

# Safeguarding and Child Protection Policy and Procedures

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# SAFEGUARDING AND CHILD PROTECTION POLICY

## 1. Definition.

Safeguarding is the term used in the United Kingdom and Ireland to denote measures to protect the health, well-being and human rights of individuals, which allow people - especially children, to be defended against illegal, abusive or immoral actions, as well as against negligence that may endanger or expose them to physical, mental or sexual abuse, harm and any other risk situations. Considering the complexity of the definition the "Safeguarding" word does not have an exact translation in Romanian, therefore to illustrate the set of measures and their coherence, it will be used the term in English, not translated.

Accordingly to the last regulations, "Safeguarding and promoting the welfare of children is defined as:

- **providing help and support to meet the needs of children as soon as problems emerge**
- protecting children from maltreatment, **whether that is within or outside the home, including online**
- preventing the impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes

## 2. Purpose. Key action (referring concern)

Avenor's safeguarding policy provides clear direction to all stakeholders about expected practices in dealing with safeguarding issues.

This policy aims to:

- Enable each child's development in ways that will promote safety and confidence;
- Provide an environment in which children feel safe, secure, valued and respected, feel confident and know how to approach adults if they experience distress;
- Raise awareness of all the teaching staff of the need to safeguard children and of their responsibility in identifying and reporting possible cases of abuse;
- Provide a monitoring system for children known/presumed to be at risk of harm, and ensure that we, as a school, support these children;
- Acknowledge the need for effective and appropriate communication between all staff members about safeguarding children;
- Develop a structured procedure within the school that will be followed by all members of the school community in cases of suspected abuse.

**Any safeguarding concern may be referred to Designated Safeguarding Lead (DSL) :**

- (I) by filling in this [ONLINE FORM](#);
- (II) on the physical form that can be found in [Appendix 4](#) to the "Procedures. Related documents" and/or printed in the Reception area;
- (III) through the Safeguarding Concern Box placed under the Safeguarding and Child Protection displays from Avenor Nursery and Avenor College, allow any member of the community to leave an anonymous note communicating child protection-related concerns.

**In case of emergency, do not hesitate to contact directly DSL or (if unavailable) one of the Deputies (DDSLs), by phone or email as listed below in Key Contacts [Appendix 5](#) to the "Procedures. Related documents"**

### 3. Scope

The responsibility of child protection rests with all the staff and the other persons directly or indirectly involved in the activities of the school, therefore this policy highlights the conceptual framework needed to understand child protection issues and the procedures designed to keep children safe in Avenor. This policy applies to all who come into contact with children at Avenor sites including teachers, teaching assistants, administrative staff, students, catering/cleaning/security teams, visitors, volunteers, contractors, governors.

This policy is applied in all Avenor sites and levels (Nursery, Primary, Secondary), hereinafter collectively referred to as the “school”.

### 4. Policy Statement

At Avenor, we are taking seriously our responsibility to safeguard and promote the welfare of children. A child is defined as someone who has not reached 18 years of age.

We understand that all staff members and the management team must contribute actively to protecting children from harm, as well as the fact that each child’s welfare is of paramount importance. To facilitate this, Avenor will provide a safe, caring, positive and stimulating environment that promotes the social, physical and emotional well-being of each child.

**Part of our mission of “co-creating the best possible future” is ensuring that each child is and feels safe within our school’s premises.**

The concerns regarding safeguarding incidents will be treated seriously and addressed accordingly in this policy, regardless of the reporting source: parents, children, staff, contractors, and/or visitors to the campus. In the event that a concern is reported and has not been confirmed, Avenor will not take punitive measures against the person who reported these suspicions, except in cases where malicious intentions are found.

### 5. When to Be Concerned

Safeguarding and child protection is everyone’s responsibility. To fulfil this responsibility effectively, all staff members should make sure their approach is child-centred. This means that they should consider, at all times, what is best in the interest of the child.

Avenor together with all its staff members is part of a wider system of Romanian safeguarding and child protection. The Romanian social assistance and child protection system is based on the principle of providing help for families to stay together where it is safe for the children to do so and looking for alternatives where it is not, whilst acting in the best interests of the child at all times.

Avenor is aware of the range of specific safeguarding issues and situations that can put children at greater risk of harm, therefore:

- All members of the staff will receive every year training from a DSL to develop their understanding of the signs and indicators of abuse;
- All members of the staff know how to respond to a child who discloses abuse and the procedure to be followed in appropriately sharing a concern of possible abuse or a disclosure of abuse;
- The child protection procedures will be annually reviewed and updated by the DSL together with the Strategic Leadership Team;
- Children’s rights will be represented by two members of the staff, currently the Counsellors;
- Adults should respect the children’s rights as they are presented in Romanian law;
- **In the event of a member of the staff having a Child Protection concern, he/she will immediately inform the DSL;**

In addition, DSLs, nursery/college, teachers, leaders and staff who work directly with children will read **Appendix 1** to the “Procedures. Related documents” which contains important additional information about specific forms of abuse and safeguarding issues.

Indicators of Abuse and Neglect are listed in [Appendix 2](#) to the “Procedures. Related documents”

Where staff are unsure how to respond to specific safeguarding issues, they should follow the processes as identified in [Appendix 3](#) to the “Procedures. Related documents” and discuss the step with the DSL or a deputy (DDSL).

## 6. Roles and Responsibilities

At Avenor College, we understand that our responsibility to safeguard children requires that we all appropriately share any concerns that we may have about children.

For consulting the roles and responsibilities of DSL and DDSLs, please read [Appendix 6](#) to the “Procedures. Related documents”.

The Avenor Safeguarding Process Chart and specific activities to be pursued are described in [Appendix 3](#) to the “Procedures. Related documents”.

Apart from the DSL and DDSLs, in Avenor, the staff members invested in the following professional roles have safeguarding and child protection responsibilities:

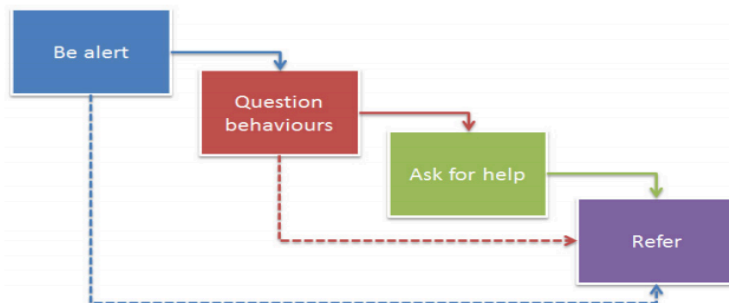
- The Head of School;
- The Director of Learning;
- The Compliance Coordinator & Health and Safety Officer;
- The Clubs Coordinator;
- The Medical Nurses.

