



Durham Cathedral Schools Foundation
SAFEGUARDING POLICY

1. Policy Aims

- 1.1 Durham Cathedral Schools Foundation (DCSF) is committed to providing a safe, supportive and nurturing environment in which all of its pupils can learn, develop and thrive, and all staff and volunteers have a crucial role to play in promoting children's wellbeing, welfare and safety. All staff and volunteers are expected to recognise that this Policy is designed above all to protect the safety, wellbeing and best interests of pupils, to support staff and volunteers in the proper exercise of their safeguarding responsibilities, and to ensure that, in the case of a safeguarding concern, effective and timely action is taken. As such, this Policy must be followed without exception by anyone who may become involved with a safeguarding issue.

DCSF takes all reasonable measures to protect and support each pupil in its care by having in place:

- a rigorous Safer Recruitment Policy governing the appointment of all staff and volunteers;
- a programme of staff and volunteer training to ensure that all adults working within the DCSF community can identify safeguarding concerns and risks, and report them to the Designated Safeguarding Lead or appropriate Deputy Safeguarding Officer;
- a clear Behaviour Policy, underpinned by DCSF's values of Moral integrity, Ambition, Responsibility and Kindness, which encourages pupils to support and respect others, whether in person or online. This takes a safeguarding-first approach to all behavioural incidents.
- clear information and signposting to ensure that pupils feel able and confident to approach a member of staff for help, and to report their concerns to DCSF or other appropriate body.

DCSF commits in this Policy to observing the principles of the Equality Act 2010 and does not discriminate on any grounds.

This Policy should be read in conjunction with the following DCSF policies:

- Online Safety Policy
- Safer Recruitment Policy
- Behaviour Policy
- Complaints Policy
- Whistleblowing Policy
- Photographs and Photography Policy
- Independent Listener Policy
- Visitor Policy
- Bring Your Own Device Policy and Acceptable Use Agreement (ICT)
- Educational Trips and Visits Policy
- Missing Pupil Policy
- Staff and Volunteer Code of Conduct
- Gender Identity Policy
- Attendance Policy

It should also be read in conjunction with:

- [Keeping Children Safe in Education](#) (September 2023)
- [Working Together to Safeguard Children](#) (September 2018)
- [Keeping Children Safe in Out-of-School Settings](#) (April 2022)
- The Durham Safeguarding Children Partnership document entitled *Durham Threshold Guidance: Keeping Children Safe* (2022) appended to this Policy
- [The Durham Cathedral Safeguarding Policy](#)

Staff, Volunteers and Safer Recruitment

- DCSF ensures that all relevant recruitment checks and procedures are implemented with regard to staff, governors, volunteers and adults employed by other organisations who work with its pupils in accordance with the following guidance:

Keeping Children Safe in Education (September 2023)

Working Together to Safeguard Children (July 2018)

Prevent Duty Guidance for England and Wales (April 2021)

Independent Schools Standards (England) Regulations (2014)

National Minimum Standards for Boarding Schools (September 2022)

Statutory Framework for the Early Years Foundation Stage

- There is a thorough induction process for all newly-appointed staff and volunteers, which includes safeguarding training, and all staff and volunteers are required to:
 - read and sign the Staff and Volunteer Code of Conduct; and
 - complete a disqualification under the childcare act (DUCA) declaration annually.

- In view of the potential seriousness of all issues of safeguarding, the procedures and guidelines contained in this Policy must be rigidly adhered to by all staff and volunteers. This Policy applies wherever staff or volunteers are working with pupils, including where this is away from the school site or on an educational trip or visit.

- DCSF takes all reasonable measures to:
 - Comply with the requirements of the Disclosure and Barring Service [DBS] with regard to the termination of employment of any individual deemed unsuitable to work with children, as explained in the Safer Recruitment Policy;
 - Ensure that, where staff from another organisation are working with its pupils on another site or online, assurances are received that appropriate safeguarding checks and procedures apply to those staff, and that appropriate supervision by DCSF is in place;
 - Follow local inter-agency procedures of the Durham Safeguarding Children Partnership;
 - Establish and maintain an environment in which pupils feel secure, are encouraged to talk, and are listened to;
 - Embed in the curriculum and co-curricular programmes of DCSF activities and opportunities to equip pupils with the knowledge and skills they need to stay safe from abuse, whether in person or online, and to seek help when they need it;
 - Communicate promptly with other schools and institutions to ensure the safe transfer of pupils to and from DCSF;
 - Ensure that visiting speakers and staff from other organisations are appropriately screened, authorised and supervised by DCSF staff.

- The DCSF Designated Safeguarding Lead (DSL) is responsible for overseeing all safeguarding structures, measures and concerns, including:

- Staff, governor, volunteer and pupil (School Monitors) training;
 - Pupil education on safeguarding issues such as bullying, child-on-child abuse and sexual harassment;
 - Communication with parents on safeguarding, wellbeing and welfare;
 - Liaison with relevant external agencies such as the Durham Safeguarding Children Partnership, Social Care, Police and CAMHS.
- The DSL will ensure that staff and volunteer training covers, at least annually, and more frequently when there are significant changes to safeguarding guidance, policy or procedures:
 - The identities, responsibilities and contact details of the Designated Safeguarding Officer and her Deputies;
 - The key principles, themes and specific safeguarding concerns identified in *Keeping Children Safe in Education* (September 2023);
 - Vulnerable pupils, including those with special educational needs and/or disabilities, young carers, Looked-After Children and children who are privately fostered, boarders, international pupils, and pupils with English as an additional language.
 - The Staff and Volunteer Code of Conduct, with particular emphasis on ensuring that the behaviour and actions of colleagues embody good safeguarding practice, and do not place pupils, colleagues or themselves at risk of harm, or of allegations of harm.
 - The DCSF policy on physical restraint, which is included in the Behaviour Policy;
 - Signs, symptoms and indicators of harm and abuse;
 - Procedures to be followed in the event of a safeguarding concern, including actions to be taken in emergencies, when receiving disclosures of any kind of abuse or harm, or when possible indicators of abuse or harm are observed or reported;
 - Any amendments to the Safeguarding Policy and its associated procedures since the previous safeguarding update;
 - The duty to report safeguarding concerns and to implement the Whistleblowing Policy where required.

The latest whole staff DCSF safeguarding training took place in September 2023.

- Staff and volunteers will be issued with a hard or electronic copy of key documents, which are also stored in the staff area of Microsoft Teams. All DCSF staff and volunteers are required to read Part 1 of *Keeping Children Safe in Education* (September 2023). Members of the Senior Leadership

Team and Governors of DCSF are required in addition to read Annex A of this document. The DSL is responsible for notifying staff of any significant amendments to key documents.

- DCSF makes contact with a number of outside organisations and providers, most notably taxi drivers who transport boarders locally. All licensed taxi drivers operating in Durham are DBS checked and receive safeguarding training through the Durham Safeguarding Children Partnership. Staff and pupils are advised only to use those organisations who are appropriately licensed and approved by DCC.
- All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in DCSF’s safeguarding provision, and should feel confident that such concerns will be taken seriously by the Senior Leadership Team. Staff have a professional duty to consult the Whistleblowing Policy if their concerns about the management of, or response to, a safeguarding issue persist.
- Senior pupils who hold positions of responsibility in DCSF, such as School Monitors, receive safeguarding training at the start of their term of office from the DSL. This training includes the appropriate action to be taken if they receive a disclosure or have a concern about the welfare or safety of a fellow pupil.

1.2 Designated Safeguarding Officers (September 2023)

Safeguarding Role	Name	Location
Designated Safeguarding Lead for the Durham Cathedral Schools Foundation	Harriet Thompson	Durham School
Deputy Safeguarding Officers	Patricia Abbott	Durham School
	Mark Younger	Durham School
	Deborah Bennett	Durham School – Events and Lettings
Deputy Safeguarding Officers	Andrew Chandler	The Chorister School, Cathedral
	Rachel Faulkner-Walford	The Chorister School, Cathedral
	Joss Balfour	The Chorister School, Cathedral and Bow

Safeguarding Lead for the EYFS	April Davies	The Chorister School, Bow
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- All Designated Safeguarding Officers undertake biennial certificated safeguarding training, and the DSL is responsible for keeping records of all such training and ensuring that it is renewed in a timely manner.
- Every interview panel will include a member of staff who has completed certificated training in Safer Recruitment. The following are staff who have completed this training:

Name	Role
Kieran McLaughlin	Principal (DCSF)
Sally Harrod	Headmistress (The Chorister School)
Sara Middleton	Chief Operating Officer
Andrew Pearson	Deputy Head Academic
Harriet Thompson	Deputy Head Pastoral
Andrew Beales	Director of Development
Paul Gerrard	Assistant Head Compliance
Kath Rochester	Assistant Head Boarding and Co-curricular
Maura Regan	Safeguarding Governor
Michelle Collinson	HR Officer

2. Safeguarding Concerns and Definitions

2.1 Categories of Child Abuse

Child abuse may fall into the following broad categories:

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 or injury in a child.

