



All Saints Avenue Margate CT9 5QN

www.cherrytreeconnect.co.uk

CHERRY TREE CONNECT SAFEGUARDING AND CHILD PROTECTION POLICY

DATE AGREED SEPTEMBER 2026

DATE FOR REVIEW: SEPTEMBER 2027

Roles and responsibilities

Safeguarding and child protection is **everyone's** responsibility. This policy applies to all staff and volunteers in Cherry Tree

All staff and volunteers

All staff will be aware of:

- Our systems which support safeguarding, the role and identity of the designated safeguarding lead (DSL)
- The early help process
- The process for making referrals to local authority children's social care
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), indicators of being at risk from or involved with serious violent crime, FGM and radicalisation (CCE)

The designated safeguarding lead (DSL)

Cherry Tree DSL is Emma Brown 07745354498 and DDSL is Soo Finn 07710548733. The DSL takes lead responsibility for child protection and wider safeguarding.

When the DSL is absent, the DDSL will act as cover.

The DSL will be given the time, funding, training, resources and support to:

- Refer suspected cases, as appropriate, to the relevant body (local authority children's social care, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly

The DSL will also keep the DDSL informed of any issues and liaise with local authority case managers and designated officers for child protection concerns as appropriate.

Confidentiality

Although we all have a duty to follow the Data Protection Act 2018 and the GDPR, these must NOT prevent or limit the sharing of information for the purposes of keeping children safe.

- Timely information sharing is essential to effective safeguarding
- Fears 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
- If staff need to share 'special category personal data', the DPA 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information without consent if it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk
- Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the child's best interests
- The government's information sharing advice for safeguarding practitioners includes 7 'golden rules' for sharing information, and will support staff who have to make decisions about sharing information
- If staff are in any doubt about sharing information, they should speak to the designated safeguarding lead (or deputy)

Recognising abuse and taking action

Staff and volunteers must follow the procedures set out below in the event of a safeguarding issue.

Please note – in this and subsequent sections, you should take any references to the DSL to mean “the DSL (or deputy DSL)”.

If a child is suffering or likely to suffer harm, or in immediate danger

Make a referral to children's social care and/or the police **immediately** if you believe a child is suffering or likely to suffer from harm, or in immediate danger. **Anyone can make a referral.**

Tell the DSL as soon as possible if you make a referral directly.

<https://www.gov.uk/report-child-abuse-to-local-council>

If a child makes a disclosure to you

If a child discloses a safeguarding issue to you, you should:

- Listen to and believe them. Allow them time to talk freely and do not ask leading questions
- Stay calm and do not show that you are shocked or upset
- Tell the child they have done the right thing in telling you. Do not tell them they should have told you sooner
- Explain what will happen next and that you will have to pass this information on. Do not promise to keep it a secret
- Write up your conversation as soon as possible in the child's own words. Stick to the facts, and do not put your own judgement on it
- Sign and date the write-up and pass it on to the DSL. Alternatively, if appropriate, make a referral to children's social care and/or the police directly and tell the DSL as soon as possible that you have done so

Types of abuse

Abuse, including neglect, and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap.

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

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Emotional abuse may involve:

- Conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person
- Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate
- 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 exploration and learning, or preventing the child participating in normal social interaction
- Seeing or hearing the ill-treatment of another

- Serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

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
- 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 also with the use of AI (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 (also known as child-on-child abuse)

Sexual violence:

- Rape, when someone intentionally penetrates the vagina, anus or mouth of another person with their penis, without the other person's consent.
- Assault by penetration, when a person penetrates another person's vagina or anus with any part of the body other than a penis, or by using an object, without the person's consent.
- Sexual Assault, Sexual assault happens when someone touches another person in a sexual manner without their consent. Or when someone makes another person take part in a sexual activity with them without that person's consent. It includes unwanted kissing and sexual touching.
- Causing someone to engage in sexual activity without consent, (A) commits an offence if s/he intentionally causes another person (B) to engage in an activity, the activity is sexual, B does not consent to engage in the activity, and A does not reasonably believe that B consents

Sexual harassment: 'unwanted conduct of a sexual nature' that can occur online and offline and both inside and outside of school/college. When we reference sexual harassment, we do so in the context of child-on-child sexual harassment. Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names
- sexual "jokes" or taunting
- physical behaviour, such as deliberately brushing against someone, interfering with someone's clothes.