Staff responsibilities are also described in [Appendix 6](#) to the “Procedures. Related documents”.

Student`s parents are responsible for safeguarding, as detailed in [Appendix 6](#)

## 7. What to do if you're worried a child is being abused?

All members of staff are expected to be aware of and follow the below approach if they are concerned about a child:



The reporting procedure is described in “Procedures. Related documents” and its [Appendix 3, 4 and 5](#)

## 8. Supporting Children

In Avenor we recognise that a child who is abused, who witnesses violence or who lives in a violent environment, or may suffer emotional abuse or neglect, may feel helpless and humiliated, may blame him/herself, and find it difficult to develop and maintain a sense of self-worth.

In Avenor we recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.

In Avenor we accept that studies show that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

Avenor will support all children by:

- encouraging the development of self-esteem and resilience in every aspect of school life including through the curriculum;
- promoting a safe, caring and positive environment within the school;

- having access, or being referred, to the counsellors in school who will offer on-the-spot individual or family support, as well as make recommendations for long-term counselling or psychotherapy outside of school;

## 9. Supporting Staff

At Avenor College, we acknowledge that staff in the school who have become involved in working with a child who has suffered harm or appears to be likely to suffer harm may find the situation stressful and upsetting.

We will support each staff by providing an opportunity to talk about their stressful experiences with the DSL and DDSs.

We also feel confident that each staff member can assess their well-being and can contact the counsellors of the school to receive support after upsetting experiences in the classroom.

One of our constant responsibilities is for the staff to receive safeguarding training at the point of induction to ensure their understanding of their important strategic role, as well as their legislative responsibilities.

## 10. Allegations against Staff

All school staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for activities with individual children or meetings with parents to be conducted in the view of other adults.

All staff should be aware of the school's Code of Conduct and respect it.

We understand that a child may make an allegation against a member of staff. If such an allegation is made, the member of staff receiving the allegation will immediately inform the DSL, if the Educational Coordinator is not present.

Suspension of the member of staff against whom an allegation has been made needs careful consideration. Any disciplinary investigation should be carried out once the child protection investigation in school has been completed.

All staff should be aware of their duty to raise concerns about the attitude or actions of colleagues. Concerns should be raised directly with the DSL.

Learning from all allegations against staff investigations are incorporated by our school, not just from those that are concluded and substantiated.

## 11. Prevention

We recognise that Avenor plays a significant part in the prevention of harm to children by providing them with effective lines of communication with trusted adults, supportive friends and a safe and caring environment.

The Avenor community will:

- establish and maintain a safe, caring and positive environment, which is understood by all staff, which enables children to feel secure and encourages them to talk knowing that they will be listened to;
- ensure that all children know that there are counsellors in school whom they can approach if they are worried or in difficulty;
- provide, across the curriculum, opportunities to equip children with the skills they need to keep safe from harm and to know whom they should turn for help.

## Physical Intervention

Staff must only ever use physical intervention as a last resort when interacting with children (e.g.: when a child is endangering him/herself or others). At all times this must be the minimal force necessary to prevent injury to another person.

## Child Protection in the Curriculum

The delivery of the curriculum in general will take into account the needs of all children. The curriculum will include materials and activities, especially within Personal, Social and Emotional Development and Personal, Social and Health Education which is designed to help children to be less vulnerable to abuse. These activities will aim to raise awareness of Child Protection issues and equip children with the skills needed to keep them safe.

The crucial part education settings play in preventative education within the context of a whole-school approach that creates a culture that does not tolerate any form of prejudice or discrimination, including sexism and misogyny/misandry. The expectation is that school's values and standards in this area will be underpinned by The behaviour policy and other linked policies.

## Health & Safety

The Avenor Health & Safety Guidelines reflect the consideration we give to the protection of our children both physically within the school environment and when away from the school on educational visits.

## 12. Related legislation

- The principles established by the [United Nations Convention on the Rights of the Child \(UNCRC\) 1989](#);
- The [Romanian law No. 272/2004 on the Protection and Promotion of the Rights of the Child](#);
- [Order No 6.235 of 6 September 2023](#) approving the Procedure for the management of cases of violence against pre-nursery/pre-school/students and school staff, as well as other related situations in the school environment and suspected violence against children outside the school environment;
- [Law on pre-university education](#) No 198/2023;
- The statutory guidance for schools and colleges [Keeping Children Safe in Education \(2023\)](#);
- The guide to inter-agency working to safeguard and promote the welfare of children [Working Together to Safeguard Children \(2023\)](#);

## 13. Related Policies and Procedures

This policy is one of a series in the Avenor integrated safeguarding portfolio and should be read and actioned in conjunction with the policies listed below:

- Attendance
- Behaviour
- Complaints
- Confidentiality
- Data protection and information sharing
- Emergency procedures such as evacuations and lockdowns
- Risk assessments, such as school trips, use of technology, school/college re-opening
- Safer recruitment
- Staff behaviour policy/code of conduct, including Use of Technology Policies
- Whistleblowing
- Diversity and Equity Policy
- PSHE policy
- Wellbeing action plan

- School violence prevention policy (anti-bullying)
- Health and safety
- Missing child
- Critical Incidents
- Inset Days Procedure
- Drugs Alcohol and Smoking policy

#### 14. Responsible for implementation

- Policy Owner/Board Secretary– for the Romanian translation
- Board Secretary – for sending the final form (EN/RO) to database
- SLT and relevant departments – for dissemination

Forms of dissemination – included in Staff Handbook, Parent`s Guide, uploaded on website

Displays with pictures of the DSLs and DDSLs will be placed in the lobbies of Avenor Nursery and Avenor College so that the members of the community have access to this information.

#### 15. Key stakeholders

All staff, contractors, students, parents and visitors

#### 16. Policy Review

The DSL is responsible for ensuring every year a review of this policy by the changes in Romanian law, as well as with any UK safeguarding and child protection guidelines.