Emotional Abuse

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 the child that they are worthless or unloved, inadequate, or valued only insofar as they meet the expectations or 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 involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including online), 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 of a child, although it may occur alone. Any such abuse may not be dismissed as 'banter', 'a joke' or 'part of growing up'; DCSF has a rigorous zero tolerance approach to all forms of emotional abuse.

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. All staff working with children should maintain an attitude of 'it could happen here'.

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

Child-on-child sexual harassment, violence and abuse involves situations in which sexual harassment or sexual assault occurs between children of any age and sex. Such abuse may occur entirely in person, entirely online, or a combination of both, and can take many forms, for example, sexual touching, the use of sexualised names, sexual jokes or taunting, the non-consensual sharing of sexual images and videos, and "upskirting". "Upskirting" is a form of abuse which typically involves taking a picture under a person's clothing without their knowledge, which is likely to cause the victim humiliation, distress or alarm. It has now been classed as a criminal offence. This behaviour, if witnessed, should be reported to the Designated Safeguarding Lead immediately. Staff and volunteers should be aware that some groups are potentially more at risk of sexual harassment, violence and abuse, namely girls, LGBT+ pupils, boarders, and pupils with special educational needs and/or disabilities. All staff and volunteers must be aware of the need to be alert to and challenge robustly any inappropriate behaviour of this nature, as dismissing or tolerating such behaviours risks normalising them, thereby fostering an environment in which serious harm may result. DCSF has a rigorous zero tolerance approach to all forms of child-on-child abuse, and such behaviour should never be dismissed as 'banter', 'a joke' or 'part of growing up'. It is essential that all victims of child-on-child sexual harassment, violence or abuse are reassured that they are being taken seriously, regardless of how long it has taken them to come forward and that they will be supported and kept safe. Abuse that occurs online or outside of DCSF should not be downplayed and should be treated equally seriously. A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report or their experience minimised.

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 of 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.

Domestic Abuse

Domestic abuse refers to any incident or pattern of incidents of controlling, coercive, 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. Domestic abuse can encompass, but is not limited to psychological, physical, sexual, financial and emotional abuse, and this Policy acknowledges particularly the risk posed to children and young people who experience or witness these behaviours in their home or wider family environment.

2.2 Specific safeguarding issues

All staff and volunteers should in addition be aware of the following specific safeguarding issues.

Mental and Emotional Health Concerns

Mental and emotional health concerns can be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Only appropriately-trained professionals should attempt to make a diagnosis of a mental health concern. Staff and volunteers, however, are well-placed to observe pupils and identify those whose behaviour or presentation suggest that they may be experiencing mental or emotional difficulties, or be at risk of developing a mental health concern, and therefore to take appropriate action. Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences (ACEs), this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that staff are aware of how these children's experiences can impact on their mental health, behaviour and education.

Self-Harm

Self-harm, also known as self-injury or self-mutilation, occurs when a child intentionally and repeatedly harms themselves in a way that is impulsive and not intended to be lethal. Most commonly, self-harm takes the form of skin cutting, eating disorders, head-banging or hitting, or burning. Other forms of self-harm involve excessive scratching or rubbing to the point of drawing blood, punching self or objects, inserting objects into body openings, ingesting harmful substances, and trichotillomania (pulling out hair or eyelashes). Many individuals who engage in self-harm or non-suicidal self-injury (NSSI) hurt themselves in more than one way.

Child-on-child abuse

Children can abuse other children. This is generally referred to as child-on-child abuse and can take many forms. This can include (but is not limited to): bullying (including cyberbullying); sexual violence and sexual harassment; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexting and initiation/hazing type violence and rituals. All staff and volunteers must be aware that DCSF has a rigorous zero tolerance approach to all forms of child-on-child abuse, and such behaviour must never be dismissed as 'banter' or 'a joke'. A victim of child-on-child abuse is likely to need significant support following an abusive experience, and should never be made to feel ashamed. Equally, it is important to note that, while perpetrators of child-on-child abuse may pose significant risk to other children, it is possible that they themselves have unmet needs and may also have experienced abuse or significant harm. In instances of child-on-child abuse, it is important for support and advice to be offered to all parties. If it is necessary for a pupil to be interviewed by the police in relation to an allegation of abuse, DCSF will endeavour to inform parents as soon as possible, and will ensure that the pupil is supported by an appropriate adult during the interview process.

Sexting

Sexting, or youth-produced sexual imagery, can be defined as images or videos of an indecent or sexual nature generated by children under the age of 18 or of children under the age of 18. It is important to be aware that pupils involved in creating or sharing sexual images or videos may be committing a criminal offence. Crimes involving indecent photographs (including pseudo-images) of a person under the age of 18 fall under Section 1 of the Protection of Children Act 1978 and Section 160 Criminal Justice Act 1998. Under this legislation it is a crime to take an

indecent photograph or allow an indecent photograph to be taken; make an indecent photograph (this includes downloading or opening an image that has been sent via email or other electronic/online medium); distribute or show such an email or other electronic message; possess with the intention of distributing images; advertise; and possess such images. Any decision to charge individuals for such offences is a matter for the Crown Prosecution Service, and whilst it is unlikely to be considered in the public interest to prosecute children, young people need to be aware that they may be breaking the law. Staff should respond to any disclosure relating to sexting in the same way they would in any other safeguarding disclosure, and the victim should never be made to feel ashamed. Staff should be mindful that that sexting may expose children to a risk of abuse, but itself may be an indicator of abuse.

Female genital mutilation (FGM)

Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. Warning signs that FGM may be about to take place, or may have already taken place, can be found in *Multi-Agency Practice Guidelines: Female Genital Mutilation*. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care. In line with Durham Safeguarding Children Partnership procedures, staff with a concern of this nature should telephone Durham Constabulary on 101, and seek advice from First Contact.

Other, so-called 'honour-based' violence (HBV)

This refers to incidents or crimes committed to protect or defend the honour of a family and/or community, which, *Keeping Children Safe in Education* points out, may include FGM, forced marriage, or practices such as breast ironing. School staff must be aware of the possibility that children may be at risk of such practices, and mindful of the complexity of these risks. HBV can involve a wide network of family and community pressures, as well as multiple perpetrators. Actions taken in response to concerns of this nature must therefore be carefully considered,

informed by and in line with guidance from the appropriate external agencies and authorities.

Child Criminal Exploitation (CCE)

Some specific forms of CCE can include children being forced or manipulated into transporting drugs or money through county lines, working in cannabis factories, shoplifting, or pickpocketing. They can also be forced or manipulated into committing vehicle crime or threatening/committing serious violence to others. As children involved in criminal exploitation often commit crimes themselves, their vulnerability as victims is not always recognised by adults and professionals, (particularly older children), and they are not treated as victims despite the harm they have experienced. It is important to note that the experience of girls who are criminally exploited can be very different to that of boys. The indicators may not be the same, however professionals should be aware that girls are at risk of criminal exploitation too. It is also important to note that both boys and girls being criminally exploited may be at higher risk of sexual exploitation.

Serious violence

All staff should be aware of indicators, which may signal that children are at risk from, or are involved with serious violent crime. These may include increased absence from school, a change in friendships or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs.

Radicalisation and Extremism

Section 26 of The Counter Terrorism and Security Act (March 2015) places a duty on schools in England and Wales to prevent people from being drawn into terrorism. This duty applies to all schools, whether maintained or independent, and organisations covered by the Early Years Foundation Stage framework. Radicalisation refers to the grooming process by which a person comes to support terrorism and others forms of extremism. There is no single way to identify an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online interactions, and specific needs or aspirations for which an extremist or terrorist group may appear to provide an answer. The internet, and the use of social media in particular, has become a major factor in the

radicalisation of young people, and DCSF operates ICT monitoring procedures designed to identify any suspicious or harmful online activity. It is important to recognise that radicalisation and extremism can be religious, political or focused around single-issue groups. While the overall risk and incidence are currently low in relative terms, awareness and vigilance are expected at all times.