Harmful sexualised behaviour, Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour displayed by children and young people which is harmful or abusive¹.

Child-on-child sexual abuse is a form of HSB where sexual abuse takes place between children of a similar age or stage of development.

Problematic sexual behaviour (PSB) is developmentally inappropriate or socially unexpected, sexualised behaviour which doesn't have an overt element of victimisation or abuse.

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 caregivers)
- Ensure access to appropriate medical care or treatment

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

➤

If you discover that FGM has taken place or a young person is at risk of FGM

The Department for Education's Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".

FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.

FGM

The DSL will make sure that staff have access to appropriate training to equip them to be alert to children affected by FGM or at risk of FGM.

Indicators that FGM has already occurred include:

- A young person confiding in a professional that FGM has taken place
- A mother/family member disclosing that FGM has been carried out
- A family/young person already being known to social services in relation to other safeguarding issues
- A girl:
 - Having difficulty walking, sitting or standing, or looking uncomfortable
 - Finding it hard to sit still for long periods of time (where this was not a problem previously)
 - Spending longer than normal in the bathroom or toilet due to difficulties urinating
 - Having frequent urinary, menstrual or stomach problems
 - Avoiding physical exercise or missing PE
 - Being repeatedly absent from school, or absent for a prolonged period
 - Demonstrating increased emotional and psychological needs – for example, withdrawal or depression, or significant change in behaviour
 - Being reluctant to undergo any medical examinations
 - Asking for help, but not being explicit about the problem
 - Talking about pain or discomfort between her legs

Potential signs that a young person may be at risk of FGM include:

- The girl's family having a history of practicing FGM (this is the biggest risk factor to consider)
- FGM being known to be practiced in the girl's community or country of origin
- A parent or family member expressing concern that FGM may be carried out

➤ A family not engaging with professionals (health, education or other) or already being known to social care in relation to other safeguarding issues

➤ A girl:

- Having a mother, older sibling or cousin who has undergone FGM
- Having limited level of integration within UK society
- Confiding to a professional that she is to have a “special procedure” or to attend a special occasion to “become a woman”
- Talking about a long holiday to her country of origin or another country where the practice is prevalent, or parents stating that they or a relative will take the girl out of the country for a prolonged period
- Requesting help from a staff member or volunteer because she is aware or suspects that she is at immediate risk of FGM
- Talking about FGM in conversation – for example, a girl may tell other children about it (although it is important to take into account the context of the discussion)

The above indicators and risk factors are not intended to be exhaustive.

Any member of staff or volunteer who suspects a child is *at risk* of FGM or suspects that FGM has been carried out must speak to the DSL and follow our local safeguarding procedures.

If you have concerns about a child’s welfare and or mental health (as opposed to believing a child is suffering or likely to suffer from harm, or is in immediate danger)

Figure 1 on page 7 illustrates the procedure to follow if you have any concerns about a child’s welfare, which includes concerns about their mental health.

All staff and volunteers should be aware that mental health problems can in some cases be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

If in exceptional circumstances the DSL or DDSL is not available, this should not delay appropriate action being taken. Speak to and take advice from local authority children’s social care. You can also seek advice at any time from the NSPCC helpline on 0808 800 5000.

Make a referral to local authority children’s social care directly, if appropriate Share any action taken with the DSL as soon as possible.

Early help

If early help is appropriate, the DSL will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner.

The DSL will keep the case under constant review and Cherry Tree will consider a referral to local authority children’s social care if the situation does not seem to be improving. Timelines of interventions will be monitored and reviewed.

