

MVP Workshops Safeguarding and Child Protection Policy

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KEY CONTACTS AT BCE	

FIRST POINT OF CONTACT FOR ALL SAFEGUARDING CONCERNS

NAME: JOANNA VASANTH

CONTACT NUMBER: 07772898451

EMAIL: Joanna.vasanth@mvpworkshops.co.uk

DESIGNATED SAFEGUARDING LEAD FOR MVP Workshops TRAINING

NAME: Joanna Vasanth

CONTACT NUMBER: 07772898451

EMAIL: Joanna.vasanth@mvpworkshops.co.uk

KEY CONTACTS WITHIN THE LOCAL AUTHORITY

The Safeguarding in Education Service is able to provide advice and consultancy in non-emergency situations

<https://www.walthamforest.gov.uk/Pages/Services/safeguarding-education.aspx?l1=100014&l2=200127>

The Waltham Forest Local Safeguarding Children Board can provide advice and training

<http://www.walthamforest.gov.uk/lscb>

REFERRAL TO LOCAL AUTHORITY SOCIAL SERVICES

If you feel that a child is at immediate risk of harm, please call the Police on 999 who will be able to provide an immediate response. Alternatively, you can contact your local police on 101 at any time.

If you don't believe the risk requires immediate action, contact the Waltham Forest Multi Agency Safeguarding Hub team (previously the Referral and Advice Team) to discuss your concerns on:

Tel: 020 8496 2310 (Monday to Thursday, 9am-5.15pm and Friday, 9am-5pm)

Tel: 020 8496 3000 (Out of Hours).

You will get to speak to a social worker who is part of the Waltham Forest Multi Agency Safeguarding Hub (MASH) team. The social worker will need to gain as much information as possible about the child and the family.

If the young person does not reside in Waltham Forest contact their home borough social services.

SAFEGUARDING POLICY FOR MVP

“Because of their day-to-day contact with individual children, teachers and other staff are particularly well-placed to observe outward signs of abuse, changes in behavior or failure to develop”. (The Children Act 1989)

1. PURPOSE

1.1. An effective whole organization safeguarding policy is one which provides clear direction to staff and others about expected behavior when dealing with safeguarding issues. An effective policy also makes explicit BCT's commitment to the development of good practice and sound procedures. This ensures that safeguarding concerns, referrals and monitoring may be handled sensitively, professionally and in ways which support the needs of the learner.

1.2. Parents, carer's or other interested parties can obtain a copy of this safeguarding policy on request.

2. INTRODUCTION

- 1.1. MVP Workshops takes seriously its responsibility to protect and safeguard the welfare of children and young people in its care. “The welfare of the child is paramount” (Children Act 1989).
- 1.2. There are three main elements to our safeguarding policy;
 - 2.1.1. Prevention through the creation of a positive atmosphere and the teaching and pastoral support offered to learners.
 - 2.1.2. Protection by following agreed procedures, ensuring staff are trained and supported to respond appropriately and sensitively to safeguarding concerns.
 - 2.1.3. Support to learners and staff who may be affected by safeguarding concerns or issues arising.
- 1.3. This policy applies to all learners, staff, volunteers and visitors to MVP Workshops.
- 1.4. MVP Workshops recognizes it is an agent of referral and not of investigation.
- 1.5. All staff must maintain an attitude of ‘it could happen here’.

3. POLICY

- 1.1. We recognize that for our learners, high self-esteem, confidence, supportive friends and clear lines of communication with a trusted adult helps to prevent abuse. MVP Workshops will therefore:
 - 3.1.1. Establish and maintain an environment where learners feel safe and secure and are encouraged to talk, and are listened to.
 - 3.1.2. Ensure that learners know that there are adults within MVP Workshops who they can approach if they are worried or are in difficulty.
 - 3.1.3. Where possible include in the curriculum activities and opportunities for personal health and social education (PHSE), which equip learners with the skills they need to stay safe from abuse.
 - 3.1.4. Where possible include in the curriculum material which will help learners develop realistic attitudes to the responsibilities of adult life.
 - 3.1.5. Ensure that wherever appropriate every effort will be made to establish effective working relationships with parents and colleagues from partner agencies.