Children who are absent from education and children missing education (CME)

Children being absent from education for prolonged periods and/or on repeat occasions can act as a vital warning sign to a range of safeguarding issues including neglect, child sexual and child criminal exploitation – particularly county lines. Children missing education (CME) refers to children of compulsory school age who are not registered pupils at a school and are not receiving suitable education otherwise than at a school. DCSF recognises that accurate attendance registers and careful procedures for identifying and addressing pupil absence are important measures in ensuring that children engage with education, that we identify abuse, and in the case of absent pupils, preventing the risk of them becoming a child missing education in the future. Children missing education are at significant risk of underachieving, being victims of harm, exploitation or radicalisation, and becoming NEET (not in education, employment or training) later in life.

Vulnerable Children

Research indicates that when young people are vulnerable, for example when they have special educational needs or disabilities, have English as an additional language, identify as LGBT+, or are boarders living away from home, then when they experience abuse or neglect, or suffer physical or emotional harm, they can find themselves at greater risk of such additional concerns as social exclusion, exclusion from education, delinquency, and being drawn into gang or peer violence. As a result, the principles of early intervention and long-term monitoring and support underpin this Policy, with a view to protecting vulnerable young people from future risk and harm.

DCSF commits to making reasonable adjustments for disabled children and young people to deal with particular disadvantages, such as bullying or child-on-child abuse.

2.3 Corporal Punishment

The use of corporal punishment is forbidden by law, and no member of DCSF staff or volunteer may apply any sanction which is intended to cause or threaten pain, injury or humiliation.

2.4 Use of Reasonable Force

DCSF recognises that there are circumstances in which it may be necessary for staff or volunteers to use reasonable force to control or restrain a pupil. Such action may be required in order to:

- prevent a child from harming him/herself or others;
- prevent a child from committing a criminal offence;
- defend oneself from attack;
- prevent a child from leaving a supervised environment, thus putting his/her safety at risk.

Reasonable force should only be used as a last resort, and staff should use the minimum force required to achieve the desired result. Physical interventions that would be deemed 'reasonable force' in such circumstances include:

- pushing, pulling or taking the arm of a child to move him/her away;
- blocking a child's way;
- standing between two children to separate them.

Physical interventions which would be deemed inappropriate include:

- holding or pulling a child by the head, hair or neck;
- twisting limbs;
- kicking, hitting or slapping.

If reasonable force is used, the member of staff should remain calm throughout and explain clearly to the pupil what is happening and why. Any incident requiring a member of staff or volunteer to use reasonable force to restrain a child should be reported to the Deputy Head Pastoral at Durham School or the Deputy Head at Chorister School as soon as is reasonably practicable.

Procedures

3.1 Durham Cathedral Schools Foundation Commitments

In accordance with the guidance and legislation above, the Durham Cathedral Schools Foundation is committed to:

- cultivating and maintaining an environment in which safeguarding is a priority, and where it is understood by all that safeguarding is everyone's responsibility;
- sharing information and cooperating fully with social care, child protection and law enforcement agencies;
- keeping informed and up-to-date with national and local advice to understand existing and emerging safeguarding risks;
- ensuring that all staff and volunteers understand these risks through regular (at least annual) safeguarding training (including online safety which, amongst other things, includes an understanding of the expectations, applicable roles and responsibilities in relation to filtering and monitoring) which refers to the possible indicators of abuse, contextual risks, and specific safeguarding issues such as radicalisation, child-on-child abuse and sexual harassment, criminal and sexual exploitation, domestic abuse, and mental health concerns;
- maintaining thorough and appropriate records of existing and emerging safeguarding concerns using CPOMS;
- monitoring pupil attendance and addressing unexplained absence from school;
- screening visiting speakers and outside groups who make use of school facilities;
- sustaining robust ICT protocols that filter out harmful or extremist material, and ensuring that filtering and monitoring systems and their effectiveness are regularly reviewed;
- requiring all DCSF ICT users (staff and pupils) to sign an Acceptable Use Agreement that defines clear expectations regarding the use of ICT;
- speaking with parents and carers about children's access to online sites when away from school.

Proactive Safeguarding Measures

Children have said that they need

- vigilance: to have adults notice when things are troubling them
- understanding and action: to understand what is happening; to be heard and understood; and to have that understanding acted upon
- stability: to be able to develop an ongoing stable relationship of trust with those helping them
- respect: to be treated with the expectation that they are competent rather than not
- information and engagement: to be informed about and involved in procedures, decisions, concerns and plans
- explanation: to be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response
- support: to be provided with support in their own right as well as a member of their family
- advocacy: to be provided with advocacy to assist them in putting forward their views
- protection: to be protected against all forms of abuse and discrimination and the right to special protection and help if a refugee.

Working Together to Safeguard Children (July 2018)

3.2.1 Proactive Procedures

The following procedures are employed to foster a safe and supportive environment and positive relationships of trust within DCSF and thereby to minimise the risk of abuse and facilitate early intervention in safeguarding concerns.

- Pupils of DCSF are nurtured to become tolerant and law-abiding citizens with a strong moral compass. The DCSF values (Moral integrity, Ambition, Responsibility and Kindness or MARK) encourage pupils to be mindful of the needs and vulnerabilities of others, and to behave responsibly, with integrity and kindness, towards their peers.
- Through safeguarding training and updates, it is made clear that staff, volunteers and senior pupils are expected to be proactive by setting a good example and positively contributing to an environment in which people are respected and listened to. Staff, volunteers and senior pupils are also

expected to be reactive by challenging low-level behaviours (such as the use of sexist, homophobic or racist or sexualised language) which, if ignored or normalised, can lead to a culture in which abuse can occur.

- Pupils are encouraged, through Chapel services, LWE lessons, House Meetings, Tutor and Form Time, as well as through component parts of subject-specific schemes of work, to consider different points of view, to analyse and critically evaluate their own and others' beliefs, and to be tolerant and respectful in their interactions with others.
- In order to provide the most meaningful and child-centred programme of education, opportunities for pupil voice are taken to ensure that pupils' own lived experience and priorities are listened to.
- Pupils are supported, through group discussions and individual conversations, to adjust their behaviours in order to reduce risks and build resilience, including to radicalisation and grooming, with particular attention to the safe use of online resources, social media and ICT. This includes ensuring children understand the law on child-on-child abuse is there to protect them rather than criminalise them.
- DCSF's pastoral structure (involving Tutors, Matrons, Senior Mental Health Lead, School Nurses, Housemasters and Housemistresses, the Chaplain, the Chorister Supervisor, Heads of Section, and members of the Senior Leadership Team with specific safeguarding and pastoral responsibilities) provides an effective framework for getting to know pupils very well such that concerns are shared and acted upon swiftly. Safeguarding and pupil welfare concerns are a standing item on agendas for the Senior Leadership Team and the Committee of Housemasters and Housemistresses.
- Staff with particular responsibility for matters of pastoral, wellbeing and safeguarding importance (primarily the Deputy Head Pastoral (also DSL), Senior Mental Health Lead, Director of Wellbeing, Assistant Head Boarding and Co-curricular, Heads of Learning Support and the Deputy Head and Pastoral Leads at the Chorister School) arrange for outside speakers and organisations to provide additional information, training and support for staff, pupils and parents on issues of particular concern or importance. The views of staff, parents and pupils are sought through regular surveys, and they are asked to suggest future items for such sessions and activities.
- In addressing pastoral and safeguarding concerns, including child-on-child abuse, conflict and disagreement, pupils are encouraged and helped to manage their emotions and behaviour calmly and reflectively, and there is a strong focus on building and, where necessary, restoring positive relationships. In cases of conflict between pupils, or when an allegation of bullying or child-on-child abuse is made, pastoral monitoring and support will be offered to all parties: the pupil(s) making the allegation, the pupil(s)

accused of perpetrating the behaviour, and, where appropriate, the wider peer group.