Referral

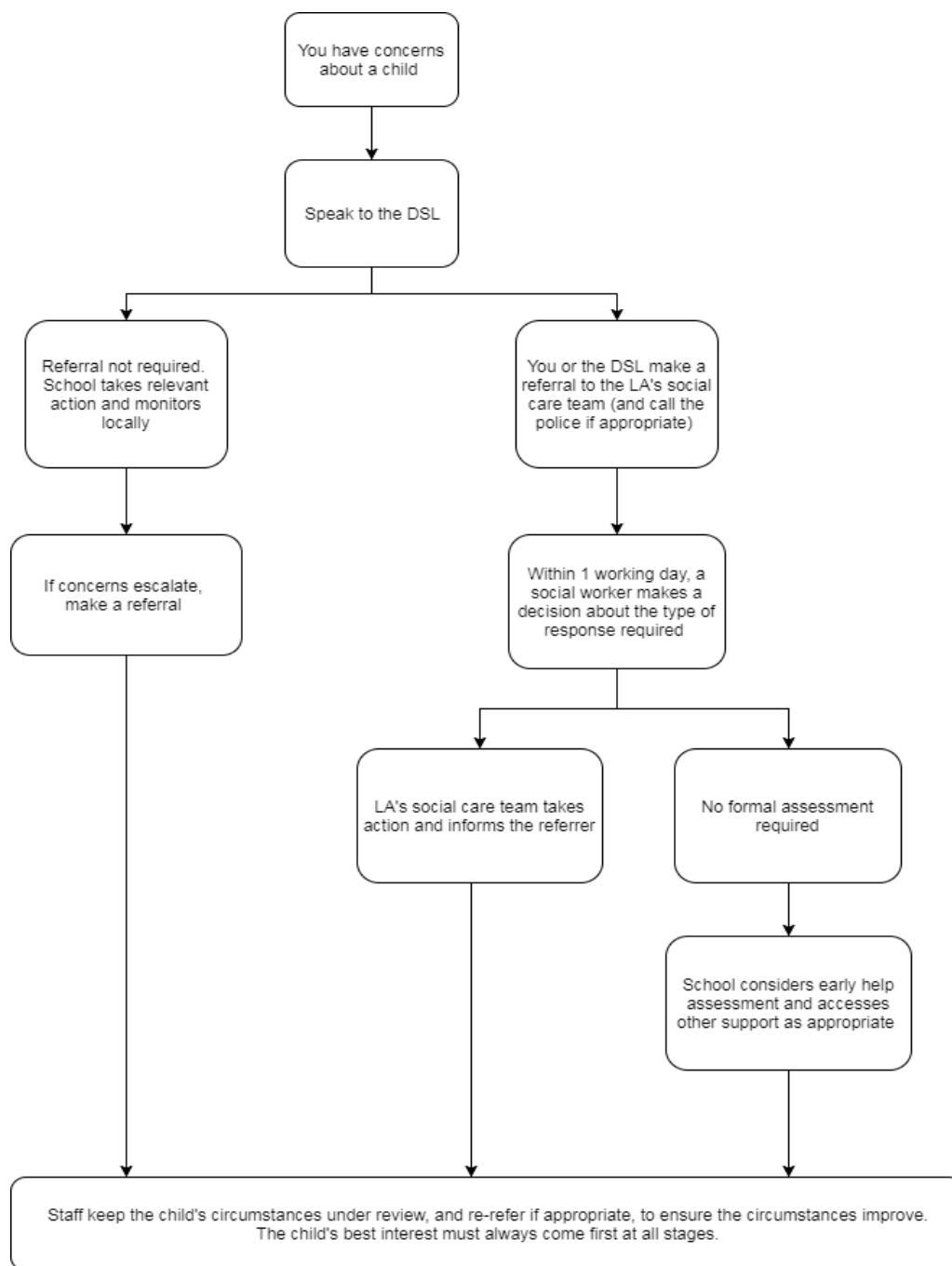
If it is appropriate to refer the case to local authority children’s social care or the police, the DSL will make the referral or support you to do so.

If you make a referral directly you must tell the DSL as soon as possible.

The local authority will make a decision within 1 working day of a referral about what course of action to take and will let the person who made the referral know the outcome. The DSL or person who made the referral must follow up with the local authority if this information is not made available, and ensure outcomes are properly recorded.

If the child's situation does not seem to be improving after the referral, the DSL or person who made the referral must follow local escalation procedures to ensure their concerns have been addressed and that the child's situation improves.

Figure 1: procedure if you have concerns about a child's welfare (as opposed to believing a child is suffering or likely to suffer from harm, or in immediate danger)



If you have concerns about extremism

If a child is not suffering or likely to suffer from harm, or in immediate danger, where possible speak to the DSL first to agree a course of action.

If in exceptional circumstances the DSL or DDSL is not available, this should not delay appropriate action being taken. Speak to and/or seek advice from local authority children's social care. Make a referral to local authority children's social care directly, if appropriate (see 'Referral' above).

