



MacIntyre
Academies

Quest Safeguarding Policy and Procedures

Including the Protection of Children and Young People in accordance with national guidelines for under 18s

Persons Responsible:

CEO for the Trust /Academy
Trust Principals (localization)

Approval:

Trust Board Safeguarding Officer & Board
Chair (under delegated Authority)

Local customisation:

Academy Principal

Type of policy

Statutory, Aligned Trust wide

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Date adopted by Trust Board:

Sept 2026

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Sept 2026

Date of next review:

Aug 2027

Cycle of Review:

At least annually and sooner following statutory change, learning review or significant safeguarding development

Summary of Changes

Version	Purpose / Change	Responsibility	Date
MAT V6	Full revision for KCSIE 2026 and Working Together 2026. Incorporates all-staff Part One reading; Family Help terminology; revised child-on-child abuse framework; modern slavery; serious violence; updated mental health; robust DSL cover; enhanced information sharing; filtering and monitoring; AI; mobile phones; restrictive intervention; alternative provision; SEND barriers and DSL/SENCO liaison; volunteers and regulated activity; trainee teachers and third-party staff; revised Part Five harmful sexual behaviour / sexual harassment / sexual violence; MAT specialist and person-centred practice.	CEO	Sept 2026
MAT V5	Overarching changes throughout policy to comply with KCSIE 2025, and: - LGBT changed to LGBT+ to ensure broad application. - CLA changed to CiC (Children in Care) and the virtual school duty for children in kinship care added. - Removed references to Endeavour House.	Executive Leader for the Trust TLG	Sept 2025
Section	Specific changes: - Changes to some of the role titles for Important Contacts. 3 - References staff training, the arts, community links and filtering and monitoring as preventative measures. Addition of reference to the risks of generative AI. 5 - Inclusion of statement regarding in house systems of support and referral for mental health concerns. 6 - Reference to statutory guidance on RSE and Health Education (2025) & Working together to improve Attendance (2024). 9 - Reference to parental consent for information sharing. Reference to Early Help and Early Support simplified to support different LAs using different terminology. 10 - Reference added to radicalisation as a 'broad area'. Reference to the 'Shorespace'; website for teenagers at risk from harmful sexual behaviours. Change from 'sexual correctness' to 'sexual safety and harm'. - Reference to the importance of positive relationships with families. – - Addition of reference to disinformation, misinformation and conspiracy theories. - Addition of statement regarding curriculum support when learners reach adulthood whilst with Macintyre Academies and the law. - Addition of explicit reference to an 'appropriate adult' for learners interviewed by the police. 11 - The addition of criminal exploitation as a 'child on child' risk. 14 - Amended language from 'include social media' to 'may include...where in the public domain'. 15 - Addition of 'age' in relation to safeguarding checks on volunteers. 16 - Clear direction on the use of Alternative Provision. 17 - Reference added to the protection of premises plan for any hired facility.		

Important Contacts

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1. Policy Scope

Safeguarding and promoting the welfare of children is everyone's responsibility. For the purposes of this policy, "child" means anyone under the age of 18. This policy applies across MacIntyre Academies Trust (MAT) and to all employees, agency and supply staff, trainee teachers, volunteers, contractors, trustees, Local Advisory Board (LAB) members, visitors and other adults whose work brings them into contact with children through the Trust.

The policy applies to safeguarding concerns arising inside or outside an academy, including online, during transport, educational visits, work-related learning, alternative provision, off-site activities, extended services and any activity delivered on academy premises by or on behalf of MAT.

Each academy must contextualise this Trust policy to its local safeguarding partnership, referral arrangements, risks, cohort and site. Localisation must strengthen relevance and accessibility and must not weaken the Trust-wide safeguarding requirements set out here.

2. Policy Aims

- Provide a caring, positive, safe and stimulating environment in which children feel secure, respected and confident that adults will listen and act.
- Put the child's welfare, rights, communication, wishes, feelings and best interests at the centre of safeguarding decisions.
- Recognise that children attending specialist provision may face additional safeguarding risks or barriers to recognising, communicating or reporting harm, and provide reasonable adjustments and additional support accordingly.
- Identify concerns early and provide help and support as soon as problems emerge, including universal services, community-based early help and targeted early help through Family Help.
- Protect children from maltreatment, abuse, neglect and exploitation inside and outside the home, including online.
- Ensure that children learn about safeguarding, relationships, consent, online safety, exploitation and how to seek help through an accessible and developmentally appropriate curriculum.
- Work in partnership with children, families, education, health, social care, police and other agencies, sharing information lawfully and proportionately to safeguard children.
- Create a culture in which staff remain professionally curious, challenge unsafe practice and understand that safeguarding concerns can arise anywhere.

3. Our Trust Approach to Safeguarding

MacIntyre Academies Trust is a special education trust that puts children and families first. Safeguarding practice across the Trust is underpinned by our values of Compassion, Ambition and Partnership and by person-centred, specialist practice.

Compassion

We seek to understand each child as an individual, remain non-judgemental and professionally curious, and recognise that communication, behaviour and presentation may tell us something important about a child's experience. Compassion never means minimising risk, accepting unsafe practice or lowering expectations for a child's safety.

Ambition

Disability, complexity of need, communication difference or previous experience must never result in lower expectations for a child's safety, rights, relationships, wellbeing or future. We continually reflect on and improve safeguarding practice and expect high-quality, evidence-informed support.

Partnership

Safeguarding is most effective when children, families and professionals work together. We value the expertise of families and multidisciplinary colleagues while recognising that the child's welfare and best interests remain paramount. We will challenge respectfully where another person or agency response does not adequately protect a child.

Our safeguarding approach is person-centred, strengths-based, trauma-informed and communication-aware. Wherever possible, safeguarding is undertaken with children rather than simply for them. We seek to understand children's wishes and feelings in ways that are accessible to them and to ensure

that communication, sensory, cognitive, physical and emotional needs are considered throughout safeguarding assessment, planning and intervention.

4. Policy statement and safeguarding principles

Our MAT is committed to protecting children from harm and creating a culture in which children come first. The Trust Board, as proprietor, retains strategic responsibility for safeguarding arrangements across the Trust. Academy leaders and LABs provide local leadership, scrutiny and contextualisation within the Trust framework.

- We maintain an “it could happen here” attitude and act in the best interests of children.
- No single practitioner can have a complete picture of a child. Effective safeguarding depends on identifying concerns, sharing information and taking prompt, coordinated action.
- Children may not feel ready or know how to tell someone they are being abused or harmed. A lack of disclosure does not mean harm is absent.
- Behaviour and changes in presentation can be forms of communication. Staff must remain curious rather than attribute possible indicators of harm automatically to diagnosis, disability or behaviour.
- Understanding behaviour as communication must never result in harmful behaviour being minimised or another child’s experience of harm being overlooked.
- Attendance and safeguarding are closely linked. Unexplained, persistent or repeated absence can be a warning sign of abuse, neglect, exploitation or other risk.
- Safeguarding includes online safety, filtering and monitoring, safe recruitment, safe premises, appropriate physical contact, medical needs, mental health, attendance and safe use of alternative provision.
- Preventative safeguarding is a whole-Trust responsibility and includes curriculum, culture, relationships, family partnership, site security, technology, staff conduct and early support.
- All safeguarding concerns, decisions, actions and rationale must be recorded clearly and in a timely way.