- Within the House system, pupils are valued, included and very visible, and changes in patterns of behaviour, or emerging unhealthy attitudes or actions connected with but not limited to safeguarding concerns (such as grooming, exploitation, radicalisation or harassment) are quickly identified and subject to early intervention.
- All vulnerable children, including those who identify as LGBT+, have a trusted adult who they can be open with, e.g., development of five-person plan.
- All staff and volunteers are made aware that pupils who are involved in relationships, both with other DCSF pupils and individuals from outside, on the internet as well as in person, may have the potential to experience abuse and unhealthy influences. Staff and volunteers are also made aware that abuse can take place entirely online, and that technology can be used to facilitate and extend abuse that takes place in person. Any concerns of this nature should be raised without delay with one of the Designated Safeguarding Officers.

3.2.2 The Safeguarding of Cathedral Choristers

Considerations

- DCSF pupils who are also Cathedral Choristers have a unique experience of school life which brings with it particular circumstances, routines, demands, responsibilities and pressures that may have an impact on their wellbeing and welfare.
- Cathedral Choristers are among the youngest pupils of DCSF, and, in order to facilitate their Chorister commitments, many of them routinely or occasionally board at school. Both of these factors – age and boarding status – must also be considered in the provision of their care and from a welfare and safeguarding perspective.
- For rehearsals, performances and Cathedral services, pupils who are Cathedral Choristers must also routinely leave DCSF premises, and the supervision and safeguarding provision in these circumstances must ensure that any risks associated with this regular travel/movement and change of location are minimised.
- In order to safeguard DCSF pupils who are Cathedral Choristers, good communication and regular liaison between DCSF and Durham Cathedral are essential.

Safeguarding Measures

- In addition to the routine pastoral monitoring and support in place for pupils, the Resident Tutors at the Cathedral site will help to oversee the welfare and safety of the Cathedral Choristers
- A member of staff on DCSF's SCR will accompany the Cathedral Choristers to and from rehearsals, performances and Cathedral services, such that they are always under the care of and accompanied by a member of DCSF staff or another member of staff on DCSF's SCR for the duration of any commitments away from the DCSF site.
- The Durham Cathedral Safeguarding Officer will introduce him/herself to DCSF pupils who are Cathedral Choristers and ensure that they understand his/her safeguarding role and responsibilities in the Cathedral.
- The DCSF Designated Safeguarding Lead will be a member of the Durham Cathedral Safeguarding Operational Group and will attend quarterly meetings to ensure that any safeguarding issues pertaining to the Cathedral Choristers can be raised, discussed and addressed.
- The Durham Cathedral Safeguarding Officer and the DCSF Designated Safeguarding Lead will contact one another directly in the event of any safeguarding concerns pertaining to the Cathedral Choristers.

3.2.3 Keeping children safe in out-of-school settings

When services or activities are provided by DCSF under the direct supervision or management of our Foundation staff (e.g., school holiday camps), DCSF arrangements for child protection will apply. Where services or activities are provided separately by another body, DCSF will seek assurance that the provider concerned has appropriate safeguarding and child protection policies and procedures in place (including inspecting these as needed); and ensure that there are arrangements in place for the provider to liaise with the Foundation on these matters where appropriate. This applies regardless of whether or not the children who attend any of these services or activities are children on the Foundation roll. DCSF also ensures safeguarding requirements are included in any transfer of control agreement (i.e. lease or hire agreement), as a condition of use and occupation of the premises; and that failure to comply with this would lead to termination of the agreement.

DCSF will follow our own managing allegations/safeguarding policies (see Section 4), including informing the LADO as appropriate, if we receive an allegation about an individual or the organisation concerning incidents that happen when the Foundation's premises are being used by external providers.

3.3 Reactive Safeguarding Measures

The following procedures are employed to ensure that children who are in need or at risk are identified promptly and that appropriate referrals, interventions and support are implemented without delay.

All staff and volunteers have a duty to take appropriate action in circumstances where a pupil is considered to be in need or at risk. Normally, this action will involve reporting the concern to the Designated Safeguarding Lead or Deputy Safeguarding Officer, but, if circumstances mean that this is not possible, a direct report or safeguarding referral to the appropriate external agency (First Contact, emergency services or Prevent Team) may be made by anyone. If anyone other than the Designated Safeguarding Lead makes a referral, that person should inform the DSL as soon as possible after the fact.

3.3.1 Procedures to be followed in the event of a safeguarding concern

- Staff (including governors, support staff and volunteers) should be prepared to identify pupils who may be in need or at risk, and who may benefit from early help. Early help means providing support as soon as a problem emerges at any point in a child's life. Staff should not assume that someone else will act and sharing information might be critical in keeping pupils safe.
- Staff should be aware that children may not feel ready or know how to tell someone they are being abused.
- A member of staff or volunteer who has a general concern about the welfare of a pupil must observe, record (either in writing or electronically through CPOMS) and discuss this concern with the Designated Safeguarding Lead. In the event that this is impossible or inappropriate (given the nature of the concern), a Deputy Safeguarding Officer should be contacted, who will give advice on the best course of action.
- In circumstances where there are clear indicators of abuse, including child-on-child abuse, the member of staff or volunteer must observe, record and report as above, but must not investigate the concern. Care should be taken to ensure that the victim is not made to feel ashamed or blamed in any way. These principles are made clear and explained in new staff induction training and DCSF annual safeguarding training. The report must be made promptly by the concerned person to the Designated Safeguarding Lead or Deputy Safeguarding Officer.
- If there is a risk of immediate serious harm to a pupil and it is not possible to contact a Designated Safeguarding Officer, a safeguarding referral must be made via First Contact or the police immediately, and any person may

make such a referral. The principle is that any suspicions based on clear indicators must be reported as above, and not shelved at the initiative of a concerned member of staff or volunteer in any circumstances.

- A member of staff or volunteer suspecting or hearing an allegation of abuse must keep a sufficient written or electronic (CPOMS) record of the disclosure or concern. He/she should listen carefully to any disclosure or allegation, but must not ask leading questions or attempt to investigate. Care should be taken to ensure that the victim is not made to feel ashamed or blamed in any way. The member of staff or volunteer may never promise confidentiality in these circumstances, and should explain instead that information may need to be shared with other individuals or agencies in the best interests of the pupil.
- The record of the concern should be made at the time of the allegation or disclosure, and should include the date, time and place of the conversation. In addition, the record should reflect accurately, and quote directly wherever possible, the nature of what was said, identifying unambiguously what was done, by whom and in whose presence. Written records should be signed by the person making it, and should use names, not initials. In CPOMS, the 'Linked Students' option should be used to identify any other pupils involved in the concern. CPOMS 'Incidents' (recorded concerns) automatically record the identity of the person raising the concern as well as the date and time it is recorded.
- Preserving evidence: any evidence (e.g. written or printed material; electronic devices including mobile phones containing messages or images; clothing) must be safeguarded and preserved. In the event of a disclosure relating to illegal material (e.g. illegal images of a child), the person receiving the disclosure must not view, download or forward any such material.
- In the case of an incident, where necessary support is provided to siblings who are DCSF pupils.

3.3.2 Reporting a Safeguarding Concern

- The DSL will consider the appropriate action to take in response to a safeguarding concern by seeking the advice of First Contact and in accordance with the Durham Safeguarding Children Partnership referral threshold document (See Appendix 1).
- Telephone discussions of concerns or specific referrals with First Contact will usually be followed up in writing, using the format of the Early Help Assessment. The information will be sent to First Contact by email (firstcontact-gcsx@durham.gcsx.gov.uk). A copy of the Early Help Assessment is stored on the pupil's CPOMS profile.

- Where there is a risk of serious or significant harm to a pupil, a referral to First Contact will be made without delay, and in any event, within 24 hours.
- Where a safeguarding referral is made, the Designated Safeguarding Lead will notify the Safeguarding Governor.

3.3.3 Reporting Specific Safeguarding Concerns

- In any situation where a pupil's life may be endangered, the emergency services must be contacted without delay on 999.
- Concerns about any pupil suspected of being at risk of **Female Genital Mutilation (FGM)** should be reported to Durham Constabulary (Telephone 101) and First Contact (03000 267 979).
- In the case of **radicalisation or extremism** concerns should be reported in line with Durham Safeguarding Children Partnership procedures to Durham Constabulary's Force Prevent Team (0191 375 2234). Non-emergency advice on extremism and radicalisation may be sought by telephoning the DfE helpline on 020 7340 7264.
- If a pupil **goes missing**, the Missing Pupil Policy should be followed. All staff and volunteers are informed of the procedures to be followed in their annual safeguarding training, and actions to be taken in the event of a missing pupil are posted in key locations in Houses and staff common rooms.