Where there is a concern, the DSL will consider the level of risk and seek consent if appropriate and decide which agency to make a referral to. This could include Channel, the government's

programme for identifying and supporting individuals at risk of being drawn into terrorism, or the local authority children's social care team.

In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you:

- Think someone is in immediate danger
- Think someone may be planning to travel to join an extremist group
- See or hear something that may be terrorist-related

If you make a referral directly you must tell the DSL as soon as possible.

Specific safeguarding issues

Consistency of all procedures across Cherry Tree is paramount, especially because of the vulnerability of the young people at Cherry Tree across all areas including 'County Lines'. It is important that staff are always vigilant within Cherry Tree so that any concerns / changes are discussed daily so that any areas of concern are raised early, but also when young people are leaving the premises. The following extra safeguarding

- At the end of the day no young person is to leave the building until they are called by a staff member or volunteer so that they can ensure the young person is going home with the right person / in the right car.
- Any new staff from young person's care home must produce ID when picking up a young person. If no ID is provided or you have any doubts, a call must be made to the young person's home so that identity of the person collecting can be verified before letting the young person go.
- To ensure a young person has not been coerced into a situation it is important NOT to take the word of a young person that the staff member is who they say they are – it is our responsibility to check.

Child criminal exploitation

Child Criminal Exploitation (CCE) is where a criminal or group takes advantage of an imbalance of power to coerce control, manipulate or deceive a child into any criminal activity:

- in exchange for something the victim needs or wants
- for financial or other advantage of the perpetrator or facilitator
- through violence or the threat of violence

The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact. It can also occur through the use of technology. CCE can include children being forced to work in drug factories and coerced into moving drugs or money across the country, forced to shoplift or pickpocket or to threaten other young people. Some of the following can be indicators of CCE:

- Children who appear with unexplained gifts or new possessions
- children who associate with other young people involved in exploitation
- children who suffer from changes in emotional well-being
- children who misuse drugs and alcohol
- children who go missing for periods of time or regularly come home late
- children who regularly miss school or education or do not take part in education

Child sexual exploitation

Child sexual exploitation (CSE) is a form of child sexual abuse that occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into

sexual activity in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator.

This can involve violent, humiliating and degrading sexual assaults, but does not always involve physical contact and can happen online. For example, young people may be persuaded or forced to share sexually explicit images of themselves, have sexual conversations by text, or take part in sexual activities using a webcam.

Children or young people who are being sexually exploited may not understand that they are being abused. They often trust their abuser and may be tricked into believing they are in a loving, consensual relationship.

If a member of staff or volunteer suspects CSE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

Indicators of sexual exploitation can include a child:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Having older boyfriends or girlfriends
- Suffering from sexually transmitted infections or becoming pregnant
- Displaying inappropriate sexualised behaviour
- Suffering from changes in emotional wellbeing
- Misusing drugs and/or alcohol
- Going missing for periods of time, or regularly coming home late

Domestic abuse

The cross-Government definition of domestic violence is:

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.

The abuse can encompass but is not limited to: psychological; physical; sexual; financial and emotional. All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Exposure to domestic abuse and or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

So-called 'honour-based' abuse (including FGM and forced marriage)

So-called 'honour-based' abuse (HBA) encompasses incidents or crimes committed to protect or defend the honour of the family and/or community, including FGM, forced marriage, and practices such as breast ironing.

Abuse committed in this context often involves a wider network of family or community pressure and can include multiple perpetrators.

All forms of HBA are abuse and will be handled and escalated as such. All staff and volunteers will be alert to the possibility of a child being at risk of HBV or already having suffered it. If staff or volunteers have a concern, they will speak to the DSL, who will activate local safeguarding procedures.

Forced marriage

Forcing a person into marriage is a crime. It is a crime to carry out any conduct whose purpose is to cause a child to marry before their 18th birthday, even if violence, threats or another form of coercion

are not used. This applies to non-binding, unofficial marriages as well as legal marriages. 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.

If a member of staff or volunteer suspects that a young person is being forced into marriage, they will report this to the DSL.