4. FRAMEWORK

- 1.1. Safeguarding is the responsibility of all adults and especially those working with children. The development of appropriate procedures and the monitoring of good practice are the responsibilities of the Local Safeguarding Children Board (LSCB).

5. ROLES AND RESPONSIBILITIES

- 1.1. All adults working with or on behalf of children have a responsibility to protect them. There are, however, key people within MVP Workshops and the local authority who have specific responsibilities under safeguarding procedures. The names of those carrying out these responsibilities are listed on the cover sheet of this document.
- 1.2. It is the role of the DSL to ensure that all of the safeguarding procedures are followed within MVP Workshops, and to make appropriate, timely referrals to local authority social services in accordance with these procedures. If for any reason the DSL is unavailable, a deputy DSL has been identified who will act in their absence.
- 1.3. Additionally, it is the role of the DSL to ensure all staff members (including temporary staff and volunteers) are aware of BCT's procedures, and to advise staff and to offer support to those requiring this.
- 1.4. The BCT senior management team are responsible for ensuring that BCT follows safe recruitment processes. As part of the MVP Workshops' recruitment and vetting process, enhanced DBS checks will be sought on all staff that have substantial and unsupervised access to learners.
- 1.5. No member of staff will be allowed unsupervised access to learners until MVP Workshops has received the results of satisfactory references and DBS check. All new staff will complete a safeguarding self-disclosure form prior to starting work.

6. IDENTIFYING CHILDREN AND YOUNG PEOPLE WHO MAY BE SUFFERING SIGNIFICANT HARM

- 6.1 Teachers and other adults in school are well placed to observe any

physical, emotional or behavioral signs, which indicate that a child may be suffering significant harm. The relationships between staff, pupils, parents and the public which foster respect, confidence and trust can lead to disclosures of abuse, and/or school staff being alerted to concerns.

6.2 As in the Children Acts 1989 and 2004, a child is anyone who has not yet reached his/her 18th birthday.

6.3 **Harm** means ill-treatment or impairment of health and development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another; Development means physical, intellectual, emotional, social or behavioral development; Health includes physical and mental health; Ill-treatment includes sexual abuse and other forms of ill-treatment which are not physical.

6.4 **Abuse and Neglect** are forms of maltreatment. Somebody may abuse or neglect a child by inflicting harm or failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them, or, more rarely, by a stranger. They may be abused by an adult or adults, another child, children or young people. There are four categories of abuse; physical abuse, emotional abuse, sexual abuse and neglect.

6.5 Recognizing abuse

To ensure that our pupils are protected from harm, we need to understand what types of behavior constitute abuse and neglect.

6.6 Abuse and neglect are forms of maltreatment. Somebody may abuse or neglect a child by inflicting harm, for example by hitting them, or by failing to act to prevent harm. Abuse may be committed by adult men or women and by other children and young people. Four categories of abuse:

6.6 **Physical Abuse** is a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. (This used to be called Munchausen's Syndrome by Proxy, but is now more usually referred to as fabricated or induced illness).

6.7 **Emotional Abuse** is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they

say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of 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 cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

6.8 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.

6.9 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.

Definitions taken from ***Keeping Children Safe in Education 2016***

6.10 Children who may be particularly vulnerable

Some children may have an increased risk of abuse. It is important to understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures that fail to acknowledge children's diverse circumstances, rather than the individual child's personality, impairment or circumstances. Many factors can contribute to an increase in risk, including prejudice and discrimination, isolation, social exclusion,

communication issues and a reluctance on the part of some adults to accept that abuse can occur.