3.3.4 Operation Encompass

- DCSF is part of Operation Encompass. Operation Encompass is a national police and education early intervention safeguarding partnership which supports children and young people who experience Domestic Violence and Abuse and which is in place in every police force in England and Wales.
- Children were recognised as victims of domestic abuse in their own right in the 2021 Domestic Abuse Act.
- Operation Encompass means that the police will share information with DCSF about **all** police attended Domestic Abuse incidents which involve any of our children prior to the start of the next school day.
- DCSF's nominated Key Adult is the Deputy Head Pastoral, Durham School. She has completed the online Operation Encompass Key Adult training and is responsible for cascading the principles of Operation Encompass to all other school staff and Governors. All DCSF staff and Governors can undertake the online training.
- Our parents are fully aware that we are an Operation Encompass Foundation and we ensure that when a new child joins our schools the parents/carers are informed about Operation Encompass.

- The Operation Encompass information is stored in line with all other confidential safeguarding and child protection information.
- As a staff we have discussed how we can support our children who are experiencing Domestic Violence and Abuse on a day-to-day basis and particularly following the Operation Encompass notification. We have used the Operation Encompass Handbooks to inform our thinking.
- We are aware that we must do nothing that puts the child/ren or the non-abusing adult at risk.
- The Deputy Head Pastoral will report on Operation Encompass in the termly report to Governors. All information is anonymised for these reports.
- We have used the Operation Encompass Key Adult Responsibilities checklist to ensure that all appropriate actions have been taken by the schools.
- When the Key Adult, DSL or DDSLs leave the schools and other staff are appointed, they will ensure that all Operation Encompass log in details are shared with the new Key Adults and that the new member of staff will undertake the Operation Encompass online training.

3.3.5 Allegations of non-recent (historic) abuse

- Non-recent abuse (also known as historical abuse) is an allegation of neglect, physical, sexual or emotional abuse made by or on behalf of someone who is now 18 years or over, relating to an incident which took place when the alleged victim was under 18 years old. Any member of staff or volunteer who receives or becomes aware of an allegation of historic abuse should inform the Principal immediately. In the event of an allegation of this nature against the Principal, the Chair of Governors should be informed.
- Information relating to allegations of non-recent abuse must be treated as confidential, and only shared in accordance with this Policy.

3.4 Confidentiality

- The Data Protection Act 2018 and GDPR do not prevent or limit the sharing of information for the purposes of keeping children safe. Concerns about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children. The Data Protection Act 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information.
- Staff and volunteers have a professional responsibility to share relevant information about the protection of children with other professionals, particularly investigative agencies such as the police and social care.

- If a pupil confides in a member of staff and requests that the information be kept secret, it is important that the member of staff tells the pupil, sensitively, that where they think that they may be at risk of harm that they have a responsibility to refer situations to the appropriate agencies. Confidentiality may not be promised to a pupil. It is important to reassure the pupil, however, that only those people who need to know will be told.
- There is a delicate balance to be kept between alerting members of staff to the concern about the pupil and the need to protect the pupil's privacy and dignity. Information should be divulged on a 'need-to-know' basis only; care will be taken to ensure that information is only given to the appropriate person.
- The pupil's wishes will be considered when determining the action to be taken, and the pupil will also be given the opportunity to express their views and give feedback through the process.
- All people working within a school will be aware of the confidential nature of personal information about a pupil and the means of maintaining that confidentiality. Personal information about a pupil's family will be regarded as confidential.
- If a member of staff or volunteer suspects abuse, information relating to that concern will be given only to strictly relevant people such as the Designated Safeguarding Lead or Deputy Safeguarding Officer. Other members of staff need to know only enough to prepare them to act effectively and with sensitivity to a distressed pupil.
- The pupil, depending on their age, will be kept informed of who knows, and what they know, at all stages of the procedure.

3.4.1 Staff and volunteer wellbeing

It is important to recognise that being involved in a safeguarding concern can be a distressing and harrowing experience for a member of staff or volunteer. Anyone involved in such a concern or incident will be offered support and an opportunity to discuss their concerns, thoughts and feelings with the Designated Safeguarding Lead. If the member of staff or volunteer wishes to speak to another colleague about their experience, they may do so, provided that the confidential details of the incident (pupils and families involved; detail of the incident itself) are not disclosed.

3.5 Communication with parents/guardians in the event of a safeguarding concern

In the event of a safeguarding concern about a pupil, contact between DCSF and the pupil's parents or guardians will be made through the Designated Safeguarding Lead. While DCSF will seek the consent of parents or guardians to make a referral

for Early Help, it is not required to obtain parental permission before making a safeguarding referral, when a pupil is deemed to be at risk of harm. The best interests of the pupil will be considered carefully in any such decision, and, where appropriate, the advice of other agencies (usually the Durham Safeguarding Children Partnership) will be sought before such contact is made.

4 Allegations against staff (including supply staff), contractors and volunteers

- The DCSF Staff and Volunteer Code of Conduct gives clear direction on how all adults working with pupils can ensure that their behaviour and actions do not place pupils or themselves at risk.
- Allegations of abuse by staff (including supply staff), contractors or volunteers must be recorded and investigated in accordance with Durham Safeguarding Children Partnership procedures to ensure that all unnecessary delays are eradicated and allegations are dealt with expeditiously and in a fair manner.
- As an employer, the Principal has responsibilities towards ensuring support for the member of staff involved, but the paramount consideration is for the welfare of the pupil.

4.1 Allegations that may meet the harms threshold

- The Principal (or the Chair of the Governors in his absence) will proceed in line with Durham Safeguarding Children Partnership procedures on receiving an allegation or concern that a member of staff has:
 - a. behaved in a way that has harmed a child, or may have harmed a child;
 - b. possibly committed a criminal offence against or related to a child;
 - c. behaved towards a child or children in a way that indicates he/she could pose a risk of harm if they work regularly or closely with children;
 - d. behaved or may have behaved in a way that indicates they may not be suitable to work with children.
- The Principal will report any such concern to the Local Authority Designated Officer (LADO) by telephoning 03000 268835.
- The Principal will inform the Chair of Governors of the allegation, as well as any actions required by the LADO.
- In the case of an allegation against the Principal, the matter should be overseen by the Designated Safeguarding Lead who will notify the Chair of Governors without informing the Principal.

- In the case of an allegation against a residential member of staff, the Designated Safeguarding Lead will make an assessment about the safety of pupils in the boarding environment and will act to protect them from risk. If required, the member of staff may be moved off campus pending the outcome of the investigation.
- In dealing with any allegation the Principal, when considering the issue of suspension, must give regard to:
 - the seriousness and nature of the allegation;
 - the risk of harm to pupils;
 - possible contamination of evidence;
 - the welfare of the person concerned.
- Suspension of the member of staff will be considered where the nature of the allegation, if found to be true, could result in doubt as to the suitability of the employee to continue to work with children, and/or where it would assist in the completion of an investigation.
- During the investigation support will be offered to both the pupil making the allegation and the member of staff concerned.
- A representative of DCSF should attend any Strategy Meetings held to allow for information to be shared. This may assist with any follow-up internal investigation that may be required to consider if any disciplinary actions need to be carried out. The Chair of Governors should attend in the case of an allegation being made against the Principal. Any allegations made against the Principal must be reported directly to the LADO, without informing the Principal.
- Detailed records will be kept by all parties involved.
- Where recommendations are made following completion of an investigation, DCSF is required to inform Children and Young People's Services and the LADO of the actions taken. The LADO must also be informed of the outcome of any internal investigation or actions taken.

4.2 Concerns that do not meet the harm threshold

- Allegations or concerns that do not meet the harms threshold are referred to as 'low level concerns'. A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a 'nagging doubt' – that an adult working in or on behalf of DCSF may have acted in a way that:
 - is inconsistent with the Staff and Volunteer Code of Conduct, including inappropriate conduct outside of work; and
 - does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the LADO.

- Examples of such behaviour could include, but are not limited to:
 - being over friendly with children;
 - having favourites;
 - taking photographs of children on their mobile phone when there is no clear educational or marketing reason to do so, or keeping images/videos on a personal device longer than is necessary;
 - engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or,
 - using inappropriate sexualised, intimidating or offensive language.