Safeguarding education and prevention

Children will receive safeguarding education through a broad, balanced and accessible curriculum, including Relationships, Sex and Health Education and relevant personal, social, health and economic education. Teaching will be adapted to age, developmental level, communication profile and individual need and may require repetition, visual support, modelling, rehearsal and generalisation across contexts.

- healthy and respectful relationships, kindness and boundaries;
- consent and bodily autonomy at an appropriate developmental level;
- stereotyping, prejudice, racism, sexism, misogyny, misandry, homophobia and biphobia;
- recognising coercive or controlling behaviour and seeking help;
- sexual harassment, sexual violence and harmful sexual behaviour;
- online harms, misinformation, disinformation, pornography, harmful influencers and AI-generated content;
- making or sharing nudes and semi-nudes, including AI-generated or digitally altered images;
- how to report concerns in ways accessible to the individual child.

Online safety, filtering and monitoring, AI and mobile phones

Online safety is integral to safeguarding. MAT recognises the four broad areas of online risk: content, contact, conduct and commerce. Online risk includes harmful interaction with other users and with generative AI applications, and includes digitally altered or wholly AI-generated images.

Each academy will have appropriate filtering and monitoring arrangements. A member of the senior leadership team will hold responsibility for filtering and monitoring, supported by the DSL and IT support. Effectiveness will be reviewed at least once each academic year, including checks that filtering operates appropriately on internet-connected devices in relevant locations, and a record of the review will be retained. The review will be informed by an annual risk assessment reflecting the risks faced by the academy’s actual learner cohort.

MAT will use approved systems and follow Trust policy for safe and effective use of generative AI. Staff and learners must not use AI tools in a way that compromises confidentiality, data protection, safeguarding, professional boundaries or the dignity of any child.

Each academy will operate a mobile phone approach consistent with Trust expectations and current DfE guidance, balancing online safety, learning, accessibility and individual reasonable adjustments.

5. Equality, inclusion and anti-discriminatory safeguarding

Effective safeguarding is anti-discriminatory and anti-racist. MAT is committed to creating inclusive cultures, challenging racism and discrimination and recognising how social and economic circumstances, ethnicity, disability, sex and other characteristics can affect children's lives and safeguarding experiences.

Children will receive equally effective protection. Equality does not always mean identical treatment: some children require reasonable adjustments, additional communication support, specialist input or different protective arrangements in order to participate safely and have their voice heard.

Children with special educational needs and/or disabilities (SEND)

Children with SEND or certain medical or physical health conditions can face additional safeguarding challenges both online and offline. These risks do not arise simply because a child is disabled; they may arise from the interaction between a child's individual needs, the environment, the attitudes or actions of others and the systems intended to support them.

- Assumptions that indicators such as behaviour, mood, injury or distress relate to a child's condition without further exploration (diagnostic overshadowing).
- Greater risk of peer isolation, prejudice-based bullying or disproportionate impact from bullying without outward signs.
- Communication barriers or difficulty understanding or reporting what is happening.
- Difficulty recognising that behaviour towards them is abusive or unsafe.
- Need for intimate care or increased dependency on adults or peers for care, communication, mobility or access.
- Cognitive difficulties in understanding online content, relationships, fact and fiction, consent, boundaries or consequences.
- Sensory, emotional-regulation or developmental differences affecting how distress is expressed.
- Harm being overlooked because the child cannot provide a conventional verbal account.

Any report of abuse involving a child with SEND requires close liaison between the DSL/DDSL and the SENCO or named SEND lead. Where appropriate, familiar communication partners and multidisciplinary professionals should contribute to understanding the child's communication and support needs. This liaison must never delay a safeguarding referral or other action needed to protect a child.

A child's ability to raise a safeguarding concern must never depend upon spoken language, literacy or the ability to initiate a conventional disclosure. Staff will recognise communication through speech, signing, AAC, symbols, communication aids, eye gaze, gesture, behaviour, emotional presentation, changes in routine or physiological presentation, and information from adults who know the child's communication well.

Mental health

Mental health concerns can be safeguarding concerns in their own right and may also be indicators that a child has experienced or is at risk of abuse, neglect or exploitation. Staff are not expected to diagnose mental health conditions, but should notice significant changes in behaviour, sleep, social engagement, self-care, self-harm, suicidal ideation or other indicators and act promptly. Where a mental health concern is also a safeguarding concern, this policy must be followed and the DSL/DDSL informed without delay.

Children who are lesbian, gay or bisexual; children questioning their gender

Being lesbian, gay or bisexual is not in itself a safeguarding risk. Children who are lesbian, gay, bisexual, or perceived by others to be so, can be vulnerable to discriminatory bullying. MAT will provide respectful,

safe environments in which bullying is not tolerated and children have trusted adults with whom they can speak.

Where a child is questioning their gender, staff will take time to understand the child's thoughts and feelings, remain professionally curious about the full range of their experiences, consider potential vulnerabilities including bullying, family and peer relationships and mental health, and follow current statutory requirements and DfE guidance. Parents and carers will normally be involved as a priority unless doing so would create a safeguarding risk. Decisions will be made in the child's best interests while considering the welfare, safety and rights of all children affected.

Sport and single-sex arrangements

Where sport is separated by sex for safety or fairness in accordance with law and current guidance, academies will apply those requirements consistently. Any individual request will be considered carefully in the context of the child's best interests, equality duties, safety, fairness and the impact on other children.

6. Legislation and statutory guidance

This policy has been prepared with regard to Keeping Children Safe in Education 2026 (KCSIE 2026), which comes into force on 1 September 2026, and Working Together to Safeguard Children 2026. It must be read alongside applicable local multi-agency safeguarding arrangements and threshold/assessment protocols.

- Education Act 2002, including section 175, as amended;
- Education (Independent School Standards) Regulations 2014;
- Children Acts 1989 and 2004, as amended;
- Children and Social Work Act 2017;
- Safeguarding Vulnerable Groups Act 2006, as amended, and Crime and Policing Act 2026 provisions relating to regulated activity;
- School Staffing (England) Regulations 2009, as applicable;
- Female Genital Mutilation Act 2003 and Serious Crime Act 2015;
- Sexual Offences Act 2003;
- Counter-Terrorism and Security Act 2015 and current Prevent duty guidance;
- Domestic Abuse Act 2021;
- Equality Act 2010, including the Public Sector Equality Duty;
- Human Rights Act 1998;
- Data Protection Act 2018, UK GDPR and Data (Use and Access) Act 2025 ("data protection laws");
- Police and Criminal Evidence Act 1984 and Code C, including appropriate adult requirements;
- Working Together to Improve School Attendance, current statutory guidance;
- Relationships Education, Relationships and Sex Education and Health Education statutory guidance;
- DfE filtering and monitoring standards and digital and technology standards;
- DfE restrictive interventions, including use of reasonable force, in schools guidance;
- current statutory guidance on alternative provision and education for children with health needs who cannot attend school;
- MAT funding agreement, articles of association and Scheme of Delegation.