To ensure that all of our pupils receive equal protection, we will give special consideration to children who are:

- disabled or have special educational needs
- young carers
- affected by parental substance misuse, domestic violence or parental mental health needs
- asylum seekers
- living away from home
- vulnerable to being bullied, or engaging in bullying
- living in temporary accommodation
- live transient lifestyles
- living in chaotic and unsupportive home situations
- vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion, disability or sexuality
- at risk of sexual exploitation
- do not have English as a first language
- at risk of female genital mutilation (FGM)
- at risk of forced marriage
- at risk of being drawn into extremism.

This list provides examples of additionally vulnerable groups and is not exhaustive. Special consideration includes the provision of safeguarding information and resources in community languages and accessible formats for children with communication needs.

6.11 Female Genital Mutilation (FGM) FGM is illegal in the UK and a form of child abuse with long-lasting harmful consequences. 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.

FGM refers to procedures of any alteration involving partial or total removal of the external female genital organs. The procedure may lead to short term and long-lasting harmful consequences such as death, trauma, infections, flashbacks, infertility, kidney problems, sexual dysfunctions, incontinence, post-traumatic stress disorder etc. It is known to be practiced in the North African countries, the Middle-East, Indonesia, Malaysia, India and Pakistan. However, with migration worldwide it is also practiced in the UK, the USA, Canada, Australia etc.

One of the prominent reasons for the practice is to suppress women's sexual desire. There is a social pressure on women to undergo the procedure otherwise they may be segregated by their peers, or labelled "unclean". Furthermore, FGM is often a requirement for getting married in practicing communities. FGM is not a religious practice.

Indicators

There is a range of potential indicators that a girl may be at risk of FGM.

FGM often takes place in the summer holidays, as the recovery period after FGM can be 6 to 9 weeks. Professionals should be mindful of at risk times when children go on long holidays and/or are getting a visit by female elder from their country of origin. Additionally, girls are considered at risk where their mother or sisters have undergone FGM, and girls are talking about a 'special' event or procedure to 'become a woman.'

The post FGM symptoms include, but are not limited to, difficulty in walking, sitting or standing, spending longer than normal in the bathroom or toilet, unusual behavior after a lengthy absence, reluctance to undergo normal medical examinations, and asking for help but not be explicit about the problem due to embarrassment or fear. They can sometimes ask about their friend's problem rather than their problem. Professionals should raise an alert to child social care via the MASH if they have any FGM concerns.

Further information on warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 16-17 of the Multi-Agency Practice Guidelines, and Chapter 9 of those Guidelines (pp42-44), which focuses on the role of schools and colleges.

Actions

The United Nations addresses FGM as violation of human rights. In the UK FGM is a criminal offence and a harmful form of child abuse. It is illegal to practice in the UK and/or anyone involved in taking girl outside of the UK to have FGM carried out will be punished under the FGM act 2003 and Serious Crime Act 2015. LBWF follows a comprehensive approach comprising prevention, punishment, enforcement, support and protection measures to safeguard young girls from FGM.

If staff have a concern they should activate local safeguarding procedures via the MASH, using existing national and local protocols for multi-agency liaison with police and children's social care. When mandatory reporting commences in October 2015 (see below) these procedures will remain when dealing with concerns regarding the potential for FGM to take place. Where a teacher

discovers that an act of FGM appears to have been carried out on a girl who is aged under 18, there will be a statutory duty upon that individual to report it to the police.

Mandatory Reporting Duty

Section 5C of the Female Genital Mutilation Act 2003 (as inserted by section 75 of the Serious Crime Act 2015) gives the Government powers to issue statutory guidance on FGM to relevant persons. Once the government issues any statutory multi-agency guidance this will apply to schools and colleges.

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) will place a statutory duty upon teachers¹, along with social workers and healthcare professionals, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils – it is likely that discovery will be made by disclosure by the student, parent or otherwise. These cases must be referred to police (via the local CAIT team or by calling 101). Immediate reporting is required if FGM has been performed recently, and in historical cases, reporting must take place within one month.