The DSL will:

- Speak to the young person about the concerns in a secure and private place
- Activate the local safeguarding procedures and refer the case to the local authority's designated officer
- Seek advice from the Forced Marriage Unit on 020 7008 0151 or fmua@fco.gov.uk

County lines

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more areas within the UK, using dedicated mobile phone lines or other form of 'deal lines'. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of the victims. Young people can be targeted and recruited into county lines in a number of locations including schools, further and higher educational institutions, young person referral units, special educational needs schools, children's homes and care homes. Young people are often recruited to move drugs and money between locations and are known to be exposed to techniques such as plugging where drugs are concealed internally to avoid detection. Young people can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network. One of the ways of identifying potential involvement in county lines are missing episodes (both from home and school), when the victim may have been trafficked for the purpose of transporting drugs. If a child is suspected to be at risk of or involved in county lines, the DSL should be informed immediately and a safeguarding referral should be considered.

Preventing radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. Extremism is vocal or active opposition to fundamental British values, such as democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs.

There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. Radicalisation can occur quickly or over a long period.

Staff and volunteers will be alert to changes in the young person's behaviour.

Signs that a young person is being radicalised can include:

- Refusal to engage with, or becoming abusive to, peers who are different from themselves
- Becoming susceptible to conspiracy theories and feelings of persecution
- Changes in friendship groups and appearance
- Rejecting activities, they used to enjoy
- Converting to a new religion
- Isolating themselves from family and friends
- Talking as if from a scripted speech
- An unwillingness or inability to discuss their views
- A sudden disrespectful attitude towards others

- Increased levels of anger
- Increased secretiveness, especially around internet use
- Expressions of sympathy for extremist ideologies and groups, or justification of their actions
- Accessing extremist material online, including on Facebook or Twitter
- Possessing extremist literature
- Being in contact with extremist recruiters and joining, or seeking to join, extremist organisations

Young people who are at risk of radicalisation may have low self-esteem or be victims of bullying or discrimination. It is important to note that these signs can also be part of normal teenage behaviour – staff or volunteers should have confidence in their instincts and seek advice if something feels wrong.

If staff or volunteers are concerned about a young person being radicalised, they must discuss their concerns immediately with the DSL. If appropriate, a Prevent and a Safeguarding referral will be made. The prevent referral must be sent to Channel, which is a voluntary support programme which focuses on providing support at an early stage to people who are identified as being susceptible to being drawn into terrorism. An individual will be required to provide their consent before any support delivered through the programme is provided.

Staff or volunteers should **always** take action if they are worried.

Non-collection of young person

If a young person is not collected at the end of the session, we will:

Contact parents / carers or home managers and if no response:

Contact emergency contacts on the young person's referral form

In the event of no response from any of the emergency contacts after an hour contact the safeguarding duty team to seek further advice.

Concerns about a staff member or volunteer

If you have concerns about a member of staff, volunteer or an adult working with children or an allegation is made about a member of staff, volunteer or an adult working with children posing a risk of harm to children, speak to the DSL. If the concerns/allegations are about the DSL, speak to the DDSL.

The DSL or DDSL will then follow the procedures set out in appendix 3, if appropriate.

If the concerns/allegations are about the DSL and DDSL then contact the area designated officer at the local authority (LADO)

Safer recruitment and DBS checks

All staff and volunteers at Cherry Tree have enhanced DBS checks. There are no current plans to employ or recruit any new staff or volunteers. However, should this change all safer recruitment processes will be followed.

Allegations of abuse made against other young people (child-on-child abuse)

We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as “banter”, “just having a laugh” or “part of growing up”.

We also recognise the gendered nature of child-on-child abuse. However, all child-on-child abuse is unacceptable and will be taken seriously.

Most cases of children hurting other children will be dealt with under Cherry Tree behaviour policy. This child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns. This might include where the alleged behaviour:

- Is serious, and potentially a criminal offence
- Could put children in Cherry Tree at risk
- Is violent
- Involves children being forced to use drugs or alcohol
- Involves sexual exploitation, harmful sexual behaviour, sexual violence, sexual abuse or sexual harassment, such as indecent exposure, sexual assault, upskirting or sexually inappropriate pictures or videos (taking and distributing nude and seminude images including sexting) (CCE)

If a child makes an allegation of abuse against another child:

- You must record the allegation and tell the DSL, but do not investigate it
- The DSL will contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence
- The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made, the perpetrator(s) and any others affected) with a named person they can talk to if needed
- The DSL will contact the children and young people's mental health services (CYPMHS), if appropriate

We will minimise the risk of child-on-child abuse by:

- Challenging any form of derogatory or sexualised language or behaviour, including requesting or sending sexual images
- Being vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards females, and initiation or hazing type violence with respect to boys
- Ensuring children know they can talk to staff confidentially
- Ensuring staff are trained to understand that a child harming another child could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy

Sexting (consensual and non-consensual sharing of nude and semi-nude images or videos)

Your responsibilities when responding to an incident

If you are made aware of an incident involving sexting (also known as 'youth produced sexual imagery'), you must report it to the DSL immediately.