If updates to the legislation occur, they will be adopted and incorporated into this document as soon as they appear; until such time as the new legislative provisions are incorporated into this document, in the event of a conflict between the provisions of this Policy and the legislative provisions, the legislative provisions shall prevail.

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# PROCEDURES. RELATED DOCUMENTS.

Safeguarding Procedures provide a clear framework for raising concerns or worries about children and should be read and understood by all Avenor College staff.

All members of Avenor College, including staff, and contractors, are responsible for safeguarding and promoting the welfare of others and must undertake to:

- Participate in any briefings and training provided
- Read the relevant documentation
- Follow procedures

Any new staff member or permanent contractor will be advised of Avenor College's Safeguarding Policy and Procedures as part of their induction programme or pre-course safeguarding briefing.

## 1. Culture of safety

### 1.1 Disclosure and Barring Service (DBS)/criminal record certificate/ Certificate of Conduct checks

Staff and contractors with direct contact with children will be required to have disclosure checks. Avenor College has a legal duty to refer to the Disclosure and Barring Service (DBS) anyone who has harmed, or poses a risk of harm, to a child, or if there is reason to believe the member of staff/contractors has committed one of several listed offences, and who has been removed from working (paid or unpaid) in regulated activity or would have been removed had they not left. The DBS will consider whether to bar the person.

If these circumstances arise about a member of staff, based on the DBS will be decided the removal of the individual


### 1.2 Access


To prevent any unauthorised person from gaining unsupervised access to any child, the following checks are in place:


- any occasional contractor or visitor will be accompanied by a staff member during their stay on campus;
- all visits will take place only in approved settings


### 1.3. Supervised Safeguarding Lanyards


As part of our school's safeguarding procedures, access card lanyards denote to everyone on campus the status of the person wearing the lanyard:

 **Dark Blue** Lanyards are issued to Avenor's staff/verified contractors and must be worn at all times, to be identified as trustworthy by the children

 **Turquoise** Lanyards identify the 6th form students, who can leave the campus without their parent's approval and use the mobile phone

 The **Yellow** Lanyard is worn by volunteers participating in various events or activities organised by Avenor

 Parents wearing a **Green** Lanyard are permitted on-site to the places indicated by reception, without a member of staff. Staff should be aware that parents may need additional assistance or direction.

 Visitors wearing a **Red** Lanyard must be with a member of staff at all times and never be left alone with children. Visitors who are seen to be without a member of staff with a Red Lanyard should be escorted to the reception.

### 1.4. Permanent visual contact

- The students are under the permanent supervision of the staff, including during the breaks
- Except for the doors that must be fire resistant, all classroom doors will be partially glass cut out to have inside visibility



## 2. What staff should look out for – vulnerable categories

### *Children Who May Require Early Help*

All staff members should be aware of the early help process and understand their role in identifying emerging problems and sharing information with other professionals to support early identification and assessments of a child's needs. It is important for children to receive the right help at the right time to address risks and prevent issues from escalating.

This also includes staff members monitoring the situations and feeding back to the DSL any ongoing / escalating concerns so that consideration can be given to a referral to Direcția Generală de Asistență Socială și Protecția Copilului if the child's situation does not appear to be improving.

All staff members should be alert to the potential need for early help for children who are also more vulnerable, such as:

- Children with disability and/or specific additional needs;
- Children with special educational needs;
- Children who are acting as a young carers;
- Children who are displaying anti-social behaviours;
- Children whose family circumstances present challenges, such as substance abuse, adult mental health or learning disability or domestic violence;
- Children who are showing early signs of abuse and/or neglect.

All staff members should be aware of the main categories of maltreatment: **physical abuse, emotional abuse, sexual abuse and neglect.**

Staff members should also be aware of the indicators of maltreatment and **specific safeguarding issues** so that they can identify cases of children who may be in need of help or protection. Please read [Appendix 1 – Specific Safeguarding and Child Protection Issues](#) and [Appendix 2 – Indicators of Abuse and Neglect](#).

### *Children with Special Educational Needs and Disabilities*

Additional barriers can exist when recognising abuse and neglect in this group of children.

This can include:

- Assumptions that indicators of possible abuse such as behaviour including, for example, ADHD or other specific behavioural problems/diagnosis, mood and injury relate to the child's impairment without further exploration;
- Assumptions that children with SEN and disabilities can be disproportionately impacted by things like bullying, without outwardly showing any signs;
- Communication barriers and difficulties;
- Reluctance to challenge carers, (professionals may over-empathise with carers because of the perceived stress of caring for a disabled child);
- Disabled children often rely on a wide network of carers to meet their basic needs and therefore the potential risk of exposure to abusive behaviour can be increased;
- A disabled child's understanding of abuse;
- Lack of choice/participation;
- Isolation.

### *Child-on-Child Abuse*

Education settings are an important part of the inter-agency framework not only in terms of evaluating and referring concerns to Direcția Generală de Asistență Socială și Protecția Copilului and the Police but also in the assessment and management of risk that the child or young person may pose to themselves and others in the education setting.

Staff should recognise that children are capable of abusing another child/colleague. The Strategic Leadership Team (SLT) should ensure their child protection policy includes procedures to minimise the risk of child-on-child abuse and set out how allegations of abuse will be investigated and dealt with. The policy should reflect the different forms child-on-child abuse can take, and make clear that abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up”. It should be clear as to how victims of will be supported.

If one child or young person causes harm to another, this should not necessarily be dealt with as abuse. When considering whether the behaviour is abusive, it is important to consider:

- Whether there is a large difference in power (for example age, size, ability, development) between the young people concerned);
- Whether the perpetrator has repeatedly tried to harm one or more other children;
- Whether there are concerns about the intention of the alleged perpetrator.

Child-on-child abuse can manifest itself in many ways and different gender issues can be prevalent. Severe harm may be caused to children by abusive and bullying behaviour of other children, which may be physical, sexual or emotional and can include gender-based violence/sexual assaults, sexting, domestic abuse, peer-on-peer exploitation, serious youth violence, sexual bullying or harmful sexual behaviour.

### 3. Dealing with Disclosure

Staff is reminded that children are not always ready or able to talk about their experiences of abuse and/or may not always recognize that they are being abused.