Mandatory reporting duty will commence in October 2015. Unless the teacher has a good reason not to, they should still consider and discuss any such case with the school's DSL and involve children's social care as appropriate.

Schools can also:

- Circulate and display materials about FGM
- Display relevant information (for example, details of the NSPCC's Helpline and appropriate black and minority ethnic women's groups)
- Ensure that a private telephone is made available should students need to seek advice discreetly
- Inform colleagues/raise awareness of the issues around FGM – as well as including appropriate training in continuing professional development

¹"teacher" means—

(a) in relation to England, a person within section 141A(1) of the Education Act 2002 (persons employed or engaged to carry out teaching work at schools and other institutions in England);
(b) in relation to Wales, a person who falls within a category listed in the table in paragraph 1 of Schedule 2 to the Education (Wales) Act 2014 (anaw 5) (categories of registration for purposes of Part 2 of that Act) or any other person employed or engaged as a teacher at a school (within the meaning of the Education Act 1996) in Wales.

- Introduce FGM into the school curriculum in relevant classes, such as personal, social and health education (PSHE), citizenship, religious knowledge, drama and history

Reference and further information

- [Keeping children safe in education, DfE](#) (see pages 14-15)

[Multi-agency practice guidelines: FGM, Home Office, DfE](#) (see pages 8, 16, 17 and 42)

<http://www.londonscb.gov.uk/fgm/>

For support around training around FGM for teachers and students, please contact:

Hibo Wardere
FGM Mediator

Tel: 020 8496 6952

Hibo.Wardere@walthamforest.gov.uk

6.12 Private fostering arrangements

A private fostering arrangement occurs when someone other than a parent or a close relative cares for a child for a period of 28 days or more, with the agreement of the child's parents. It applies to children under the age of 16, or aged under 18 if the child is disabled. Children looked after by the local authority or who are placed in a residential school, children's home or hospital are not considered to be privately fostered.

Private fostering occurs in all cultures, including British culture and children may be privately fostered at any age.

Most privately fostered children remain safe and well but safeguarding concerns have been raised in some cases so it is important that schools are alert to possible safeguarding issues, including the possibility that a child has been trafficked into the country.

By law, a parent, private foster carer or other persons involved in making a private fostering arrangement must notify children's services as soon as possible. *(See school or LSCB guidance for further information. Add a web link or append guidance to this policy)*

Where a member of staff becomes aware that a pupil may be in a private fostering arrangement they will raise this with the DSL and the school should notify the local authority of the circumstances.

6.13 Domestic Abuse

Domestic abuse is any type of controlling, bullying, threatening or violent behavior between people in a relationship. But it isn't just physical violence – domestic abuse includes any emotional, physical, sexual, financial or psychological abuse. It can happen in any relationship, and even after the relationship has ended. Both men and women can be abused or abusers.

Witnessing domestic abuse is really distressing and scary for a child, and causes serious harm. Children living in a home where domestic abuse is happening are at risk of other types of abuse too. Children can experience domestic abuse or violence in lots of different ways. They might:

- see the abuse
- hear it from another room
- see a parent's injuries or distress afterwards
- be hurt by being nearby or trying to stop the abuse.

Domestic abuse can happen in any relationship, and it affects young people too. They may not realize that what's happening is abuse. Even if they do, they might not tell anyone about it because they're scared of what will happen, or ashamed about what people will think.

6.14 Child Sexual Exploitation

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 organized 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 also important to recognize that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

The school includes the risks of sexual exploitation in the PSHE and SRE curriculum. A common feature of sexual exploitation is that the child often doesn't recognize the coercive nature of the relationship and doesn't see themselves as a victim. The child may initially resent what they perceive as interference by staff, but staff must act on their concerns, as they would for any other type of abuse.

All staff are made aware of the indicators of sexual exploitation and all concerns are reported immediately to the DSL.