You must **not**:

- View, download or share the imagery yourself, or ask a child to share or download it. If you have already seen the imagery by accident, you must report this to the DSL
- Delete the imagery or ask the child to delete it
- Ask the child / children who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)
- Share information about the incident with other members of staff, the children it involves or their, parents and/or carers
- Say or do anything to blame or shame any young people involved

You should explain that you need to report the incident and reassure the child that they will receive support and help from the DSL.

Initial review meeting

Following a report of an incident, the DSL will hold an initial review meeting with appropriate staff. This meeting will consider the initial evidence and aim to determine:

- Whether there is an immediate risk to children
- If a referral needs to be made to the police and/or children's social care
- If it is necessary to view the imagery in order to safeguard the young person (in most cases, imagery should not be viewed)
- What further information is required to decide on the best response
- Whether the imagery has been shared widely and via what services and/or platforms (this may be unknown)
- Whether immediate action should be taken to delete or remove images from devices or online services
- Any relevant facts about the children involved which would influence risk assessment
- If there is a need to contact other professionals
- Whether to contact parents or carers of the children involved (in most cases parents/carers should be involved)

The DSL will make an immediate referral to police, LADO and/or children's social care if:

- The incident involves an adult
- There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example owing to special educational needs)
- What the DSL knows about the imagery suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent
- The imagery involves sexual acts and any child in the imagery is under 13
- The DSL has reason to believe a child is at immediate risk of harm owing to the sharing of the imagery (for example, the young person is presenting as suicidal or self-harming)

If none of the above apply then the DSL, in consultation with the DDSL, may decide to respond to the incident without involving the police, LADO or children's social care.

Further review by the DSL

If at the initial review stage, a decision has been made not to refer to police and/or children's social care, the DSL will conduct a further review.

They will hold interviews with the children involved (if appropriate) to establish the facts and assess the risks.

If at any point in the process there is a concern that a child has been harmed or is at risk of harm, a referral will be made to children's social care and/or the police immediately.

Informing parents / carers

The DSL will inform parents / carers at an early stage and keep them involved in the process, unless there is a good reason to believe that involving them would put the child at risk of harm.

Referring to the police

If it is necessary to refer an incident to the police, this will be done by calling 101.

Recording incidents

All sexting 'Sharing nudes and semi-nudes' - incidents and the decisions made in responding to them will be recorded.

Notifying parents / carers

Where appropriate, we will discuss any concerns about a child with the child's parents/carers. The DSL will normally do this in the event of a suspicion or disclosure.

If we believe that notifying the parents/carers would increase the risk to the child, we will discuss this with the local authority children's social care team before doing so.

In the case of allegations of abuse made against other children, we will normally notify the parents/carers of all the children involved.

Children with special educational needs and disabilities

We recognise that children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group, including:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration
- Children being more prone to peer group isolation than other children
- The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs
- Communication barriers and difficulties in overcoming these barriers

Mobile phones, cameras and internet use

Staff or volunteers will not take pictures or recordings of young persons on their personal phones or cameras.

Children at Cherry Tree are not permitted to have a phone, camera or smart device on them in Cherry Tree. They will leave their phone in a box on arrival and can be used if they need to contact parent or carer if deemed necessary.

Children potentially at a greater risk of harm

Children who need a social worker

Children may need a social worker due to safeguarding or welfare needs. Children may need this help due to abuse, neglect and complex family circumstances. A child's experiences of adversity and trauma can leave them vulnerable to further harm as well as educationally disadvantaged in facing barriers to learning behaviour and mental health.

Children requiring mental health support

Cherry tree has an important role to play in supporting the mental health and wellbeing of their young people. mental health problems can in some cases be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

Due to the complexities of young people at Cherry Tree, all young people are observed and discussed on a daily basis.

Any concerns are discussed with and actioned by the DSL and where appropriate other professionals are contacted. The DSL will look to gain consent if appropriate.