If a child discloses that he or she has been abused in some way, the member of staff should:

- Listen to what is being said without displaying shock or disbelief
- Accept what is being said
- Allow the child to talk freely
- Reassure the child, but do not make promises that it might not be possible to keep
- Never promise a child that they will not tell anyone - as this may ultimately not be in the best interests of the child.
- Assure the child that you will tell someone about the issue who can provide more help, but confidentially.
- Reassure him or her that what has happened is not his or her fault
- Stress that it was the right thing to tell
- Listen, only asking questions when necessary to clarify
- Not criticise the alleged perpetrator
- Explain what has to be done next and who has to be told
- Make a written record (see Safeguarding Process Chart)
- **Pass the information to the DSL without delay.**

## 4. Reporting procedures

**Members of staff or contractors/visitors with a safeguarding concern should report it to the DSL or DDSLs (Safeguarding Process Chart listed in [Appendix 3](#)) and fill out a Child Protection Referral Form ([Appendix 4](#)).**

**Contact details of the DSL and DDSL are attached in [Appendix 5](#)**

## 5. Roles and responsibilities

The Strategic Leadership Team (SLT) has appointed an appropriate senior member of staff, to the role of DSL;

**The DSL lead responsibility is safeguarding and child protection;**

The DSL will have the appropriate status and authority within the school to carry out the duties of the post;

The DSL will be given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and child protection matters, to take part in strategy discussions and interagency meetings – and/or to support other staff to do so – and to contribute to the assessment of children;

There will be appointed also DDSLs who will be trained to the same standard as the designated safeguarding lead;

Whilst the activities of the DSL can be delegated to the deputy, the ultimate lead responsibility for child protection, as set out above, remains with the DSL this lead responsibility will not be delegated.

**The detailed roles and responsibilities of DSL and DDSLs are listed in [Appendix 6](#)**

**Staff responsibilities are also described in [Appendix 6](#)**

**Students' parents are responsible for safeguarding, as detailed in [Appendix 6](#).**

## 6. Confidentiality

- we recognise that all matters relating to child protection are confidential;
- the DSL will disclose personal information about a child to deputies or other members of the staff only on a need-to-know basis;
- all staff must be aware that they have a professional responsibility to share child protection relevant information with the DSL and DDSLs to safeguard children;
- all staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being or that of another;
- all staff should not disclose any information on a child to a third party (e.g.: nanny, driver, uncle, family friend etc.) unless there is an authorisation from the parent or legal guardian of the child;

## 7. Estranged parents

- unless there is a legal document limiting access to a child by one parent, or special circumstances deemed to put the child at risk by the school staff, the school will inform both parents of the progress and welfare of the child;
- confidential information about a child will not be disclosed to only one of the parents, especially when there is an impending legal process (e.g.: divorce, custody);

## 8. Informing the appropriate authorities and agencies

- where it has been discovered that a child is in danger or at risk of being abused or neglected, the DSL or DDSLs will contact the parents of the child within 24 hours to schedule a meeting;

- during the meeting the parents will receive assistance and guidance aimed to stop right away any form of abuse towards the child, informing them of the school's responsibility to notify the local authorities in case they fail to do so;
- in the absence of cooperation from the child's parents to stop any form of abuse towards the child, the DSL will inform the Director of Learning and Head of School that a referral will be made to the authorities and will contact the local welfare authorities => the nearest branch of Direcția Generală de Asistență Socială și Protecția Copilului to the child's declared residence address (included in the Registration File of each child);

## 9. Record Keeping

All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing. If in doubt about recording requirements staff should discuss them with the DSL.

When a child has made a disclosure, the member of staff should:

- Record as soon as possible after the conversation. Use the school record of concern sheet wherever possible.
- Do not destroy the original notes in case they are needed by a court.
- Record the date, time, place and any noticeable non-verbal behaviour (e.g. avoiding eye contact, shaking, talking about it without showing emotions, crying, etc.) and the words used by the child.
- Draw a diagram to indicate the position of any injuries.
- Record statements and observations rather than interpretations or assumptions.

All records need to be given to the DSL promptly. No copies should be retained by the member of staff or volunteer.

The DSL will ensure that all safeguarding records are managed by the existing national legislation and the UK guideline

If a child who is/or has been the subject of a child protection plan changes school, DSL will inform the social worker responsible for the case and transfer the appropriate records to the DSL at the receiving school, in a secure manner, and separate from the child's academic file.

DSL and/or Deputies will fill the forms indicated in [Appendix 7 and 8](#) for investigating and monitoring Safeguarding cases.

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Included within the procedures are several appendices:

- Appendix 1 **SPECIFIC SAFEGUARDING AND CHILD PROTECTION ISSUES**
- Appendix 2 **INDICATORS OF ABUSE AND NEGLECT**
- Appendix 3 **PROCESSES/**
- Appendix 4 Template: **CHILD PROTECTION REFERRAL FORM**
- Appendix 5 **KEY CONTACTS**
- Appendix 6 **ROLES AND RESPONSIBILITIES**
- Appendix 7 Template: **CHILD PROTECTION INVESTIGATION REPORT**
- Appendix 8 Template: **CHILD PROTECTION INTERVENTION PLAN**

## Appendix 1

### SPECIFIC SAFEGUARDING AND CHILD PROTECTION ISSUES

#### **Excerpt from the statutory guidance for schools and colleges Keeping Children Safe in Education (2022)**

It is essential that all staff have access to this online document and read the information on the:

- Children missing from education;
- Child sexual exploitation;
- Private Fostering;
- 'Honour-based' violence;
- FGM;
- Preventing radicalisation;
- Online Safety;
- AI exploitation; predators are now using AI-generated images to target children, making it harder for schools and parents to detect threats;
- Excessive screen time and addiction, linking to declining mental health and concentration levels;
- Increased incidents of child-on-child abuse taking place online and being brought into school;
- Use of Mobile Phones and Cameras;
- Domestic violence;
- Forced marriage;
- LGBTQ children.

This is to assist staff to understand and discharge their role and responsibilities as set out in this guidance.

#### ***Children Missing in Education***

A child going missing from education is a potential indicator of abuse or neglect and such children are at risk of being victims of harm, exploitation or radicalisation. School and college staff should follow their procedures for unauthorised absence and for dealing with children that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of going missing in future.

#### ***Child Sexual Exploitation***

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status.

Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation does not always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.

Some of the following signs may be indicators of sexual exploitation:

- Children who appear with unexplained gifts or new possessions;
- Children who associate with other young people involved in exploitation;
- Children who have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant;
- Children who suffer from changes in emotional well-being;
- Children who misuse drugs and alcohol;
- Children who go missing for periods or regularly come home late; and

- Children who regularly miss school or education or do not take part in education.