- It is vital that staff (including supply teachers, volunteers and contractors) share any low level concerns they have in order that DCSF has a culture of openness, trust and transparency in which its MARK values and the expected behaviour as set out in the Staff and Volunteer Code of Conduct are constantly lived, monitored and reinforced by all staff.
- This includes the self-referral of staff for example, if they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards.
- Low level concerns should be reported to the Designated Safeguarding Lead.
- In the case of a low level concern about the Principal, the matter should be overseen by the Designated Safeguarding Lead.
- All low level concerns should be recorded on CPOMS StaffSafe. The record should include details of the concern, the context in which the concern arose, and the action taken. The name of the individual sharing their concerns should also be noted, although if the individual wishes to remain anonymous then that should be respected as far as reasonably possible.

5. Review

The Safeguarding Policy is reviewed by the Designated Safeguarding Lead and the Governing Body at least annually, and more frequently if required, i.e., when there are changes to government safeguarding guidance. There are procedures in place for monitoring and evaluating its effectiveness in maintaining a safe environment for children and protecting them from harm.

6. Conclusion

Staff and volunteers are expected to recognise that this Policy is designed above all to protect the safety, wellbeing and best interests of the child, to support staff and volunteers in the proper exercise of their safeguarding responsibilities, and to ensure that required action is taken as quickly as possible. As such, the Policy must be followed without exception by all staff and volunteers who may become involved with a safeguarding issue.

7. Contact Details

Contact Details of Designated Safeguarding Officers

Safeguarding Role	Name	Telephone Number
Designated Safeguarding Lead for the Durham Cathedral Schools Foundation	Harriet Thompson	313119
Deputy Safeguarding Officers, Durham School	Patricia Abbott	313120
	Mark Younger	313312
	Deborah Bennett	313109
Deputy Safeguarding Officers, The Choristers School – Cathedral Site	Andrew Chandler	313603
	Rachel Faulkner- Walford	313500 / 313600
	Joss Balfour	
Safeguarding Lead for the EYFS	April Davies	313516

Contact Details of Agencies

Durham Safeguarding Children Partnership **03000 265 770**

LADO **03000 268 835**

First Contact **03000 267 979**

[to report concerns about children in need and children at risk]

Children Missing Education (Durham)

03000 265 908

Durham Constabulary

101 [non-emergency number]

999 [emergency number]

0191 375 2234 [Force Prevent Team]

Policy reviewed by Patricia Abbott, Designated Safeguarding Lead, DCSF

September 2021

November 2021

Policy reviewed by Harriet Thompson, Deputy Head Pastoral and DSL

September 2022

September 2023

Durham Thresholds Guidance

DURHAM THRESHOLD GUIDANCE



Meeting the Needs of Children and Families
in County Durham

Keeping Children Safe

Durham

Safeguarding Children Partnership



Introduction

Working Together to Safeguard Children 2018 sets out a clear expectation that local agencies will work together and collaborate to identify children who require help or protection and provide support as soon as problems emerge. This threshold document sets out the local criteria for action and includes links to additional information which may assist with professional judgement in understanding, and subsequently meeting a child and family's needs.

Safeguarding is everyone's responsibility. Everyone who meets families has a role to play in identifying concerns, sharing information and taking prompt action.

Across Durham we expect everyone to take a child-centred approach. Anyone working with children should see and speak to the child, listen to what they say and take their views seriously. The best way to address a concern is through a conversation with the family (if this does not increase the risk for the child or anyone else) and with all the other practitioners involved.

If you are uncertain about the level at which the concern needs addressing and need advice, you can use this threshold document to support your conversation with Durham's First Contact Team. Concerns regarding confidentiality should not be a barrier where safeguarding risks are identified. When sharing information, practitioners should take account of their agency's information sharing agreement and policies.

Consent

When requesting early help for a family, you must always discuss this with the family beforehand. Consent to request support from services should always be sought from those with parental responsibility. When making a safeguarding children referral, it is good practice to inform those with parental responsibility of your concerns and intention to make a referral, unless to do so would place the child at further risk of harm.

Resolving Disagreements

Should practitioners not agree with First Contact about the outcome of their concern, we request that they refer to the [resolution of disputes process](#).

Definitions of Thresholds

Universal

Most children will achieve their full potential through the provision of universal services alone. These services can be accessed in the local community and delivered by partners including schools, GPs, hospitals, community health services, Health Visitors, Midwives and voluntary and community groups.

Early Help

This offer of support is for children and families who require additional support which cannot be provided by universal services alone or who require coordinated intensive support.

Durham's Early Help support offer for families brings together local partners to provide early support for children and families coordinated via a Team Around the Family and can include targeted services e.g. substance misuse, domestic abuse services, and, Child and Adolescent Mental Health Service (CAMHS).

Safeguarding

Child in Need (CIN)

A child in need under the legislation is one: who is unlikely to achieve or maintain a reasonable level of health or development; or whose health or development is likely to be significantly impaired without the provision of services; or a child who is disabled.

A referral should be made where there are complex needs which require a multi-agency coordinated response. Consent must be gained from parents/carers and recorded on the children's services referral form before it is submitted to First Contact.

Child Protection

Where a local authority has reasonable cause to suspect that a child (who lives or is found in their area) is suffering or is likely to suffer significant harm, it has a duty to make such enquiries as it considers necessary to decide whether to take any action to safeguard or promote the child's welfare. Such enquiries, supported by other organisations and agencies, as appropriate, should be initiated where there are concerns about all forms of abuse, exploitation, physical, sexual, emotional, neglect.

Whilst Child Protection referrals do not need the consent of the family it is good practice to discuss your concerns with the family and your intention to contact children's services if doing so does not put anyone at risk.

Other circumstances which need a referral to Children's Social Care

Private Fostering

A private fostering arrangement is one in which a child under the age of 16 (or under 18 if disabled) is cared for by someone other than their parent or 'close relative' for 28 days or more. Close relatives are defined as stepparents, grandparents, brothers, sisters, uncles or aunts (whether of full blood, half blood or marriage/affinity).

Children with a Disability

The principal legislation for support services to Disabled Children, Young People and their families is the Children Act 1989. Disabled Children are considered to be Children in Need under this legislation.

16 and 17-year-old young people at risk of/may be homeless

The Local Authority has duties to prevent homelessness for young people and to provide accommodation for 16 and 17-year-old young people who may be homeless and/or require accommodation.

Section 7 Report for Court

A court may ask the Local Authority for a welfare report when they are considering any private law application under the Children Act 1989 in circumstances where the Local Authority have had previous involvement with a child or family as per the protocol between Local Authorities and CAFCASS. Where the child and family are not known to the Local Authority this work will be undertaken by CAFCASS.

Section 37 Report for Court

When, during any private law proceedings under the Children Act 1989, a question arises about the welfare of the child, and it seems to the court that it might be appropriate for a Care Order or Supervision Order to be made, then it will direct a Local Authority to undertake an investigation of the child's circumstances and report its findings to the court.

Screening Tools

To help make your decision about the nature and seriousness of your concern there are several screening tools available in the Resource Library. Durham has adopted the Signs of Safety practice model and your agency safeguarding lead will have further information regarding use of this approach.

Guidance and Procedures

Durham Safeguarding Children Partnership Online Procedures Manual can help in decision making about what to do next. You will find a range of multi-agency guidance, procedures and strategies on the DSCP website.

Contacting Children's Services

Early Help

As a professional you can request support for a child and family by:

Before making a request for (additional) early help complete an Early Help Assessment and Child and Family Plan

If you have followed the Early Help Pathway and still feel you need to request (additional) early help on behalf of a child and family, follow the below steps:

1. Obtain agreement with the family for their information to be discussed and shared with relevant agencies in order that appropriate support can be offered and provided (see [Privacy Notice and Family Friendly Privacy Notice Video](#))
2. Complete the online Early Help Assessment and Child and Family Plan selecting the purpose of 'requesting (additional) early help'. You can do this by firstly creating an account on Liquid Logic (you only need to do this the once) and follow the link to complete and submit.

OR

3. Telephone our Early Help Triage Team on 03000 267 979, Option 1, Option 2, Option 4, (Mon – Thurs 08.30 – 17.00, Fri 08.30 – 16.30)
4. If you have completed and submitted an Early Help Assessment and Child and Family Plan/Review within the last 12 weeks, email the Early Help Triage

Team at earlyhelp@durham.gov.uk and in subject header add 'Request for (additional Early Help). Include the name, DOB and address of child/family in the email and your telephone number. An Early Help Triage Worker will contact you within one working day.