7. Definitions and terminology

Safeguarding and promoting the welfare of children includes providing help and support as soon as problems emerge; protecting children from maltreatment inside or outside the home, including online; preventing impairment of mental and physical health or development; ensuring safe and effective care; supporting children to grow up within their family network where possible and in their best interests; and taking action to enable children to have the best outcomes.

Child protection is part of safeguarding and concerns activity undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. Harm can occur inside or outside the home, in care settings and online.

Abuse is maltreatment of a child and may involve inflicting harm or failing to act to prevent harm. Abuse

can be perpetrated by adults or children and can occur in person or through technology. Appendix 1 provides further definitions.

For person-centred practice, MAT will normally use “child who has experienced harm” and “child alleged to have caused harm” or “child who has displayed harmful behaviour”. The statutory terms “victim” and “alleged perpetrator/perpetrator” may be used where necessary for legal, police, social-care or guidance purposes. Staff should use terminology the child is comfortable with wherever possible.

8. Responsibilities

8.1 Trust Board and Trust leadership

- The Trust Board, as proprietor, has strategic leadership responsibility for safeguarding arrangements and must ensure MAT complies with statutory safeguarding duties.
- The Trust Board will nominate a safeguarding officer/trustee to provide focused scrutiny and assurance while recognising that safeguarding remains a collective Board responsibility.
- The CEO / Strategic Safeguarding Lead will provide executive oversight, ensure resources and improvement action are available, and report safeguarding assurance to the Board.
- The Trust will maintain a Trust-wide Safeguarding Forum to share learning, quality assure practice and support consistent implementation across academies.
- The Trust will commission internal and/or external safeguarding review and assurance activity proportionate to risk, and will ensure recommendations are tracked to completion.
- The Trust will ensure appropriate safeguarding supervision/support is available to DSLs and key safeguarding staff handling complex casework.
- The Trust will maintain aligned policies for safer recruitment, low-level concerns, whistleblowing, equality and diversity, data protection, acceptable use/online safety, health and safety and Compassionate Schools.

8.2 Principal / Designated Safeguarding Lead (DSL)

Each academy will appoint an appropriate senior member of the leadership team as DSL. Within MAT, the Principal will normally hold this role. The DSL retains lead responsibility for safeguarding and child protection, including online safety and understanding filtering and monitoring systems. Operational duties may be delegated to trained deputies, but lead accountability cannot be delegated.

- Ensure the academy has an up-to-date, locally contextualised version of this policy available on its website.
- Ensure staff understand and follow safeguarding procedures and receive appropriate induction, training and updates.
- Manage referrals to children’s social care, police, Channel/Prevent, DBS and other agencies as required.
- Work with safeguarding partners and understand local criteria for action, local assessment protocols and escalation arrangements.
- Ensure safeguarding files are accurate, confidential, secure and transferred appropriately when children move settings.
- Ensure robust DSL cover arrangements operate whenever the academy is open and that safeguarding messages can be received and acted upon during closures/holidays where required.
- Ensure the SENCO/SEND lead is closely involved in safeguarding reports concerning children with SEND without delaying safeguarding action.
- Ensure safeguarding informs decisions on attendance, alternative provision, behaviour support, restrictive intervention and educational arrangements.
- Ensure children are taught how to keep themselves safe in accessible, developmentally appropriate ways.
- Ensure allegations against adults, including supply staff, trainee teachers, volunteers and contractors, are managed under Part Four of KCSIE 2026 and local LADO arrangements.
- Ensure safeguarding concerns are included in appropriate risk assessments and support plans, and that the child’s wishes and feelings are sought in accessible ways.

- Report safeguarding activity, patterns and assurance to the LAB and Trust in accordance with reporting arrangements.

8.3 Deputy Designated Safeguarding Leads (DDSLs)

DDSLs will be trained to the same standard as the DSL. Their duties may include receiving and reviewing concerns, making referrals, liaising with families and agencies, attending multi-agency meetings, supporting staff, maintaining records and contributing to training and quality assurance. Deputies act on behalf of the DSL but do not remove the DSL's lead responsibility.

8.4 Local Advisory Boards and safeguarding lead

- Provide local scrutiny and challenge regarding the implementation and impact of safeguarding arrangements.
- Ensure local safeguarding contacts and procedures are current and reflected in the academy version of this policy.
- Receive safeguarding reports at each LAB meeting and monitor actions arising from audits, visits, incidents and external review.
- Undertake safeguarding monitoring visits in accordance with Trust expectations and report findings to the LAB.
- Escalate material safeguarding concerns to the Trust Board Safeguarding Officer and/or CEO where necessary.

8.5 All staff

- Read and understand Part One of KCSIE 2026 in full and revisit it at least annually. The Part One overview is a supplementary quick reference and does not replace Part One.
- Read and understand this policy, the Staff Code of Conduct and relevant academy procedures.
- Complete safeguarding and child protection training at induction and regular updates thereafter, including online safety, filtering and monitoring expectations.
- Maintain professional curiosity and an "it could happen here" attitude.
- Record and report concerns promptly to the DSL/DDSL using the academy safeguarding system. If a child is in immediate danger or there is risk of significant harm, staff must act immediately and may make a direct referral.
- Know that they can make a referral directly to children's social care and/or police and that DSL unavailability must never delay protective action.
- Understand Family Help and local referral thresholds and be prepared to support multi-agency work after referral.
- Report concerns about adults, low-level concerns and safeguarding culture without delay using the routes in sections 13 and 22.
- Understand that safeguarding issues can overlap and that a child may experience multiple forms of harm at the same time.

8.6 Abuse of position of trust

Adults working in MAT must maintain conduct beyond reproach and comply with the Staff Code of Conduct. Under the Sexual Offences Act 2003, sexual activity between a person aged 18 or over in a position of trust and a child under 18 may be a criminal offence even where the child is above the age of consent and appears to consent.

9. Procedures and taking action

9.1 Local accountability

Each academy will follow the published arrangements, thresholds, assessment protocols and escalation procedures of the relevant safeguarding partnership. Where learners live in different local authority areas, the DSL will identify which authority and protocol applies and will liaise with both host and home/placing authorities where necessary.

9.2 Procedure for taking action

IMMEDIATE DANGER OR SIGNIFICANT HARM: Make an immediate referral to children's social care and/or the police. Anyone can make a referral. Do not wait for the DSL or DDSL to become available. Tell the DSL as soon as possible after taking action.

1. Notice, receive or become concerned about a safeguarding issue. Ensure immediate safety and emergency medical needs are addressed.
2. Record the concern promptly and factually on the academy safeguarding system, using the child's own words or communication as far as possible.
3. Inform the DSL/DDSL without delay. Where the concern is urgent, make direct verbal contact as well as recording it electronically.
4. The DSL/DDSL considers immediate safety, the child's wishes and feelings, local thresholds, existing plans, known risks, family involvement, SEND/communication needs and whether advice or referral is required.
5. Possible responses include internal/pastoral support, universal/community-based early help, a Family Help assessment, referral to statutory children's social care, police, health, Prevent/Channel or another specialist service.
6. All decisions, advice, referrals, actions, rationale and outcomes are recorded. The concern remains under review until the DSL is satisfied that appropriate support/protection is in place.