### ***Private Fostering***

The accepted definition of 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).

Many private fostering arrangements remain unknown to the local authority. This is a cause for concern as privately fostered children and young people, without the safeguards provided by law, are a particularly vulnerable group.

All staff should be alert to the definition and wider aspects relating to private fostering.

### ***Honour-Based Violence (HBV)***

So-called "honour-based" violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing.

All forms of so-called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt, staff should speak to the DSL. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV or already having suffered HBV.

There is a range of potential indicators that a child may be at risk of HBV.

Schools and colleges can play an important role in safeguarding children from forced marriage.

### ***Female Genital Mutilation (FGM)***

Female genital mutilation includes procedures that intentionally alter or injure the female genital organs for non-medical reasons.

It is carried out on children between the ages of 0-15, depending on the community in which they live.

### ***Preventing Radicalisation***

The legislation on security and Counter-Terrorism and Security Act, of 2015 places a duty on authorities 'to have due regard to the need to prevent people from being drawn into terrorism'.

Protecting children from the risk of radicalisation should be seen as part of schools' and colleges' wider safeguarding duties, and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation, it is possible to intervene to prevent vulnerable people from being radicalised.

As with other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately, which may include making a referral to the Channel programme (A voluntary, confidential programme which safeguards people identified as vulnerable to being drawn into terrorism. It is a multi-agency process, involving partners from the local authority, the police, education, health providers and others)

### ***Online Safety***

It is important that children and young people receive consistent messages about the safe use of technology and can recognise and manage risks posed both in the real world and the virtual world.

Terms such as 'e-safety', 'online', 'communication technologies' and 'digital technologies' refer to all fixed and mobile technologies that adults and children may encounter, now and in the future, which allow them access to content and communications that could raise issues or pose risks to their well-being.

The issues can be categorised into three areas of risk:

- Content – being exposed to illegal, inappropriate or harmful material
- Contact – being subjected to harmful online interaction with other users
- Conduct – personal online behaviour that increases the likelihood of, or causes harm

Best Practice:

- **Whole Setting Approach:** Members of Staff recognise and are aware of online safety issues and the DSL and leadership team should make online safety a priority. In this matter, school should:
  - Regularly review and update your school's online safety policies to reflect emerging threats like AI exploitation.
  - Ensure all staff and governors complete online safety training which considers emerging risks
  - Support children and young people to understand what healthy online behaviour looks like
- **Policies:** DSL and the leadership team must ensure that all of the relevant online safety policies and procedures are in place and implemented. This includes having an awareness of the relevant sections of the EYFS Statutory Framework which relate to safeguarding.
- **Monitoring and Evaluation:** Risk assessment is taken seriously and used to promote online safety. There are appropriate filters and monitoring systems in place to protect children from harmful online material.
- **Management of Personal Data:** Data is managed securely and by the requirements of the Data Protection Act.

### ***Use of Mobile Phones and Cameras***

The DSL and leadership team must ensure that the relevant safety policies and procedures are in place and implemented which relate to the use of mobile phones, cameras and social networking for pupils and staff, visitors and volunteers.

The DSL and leadership team must ensure that staff read and understand all relevant 'Staff Codes of Conduct'/'Staff Behaviour' policies, inclusive of clear procedures about the use of mobile phones, cameras and social networks as well as online conduct.

Staff should have a clear understanding of what constitutes a misuse of mobile phones and cameras and know how to minimise the risk.

Staff must be vigilant to any potential warning signs of the misuse of mobile phones and cameras and report any concerns.

### ***Domestic Violence (DV)***

Domestic violence is defined as any incident or pattern incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality.

This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

The impact of domestic abuse includes the potential short-term and long-term detrimental impact on children's health, wellbeing, and ability to learn if they are experiencing domestic abuse at home or within their own intimate relationship

### ***Forced Marriage***

A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some perpetrators use perceived cultural practices to coerce a person into marriage.

### ***LGBTQ children***

Children who are LGBT can be targeted by other children. In some cases, a child who is perceived by other children to be LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT.

LGBT inclusion is part of the statutory Relationships Education and Relationship and Sex Education and Health Education curriculum and there is a range of support available to help school counter homophobic, biphobic, and transphobic bullying and abuse.



## Appendix 2

### INDICATORS OF ABUSE AND NEGLECT

Abuse is a form of maltreatment of a child. Abuse or neglect can imply inflicting harm or failing to act to prevent harm. Children can be abused by an adult / more adult or by another child/other children.

**Physical abuse** is a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.

**Emotional abuse** is the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development.

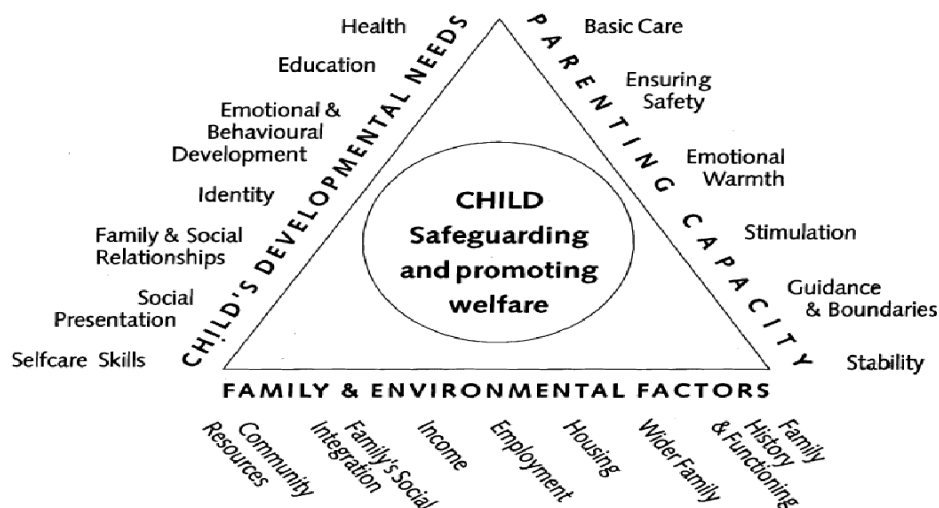
- it may involve conveying to a child that they are worthless or unloved, inadequate, or valued only as long as they meet the needs of another person;
- it may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun of what they say or how they communicate';
- it may feature age or developmentally inappropriate expectations being imposed on children => these may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploring and learning, or preventing the child to participate in normal social interaction;
- it may involve seeing or hearing the ill-treatment of another;
- it may involve serious bullying, causing children frequently to feel frightened or in danger.