Safeguarding

Where there is an immediate risk to a child ring First Contact on

03000 267979 (listen to the options and select 'Safeguarding') or ring 999 and speak to the Police if risk of harm is imminent.

If you have a safeguarding concern and are worried about a child, use the threshold guidance on this page and complete the [Children's Service Referral Form](#) and [email to firstcontact@durham.gov.uk](mailto:email%20to%20firstcontact@durham.gov.uk)

Durham Continuum of Need Model

<p><u>Universal Provision</u></p>	<p>Need: Children and young people who have no additional support</p>	<p>Services Involved: Community services accessible by all families</p>	<p>Issues: Child meeting all expected outcomes</p>	<p>Outcomes: Progressing in line with expected outcomes</p>
<p><u>Early Help Provision</u></p>	<p>Need: Children, families and young people who need additional targeted support</p>	<p>Services Involved: Early Help partnership where a Team Around the Family is required</p>	<p>Issues: Universal services not able to meet the needs of the child or family</p>	<p>Outcomes: Improve health and wellbeing outcomes preventing escalation to statutory services</p>
<p><u>Safeguarding Provision</u></p>	<p>Need: Children and young people with complex needs, suffering or likely to suffer significant harm.</p>	<p>Services Involved: Multi-agency safeguarding services</p>	<p>Issues: Statutory assessment multi-agency response from specialist services</p>	<p>Outcomes: Improve outcomes so children are safe and healthy</p>

Thresholds: Developmental Needs

Abuse and Neglect Thresholds

Abuse and Neglect Thresholds	
<u>Universal</u>	<ul style="list-style-type: none"> Concerns emerging about child's hygiene/clothing and diet, few opportunities for play and socialisation, poor school attendance.
<u>Early Help</u>	<ul style="list-style-type: none"> Consistent concerns raised about child's hygiene/clothing and diet, few opportunities for play and socialisation, consistently poor school attendance. Child not reaching development milestones, health needs not always being met. Parents struggling to provide adequate care, minor mental health difficulties, and non- problematic drug and alcohol misuse. At risk of any child exploitation.
<u>Safeguarding</u>	<ul style="list-style-type: none"> Disclosures of physical and sexual harm. Over- chastisement outside of legal limits. Child presents with unexplained injuries or inconsistent explanation. Child not reaching development milestones despite sustained intervention, health needs not met. Parental behaviour of problematic and chronic drug and alcohol misuse that exposes child or unborn potential harm. Impact and exposure to domestic abuse. Child is exposed to unrelenting exposure to dangerous situations in the home/ community. Severe complex parental mental health or learning disability that impairs parenting roles places child or unborn at risk of harm. Disclosures and/or consistent chronology of chronic neglect about a child's lack of adequate clothing/housing/diet/access to education/access to health, needs not being met, and parents not able to provide good enough care that is impacting on the child or unborn. Child has been abandoned. Child/young person subject to or at significant risk of sexual or criminal exploitation, trafficked. Female Genital Mutilation as either a perpetrator or victim.

Learning, Education and Employment Thresholds

Learning, Education and Employment	
<u>Universal</u>	<ul style="list-style-type: none"> • Child is not making expected progress. • Additional support needed to meet all development milestones; at risk of becoming NEET (not in employment, education or training).
<u>Early Help</u>	<ul style="list-style-type: none"> • Consistently underachieving despite sustained interventions, where this may not otherwise be attributed to an identified SEN or developmental need.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Significant delay/impairment to developmental milestones.

Health Thresholds

Health	
<u>Universal</u>	<ul style="list-style-type: none"> • Early indication of child's unmet physical or mental health condition or disability. • Child not brought to some health appointments or immunisations. • No physical activity/ unhealthy diet impacting on child's health. • Early signs that child's drug or alcohol use is having a negative impact on social wellbeing.
<u>Early Help</u>	<ul style="list-style-type: none"> • Child has physical or mental health condition or disability which impacts affects daily functioning. • Child not brought to a number of health appointments or immunisations. • No physical activity/unhealthy diet seriously impacting on child's health despite sustained interventions. • Substance misuse impacting on child's wellbeing.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Complex physical or mental health condition or disability has significant adverse impact on the child. • Child not brought to health appointments or immunisations. • No physical activity/unhealthy diet seriously impacting on health and placing at risk of significant harm despite sustained interventions. • Childs substance misuse placing child at significant risk of harm.

Emotional Wellbeing

Emotional Wellbeing	
<u>Universal</u>	<ul style="list-style-type: none"> • Poor self-esteem child requires additional emotional support. Child not brought to some health appointments or immunisations.
<u>Early Help</u>	<ul style="list-style-type: none"> • Poor self-esteem/sense of identity impacts on daily outcomes.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Negative sense of self leading to significant harm. • Concern of suicide or self-harm, failing to meet development milestones. • Child is exploited and harmed by others as a result; development significantly impaired; self-harming or suicidal; at high risk of Child Exploitation.

Social Development

Social Development	
<u>Universal</u>	<ul style="list-style-type: none"> • Child has limited social interaction; language and communication difficulties. • Victim or perpetrator of bullying – some support required.
<u>Early Help</u>	<ul style="list-style-type: none"> • Child is socially isolated; significant communication difficulties, negative interactions and lack of respect. • Victim or perpetrator or persistent or severe bullying despite universal interventions.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Child is completely isolated; little or no communication skills or positive interaction with others, negative interactions and lack of respect. • Victim or perpetrator of persistent or severe bullying which places wellbeing at risk.

Behaviour

Behaviour	
<u>Universal</u>	<ul style="list-style-type: none"> • Child displaying lack of age-appropriate self-control; risk of negative use of internet and social behaviour.
<u>Early Help</u>	<ul style="list-style-type: none"> • Child displaying regular lack of age-appropriate self-control. • Regularly displaying disruptive behaviour. • Engaged in or victim of harmful use of internet with social media. • Caring responsibilities with negative impact. • Negative and intolerant interaction with others.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Child displaying little or no age-appropriate self-control. • Child's behaviour which poses a significant risk to others including other children. • Involvement in negative, antisocial or criminal behaviour and at greater risk of being groomed or exploited by others.

Environmental Factors

Environmental Factors	
<u>Universal</u>	<ul style="list-style-type: none"> • Early indication of unmet housing needs such as affordability, suitability and property condition.
<u>Early Help</u>	<ul style="list-style-type: none"> • Unmet housing needs due to affordability, suitability, property condition and domestic abuse.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Unsafe housing due to suitability, property condition and domestic abuse, and/or are currently homeless. 16 and 17-year-old young people who are at risk of homelessness. • No recourse to public funds.

Extremism

Extremism	
<u>Universal</u>	<ul style="list-style-type: none"> • Short lived sympathy for violent/ extreme ideology. • Child expresses sympathy/ verbal support for inappropriate ideologies but is open to other views and can discuss the pros and cons of different viewpoints.
<u>Early Help</u>	<ul style="list-style-type: none"> • Expresses support for extremism and violence. • Child is being sent violent extremist imagery by family member/friends or being helped to access it. • Negative behaviour associated with extremism.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Involved in extremism and violence; significant concern child young person is being groomed for involvement in extremist activity. • Strong links with extremist individuals/ groups • Child is circulating violent extremist images and is promoting the actions of violent extremist and/or saying that they will carry out violence in support of extremist views. • Persistently missing from home - concerns around extremism.

Criminal or Antisocial Behaviour

Criminal or Antisocial Behaviour	
<u>Universal</u>	<ul style="list-style-type: none"> • Evidence of antisocial behaviour or low-level criminal behaviour
<u>Early Help</u>	<ul style="list-style-type: none"> • Has associations /affiliation with negative peer groups in offending behaviour. • Involved in persistent low-level criminal activity.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Involved in persistent, serious criminal activity of a sexual or violent nature or the offence of possession with intent to supply drugs. • Known involvement in gang/ organised crime activity impacting significantly on day to day life.

Missing from Home

Missing From Home	
<u>Universal</u>	<ul style="list-style-type: none">• Child has been missing from home with no factors relating to exploitation or family conflict.
<u>Early Help</u>	<ul style="list-style-type: none">• Child has been missing from home and there are some concerns that they are running away in order to spend time with others who have risk factors/ behaviours that are influencing them.• Possible risk factors: ASB: Crime/ County lines.• Substance or alcohol misuse: sexual activity; child sexual exploitation.• Terrorism/extremism views.
<u>Safeguarding</u>	<ul style="list-style-type: none">• Child/young person persistently (3 times in 3 months) missing and are at risk of being exploited. At risk of involvement in Crime/country lines; Child sexual exploitation.• Terrorism/extremism views.• Children under 11 years who has had a missing episode irrespective of timescales.• Children persistently missing from education who are not home schooled.