Looked after children and previously looked after children

All staff and volunteers at Cherry Tree need to have the skills and knowledge, via up-to-date training, to keep looked after children safe.

All previously looked after children potentially remain vulnerable and all staff are supported to have the skills, knowledge and understanding to keep previously looked after children safe.

Allegations of abuse made against staff or volunteers

This section of this policy applies to all cases in which it is alleged that a current member of staff or volunteer has:

- Behaved in a way that has harmed a child, or may have harmed a child, or
- Possibly committed a criminal offence against or related to a child, or
- Behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children
- behaved or may have behaved in a way that indicates they may not be suitable for working with children

It applies regardless of whether the alleged abuse took place in Cherry Tree. Allegations against a staff member or volunteer who is no longer working at Cherry Tree and historical allegations of abuse will be referred to the police.

We will deal with any allegation of abuse against a member of staff or volunteer very quickly, in a fair and consistent way that provides effective child protection while also supporting the individual who is the subject of the allegation.

Our procedures for dealing with allegations will be applied with common sense and judgement.

Suspension of the accused until the case is resolved

Suspension will not be the default position and will only be considered in cases where there is reason to suspect that a child or other children is/are at risk of harm, or the case is so serious that it might be grounds for dismissal. In such cases, we will only suspend an individual if we have considered all other options available and there is no reasonable alternative.

Definitions for outcomes of allegation investigations

- **Substantiated:** there is sufficient evidence to prove the allegation
- **Malicious:** there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive
- **False:** there is sufficient evidence to disprove the allegation
- **Unsubstantiated:** there is insufficient evidence to either prove or disprove the allegation (this does not imply guilt or innocence)
- **Unfounded:** to reflect cases where there is no evidence or proper basis which supports the allegation being made

Procedure for dealing with allegations

In the event of an allegation that meets the criteria above we will take the following steps:

- Immediately discuss the allegation with the designated officer at the local authority. This is to consider the nature, content and context of the allegation and agree a course of action, including whether further enquiries are necessary to enable a decision on how to proceed, and whether it is necessary to involve the police and/or children's social care services. (The case manager may, on occasion, consider it necessary to involve the police *before* consulting the designated officer – for example, if the accused individual is deemed to be an immediate risk to children or there is evidence of a possible criminal offence. In such cases, the case manager will notify the designated officer as soon as practicably possible after contacting the police)
- Inform the accused individual of the concerns or allegations and likely course of action as soon as possible after speaking to the designated officer (and the police or children's social care

services, where necessary). Where the police and/or children's social care services are involved, the case manager will only share such information with the individual as has been agreed with those agencies

- Where appropriate (in the circumstances described above), carefully consider whether suspension of the individual from contact with children at Cherry Tree is justified or whether alternative arrangements such as those outlined above can be put in place. Advice will be sought from the designated officer, police and/or children's social care services, as appropriate
- Cherry Tree does NOT employ supply staff or have organisations or individuals using the premises.
- **If immediate suspension is considered necessary**, agree and record the rationale for this with the designated officer. The record will include information about the alternatives to suspension that have been considered, and why they were rejected. Written confirmation of the suspension will be provided to the individual facing the allegation or concern within 1 working day, and the individual will be given a named contact at Cherry Tree and their contact details
- **If it is decided that no further action is to be taken** in regard to the subject of the allegation or concern, record this decision and the justification for it and agree with the designated officer what information should be put in writing to the individual and by whom, as well as what action should follow both in respect of the individual and those who made the initial allegation
- **If it is decided that further action is needed**, take steps as agreed with the designated officer to initiate the appropriate action in Cherry Tree and/or liaise with the police and/or children's social care services as appropriate
- Provide effective support for the individual facing the allegation or concern, including appointing a named representative to keep them informed of the progress of the case and considering what other support is appropriate.
- Inform the parents or carers of the child/children involved about the allegation as soon as possible if they do not already know (following agreement with children's social care services and/or the police, if applicable). The case manager will also inform the parents or carers of the requirement to maintain confidentiality about any allegations made against Cherry Tree staff or volunteers (where this applies) while investigations are ongoing. Any parent or carer who wishes to have the confidentiality restrictions removed in respect of a Cherry Tree staff member or volunteer will be advised to seek legal advice
- Keep the parents or carers of the child/children involved informed of the progress of the case and the outcome, where there is not a criminal prosecution, including the outcome of any disciplinary process (in confidence)
- Make a referral to the DBS where it is thought that the individual, which includes staff, volunteers the allegation or concern has engaged in conduct that harmed or is likely to harm a child, or if the individual otherwise poses a risk of harm to a child

If Cherry Tree is made aware that the secretary of state has made an interim prohibition order in respect of an individual, we will immediately suspend that individual from working, pending the findings of the investigation.