9.3 Reporting systems for children

Children will be able to raise concerns with any trusted adult. Reporting systems will be promoted, accessible, understood and matched to children's communication needs. Children will be told that concerns will be taken seriously, what will happen next and who information may need to be shared with.

A child's ability to report a concern must not depend on conventional speech or literacy. Communication methods may include AAC, signing, symbols, visual systems, communication passports, eye gaze, gesture, behaviour, changes in presentation or information from trusted adults who know the child well. Staff will remain professionally curious about unexplained marks, injuries, changes in behaviour, fear, dysregulation, sleep, appetite, toileting, attendance or engagement and will not assume these arise from diagnosis or disability.

9.4 Parents and carers

MAT values partnership with families. Where appropriate, the DSL will discuss concerns with parents/carers and involve them in support and planning. This must not happen where doing so may increase risk, undermine a police/social-care enquiry, lead to loss of evidence, or otherwise be contrary to the child's welfare. In such cases, the DSL will seek advice from statutory agencies where appropriate.

9.5 Emergency and continuity arrangements

During exceptional closures, public-health emergencies or other disruption, academies will identify children whose safeguarding vulnerability may increase and maintain appropriate contact, attendance, support and multi-agency arrangements. The DSL will keep decisions under review as circumstances change.

9.6 Safeguarding children with SEND

The specialist principles in section 5 apply throughout every safeguarding process. The DSL/DDSL will ensure reasonable adjustments are made to communication, interviews, meetings, risk assessments and support plans. A child's developmental understanding should inform how information is obtained and explained but must never be used to reduce protection.

9.7 Safeguarding children with medical conditions

An incident relating to a medical condition does not automatically require a safeguarding referral. A referral is required where the circumstances indicate increased risk of neglect, abuse or exploitation because of the medical condition, for example repeated failure to provide essential medication or withholding relevant information in a way that places the child at risk.

10. Recognising and responding to safeguarding concerns

10.1 Child suffering, likely to suffer harm, or in immediate danger

Make an immediate referral to children's social care and/or police. Anyone can make a referral. Inform the DSL as soon as possible. If there is uncertainty about threshold, seek timely advice using the local authority consultation route; uncertainty must not result in delay where a child may be at immediate risk.

10.2 If a child tells you about abuse or indicates harm

- Listen carefully and take the child seriously. Respond with empathy and remain calm.
- Allow the child time and use their preferred communication system. Do not require conventional spoken disclosure.
- Do not promise secrecy. Explain in accessible language that information must be shared with people who can help keep them safe.
- Use only minimal open or necessary clarifying questions to understand immediate safety. Staff may ask directly whether a child has been harmed and the nature of that harm where necessary, particularly where communication is adapted or expressive language is limited. Do not investigate, repeatedly question or ask leading questions.
- Record what was communicated, how it was communicated, the context, date/time and your response. Preserve original notes.
- Report immediately to the DSL/DDSL or make a direct referral if urgent.

10.3 Female genital mutilation (FGM)

FGM is illegal and a form of child abuse. Teachers have a personal statutory duty to report to police where, in the course of their professional duties, they discover that an act of FGM appears to have been carried out on a girl under 18. This does not apply to suspicion/risk alone, which must be reported immediately through safeguarding procedures. Staff must not examine children.

10.4 Radicalisation and Prevent

All concerns about radicalisation or terrorism must be reported promptly to the DSL/DDSL. Radicalisation can affect any child regardless of SEND, ethnicity, religion or background. The DSL will consider local Prevent/Channel arrangements, children's social care and police as appropriate. Emergency situations require 999.

10.5 Mental health concerns

Where a mental health concern is also a safeguarding concern, follow section 9.2 immediately. If a child is in immediate danger, call 999 or arrange urgent emergency healthcare. Staff should use evidence-informed interventions and seek specialist health support where indicated.

10.6 Harmful sexual behaviour (HSB)

Children's sexual behaviour exists on a continuum from developmentally expected behaviour through inappropriate/problematic and harmful sexual behaviour to sexual violence. HSB can be harmful both to the child displaying it and to those subjected to it. Technology-assisted HSB may involve pornography, sexualised communication, coercion, or making/sharing nudes or semi-nudes, including AI-generated content.

Assessment must consider chronological and developmental age, SEND, communication, understanding of consent and boundaries, power imbalance, coercion, repetition, impact, trauma and context. All HSB concerns must be reported to the DSL/DDSL without delay and responded to under KCSIE 2026 Part Five where relevant.

10.7 Sexual harassment and sexual violence

Sexual harassment and sexual violence can occur between children of any age and sex, in groups or one-to-one, online or face-to-face. It is never acceptable and must never be dismissed as banter, part of growing up or an inevitable feature of SEND. Responses will be child-centred, trauma-aware, proportionate, and coordinated with police/social care where required.

10.8 Online abuse and making/sharing nudes or semi-nudes

Online abuse can include bullying, sexual abuse, exploitation, grooming, coercion, harassment, financial exploitation, harmful content and criminal exploitation. All incidents involving the making or sharing of nudes or semi-nudes by children require a safeguarding response whether consensual or non-consensual and whether images are self-generated, digitally altered or wholly generated using AI. Staff must not view, copy, print, forward or save such imagery except where specifically permitted by current statutory/UKCIS guidance and directed by the DSL.

10.9 When a child may present a safeguarding risk to others

A child who harms or may harm another person may also have unmet safeguarding, developmental or welfare needs. Staff must protect others while avoiding deficit labels or assumptions. The response should seek to understand what happened, what the behaviour communicated, the child's level of understanding, the impact on others, and what teaching, therapeutic, environmental, behavioural or safeguarding intervention is required.

10.10 Children in Care, previously looked-after children, kinship care and care leavers

The DSL and Designated Teacher will ensure staff understand relevant care status, delegated authority, contact arrangements and the role of social workers, carers and Virtual School Heads. The academy will liaise with Virtual School Heads in relation to children in care, previously looked-after children and the non-statutory role relating to children in kinship care, including attendance and educational outcomes. For care leavers who remain in education, the DSL will liaise with the local authority Personal Adviser as necessary.

10.11 Children absent from education

Prolonged, repeated or unexplained absence may be a vital safeguarding warning sign, including for neglect, sexual or criminal exploitation and county lines. The academy will follow statutory attendance and children missing education guidance, respond early to emerging patterns, and integrate known safeguarding information into attendance decisions and escalation.

10.12 Children missing from home or care

Going missing from home or care can increase the risk of exploitation, abuse, trafficking, criminality and other harm. The academy will share information promptly with the relevant agencies and support return-home and risk-reduction planning where appropriate.