The MASE is the Multi-Agency Sexual Exploitation meeting, which is held on a monthly basis and is co-chaired by Children's Social Care and the Metropolitan Police. The MASE has two purposes:

1. For professionals to refer young people who are at risk of or are experiencing sexual exploitation: who are subject to a plan (Child Protection, Multi-agency or Child in Need) but for whom the risks are not decreasing and specialist advice or support is required
2. To refer information/intelligence about possible venues/people involved in sexual exploitation. This information will then contribute to developing a strategic overview and understanding of sexual exploitation in Waltham Forest

Please see relevant documents below:

- [MAP \(multi-agency planning\) and MASE \(multi-agency sexual exploitation\) meetings](#) - local guidance document
- [WFSCB CSC referral letter](#)
- [WFSCB MASE referral form](#)
- [Pan-London Child Sexual Exploitation operating protocol \(February 2014\)](#)

PREVENT and anti-radicalization

1.1. At MVP Workshops we are fully aware and committed to the on-going protection and safety of our pupils, staff and wider community in accordance with DfE guidance '*Working together to Safeguard Children*' (2016) and '*Keeping Children Safe in Education*' (2016). An integral part of that work relates to the governments PREVENT strategy and the duties it places on academic institutions.

1.2. Our school is committed to providing a secure environment for pupils, where children feel safe and are kept safe. All adults in our school recognize that safeguarding is everyone's responsibility irrespective of the role they undertake or whether their role has direct contact or responsibility for children or not. Staff will be alert to issues including:

5.1.1. Disclosures by pupils of their exposure to the extremist actions, views or materials of others outside of school, such as in their homes or community groups

5.1.2. Graffiti symbols, writing or art work promoting extremist messages or images

- 5.1.3. Pupils accessing extremist material online, including through social networking sites
 - 5.1.4. Parental reports of changes in behavior, friendship or actions and requests for assistance
 - 5.1.5. Use of extremist or 'hate' terms to exclude others or incite violence
 - 5.1.6. Intolerance of difference, whether secular or religious or, in line with our equalities policy, views based on, but not exclusive to, gender, disability, homophobia, race, color or culture
- 1.3. By continually developing our leadership and accountability practices, staff training opportunities (primarily the Home Office developed WRAP Training), referral systems and management of those referrals, we strive to demonstrate a pro-active and diligent approach to this aspect of our responsibilities as educators and safe-guarders.
- 1.4. Aligned with a consistent delivery of a broad and balanced curriculum and use of the Local Authority-approved Self-Assessment framework, we strive to protect our students - and the wider community - against the threats of extremism, through the promotion of both fundamental values and cohesion amongst our communities.
- 1.5. We also recognize that further information and support is available from the Multi-Agency Safeguarding Hub (020 8496 2310), the Local Authority's Community Safety Team (020 8496 3000) and the PREVENT Education Officer/Citizenship and Cohesion Advisor for WF sean.thomson@walthamforest.gov.uk 0208 496 3447.
- 1.6. The self-assessment framework referenced in this policy can also be found on the Waltham Forest Education Network **The Hub**, using the following link:
<https://thehub.walthamforest.gov.uk/policy/schools/safeguarding/digital-resilience-package>

7. PROCEDURES

- 1.1. All action is taken in line with the following guidance;
- 7.1.1. Local Safeguarding Children Board (LSCB) guidelines
 - 7.1.2. London child protection procedures 2016
 - 7.1.3. Safeguarding Children in Education Sept 2016
 - 7.1.4. What to Do If You're Worried a Child Is Being Abused 2015
 - 7.1.5. Working Together to Safeguard Children 2015
- 1.2. MVP Media staff who work unsupervised will be kept informed about safeguarding responsibilities and procedures through induction,

briefings and awareness training. There may be other adults in the company who rarely work unsupervised, more usually working alongside members of staff. However, the DSL will ensure they are aware of and work within MVP Media's policy.