**Sexual abuse** is forcing and enticing a child 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.

**Neglect** is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in a serious impairment of the child's health and development.

- it may involve failing to provide adequate food, clothing and shelter;
- it may involve failing to protect a child from physical and emotional harm or danger;
- it may involve failing to ensure adequate supervision;
- it may feature not ensuring access to appropriate medical care or treatment;
- it may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

#### *The framework for understanding children's needs*



### ***The indicators of abuse and neglect***

Excerpt the guide to inter-agency working to safeguard and promote the welfare of children [Working Together to Safeguard Children \(2023\)](#)

<b>Physical Abuse</b> = may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.	
<b>Child</b>	
Bruises – shape, grouping, site, repeat or multiple	Withdrawal from physical contact
Bite-marks – site and size Burns and Scalds – shape, definition, size, depth, scars	Aggression towards others, emotional and behaviour problems
Improbable, conflicting explanations for injuries or unexplained injuries	Frequently absent from school
Untreated injuries	Admission of punishment which appears excessive
Injuries on parts of the body where the accidental injury is unlikely	Fractures
Repeated or multiple injuries	Fabricated or induced illness
<b>Parents</b>	<b>Family / Environment</b>
Parent with injuries	History of mental health, alcohol or drug misuse or domestic violence.
History in the family of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault	Evasive or aggressive towards child or others
Explanation inconsistent with injury	Marginalised or isolated by the community.
Fear of medical help/parents not seeking medical help	Physical or sexual assault or a culture of physical chastisement.
Over chastisement of the child	

<b>Emotional Abuse</b> = 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, not giving the child opportunities to express their views, 'making fun' of what they say or how they communicate - hearing the ill-treatment of another and serious bullying (including cyberbullying).	
<b>Child</b>	
Self-harm	Over-reaction to mistakes / Inappropriate emotional responses
Chronic running away	Abnormal or indiscriminate attachment
Drug / Solvent abuse	Low self-esteem
Compulsive stealing	Extremes of passivity or aggression
Makes a disclosure	Social isolation – withdrawn, a 'loner' Frozen watchfulness, particularly preschool
Developmental delay	Depression
Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)	Desperate attention-seeking behaviour

Parent	Family / Environment
Observed to be aggressive towards child or others	Marginalised or isolated by the community.
Intensely involved with their children, never allowing anyone else to undertake their child's care.	History of mental health, alcohol or drug misuse or domestic violence.
Previous domestic violence	History of unexplained death, illness or multiple surgeries in parents and/or siblings of the family
History of abuse or mental health problems	History in the care of childhood abuse, self self-harmatising disorder or false allegations of physical or sexual assault
Mental health, drug or alcohol difficulties	Wider parenting difficulties
Cold and unresponsive to the child's emotional needs	Physical or sexual assault or a culture of physical chastisement.
Overly critical of the child	Lack of support from family or social network.

**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 or non-contact activities, such as involving children in looking at sexual images or being groomed online/child exploitation.

Child	
Self-harm - eating disorders, self-mutilation and suicide attempts	Poor self-image, self-harm, self-hatred
Running away from home	Inappropriate sexualised conduct
Reluctant to undress for PE	Withdrawal, isolation or excessive worrying
Pregnancy	Sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
Inexplicable changes in behaviour, such as becoming aggressive or withdrawn	Poor attention/concentration (world of their own)
Pain, bleeding, bruising or itching in the genital and /or anal area	Sudden changes in school work habits becoming truant
Sexually exploited or indiscriminate choice of sexual partners	
Parent	Family / Environment
History of sexual abuse	Marginalised or isolated by the community
Excessively interested in the child	History of mental health, alcohol or drug misuse or domestic violence
Parent displays inappropriate behaviour towards the child or other children	History of unexplained death, illness or multiple surgeries in parents and/or siblings of the family
A conviction for sexual offences	History in the care of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
Comments made by the parent/carer about the child	Grooming behaviour
Lack of sexual boundaries	Physical or sexual assault or a culture of physical chastisement.

**Neglect** = 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.

Child
-------

Failure to thrive - underweight, small stature	Low self-esteem
Dirty and unkempt condition	Inadequate social skills and poor socialisation
Inadequately clothed	Frequent lateness or non-attendance at school
Dry sparse hair	Abnormal voracious appetite at school or nursery
Untreated medical problems	Self-harming behaviour
Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold	Constant tiredness
Swollen limbs with sores that are slow to heal, usually associated with cold injury	Disturbed peer relationships
<b>Parent</b>	<b>Family / Environment</b>
Failure to meet the child's basic essential needs including health needs	Marginalised or isolated by the community.
Leaving a child alone	History of mental health, alcohol or drug misuse or domestic violence.
Failure to provide adequate caretakers	History of unexplained death, illness or multiple surgeries in parents and/or siblings of the family
Keeping an unhygienic dangerous or hazardous home environment	History in the family of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
Unkempt presentation	Lack of opportunities for the child to play and learn
Unable to meet child's emotional needs	Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
Mental health, alcohol or drug difficulties	

## Appendix 3

### PROCESSES

#### Be alert

- Be aware of the signs of abuse and neglect
- Identify concerns early to prevent escalation.
- Know what systems the school have in place regarding support for safeguarding (Inset Days Training , Staff Code of Conduct and the role of the Designated Safeguarding Leads (DSL) and Deputies (DDSL).

#### Question behaviours

- Talk and listen to the views of children, be non-judgmental.
- Observe any change in behaviours and question any unexplained marks / injuries
- To raise concerns about poor or unsafe practice, refer to the Level Coordinator, if the concerns is about the Level Coordinator escalate to the Director of Learning.
- Utilize whistleblowing procedure, if case.