10.13 Young carers

Staff will be alert to the needs of young carers and recognise that caring responsibilities can affect attendance, attainment, behaviour and wellbeing. Early identification should lead to appropriate support through the academy, local authority, health or other partners.

10.14 Young people aged 18 or over - adults at risk

Some MAT learners remain in academy beyond their eighteenth birthday. Child safeguarding law applies until age 18; from 18, adult safeguarding legislation and local adult safeguarding procedures may apply. Our MAT's duty of care, internal reporting expectations, professional boundaries and commitment to safety remain. Curriculum and support will help learners understand their legal status, relationships and risks in a way matched to their understanding.

10.15 Children and the court / police interviews

Where a child is involved in the court or criminal justice system, the academy will provide appropriate support. Where required by PACE and circumstances, arrangements will be made for an appropriate

adult. Staff must not assume that family members are always able or appropriate to fulfil that role.

11. Child-on-child abuse (including harassment and violence)

Our MAT recognises that children can abuse other children and that child-on-child abuse may occur inside or outside an academy and online. All staff will maintain an “it could happen here” attitude even where no incidents have been reported.

Child-on-child abuse is a safeguarding concern and will never be dismissed as “banter”, an inevitable part of growing up, an inevitable consequence of SEND, or simply behaviour associated with a diagnosis. It can include bullying, prejudice-based and discriminatory bullying, abuse in intimate relationships, physical abuse, serious violence or threats with weapons, sexual violence, sexual harassment, coercing sexual activity, making or sharing nudes or semi-nudes, upskirting, initiation/hazing behaviours, financial abuse, stalking, coercive control, criminal exploitation and other harmful conduct.

11.1 Specialist context: SEND, development and intent

As a special education Trust, MAT recognises that interactions between children can be complex. Learners may have differences in communication, cognition, social understanding, sensory processing, emotional regulation, impulse control or their understanding of relationships, consent, boundaries, risk and consequences.

A child may display behaviour that causes significant harm without fully understanding its meaning or likely impact. Equally, a child’s SEND or developmental presentation must never be used to minimise behaviour that has harmed another child or to reduce the protection and support offered to that child. MAT therefore distinguishes, where appropriate, between child-on-child abuse, harmful behaviour and other child-on-child incidents when determining the most appropriate response. This distinction does not determine whether safeguarding action is required: any incident that raises a safeguarding concern will receive a safeguarding response.

In reaching a professional judgement the DSL will consider:

- nature and severity of the behaviour and actual or likely impact;
- whether behaviour was repeated, escalating or targeted;
- age, developmental level, communication, physical ability and social power;
- coercion, intimidation, grooming, exploitation or power imbalance;
- understanding of consent, relationships, boundaries and consequences;
- intent, where it can reasonably be established;
- whether behaviour occurred during distress, dysregulation or crisis;
- previous experiences of abuse, trauma or harmful behaviour;
- wider peer, family, community and online context;
- whether a criminal threshold may have been met;
- what action is required to prevent further harm.

Intent is relevant to understanding an incident and determining support and intervention. It is not determinative of whether another child has experienced harm.

11.2 Responding to child-on-child abuse or harmful behaviour

The response will prioritise immediate safety, take the wishes and feelings of children into account, preserve evidence where required, avoid unnecessary repeated accounts, and involve external agencies when thresholds are met. Depending upon complexity of need, the DSL/DDSL will liaise closely with the SENCO/SEND lead and, where appropriate, familiar communication partners and multidisciplinary professionals. This must not delay protective action.

- Put immediate safety arrangements in place for each affected child.
- Record the concern and rationale for categorisation. A behaviour record does not replace a

safeguarding record where safeguarding concerns exist.

- Do not investigate before seeking external advice where police/social-care involvement may be required. Internal fact-finding should occur only when appropriate and should not compromise statutory enquiries.
- Consider risk assessment and individual support plans for each child rather than one combined plan.
- Inform parents/carers at an appropriate stage unless doing so would create additional risk or conflict with police/social-care advice.
- Refer to children's social care, police, health, Family Help or specialist HSB services as appropriate.
- Keep arrangements under review and act on retaliation, bullying, exclusion, online circulation, repeat victimisation or emerging risk.

Support for the child who has experienced harm

- Identify a trusted adult and accessible route to seek help.
- Put in place an individual safety/support plan, including communication and sensory adjustments where needed.
- Consider therapeutic, pastoral, clinical or specialist support and external referral.
- Protect access to education and avoid placing the burden of safety solely on the child harmed.
- Review how the child feels about arrangements and amend them as needed.
- Support parents/carers where appropriate.

Support for the child alleged to have caused harm or who displayed harmful behaviour

It is important to understand why the behaviour occurred and whether the child has experienced harm themselves or has unmet developmental, communication, mental-health or safeguarding needs. Compassionate support must never minimise the impact on the child who experienced harm.

- Complete an individual risk and needs assessment and support plan.
- Provide a trusted adult and communication support.
- Consider Family Help, social care, health, therapeutic, HSB or specialist services.
- Provide targeted teaching/support on relationships, consent, regulation, boundaries and safety at a level the child can understand.
- Use consequences or disciplinary responses where appropriate alongside safeguarding, taking account of developmental understanding and SEND. Safeguarding must not be confused with punishment.
- Review progress and risk regularly.

Support for other children affected

Safeguarding consideration is not restricted to the two children directly involved. Witnesses, siblings, friends, peers or other children may feel unsafe, have seen or received online content, become subject to pressure or retaliation, or be affected by group dynamics. The DSL will consider whether any other child requires safeguarding assessment, reassurance, communication support, pastoral/therapeutic intervention or environmental changes.

12. Confidentiality, information sharing and records

Information sharing is vital to identifying and tackling abuse, neglect and exploitation and promoting children's welfare and educational outcomes. Data protection law does not prevent the sharing of information for safeguarding purposes. Staff must not allow fear about sharing information to stand in the way of protecting children.

MAT uses the term "data protection laws" to refer collectively to the Data Protection Act 2018, UK GDPR and Data (Use and Access) Act 2025. Safeguarding information will be shared on a lawful, necessary, proportionate and need-to-know basis. The DSL will consider risk when deciding whether, when and

how to share information and will record the decision and rationale.

Safeguarding records will be kept securely, separately from the main pupil record with an appropriate marker that additional confidential information exists. Access will be restricted to those who need it. When a child transfers setting, the child protection file will be transferred securely and separately from the main pupil file in accordance with KCSIE and local procedures, with confirmation of receipt obtained. The DSL should normally obtain consent where appropriate, but consent is not required where sharing is necessary to safeguard a child. Parents/carers must not be informed or consulted where this would increase risk, prejudice an enquiry or otherwise be contrary to the child's welfare.

13. Concerns or allegations about adults working with children

All concerns about adults working with children must be taken seriously, including conduct that appears minor but is inconsistent with the Staff Code of Conduct. Concerns may relate to employees, supply/agency staff, trainee teachers, volunteers, contractors or any other adult in a position of trust.

13.1 Concerns or allegations that may meet the harm threshold

An allegation may meet the harm threshold where a person has behaved in a way that harmed or may have harmed a child; possibly committed a criminal offence against or related to a child; behaved towards a child in a way indicating they may pose a risk of harm; or behaved or may have behaved in a way indicating they may not be suitable to work with children.

Concerns about a member of staff must be reported to the Principal without delay. Concerns about the Principal must be reported to the CEO or other person specified in Trust procedure. The case manager will follow KCSIE 2026 Part Four and consult/refer to the LADO within required timescales. No internal investigation should begin before appropriate LADO/police/social-care advice where this may compromise external processes.

Where concerns involve supply staff, trainee teachers or contracted staff, MAT will work jointly with the employing agency, training provider or contractor. The academy cannot simply cease using a person's services without ensuring the safeguarding concern is properly addressed and relevant referrals are considered.

13.2 Low-level concerns

A low-level concern means any concern - however small - that an adult working in or on behalf of the academy may have acted in a way inconsistent with the Staff Code of Conduct, including inappropriate conduct outside work, but which does not meet the harm threshold. "Low-level" does not mean insignificant. Concerns must be reported and managed under the MAT Low Level Concerns Policy so that patterns can be identified and action taken early.

13.3 Whistleblowing and direct referral

Staff who believe safeguarding concerns are not being addressed can use the Trust Whistleblowing Policy, escalate to the CEO/Trust Board Safeguarding Officer, contact the local authority/LADO/children's social care where appropriate, or use the NSPCC whistleblowing advice line. Immediate risk requires direct action and should not wait for internal escalation.

14. Safer recruitment

MAT will operate safer recruitment in accordance with KCSIE 2026 Part Three and the MAT Recruitment and Selection Policy. Safeguarding is central to recruitment, selection, pre-employment checks, induction and ongoing employment.

- Applicants will complete an application form including full employment history and explanation of gaps; CVs will not be accepted in isolation.
- Appropriate references, identity, qualifications, right-to-work and employment checks will be completed.
- Online searches may be undertaken on shortlisted candidates as part of due diligence, limited to information relevant to suitability to work with children and conducted in a way that reduces

discrimination risk.

- DBS, barred-list, prohibition, direction, overseas and other checks will be obtained as required for the role.
- At least one person involved in recruitment will have completed safer recruitment training.
- The Trust will maintain an accurate Single Central Record in accordance with KCSIE 2026.
- The Trust will consider DBS Update Service information and certificate issue dates in accordance with current statutory guidance; arbitrary certificate-age rules will not replace the required risk and eligibility assessment.
- Existing staff and volunteers will be subject to further checks where circumstances require and as permitted by law.
- Legal duties to refer to the DBS and/or Teaching Regulation Agency will be followed.

14.1 Regulated activity and volunteers - 2026 change

The Crime and Policing Act 2026 removes the former “supervision exemption” from regulated activity. Supervision does not of itself remove a volunteer from regulated activity. Any person volunteering in a school in a role involving teaching, training, instructing, caring for or supervising children on more than three days in a 30-day period, or overnight, is in regulated activity. MAT will apply the statutory definition in force at the time and obtain enhanced DBS and children’s barred-list information where required.

15. Other adults on site

15.1 Visitors

Visitors must sign in and out, wear identification and follow academy safeguarding, mobile-phone and online-safety arrangements. Identity and the purpose of the visit will be verified. Decisions about supervision and checks will be based on the visitor’s role, activity, frequency, access to children and statutory eligibility rather than the age of a DBS certificate alone. Adults whose identity or purpose cannot be established must be challenged and reported.

15.2 Volunteers

Before a volunteer starts, the academy will determine whether the role is regulated activity under the post-2026 definition and complete all required checks. Where a volunteer is not in regulated activity, the academy will undertake a proportionate risk assessment and obtain checks that are lawful and appropriate. A person known to be barred must never be permitted to undertake regulated activity.

15.3 Agency, supply and trainee staff

The academy will obtain written confirmation from the agency, employer or training provider that required safer recruitment checks have been completed, will verify identity on arrival and will confirm that the person presenting is the person for whom assurance was provided. MAT and third-party employers share safeguarding responsibilities and will cooperate fully where concerns arise.

15.4 Contractors

Contractors will be subject to identity and safeguarding checks appropriate to their work and contact with children. A contractor who is required to have a barred-list check but has not undergone one will not undertake regulated activity. Supervision and access arrangements will be risk assessed.

16. Alternative provision, off-site arrangements and work experience

Where an academy places a learner with an alternative provision provider, the academy remains responsible for that learner’s safeguarding and must satisfy itself that the provision is safe, appropriate and able to meet the learner’s needs.

- Obtain written assurance that appropriate safeguarding checks have been completed on staff and that the provider will notify the academy of staffing or other arrangements that may place the child at risk.
- Complete due diligence and quality assurance; an approved-provider list does not remove the commissioning academy’s responsibility.
- Know where the child is during school hours, including the address of the provider and any

subcontracted or satellite sites.

- Review every placement at least half-termly, and more frequently where safeguarding risk, attendance, presentation or individual needs indicate. The review must confirm regular attendance, continuing safety and continuing suitability.
- Immediately review safeguarding concerns and terminate/suspend a placement where necessary until concerns are satisfactorily addressed.
- For learners with SEND, review communication, sensory, medical, therapeutic and behavioural support; staff competence; safeguarding information-sharing; peer compatibility; transport; restrictive intervention; attendance; learner and family views; and progress towards relevant EHCP outcomes.
- Ensure every placement has clear outcomes agreed for and with the learner and that safeguarding information is shared on a need-to-know basis.

16.1 Work experience

Work-experience providers must have appropriate safeguarding arrangements. The academy will determine whether adults supervising learners are engaged in regulated activity under the current statutory definition and complete or obtain assurance of required checks. Risk assessments will reflect the learner's SEND, communication, medical needs, travel, environment and any one-to-one contact.

17. Third-party organisations and use of premises

Where MAT premises are hired or used by another organisation or individual, safeguarding requirements will form a condition of any transfer-of-control, lease or hire agreement. The Trust/academy will obtain assurance that appropriate child-protection and safer-recruitment arrangements are in place and that the provider knows how to liaise with the academy DSL. Failure to comply with safeguarding requirements may result in termination of the agreement.

Where services or activities are delivered on behalf of the academy, MAT's safeguarding arrangements apply. Where an external body operates independently, it must maintain its own compliant arrangements and cooperate with MAT where safeguarding concerns affect children using the premises, whether or not those children are on the academy roll.

Any services using the trusts premises out of school hours must read and understand our protection of premises arrangements in order to be prepared to manage risks that may occur during usage.

18. Training and safeguarding culture

Safeguarding training is part of an ongoing culture, not a one-off event. All staff receive safeguarding and child-protection training, including online safety and filtering/monitoring, at induction; training is regularly updated and staff receive updates at least annually and whenever necessary to maintain current knowledge.

DSLs and DDSLs will receive training appropriate to KCSIE Annex B at least every two years and will update knowledge and skills at regular intervals and at least annually. Trustees and LAB members will receive safeguarding training at induction and regular updates appropriate to their strategic role.

Because MAT is specialist provision, safeguarding learning will include communication and disclosure in SEND, diagnostic overshadowing, child-on-child abuse and HSB in the context of developmental difference, intimate/personal care, restrictive intervention, online vulnerability, exploitation, mental health, professional curiosity and person-centred risk assessment.

18.1 Restrictive intervention and reasonable force

There are limited circumstances in which reasonable force may be necessary to safeguard children. MAT rejects blanket "no contact" approaches where they would prevent staff from protecting or supporting a child. Any restrictive intervention must be lawful, necessary, proportionate and the least restrictive response reasonably available; it must never be punitive.

When risk involves children with SEND, mental health needs or medical conditions, staff must recognise additional vulnerability, make reasonable adjustments and consider equality duties. Positive and

proactive behaviour support, individual planning and partnership with families should reduce the need for restrictive intervention.

Restrictive interventions will be recorded and reviewed for patterns, injuries, distress and safeguarding implications. A change or increase in restrictive practice will prompt professional curiosity. Children's views and experience will be sought in an accessible manner and used to inform individual and organisational learning.

19. Robust DSL cover arrangements

Each academy will implement robust arrangements so safeguarding concerns are received, monitored and acted upon without delay when the DSL is absent. This will include trained deputy cover and use of the CPOMS system to log concerns. Staff may also email any DSL or DDSL directly, a confidential shared mailbox or equivalent secure system. Arrangements will identify who is responsible on each day, how urgent messages are escalated, how handover occurs and how out-of-term safeguarding messages are monitored where necessary. Our academies will ensure that the local authority have the contact details of key DSL trained staff during school closure times, in and out of term time.

20. Reporting, referrals, Family Help and local assessment protocols

All staff should be prepared to identify children who may benefit from Family Help. Staff must understand local arrangements for universal services, community-based early help, targeted early help through Family Help and statutory services, including section 17 and section 47 Children Act 1989 thresholds and how these apply to disabled children.

If statutory intervention is not required, the DSL/DDSL will normally lead liaison with agencies and an inter-agency assessment where appropriate. Cases will remain under review and be escalated if the child's situation does not improve or worsens.

Where a child is suffering or likely to suffer harm, referral to children's social care and, where appropriate, police must be immediate. Referrals should include relevant information about harm outside the home and the child's SEND, communication and support needs so that assessment is properly contextualised.

All concerns, discussions, decisions and reasons for decisions will be recorded. Referrers will follow up referrals if expected responses are not received and use local escalation procedures where they remain concerned.

21. Escalation of concerns

Each safeguarding partnership has an agreed professional escalation/disagreement procedure. MAT staff must maintain respectful working relationships with partners but must never allow professional deference to prevent challenge where a child's safety or welfare is at risk.

- Escalate initially through the allocated/duty practitioner and their manager where appropriate.
- Escalate manager-to-manager and senior-leader-to-senior-leader in line with local procedure.
- Record the concern, escalation, advice received, decisions, rationale and outcome.
- If a child remains at immediate risk, take direct protective action and contact emergency/statutory services as necessary.

22. Whistleblowing

Staff who are dissatisfied with the response to a safeguarding concern, or who are concerned about safeguarding practice or organisational failure, must use the MAT Whistleblowing Policy and/or safeguarding escalation routes. Staff may contact external bodies where necessary, including children's social care, LADO, police or the NSPCC whistleblowing advice line. No member of staff will be disadvantaged for raising a genuine safeguarding concern in good faith.

23. Supporting staff

Safeguarding work can be emotionally demanding. MAT will provide proportionate support, debrief and reflective/practice supervision for staff involved in significant or complex safeguarding cases, while maintaining confidentiality and professional boundaries. Staff can access line-management support, Trust wellbeing arrangements and the Employee Assistance Programme. Support for staff must never compromise the independence or integrity of safeguarding enquiries.

24. Monitoring compliance, quality and impact

This policy will be reviewed at least annually and sooner following statutory change, serious safeguarding learning, inspection findings or a significant change in Trust provision. The Trust Safeguarding Forum will contribute to review and implementation. Academy localisation will be checked annually.

Safeguarding assurance will consider both compliance and impact. Monitoring will include, as appropriate:

- internal/external audit and Trust/LAB safeguarding visits;
- quality of recording, referrals, escalation and information sharing;
- learner voice and accessibility of reporting systems;
- patterns in child-on-child abuse, HSB, bullying, discrimination and online harm;
- disproportionality by SEND, sex, ethnicity or other relevant characteristics;
- restrictive intervention, injuries and safeguarding links;
- attendance, children missing education and safeguarding vulnerability;
- alternative provision safety, attendance and half-termly review compliance;
- filtering and monitoring review and online-safety risk assessment;
- staff training, culture, low-level concerns and whistleblowing themes;
- outcomes for children and evidence that support plans reduce risk and improve safety.

Appendix 1. Categories of abuse and specific safeguarding issues

Abuse can be perpetrated by adults or children and can take place in families, institutions, communities or online. Harm includes non-physical ill treatment and the impact of seeing, hearing or experiencing domestic abuse. Children can also cause harm to family members, sometimes referred to as child-to-parent or child-to-caregiver abuse.

Physical abuse

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

Emotional abuse

Persistent emotional maltreatment causing severe and adverse effects on emotional development. It can include conveying worthlessness or inadequacy, verbal abuse such as criticism or belittling, silencing communication, developmentally inappropriate expectations, overprotection, preventing normal social interaction, witnessing ill-treatment, serious bullying, exploitation or corruption.

Sexual abuse

Involves forcing or enticing a child to take part in sexual activities whether or not the child understands what is happening. It may involve contact or non-contact activity, including rape, assault by penetration, sexual assault, involving children in sexual images, watching sexual activity, encouraging sexualised behaviour or grooming. It can occur online or be facilitated by technology. Sexual abuse can be committed by adults or children.

Neglect

Persistent failure to meet a child's basic physical and/or psychological needs, likely to cause serious impairment of health or development. It may include failure to provide food, clothing, shelter, supervision, medical care, emotional care or a suitable education.

Modern slavery and trafficking

Modern slavery is exploitation involving removal of personal freedom and imbalance of power and can include trafficking, domestic servitude and forced labour. It may involve organised crime or occur within a household/family. Staff must follow referral expectations in current statutory guidance.

Honour-based abuse, forced marriage and FGM

Honour-based abuse encompasses crimes or incidents committed to protect or defend perceived family/community honour, including FGM, forced marriage and other harmful practices. It may involve multiple perpetrators and wider family/community pressure.

Child sexual exploitation (CSE) and child criminal exploitation (CCE)

CSE and CCE occur where an individual or organised network/group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual or criminal activity, for something the child needs or wants, financial advantage/status of the perpetrator, or through violence/threats. Children may not recognise they are being exploited and may identify with the group or relationship. Children coerced into offending may be criminalised despite being victims.

County lines

County lines describes gangs and organised criminal networks exporting illegal drugs into one or more areas using dedicated phone lines or other communication. Children can be coerced to transport drugs or money and may face serious violence and exploitation.