Where the police are involved, wherever possible the DSL or DDSL will ask the police at the start of the investigation to obtain consent from the individuals involved to share their statements and evidence for use in the Cherry Tree disciplinary process, should this be required at a later point.

Timescales

- Any cases where it is clear immediately that the allegation is unsubstantiated or malicious will be resolved within 1 week
- If the nature of an allegation does not require formal disciplinary action, we will institute appropriate action within 3 working days

- If a disciplinary hearing is required and can be held without further investigation, we will hold this within 15 working days

Specific actions

Action following a criminal investigation or prosecution

The case manager will discuss with the local authority's designated officer whether any further action, including disciplinary action, is appropriate and, if so, how to proceed, taking into account information provided by the police and/or children's social care services.

Conclusion of a case where the allegation is substantiated

A referral will be made to the DBS if an allegation is substantiated and it is thought that the individual has or may have engaged in conduct that has harmed or is likely to harm a child, or that they might pose a risk to harm a child.

Individuals returning to work after suspension

If it is decided on the conclusion of a case that an individual who has been suspended can return to work, the case manager will consider how best to facilitate this.

The case manager will also consider how best to manage the individual's contact with the child or children who made the allegation, if they are still attending Cherry Tree.

Unsubstantiated or malicious allegations

If an allegation is shown to be deliberately invented, or malicious, the DSL or DDSL will consider whether any disciplinary action is appropriate against the young person who made it, or whether the police should be asked to consider whether action against those who made the allegation might be appropriate.

Confidentiality

Cherry Tree Connect will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

The case manager will take advice from the local authority's designated officer, police and children's social care services, as appropriate, to agree:

- Who needs to know about the allegation and what information can be shared
- How to manage speculation, leaks and gossip, including how to make parents or carers of a child / children involved aware of their obligations with respect to confidentiality
- What, if any, information can be reasonably given to the wider community to reduce speculation
- How to manage press interest if, and when, it arises

Record-keeping

The case manager will maintain clear records about any case where the allegation or concern meets the criteria and file for the duration of the case. Such records will include:

- A clear and comprehensive summary of the allegation
- Details of how the allegation was followed up and resolved
- Notes of any action taken and decisions reached (and justification for these, as stated above)

If an allegation or concern is not found to have been malicious, the school will retain the records of the case.

Where records contain information about allegations of sexual abuse, we will preserve these for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry. We will retain all

other records at least until the individual has reached normal pension age, or for 10 years from the date of the allegation if that is longer.

The records of any allegation that is found to be malicious will be deleted from the file.

References

When providing employer references, we will not refer to any allegation that has been proven to be false, unsubstantiated or malicious, or any history of allegations where all such allegations have been proven to be false, unsubstantiated or malicious.

Learning lessons

After any cases where the allegations are *substantiated*, we will review the circumstances of the case with the local authority's designated officer to determine whether there are any improvements that we can make to Cherry Tree's procedures or practice to help prevent similar events in the future.

This will include consideration of (as applicable):

- Issues arising from the decision to suspend members of staff or volunteers
- The duration of the suspension
- Whether or not the suspension was justified
- The use of suspension when the individual is subsequently reinstated. We will consider how future investigations of a similar nature could be carried out without suspending the individual

Training

All staff and volunteers

All staff and volunteers will undertake safeguarding, child protection training to ensure they understand the Cherry Tree's safeguarding systems and their responsibilities and can identify signs of possible abuse or neglect.

All staff and volunteers will have training on the government's anti-radicalisation strategy, Prevent, to enable them to identify children at risk of being drawn into terrorism and to challenge extremist ideas.

Staff and volunteers will also receive regular safeguarding and child protection updates

The DSL and DDSL

The DSL and DDSL will undertake child protection and safeguarding training at least every 2 years.

They will also undertake Prevent awareness training.

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