising awareness within the school about the safeguarding processes relating to protecting students/pupils from radicalisation and involvement in terrorism;
- Acting as the first point of contact within the school for case discussions relating to students/pupils who may be at risk of radicalisation or involved in terrorism;
- Collating relevant information from in relation to referrals of vulnerable students/pupils into the Channel\*<sup>1</sup> process;
- Attending Channel\* meetings as necessary and carrying out any actions as agreed;
- Reporting progress on actions to the Channel Co-ordinator; and sharing any relevant additional information in a timely manner.

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<sup>1</sup> Channel is a multi-agency approach to provide support to individuals who are at risk of being drawn into terrorist related activity. It is led by the West Midlands Police Counter-Terrorism Unit, and it aims to

- Establish an effective multi-agency referral and intervention process to identify vulnerable individuals;
- Safeguard individuals who might be vulnerable to being radicalised, so that they are not at risk of being drawn into terrorist-related activity; and
- Provide early intervention to protect and divert people away from the risks they face and reduce vulnerability.