Serious violence

Indicators can include increased absence, changes in friendships or older associates, decline in performance, self-harm, changes in wellbeing, unexplained injuries, gifts or possessions, weapon carrying, offending or criminal exploitation. Staff should consider when and where risk is highest,

including travel to/from school and after school.

Domestic abuse

Domestic abuse can be psychological, physical, sexual, financial or emotional. Children can be affected by seeing, hearing or experiencing its effects and can experience abuse in their own intimate relationships. Child/adolescent-to-parent violence and abuse can also form part of domestic abuse contexts. Safeguarding procedures apply to all children under 18 irrespective of whether behaviour meets the statutory domestic-abuse definition by age.

Radicalisation and extremism

Radicalisation is the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. MAT will fulfil the Prevent duty and act on concerns using safeguarding, Channel and police arrangements as appropriate.

Child-on-child abuse

Child-on-child abuse is addressed in section 11. It is a safeguarding issue for the child who experiences harm and may also identify safeguarding needs in the child alleged to have caused harm. It is preventable and must never be normalised.

Cybercrime

Children with particular skills or interests in computing may become involved in cyber-dependent crime, including unauthorised access, malware or denial-of-service activity. Staff should distinguish between safe curiosity and criminal activity and use safeguarding and specialist referral routes where concerns arise.

Appendix 2. Responding to a safeguarding concern

Stage	Required action
1. Concern	A child communicates harm, a member of staff notices a concern, or information is received from another source. Ensure immediate safety.
2. Immediate danger	If the child is suffering or likely to suffer harm, or is in immediate danger, contact children's social care and/or police immediately. Anyone can refer. Do not wait for the DSL.
3. Record	Record promptly and factually on the academy safeguarding system. Include the child's own words/communication and relevant context; preserve original notes.
4. Inform DSL/DDSL	Make direct contact for urgent concerns as well as recording electronically.
5. Assess and decide	DSL/DDSL considers child's wishes/feelings, local thresholds, SEND and communication, existing plans, family involvement, immediate risk and external advice.
6. Action	Possible responses: internal support; universal/community early help; Family Help assessment; children's social care; police; health; Prevent/Channel; specialist service.
7. Follow up	Record decisions and rationale, confirm referral receipt/outcome, review risk and escalate if the response does not adequately protect the child.

Appendix 3. Responding to a child who communicates about actual or likely harm (sometimes called a disclosure): the 6 Rs

1. Receive

- Listen without displaying shock or disbelief.
- Take what the child communicates seriously.
- Allow the child to use their usual communication method and give them time.

2. Reassure

- Acknowledge that telling or communicating was important.
- Do not promise confidentiality; explain who needs to know and why.
- Do not make promises you cannot keep.
- Avoid condemning the person alleged to have caused harm.

3. React

- Allow free recall but do not press for detail beyond what is minimally necessary for immediate safety.
- Use open or necessary clarifying questions; do not ask leading questions or repeatedly question the child.
- Do not make assumptions about the child's feelings or intent.
- Explain what will happen next in a way the child can understand.

4. Record

- Record exactly what was communicated and how, as soon as possible.
- Record date, time, place, non-verbal communication and the words/signs/symbols used as accurately as possible.
- Separate observed facts from interpretation.
- Retain original notes and sign/date/time the record.

5. Remember

- Inform the DSL/DDSL immediately unless you have made a direct emergency referral.
- Do not assume parents/carers are uninvolved or safe to contact.
- Investigation rests with statutory agencies; school staff should not conduct their own investigative questioning.

6. Regulate and seek support

After ensuring the child is safe and the concern is reported, access appropriate professional support or debrief for yourself. Maintain confidentiality and do not discuss the matter with colleagues who do not need to know.

Appendix 4. Academy localisation schedule

Before publication, each academy must complete the following and review it at least annually or whenever arrangements change.

Local requirement	Academy entry
Academy name	Quest Academy
Principal / DSL	Laura Thackaberry
DDSL(s)	Gemma Batchelor
SENCO / SEND lead	Ben Makins
Designated Teacher for Children in Care	Abby Thomas
Senior Mental Health Lead	Rhiann McGarrity
LAB safeguarding lead	Brin Linsell
LADO details	01926 743433 LADO@warwickshire.gov.uk
Children's social care / MASH / front door	triagehub@warwickshire.gov.uk 07926414144 (Warwickshire County Council) 0116 305 8727 (Leicestershire County Council) Birmingham Family Connect (Birmingham County Council) 0300 126 7000 (West Northamptonshire Council) 01536 805 244 (North Northamptonshire Council) earlyhelp@coventry.gov.uk 0800 887 0545 – Coventry City Council
Local threshold / assessment protocol	Spectrum-of-Support-2025_V1_18-11-2025.pdf
Local professional escalation procedure	Warwickshire Professional Escalation Procedure
Prevent / Channel route	Geoff Thomas Geoffthomas@warwickshire.gov.uk or communitysafety@warwickshire.gov.uk .
Adult safeguarding route for learners 18+	Warwickshire Adult Safeguarding
Safeguarding recording system	CPOMs
DSL cover / shared mailbox / on-call arrangements	Email Laura Thackaberry and Gemma Batchelor (page 3) and if out of term time, this will direct you to who is on call.
Filtering and monitoring responsible SLT member	Ben Makins – Deputy Principal

Local requirement	Academy entry
Academy-specific contextual safeguarding risks	Extra familial harm arising from CSE, CCE and online harm are our biggest risk areas. Also due to the needs of learners self-harm can be a risk for some.
Local alternative provision providers / assurance process	Quality Assurance evidence is robust and available on Request
Local transport safeguarding arrangements	WCCC-2087472573-1166
Date localisation checked and approved by Principal/DSL and LAB	01/10/26

Appendix 5

Trust and academy policies to read alongside this policy

- MAT Compassionate Schools Policy
- MAT Equality and Diversity Policy
- MAT Recruitment and Selection Policy
- MAT Low Level Concerns Policy
- MAT Whistleblowing Policy
- MAT Staff Code of Conduct
- MAT Data Protection Policy
- MAT Health and Safety Policy
- MAT Acceptable Use / ICT and online safety arrangements
- Academy Behaviour Support / Positive Behaviour Support Policy
- Academy Attendance Policy
- Academy Anti-Bullying Policy
- Academy Medical Conditions / First Aid arrangements
- Academy Restrictive Intervention / Reasonable Force arrangements
- Academy Relationships, Sex and Health Education arrangements

Core statutory and national references

- Keeping Children Safe in Education 2026 - Department for Education - effective 1 September 2026
- Working Together to Safeguard Children 2026 - HM Government
- Working Together to Improve School Attendance - Department for Education
- Restrictive interventions, including use of reasonable force, in schools - Department for Education
- Meeting digital and technology standards in schools and colleges - filtering and monitoring standards
- Alternative Provision statutory guidance and current national standards for non-school alternative provision
- Information sharing advice for safeguarding practitioners
- Prevent duty guidance and Channel guidance
- Education (Independent School standards) Regulations 2014