- 1.3. Any member of staff, volunteer or visitor to MVP Media events who receives a disclosure or allegation of abuse, or suspects that a learner may have suffered significant harm or be at risk of suffering significant harm, or who notices possible signs or indicators of abuse must make an immediate telephone report to the DSL or in their absence, the deputy designated DSL. In the absence of either of the above, the matter should be brought to the attention of the most senior member of staff available as a matter of priority.
- 1.4. The DSL will immediately refer cases of suspected abuse or allegations of abuse to the local authority (Children's Social Care or the LADO as appropriate) by telephone. If known include the following:
 - 1.1.1. The learner's name, gender, address, date of birth, family composition, ethnicity, religion, any special needs
 - 1.1.2. The reason for the referral, including details of any significant events in the learner's life
 - 1.1.3. Details of any allegations made including verbatim reports of any relevant conversations
 - 1.1.4. The learner's current location and emotional / physical condition
 - 1.1.5. Identity of those with parental responsibility and details of whether they are aware of the referral
 - 1.1.6. The name of person who initially received the disclosure plus any advice given
- 1.5. The young person concerned must be informed that this information is being passed on to the MVP Media DSL who will deal with information in line with this policy. There may be exceptional cases where it is judged that the referral should be made without the consent of the young person and this is a matter of judgment for the DSL.
- 1.6. The telephone referral to local authority Children's Social Care must be confirmed in writing by the end of the working day.
- 1.7. The DSL should follow up with local authority Children's Social Care within 24 hours of the referral to determine the outcome of the referral and any action to be taken. The DSL is responsible for establishing the outcome of the referral.

- 1.8. Staff are responsible to make direct referrals in the unlikely case of an emergency if they can't find the DSL or believe that their concern is minimized or not taken seriously.
- 1.9. MVP Media is committed to sharing referral information with learner's parents / carers unless to do so could place the learner at greater risk of harm or impede a criminal investigation. On these occasions advice will be taken from local authority social services or the police.
- 1.10. The reporting member of staff must, as soon as possible, but at the latest by the end of the working day, make a written record of the disclosure of their concerns and send it via email to the DSL who will record it in the learner's record.
- 1.11. Where concerns do not relate to the immediate risk of significant harm the DSL will discuss the concerns with relevant colleagues and agree a plan of action which will be recorded by the DSL in the learner's notes.
- 1.12. Where concerns about the safety or wellbeing of a young person exist it may be appropriate to approach relevant agencies (former schools, colleges etc.) to see if there is any relevant information available.

8. TRAINING AND SUPPORT

- 1.1. All staff will undertake appropriate safeguarding awareness training to equip them to carry out their responsibilities for safeguarding effectively, and training will take place at least annually to ensure that staff are up to date with current learning.
- 1.2. MVP Workshops will ensure that the DSL undertakes a DSL refresher training every two years with annual training to ensure that their knowledge and skills are up to date. This may include specific issues training, multi-agency training delivered by the LSCB or attendance at the safeguarding forums held by the Senior Safeguarding Lead for LB WF.
- 1.3. Temporary staff and volunteers who work with learners at MVP Workshops will, through induction training, be made aware of the company's arrangements for safeguarding and their responsibilities.
- 1.4. Support is available for staff from the DSL where there are concerns or queries about safeguarding.

- 1.5. All staff are offered guidance on the boundaries of appropriate behavior and conduct. These matters form part of staff induction and this guidance is available in the staff handbook. All staff and volunteers sign the MVP Workshops code of conduct to which they are expected to adhere at all times.
- 1.6. All staff have access to guidance on how to spot indicators of potential abuse.
- 1.7. All staff who receive a disclosure from a learner will have access to a counselling service.