Thresholds: Parental and Family Factors

Protection from harm, physical and sexual abuse

Protection from harm, physical and sexual abuse	
<u>Universal</u>	<ul style="list-style-type: none"> • Parents can take appropriate action to safeguard their child when they have been harmed by people outside of the family i.e. a peer, or within the community and engaged with the right support services. • Indicators of accidental harm, over presenting for health care; use of physical chastisement within legal limits that is impacting on child/young person's emotional well-being. • Parents can protect and act appropriately from extended family pressures, cultural and traditional practices that may be prevalent.
<u>Early Help</u>	<ul style="list-style-type: none"> • Parents need help and support to take appropriate action to safeguard their child when they have been harmed by people outside of the family. i.e. a peer, or within the community. • Some exposure to criminal activity which impacts on the child. • Parental conflict. • Exposure to online grooming or emerging unhealthy sexualised behaviours between peers. • Ongoing and numerous incidents indicators of accidental harm, over presenting for health care.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Parents cannot safeguard their child from harm. • Unable to protect or seek appropriate support when a child/young person has been harmed by people outside of the family i.e. a peer, or within the community. • Repeated incidents of domestic abuse in the home. • Unable to keep child/young person safe due to exposure to significant criminal activity of violent crime. • Family heard at MARAC due to serious level of domestic abuse. • Persistent low level of domestic incident with no engagement or behaviour change. • Parents are unable to protect child from grooming or exposure to sexualised harm. • Parents are prompting illegal cultural practices of forced marriage, female genital mutilation.

Neglect

Neglect	
<u>Universal</u>	<ul style="list-style-type: none"> Concerns that child/young person's physical and material needs may not always be being met, increasing their vulnerability within the home, community.
<u>Early Help</u>	<ul style="list-style-type: none"> Evidence that the child/young person's physical and material needs are not always being met and this is starting to impact on the child's wellbeing.
<u>Safeguarding</u>	<ul style="list-style-type: none"> The child/young person's physical and material needs are not adequately met and impacts on the child's wellbeing and safety, increasing their vulnerability within the home community on a persistent basis. Child/young person has been rejected or abandoned.

Domestic Abuse

Domestic Abuse	
<u>Universal</u>	<ul style="list-style-type: none"> Parents/carers subject to a verbal or coercive relationship, low level parental conflict.
<u>Early Help</u>	<ul style="list-style-type: none"> Parent/carer has previously experienced and evidence of current domestic abuse including coercive control. Domestic abuse within the family with limited sign of a change or recognition of adverse emotional impact. Child and adolescent on parent violence and abuse (CAPVA), when a child shows signs of emotional, physical, financial abuse and or coercive and controlling behaviours towards a parent / carer. Parents show signs of unresolved parental conflict which is impacting on child's emotional wellbeing
<u>Safeguarding</u>	<ul style="list-style-type: none"> There is instability and violence in the home continually, persistent domestic abuse and parental conflict including coercive control and stalking behaviours.

	<ul style="list-style-type: none"> • Child and adolescent on parent violence and abuse (CAPVA), when a child is emotionally, physically, financially abusive and or coercive and controlling towards a parent / carer, causing injury, trauma and significant risk of harm to themselves, parents /carers and siblings • Parent a subject of MARAC.
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Perinatal Period

Perinatal Period	
<u>Universal</u>	<ul style="list-style-type: none"> • Ambivalent to/irregular take up of ante/post-natal care; struggles to parent effectively but open to support.
<u>Early Help</u>	<ul style="list-style-type: none"> • Limited attendance or engagement ante/post-natal care. • Additional support due to postnatal mental health or parenting.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Does not access ante/post-natal care or is suffering from post-natal depression which impacts on the child. • Sustained difficulties in parenting effectively and will not accept support.

Extremism

Extremism	
<u>Universal</u>	<ul style="list-style-type: none"> • Some support of extreme views or ideology, but no evidence of active involvement with extremism organisation.
<u>Early Help</u>	<ul style="list-style-type: none"> • Family members, parents or carers expose child/young person to involvement in activity that supports or endorses extremism.

<u>Safeguarding</u>	<ul style="list-style-type: none"> Family members, parents or carers involve child/young person in activity that supports or endorses extremism.
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Drug and Alcohol Use

Drug and Alcohol Use	
<u>Universal</u>	<ul style="list-style-type: none"> Emerging concerns of parents/ carers drug or alcohol use which could impact on the child
<u>Early Help</u>	<ul style="list-style-type: none"> Previous history or ongoing evidence of problematic drug and alcohol use by a family member. Acknowledgement of the impact on the child or the worries the child may be experiencing about parental usage.
<u>Safeguarding</u>	<ul style="list-style-type: none"> High risk level (chaotic drug usage, IV drug usage and alcohol dependency/ regular binge drinking) whereby capacity is impacted. Child/unborn exposed to substance misuse, drug seeking behaviours, impact on family finances and possible exposure to criminal activity.

Physical Ill Health or Disability

Physical Ill Health or Disability	
<u>Universal</u>	<ul style="list-style-type: none"> Parental learning disability/ difficulty requires some additional support. Child has some caring responsibility which does not impact on the child.
<u>Early Help</u>	<ul style="list-style-type: none"> Concerns due to parental learning disability/difficulty rendering the child more vulnerable. The child is vulnerable due to age, illness, disability or behaviour/ emotional issues. Child has some caring responsibilities and requires additional support.
<u>Safeguarding</u>	<ul style="list-style-type: none"> There is no other adult that can be depended upon to meet the needs of the child. (Children or lone parents or isolated parents are at greater risk as they are less likely to have an alternative caregiver) The child has caregiving responsibilities which significantly impact on their health and wellbeing and childhood experiences.

Adult Mental Ill Health

Adult Mental Ill Health	
<u>Universal</u>	<ul style="list-style-type: none"> • Changes in the child's behaviour since the onset of the parent/ carer's mental health.
<u>Early Help</u>	<ul style="list-style-type: none"> • The presenting mental ill health (including the effect of medication/treatment) is impacting on parent/carer's capability to consistently meet the needs of the child.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Delusional beliefs/ideas involving the child. • Risk that a child will be harmed as part of a suicide plan. • The child is a target parental aggression or rejection. • Co-existing parent/carer mental ill health, domestic abuse or alcohol/ substance abuse. • The child is the parent's carer and this impacts on their health and well- being Parent or carer requires hospital admission and there is no appropriate adult to care for the child.

Criminal or Anti-Social Behaviour

Criminal or Anti-Social Behaviour	
<u>Universal</u>	<ul style="list-style-type: none"> • Low level criminal activity in family. Concerns impact on the child.
<u>Early Help</u>	<ul style="list-style-type: none"> • Criminal record for violent or serious crimes in family with potential effect on child/young person. • Family willing to engage to behaviour change programs. Risk of eviction due to anti-social behaviour.
<u>Safeguarding</u>	<ul style="list-style-type: none"> • Open to MAPPA level 2 or 3. • Parents/carers are currently/ historically involved in criminal activities of a serious violent or sexual nature. • Parents involve their children in criminal activity and/or associates. • Parents/carers are members of organised crime groups which impact on the child and family. • Parental criminality resulting in an evidenced risk of reprisal activity and harm to the child.

Durham Continuum of Need Model (Print Version)

	Governance	Need	Services Involved	Issues	Outcomes	
Continuous Assessment	<u>Safeguarding</u>	Children and young people with complex needs, suffering or likely to suffer significant harm.	Multi-agency safeguarding services	Statutory assessment multi-agency response from specialist services	Improve outcomes so children are safe and healthy	Statutory
	<u>Early Help</u>	Children, families and young people who need additional targeted support	Early Help partnership where a Team Around the Family is required	Universal services not able to meet the needs of the child or family	Improve health and wellbeing outcomes preventing escalation to statutory services	Early Help & Intervention
	<u>Universal</u>	Children and young people who have no additional support	Community services accessible by all families	Child meeting all expected outcomes	Progressing in line with expected outcomes	