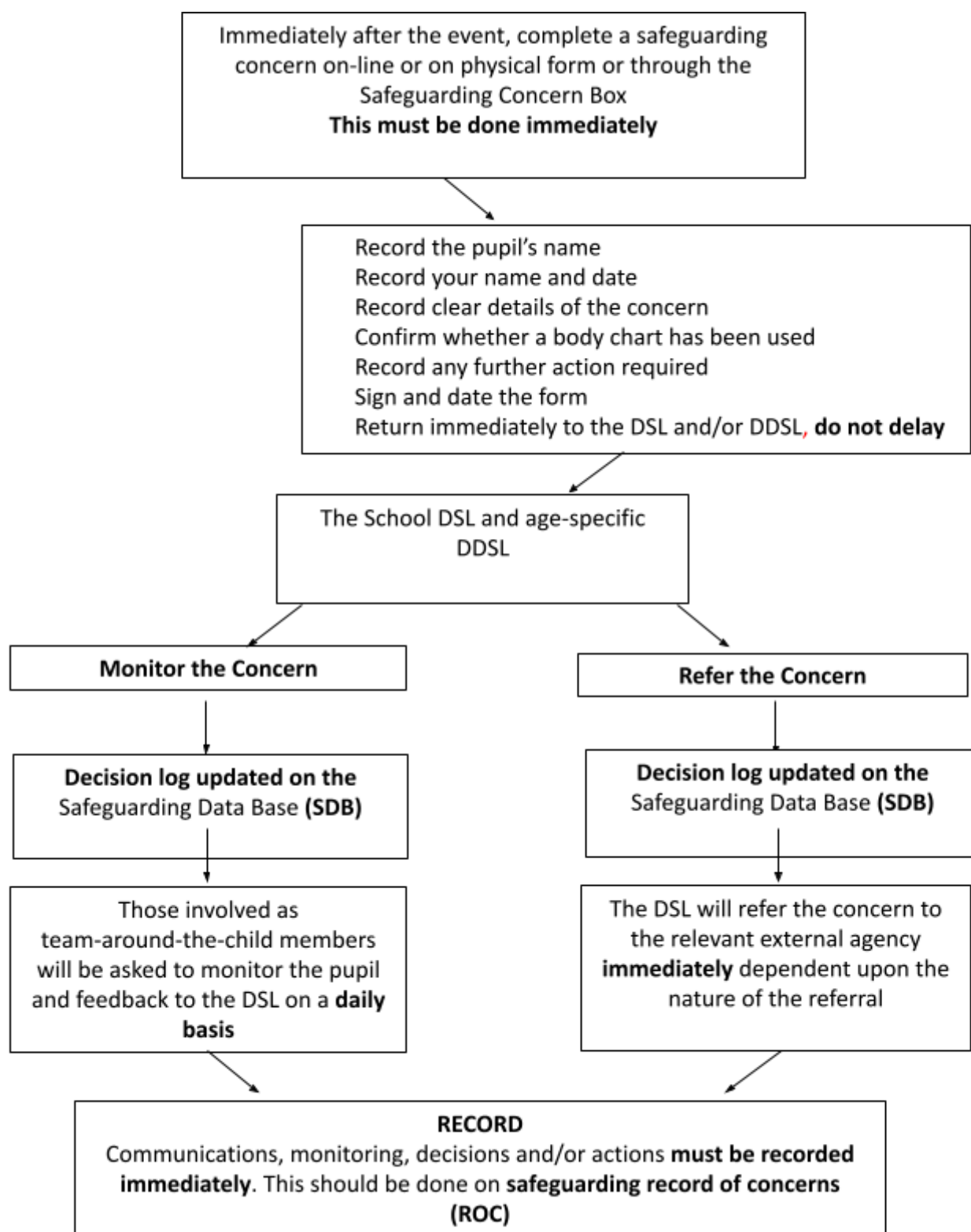
#### Ask for help

- Record and share information appropriately with regard to confidentiality.
- If staff members have concerns, raise these with the school's DSL or DDSLs
- Responsibility to take appropriate action, do not delay.

#### Refer

- Fill the Child Protection Referral Form to open the investigation undertaken by DSL
- DSL will make referrals to children services after a thorough investigation in consultation with the Director of Learning and the Head of School.

## AVENOR SAFEGUARDING PROCESS CHART



## Appendix 4

### CHILD PROTECTION REFERRAL FORM

**(Confidential)**

<b>Student's Name:</b> <i>(mandatory)</i>	<b>Personal Numeric Code (CNP):</b> <i>(optional)</i>
<b>Date of Birth:</b> <i>(optional)</i>	<b>Age/Grade Group:</b> <i>(mandatory)</i>
<b>First Language of the Student/Parents:</b> <i>(mandatory)</i>	<b>Ethnicity:</b> <i>(optional)</i>

<b>Reason for Referral:</b>  <i>What have you observed?</i> <i>What has the student disclosed to you which leads you to believe this is a child protection referral where a child may be at risk of harm or being harmed?</i> <i>Give as much detail as possible and attach a copy of any background notes which may be relevant to this referral.</i> <i>Confirm whether a body chart has been used</i>  <i>Record any further action required</i>  <i>Continue overleaf or on a separate sheet if necessary.</i>
---

Signed:	Name in clear writing:
Date:	Telephone Number:

**Please hand this referral personally to the Designated Safeguarding Lead (DSL). To discuss a referral please call the Designated Safeguarding Lead (DSL).**

**You can also fill in this [ONLINE FORM](#) and the DSL will be notified by email of any new entry.**

## Appendix 5

### KEY CONTACTS

Role	Name, Surname	Position/ Professional training	Contact details
<b>DSL</b> School Designated Safeguarding Lead	<b>Claudia Andrei</b>	Counsellor	<a href="mailto:dsl@avenor.ro">dsl@avenor.ro</a> 0724271539
		L3 Advanced Child Protection Course- September 2020	
<b>DDSL – Avenor College</b> Deputy Designated Safeguarding Lead	<b>Oana Carlan</b>	Counsellor Teacher for preschool	<a href="mailto:dsl@avenor.ro">dsl@avenor.ro</a> 0733047376
		L3 Advanced Child Protection Course- September 2020	
<b>DDSL – Avenor College</b> Deputy Designated Safeguarding Lead	<b>Ioana Botez</b>	Counsellor	<a href="mailto:dsl@avenor.ro">dsl@avenor.ro</a>
		L3 Advanced Child Protection Course- September 2020	
<b>DDSL – Avenor College</b> Deputy Designated Safeguarding Lead	<b>Manuela Nae</b>	Head of School School Compliance Director	<a href="mailto:dsl@avenor.ro">dsl@avenor.ro</a> 0737043482
		L3 Advanced Child Protection Course -February 2022	
<b>DDSL – Avenor College</b> Deputy Designated Safeguarding Lead	<b>Anda Costache</b>	Counsellor	<a href="mailto:dsl@avenor.ro">dsl@avenor.ro</a> 0747289169
		L3 Advanced Child Protection Course- September 2020	
<b>DDSL – Avenor Nursery</b> Deputy Designated Safeguarding Lead	<b>Oana Petre</b>	Head of Nursery Director of Nursery Compliance	<a href="mailto:dsl@avenor.ro">dsl@avenor.ro</a> 0751149443
		L3 Advanced Child Protection Course- September 2020	
<b>DDSL – Avenor Nursery</b> Deputy Designated Safeguarding Lead	<b>Richard Thomason</b>	Head of Secondary	<a href="mailto:dsl@avenor.ro">dsl@avenor.ro</a> 0740163443
		L3 Advanced Child Protection Course- february 2023	