9. PROFESSIONAL CONFIDENTIALITY

- 1.1. Confidentiality is an issue which needs to be discussed and fully understood by all those working with children, particularly in the context of safeguarding.
- 1.2. The only purpose of confidentiality in this respect is to benefit the learner. **A member of staff must never guarantee confidentiality to a learner nor should they agree with a learner to keep a secret**, as where there is a safeguarding concern this must be reported to the DSL and may require further investigation by appropriate authorities.
- 1.3. Staff will be informed of relevant information in respect of individual cases regarding safeguarding on a “need to know basis”. Any information shared with a member of staff in this way must be held confidentially by them.
- 1.4. Where sharing will be in the best interests of the relevant learner information will be shared with other organizations.

10. RECORDS AND MONITORING

- 1.1. Well-kept records are essential to good safeguarding practice. MVP Workshops is clear about the following:
 - 10.1.1. The need to accurately record any concern held about a learner within the company
 - 10.1.2. The status of such records
 - 10.1.3. When these records should be passed over to other agencies.

- 1.2. Any member of staff receiving a disclosure of abuse or noticing signs or indicators of abuse must email the details to the DSL. All records will be dated and will include the action taken. These notes are kept in a confidential electronic learner record.

11. ATTENDANCE AT SAFEGUARDING CONFERENCES AND CORE GROUPS

- 1.1. It is the responsibility of the DSL to ensure that MVP Workshops is represented or a report is submitted to any safeguarding conference called for learners on programme at MVP Workshops or previously known to them. Whoever attends should be fully briefed on any issues or concerns MVP Workshops has and be prepared to make decisions on registration at the end of the conference.
- 1.2. When a learner is the subject of a child protection plan, it is the DSL's responsibility to ensure that the learner is monitored regarding their attendance, welfare and presentation.
- 1.3. If MVP Workshops is part of the core group, then the DSL should ensure that MVP Workshops is represented at these meetings; that there is a record of attendance and issues discussed.
- 1.4. All concerns about the CP plan and / or the learner's welfare should be discussed and recorded at the core group meeting unless the learner is at further risk of significant harm before the meeting date. In this case the DSL must inform the learner's key worker **immediately** and then record that they have done so and the actions agreed.

12. YOUNG APPRENTICES AND LEARNERS ON WORK PLACEMENTS

- 1.1. Where young apprentices or under 18s who are on work placement are working on their own with the placement provider MVP Workshops will conduct an enhanced CRB check and an ISA check (if appropriate) on that individual.
- 1.2. MVP Workshops will provide guidance to placement providers as to appropriate action they should take if a learner discloses to them.
- 1.3. MVP Workshops will provide guidance to young apprentices or learners who are on work placement as to action they should take if they have any concerns about their placement.

13. RISK ASSESSMENT OF TRIPS AND VISITS

- 1.1. In order to safeguard learners, all activities that take place outside of MVP Workshops designated training centers must be prepared for and risk assessed in accordance with the policies and procedures in the staff handbook.
- 1.2. Failure by staff to adequately prepare for and risk assess any trips or visits may lead to disciplinary action under the disciplinary procedure.

14. SUPPORTING LEARNERS AT RISK

- 1.1. MVP Workshops recognizes that children who are abused or who witness violence may find it difficult to develop a sense of self-worth or view the world as a positive place.
- 1.2. MVP Workshops may be the only stable, secure and predictable element in the lives of children at risk. Nevertheless, whilst at MVP Workshops events their behavior may still be challenging and defiant or they may not actively participate.
- 1.3. MVP Workshops will endeavor to support pupils through:
 - 14.1.1. The curriculum to encourage self-esteem and self-motivation.
 - 14.1.2. The organizational ethos which promotes a positive, supportive and secure environment and which gives all learners and adults a sense of being respected and valued.
 - 14.1.3. A consistent approach agreed by all staff which will endeavor to ensure the learner knows that some behaviour is unacceptable but s/he is valued.
 - 14.1.4. Regular liaison with other professionals and agencies that support learners and their families.
 - 14.1.5. A commitment to develop productive, supportive relationships with parents and carers, whenever it is in the learner's best interest to do so.
 - 14.1.6. The development and support of a responsive and knowledgeable staff group, trained to respond appropriately in safeguarding situations.
 - 14.1.7. Recognition that statistically children with behavioural difficulties and disabilities are most vulnerable to abuse, so staff who work in any capacity with learners with profound and multiple disabilities, sensory impairment and / or emotional and behavioural problems will need to be particularly sensitive to signs of abuse.

- 14.1.8. Recognition that in a home environment where there is domestic violence, drug or alcohol abuse, learners may also be vulnerable and in need of support or protection.

15. ALLEGATIONS AGAINST STAFF

- 1.1. When an allegation is made against a member of staff, set procedures must be followed. It is rare for a child to make an entirely false or malicious allegation, although misunderstandings and misinterpretations of events do happen.
- 1.2. A child may also make an allegation against an innocent party because they are too afraid to name the real perpetrator. Even so, we must accept that some professionals do pose a serious risk to pupils and we must act on every allegation.
- 1.3. Staff who are the subject of an allegation have the right to have their case dealt with fairly, quickly and consistently and to be kept informed of its progress. Suspension is not the default option and alternatives to suspension will always be considered. In some cases, staff may be suspended where this is deemed to be the best way to ensure that children are protected. In the event of suspension, the school will provide support and a named contact for the member of staff.
- 1.4. Staff, parents and governors are reminded that publication of material that may lead to the identification of a teacher who is the subject of an allegation is prohibited by law. Publication includes verbal conversations or writing, including content placed on social media sites.
- 1.5. Allegations concerning staff who no longer work at the school, or historical allegations will be reported to the police
- 1.6. Where an allegation is made against any person working in or on behalf of the school that he or she 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; or
 - c. behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children (refer to statutory guidance for schools and colleges; Keeping Children Safe in Education (2016))

We will apply the same principles as in the rest of this document, as well as always follow the procedures outlined in the above-mentioned document. This includes allegations against staff in their personal lives.

- 15.7 Whilst we acknowledge such allegations, (as all others), may be false, malicious or misplaced, we also acknowledge they may be founded. It

is, therefore, essential that all allegations are investigated properly, in line with agreed procedures and outcomes recorded.

Initial Response to an allegation or concern:

Initial Action by person receiving or identifying an allegation or concern

- Treat the matter seriously and keep an open mind
- Make a written record of the information including the time, date and place of incident/s, persons present and what was said and sign and date this
- Immediately report the matter to the most senior person in the organization.

Initial Action by the DSL.

If the DSL is the subject of the allegation, then the senior management team will take the following action.

- Obtain written details of the concern or allegation, but do not investigate or interview child, adult or witnesses
- Contact the LADO within 1 working day
- Discuss with the LADO next steps using the London Child Protection Procedures Flow Charts Allegations/Concerns Against Staff
- Inform the management team of the allegation

Subsequent Action by the DSL

- Conduct a disciplinary investigation, if an allegation indicates the need for this.
- Contribute to the child protection process by attending professional strategy meetings.
- Maintain contact with the LADO.
- Ensure clear and comprehensive records regarding the allegation, and action taken and outcome are retained on the staff member's personnel file.
- Consider whether a referral to the DBS should be made.

16. WHISTLE BLOWING

1.1. We recognize that children cannot be expected to raise concerns in an environment where staff members do not do so.

1.2. Therefore, all staff should be aware of their duty to raise concerns about the attitude or actions of colleagues in accordance with the BCT whistle blowing policy.

17. COMPLAINTS

- 1.1. Complaints by young people can be made under the complaints procedure in the learner handbook.
- 1.2. Complaints by staff can be made under the complaints procedure in the staff handbook.

18. POLICY REVIEW

- 1.1. The MVP Workshops senior management team is responsible for ensuring the annual review of this policy. Previous versions of the policy are to be kept to demonstrate progress and developments made
- 1.2. The MVP Workshops senior management team is responsible for ensuring that the list of key contacts on the cover sheet is kept up to date.

Last updated	Next review	Person responsible
November 2019	November 2021	JV