## Appendix 6

### ROLES AND RESPONSIBILITIES

#### ***Designated Safeguarding Lead (DSL) and the Deputies Designated Safeguarding Leads (DDSLs)***

##### **1. Managing referrals**

The Designated Safeguarding Lead (DSL) is expected to:

- support staff in making child protection referrals and communicating safeguarding concerns;
- collect the physical concern forms as often as the case may be and/or delegate this assignment to one of the deputies
- check the concern boxes every morning and/or delegate this assignment to one of the deputies
- register physical concern forms (reception/concern box) with the safeguarding record of concerns (ROC)
- enable ROC for sharing with Deputies after updating with the physical form and assign them tasks
- follow the AVENOR Safeguarding process chart and make the right judgement when the case is so serious that needs to be referred to external agencies

##### **2. Work with others**

The Designated Safeguarding Lead (DSL) is expected to:

- liaise with the Head of School to inform him/her of issues related to safeguarding and child protection.
- liaise DDSL with the “case manager” and the designated officer(s) at the Direcției Generale de Asistență Socială și Protecția Copilului for child protection concerns (all cases which concern a staff member);
- liaise with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies;
- act as a source of support, advice and expertise for staff.

##### **3. Training**

The DSL (and any DDSLs) should undergo training to provide them with the knowledge and skills required to carry out the role. This training should be updated at least every two years.

In addition to the formal training set out above, their knowledge and skills should be refreshed (this might be via e-bulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, but at least annually, to allow them to understand and keep up with any developments relevant to their role so they:

- understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments;
- have a working knowledge of how local authorities conduct a child protection case conference;
- ensure each member of staff has access to and understands the school or child protection policy and procedures, especially new and part-time staff;

- are alert to the specific needs of children in need, those with special educational needs and young carers;
- are able to keep detailed, accurate, secure written records of concerns and referrals;
- obtain access to resources and attend any relevant or refresher training courses; and
- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school may put in place to protect them.

#### **4. Raise Awareness**

The DSL should:

- ensure the Safeguarding and Child Protection Policy is known, understood and used appropriately;
- ensure the Safeguarding and Child Protection Policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with the Strategic Leadership Team regarding this;
- ensure the Safeguarding and Child Protection Policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school in this; and
- link with the local child protection NGOs to make sure staff are aware of training opportunities and the latest local initiatives on safeguarding.

#### **5. Child Protection File**

When children leave the school ensure their child protection file is transferred to the new school as soon as possible. This will be transferred separately from the main pupil file, ensuring secure transit and confirmation of receipt should be obtained.

#### **6. Availability**

During term time the DSL (or a DDSLs) will always be available (during school hours) for staff in the school to discuss any safeguarding concerns. In exceptional circumstances availability via phone and or virtual call or other such media is acceptable. The school and the DSL will arrange adequate and appropriate cover arrangements for any out-of-hours/out-of-term activities.

#### ***Members of staff***

Our staff play a particularly important role in safeguarding as they are in a position to identify concerns early, provide help for children, promote children's welfare and prevent concerns from escalating.

All members of staff have a responsibility to:

- provide a safe environment in which children can learn.
- be aware of the indicators of abuse and neglect so that they can identify cases of children who may need help or protection.
- know what to do if a child tells them that they are being abused, neglected, or exploited and understand the impact abuse and neglect can have upon a child.
- be able to identify and act upon indicators that children are, or at risk of developing mental health issues.
- be prepared to identify children who may benefit from early help.

- understand the early help process and their role in it.
- understand the Avenor College safeguarding policies, procedures and systems.
- undertake regular and appropriate training which is regularly updated.
- know how to maintain an appropriate level of confidentiality.
- reassure children who report concerns that they are being taken seriously and that they will be supported and kept safe.

Staff at Avenor College recognise that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as being abusive or harmful. This should not prevent staff from having professional curiosity and speaking to a DSL if they have any concerns about a child.

### ***Parents and carers***

Parents/carers have a responsibility to:

- Understand and adhere to the relevant Avenor College policies and procedures.
- Talk to their children about safeguarding issues and support Avenor College in their safeguarding approaches.
- Identify behaviours which could indicate that their child is at risk of harm including online.
- Seek help and support from Avenor College or other agencies.

## Appendix 7

### CHILD PROTECTION INVESTIGATION REPORT

**(Confidential)**

<b>Investigated by:</b>		<b>Position:</b>	
<b>Date:</b>			
Final Report of Investigation of child protection referral of (insert the name of the child) made by (insert name of the person who made the referral) at (insert date).			
In my/our investigation of the child protection referral, it is found (please circle the appropriate category):			
<ul style="list-style-type: none"> <li>● Found grounds to support the referral;</li> <li>● Did not find grounds to support the referral;</li> <li>● Did not find enough information to make a judgement on the referral.</li> </ul>			
<b>Summary of the investigation:</b>			
<b>External agencies contacted?</b>		Yes Date: __ / __ / ____      No	

	Date
Signature of Investigator:	
Signature of the DSL/DDSL:	
Support offered to the child who was referred?	
Individual Intervention Plan developed? Yes / No	

## Appendix 8

### CHILD PROTECTION INTERVENTION PLAN

*(Confidential)*

<b>What?</b> The actions included in the plan	
<b>Why?</b> The aim of the plan	
<b>Who?</b> The people responsible for implementing the plan	
<b>How?</b> The methods used to implement the plan	
<b>When?</b> The timeframe needed to implement the plan	
<b>Conclusions</b>	
<b>Need for Monitoring</b>	

Names and Signatures:

Date: