

Noor ul Islam

INSPIRE MADRASSA

Inspire
Madrassa

Part 1.

Safeguarding Policy Framework

Named personnel with designated responsibility for Safeguarding

Academic Year	Designated Safeguarding Lead	Deputy Designated Safeguarding Lead	Nominated Safeguarding Governor	Chair of Governors
2021-2022	Zafar Syed	Position Vacant	Mohammad Khan (Resigned Dec 2025) – Position Vacant.	N/A

Named personnel with designated responsibility regarding allegations against staff

Academic Year	Designated Senior Manager (this would normally be the Head teacher)	Deputy Designated Senior Manager	Chair of Governors	Nominated Governor
2021-2022	Zafar Syed	Position Vacant	N/A	Mohammad Khan

Dates the Safeguarding Policy is reviewed and dates of any safeguarding audits

Review Date	Changes made/Details of action plan	Due Date	By Whom
April 2022	Updated to reflect new model policy issued by LA	Sep 2022	Zafar Syed
August 2022	Updated based on the new model policy from Waltham Forest LA	Sep 2022	Zafar Syed
September 2022	Updated to reflect new KCSIE 2019 guidance	Sep 2022	Zafar Syed
September 2023	Updated to reflect new KCSIE 2023 guidance	Oct 2023	Zafar Syed
September 2024	Updated to reflect new KCSIE 2024 guidance	Aug 2025	Zafar Syed
September 2025	Updated to reflect new KCSIE 2025 guidance	Aug 2026	Zafar Syed
November 2026	Updated to reflect new KCSIE 2026 guidance	Sep 2027	Zafar Syed

Dates of Staff training and details of course title and training provider			
Date	**Course**	**Delivered by**	**Attended by**
30/1/2020	**DSL Safeguarding Training**	Waltham Forest Ann Stuart	Zafar Syed
01/09/2021	Designated Safeguarding Training	Hawa Moreea	All Staff
22/03/2023	Advanced DSL Training	Waltham Forest Nick Pratt	Zafar Syed
24/04/2023	Safeguarding Training	Zafar Syed	All Staff
04/09/2023	Safeguarding Training	Zafar Syed	All Staff
07/05/2024	Safeguarding Training	Zafar Syed	All Staff
01/09/2026	Safeguarding Training	Zafar Syed	All Staff

Key Setting Information

Name of Setting	Noor Ul Islam Inspire Madrassa
Setting Type	Inspire Madrassa
Setting Main Phone Number	020 8558 0786
Setting Main Email	madrassa@noorulislam.org.uk
Setting Address	717-723 High Road, Leyton, London, E10 5AB
Designated Safeguarding Lead	Zafar Syed - 020 8558 0786 zafar.syed@noorulilsam.org.uk
Deputy Designated Safeguarding Lead	TBC – 020 8558 0786
Named Person responsible for Allegations against staff in setting	Manager – Zafar Syed – 020 8558 0786 zafar.syed@noorulislam.org.uk
Chair of Governors	N/A
Governance Lead for Safeguarding	N/A

1. Purpose & Scope

Children learn and thrive best when they are healthy, safe and secure, when their individual needs are met, and when they have positive relationships with the adults caring for them. Noor Ul Islam Inspire Madrassa aims to offer an environment where children feel welcome, safe, stimulated and where children are able to enjoy learning and developing in confidence.

In order to take all necessary steps to keep children safe and well, Noor Ul Islam Inspire Madrassa will safeguard children; ensure the suitability of adults who have contact with children; promote good health; manage behaviour; and maintain records, policies and procedures.

The purpose of this policy is to safeguard and promote the welfare of children at Noor Ul Islam Inspire Madrassa. Safeguarding and promoting the welfare of children is defined for the purposes of this policy as:

- Protecting children from maltreatment;
- Preventing impairment of children's health or development;
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care;
- Taking action to enable all children to have the best outcomes.

This policy applies to all staff, including paid staff, volunteers and sessional workers, agency staff, one-off visitors, students or anyone working on behalf of Noor Ul Islam Inspire Madrassa.

This policy relates to all children (anyone up to their 18th birthday) with whom Noor Ul Islam Inspire Madrassa works.

This policy will be readily available via our website www.noorulislam.org.uk/madrassa for professionals, parents and partners. The policy will be given to parents prior to children commencing, and following each update. Support and consideration will be given to those parents for whom English is not a first language.

All staff must read, understand and put the policy into practice. Furthermore, all staff must read the statutory guidance Keeping Children Safe in Education (2026) and Working Together to Safeguard Children (2026). The DfE departmental guidance What to do if you're worried a child is being abused (2015) is also highly recommended.

Education professionals are an important part of the wider safeguarding system for children. This system is described in statutory guidance Working Together to Safeguard Children (2026).

Noor Ul Islam Inspire Madrassa believes that no child or young person should ever experience abuse, maltreatment or neglect of any kind, and that it is our responsibility to keep children safe. We are committed to practise in such a way that both prevents and protects.

We recognize our role as educators to support parents and the community at wide to develop more effective parenting and behaviour management strategies, and to challenge any behaviour that puts children at risk.

Guiding principles

Be observant and alert to signs of abuse

- You are in a unique position to be able to observe signs of abuse or neglect, or changes in behaviour which may indicate a child may be being abused or neglected.

Be curious and question

- Be alert to the signs of abuse and neglect, and question behaviour / accounts of children and parents/carers; don't necessarily take what you are told at face value.

Ask for support

- Safeguarding is most effective when it is a collaborative process.
- Make sure you know where to turn to if you need to ask for help.
- If no help is at hand, be sure that you refer to children's social care (e.g., MASH or LADO) or to the police/ambulance without delay.

Follow local and setting policy & guidance

- You must work within Waltham Forest's multi-agency safeguarding arrangements as set out within the local strategic partnership boards, including Waltham Forest safeguarding children board.

Always be guided by the following key principles

- All children have a right to be safe and should be protected from all forms of abuse and neglect
- Safeguarding children is everyone's responsibility
- It is better to help children as early as possible, before issues escalate and become more damaging
- Work together with other agencies: children and families are best supported and protected when there is a coordinated response from all relevant agencies.

Constructive process of inquiry and support

- Don't let other considerations, like the fear of damaging relationships with adults, get in the way of protecting children from abuse and neglect.
- If you think that referral to children's social care is necessary, you must not delay.
- See child protection and safeguarding as the beginning of a process of inquiry, not as an accusation or punishment.

Everyone's Responsibility

Safeguarding and promoting the welfare of children is everyone's responsibility. Everyone who comes into contact with children and their families and carers has a role to play in safeguarding children.

If children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.

No single professional can have a full picture of a child's needs and circumstances.

The voice of the child

All professionals should make sure their approach is child-centred. This means that they should consider, at all times, what is in the best interests of the child. We must try to understand the lived experience of a given child in a given classroom/family/neighbourhood at this moment; this necessarily involves giving the child a voice within their own safeguarding. Even non-verbal children have can express preference and wishes, and it is our job as professionals to ensure that these are understood and incorporated in our plans.

Obligatory practice for ALL staff

The statutory guidance Keeping Children Safe in Education (2026) and Working Together to Safeguard Children (2026), and departmental guidance What to do if you're worried a child is being abused (2015) are each clear that **all staff**:

- is individually responsible for safeguarding
- must be able to identify concerns (Early Help / Child in Need / Child Protection / Allegations Against Professionals)
- must be familiar with internal reporting procedures and processes (reporting safeguarding concerns to DSLs, and allegations only to Manager/Proprietor/similar)
- must refer concerns to children's social care in the absence of DSLs
- must ensure that all safeguarding concerns are shared promptly with DSLs
- must be able to challenge professional safeguarding decisions internally and with other agencies
- must refer a case if disagree with DSL not to refer, with respect and transparency
- must be able to whistleblow when required

Each member of staff, regardless of where they work within the organizational structure of a setting must take responsibility for reading and reviewing the safeguarding policies.

Equality Statement

We are committed to contributing to a fairer society by promoting equality and good relations for children, young people, parents and carers, partner organisations, staff and job applicants. We believe in giving every individual the opportunity to fulfil their potential. We are committed to treating all individuals with respect and dignity.

Research clearly shows that **diversity in safe environments** produces more creative and effective work products than homogenous groups. We recognise that differences and diversity enrich society and practice, and celebrating diversity is always at the heart of our practice.

All staff are committed to anti-discriminatory practice, and to giving all children and young people the same offer of support, response and protection regardless of:

- Age
- Cultural identity
- Disability / ability / SEND
- Ethnicity
- Financial status
- Gender
- Gender identity (e.g., Trans / gender nonspecific)
- Gender reassignment status
- Health status (e.g., mental health / HIV / substance misuse)
- Housing status
- Immigration status
- Political beliefs
- Pregnancy / maternity / parenthood
- Sexual orientation (e.g., LGBTQ)
- Social class
- Social status
- Relationship status
- Religion / beliefs

2. Requirements for ALL Staff

Noor Ul Islam Inspire Madrassa is committed to safeguarding and promoting the welfare of all of its pupils. Each pupil's welfare is of paramount importance.

Systems for ALL staff

As such, **ALL staff** should be aware of systems within their school or college which support safeguarding. These should be covered during training sessions and should be explained as part of staff induction. This should include:

- the safeguarding policy;
- the behaviour policy;
- the staff behaviour policy (code of conduct);
- the safeguarding response to children who go missing from education; and
- the role of the designated safeguarding lead (including the identity of the designated safeguarding lead and any deputies).
- **Part 1** and **Annex A** of Keeping Children Safe in Education (2026) and **Chapter 1** of Working Together to Safeguard Children (2026)

Support for ALL Staff

In order to achieve this, all staff will receive:

- appropriate safeguarding and child protection training which is regularly updated.
- In addition, all staff should receive safeguarding and child protection updates (for example, via email, e-bulletins and staff meetings), as required, and at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.
- **Training will ensure that ALL** staff:
- Are aware of their local early help process and understand their role in it.
- Are aware of the process for making referrals to children's social care and for statutory assessments under the Children Act 1989
- Are aware of the process for making referrals of allegations against professionals to the local authority's **Designated Officer** (usually known as the LADO)
- Know what to do if a child tells them he/she is being abused or neglected.
- Know how to manage the requirement to maintain an appropriate level of confidentiality.

ALL staff to demonstrate particular alertness to potential for need in children who:

- Are disabled and has specific additional needs
- Have special educational needs (whether or not they have a statutory EHC plan)
- Are young carers
- Are showing signs of anti-social or criminal behaviour, including gangs, organised crime groups
- Are frequently missing/goes missing from care or from home
- Are misusing drugs or alcohol themselves
- Are at risk of modern slavery, trafficking or exploitation
- Live in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse
- Have returned home to their family from care
- Are showing early signs of abuse and/or neglect
- Are at risk of being radicalised or exploited
- Are a privately fostered child.

ALL Staff Awareness of Indicators

- **All** staff should be aware of indicators of abuse and neglect so that they are able to identify cases of children who may be in need of help or protection.
- Departmental advice What to Do if You Are Worried a Child is Being Abused - Advice for Practitioners (2015) provides more information on understanding and identifying abuse and neglect
- Staff working with children are advised to maintain an attitude of **'it could happen here'** where safeguarding is concerned.
- When concerned about the welfare of a child, staff should always act in the **best** interests of the child.
- Knowing what to look for is vital to the early identification of abuse and neglect.
- If staff are unsure, they should **always** speak to the designated safeguarding lead (or deputy).

Information sharing

The Data Protection Act 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

Effective sharing of information between practitioners and local organisations and agencies is essential for early identification of need, assessment and service provision to keep children safe.

Clear and comprehensive advice on information sharing can be found in Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers 2018.

Serious case reviews (SCRs) have highlighted that missed opportunities to record, understand the significance of and share information in a timely manner can have severe consequences for the safety and welfare of children.

Practitioners should be proactive in sharing information as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to local authority children's social care (e.g. they are being supported as a child in need or have a child protection plan). Practitioners should be alert to sharing important information about any adults with whom that child has contact, which may impact the child's safety or welfare.

- Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children, which must always be the paramount concern.
- Practitioners must never assume that someone else will pass on information that they think may be critical to keeping a child safe, even if another has agreed to make a referral.
- All practitioners should be particularly alert to the importance of sharing information when a child moves from one local authority into another, due to the risk that knowledge pertinent to keeping a child safe could be lost
- Practitioners should aim to gain consent to share information, but should be mindful of situations where to do so would place a child at increased risk of harm.
- Information may be shared without consent if a practitioner has reason to believe that there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner. When decisions are made to share or withhold information, practitioners should record who has been given the information and why

Practitioners must have due regard to the relevant data protection principles which allow them to share personal information, as provided for in the Data Protection Act 2018 and the General Data Protection Regulation 2016 (*GDPR*).

To share information effectively:

- all practitioners should be confident of the processing conditions under the Data Protection Act 2018 and the General Data Protection Regulation 2016 (*GDPR*).

- which allow them to store and share information for safeguarding purposes, including information which is sensitive and personal, and should be treated as 'special category personal data'
- Practitioners should always report a breach of data protection to their lead data officer in the organisation so that it can be considered for referral to the Information Commissioner's Office.

The Data Protection Act 2018 allows practitioners to share information without consent when –

- it is not possible to gain consent,
- it cannot be reasonably expected that a practitioner gains consent
- if to gain consent would place a child at risk

The seven golden rules to sharing information

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are **not barriers to justified information sharing**, but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. **Be open and honest** with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. **Seek advice from other practitioners, or your information governance lead**, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4. **Where possible, share information with consent**, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.
5. **Consider safety and well-being**: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. **Necessary, proportionate, relevant, adequate, accurate, timely and secure**: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see principles).
7. **Keep a record of your decision and the reasons for it** – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

3. The Legislative & Guidance Framework

All Staff & Volunteers

Everyone working in or for **Noor Ul Islam Inspire Madrassa** shares an objective to help keep children and young people safe by contributing to:

- providing a safe environment for children and young people to learn and develop
- identifying children and young people who are suffering or likely to suffer significant harm, and taking appropriate action with the aim of making sure they are kept safe both at home and in our school/setting

This policy adheres to the London Child Protection Procedures. This policy has been drawn up on the basis of legislation aimed to protect children:

- Children Act 1989
- UN Convention of the Rights of the Child 1991
- General Data Protection Regulations 2016
- Data Protection Act 2018
- Human Rights Act 1998
- Education Act 2002
- Sexual Offences Act 2003
- Children Act 2004
- Safeguarding Vulnerable Groups Act 2006
- Childcare Act 2006
- Protection of Freedoms Act 2012
- Children & Families Act 2014

It also should be applied alongside the following statutory guidance:

- Keeping Children Safe in Education (2026)
- Working together to safeguard children: A guide to interagency working to safeguard and promote the welfare of children 2023
- Early Years Foundation Stage (EYFS) (2025)
- Special Educational Needs & Disability (SEND) code of practice for 0 to 25 years: Statutory 2015
- Section 39 (1) (b) of the Childcare Act 2006 places a duty on childcare and early years providers to comply with the safeguarding and welfare requirements of the Statutory Framework for the Early Years Foundation Stage 2017. All childcare providers should also to refer to Keeping Children Safe in Education (2026)

And departmental guidance:

- What to Do if You Are Worried a Child is Being Abused - Advice for Practitioners (2015)
- Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers 2018

See further safeguarding guidance for education settings.

Basic Statutory Requirements

- All staff must read Part One of Keeping Children Safe in Education (2026) guidance.
- s175 of the Education Act 2002 requires local education authorities and the governors to make arrangements to ensure that their functions are carried out with a view to safeguarding and promoting the welfare of children.
- s157 of the same act and the Education (Independent Schools Standards) (England) Regulations 2003 require proprietors of independent schools (including academies and city technology colleges) to have arrangements to safeguard and promote the welfare of children who are pupils at the school.
- Keeping Children Safe in Education (2026) is issued under s 175 of the Education Act 2002, the Education (Independent School Standards) Regulations 2010 and the Education (Non-Maintained Special Schools) (England) Regulations 2015. Schools and colleges must have regard to this guidance when carrying out their duties to safeguard and promote the welfare of children.

4. Governance & Leadership

Everyone is individually responsible for safeguarding. However, safeguarding is never a clear-cut matter, and requires expertise and experience to guide practice.

Therefore, alongside this shared individual responsibility, there should be a safeguarding lead within each setting to support both staff and children & young people, and to monitor compliance, ensure adequate and appropriate training, act as a liaison with other agencies and make difficult and complex decisions.

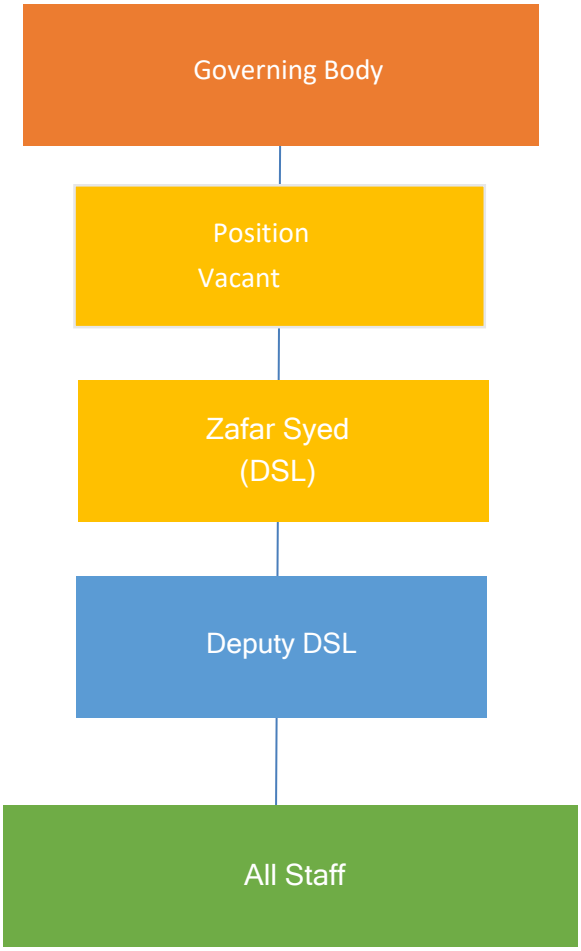
In turn, the safeguarding leadership within **Noor Ul Islam Inspire Madrassa** should be held to account by the governing body for safeguarding.

Quality Assurance

We make our requirement to share accurate, appropriate and timely section 11 / section 3 audit data with the local authority a priority.

We also engage in support and training from the local authority and other agencies when appropriate.

The Safeguarding Governance structure in **Noor Ul Islam Inspire Madrassa**



Governing Body

The governing body will appoint a Lead for Safeguarding for strategic oversight and governance of safeguarding practice and policies.

Where services or activities are provided on the setting premises by another body, the body concerned has appropriate policies and procedures in place in regard to safeguarding children and liaises with the school/setting on these matters where appropriate.

> *'Governing bodies and proprietors (includes management committees) must ensure that they comply with their duties under legislation. They must have regard to this guidance, ensuring that policies, procedures and training in their schools or colleges are effective and comply with the law at all times.*
>
> *Governing bodies and proprietors should have a senior board level (or equivalent) lead to take leadership responsibility for their school's or college's safeguarding arrangements.'*

Key Tasks of Governing Bodies & Proprietors

It is the task of the governing body to test and challenge **Noor Ul Islam Inspire Madrassa** 's senior leadership team.

See Chapter 2 of Working together to safeguard children: A guide to interagency working to safeguard and promote the welfare of children 2018: 'Organisational Responsibilities'; and Part 2 of Keeping Children Safe in Education 2024 "Management of Safeguarding'.

Here are some of the Safeguarding areas of which governors / trustees should have oversight:

- Ensure effective policies and procedures
- Appoint senior DSLs
- Ensure effective multi-agency working
- Information sharing guidance
- Safeguarding training including induction
- Online safety (also see Annex C)
- Opportunities to teach safeguarding
- Inspection
- Safer Recruitment
- Concerns about a member of staff
- Peer on Peer abuse
- Child-focused practice
- Safe Child's wishes
- LAC & previously LAC
- Virtual Head
- Care Leavers
- SEND
- Reasonable force (also see use of reasonable force in schools guidance)
- Safer Recruitment

Annex B of Keeping Children Safe in Education (2024) states that:

- *Governing bodies, proprietors and management committees should ensure an appropriate senior member of staff, from the school or college leadership team, is appointed to the role of designated safeguarding lead.*
- *The designated safeguarding lead should take lead responsibility for safeguarding and child protection (including online safety). This should be explicit in the role holder's job description.*
- *This person should have the appropriate status and authority within the school to carry out the duties of the post. They should be given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and child protection matters, to take part in strategy discussions and inter-agency meetings, and/or to support other staff to do so, and to contribute to the assessment of children.*

Safeguarding Leadership

Just as we act as role models for children and young people, and impart leadership skills to them, so too does **Noor Ul Islam Inspire Madrassa**'s leadership team with all staff, sharing and passing on skills and knowledge and supporting the learning of others.

The Designated Safeguarding Lead Role

This person should have the appropriate status and authority within the school to carry out the duties of the post. They should be given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and child protection matters, to take part in strategy discussions and inter-agency meetings, and/or to support other staff to do so, and to contribute to the assessment of children.'

Key Tasks of the Designated Safeguarding Lead (DSL) Role

- Work with others
- Raising Safeguarding Awareness with children, professionals and parents
- Managing the child protection file & transfers for incoming and leaving pupils
- Ensure availability and cover
- Managing referrals to children's social care and the Channel programme
- Supporting staff around referrals
- Policy development, review & compliance
- Raising awareness
- Managing annual safeguarding training of all staff
- Take a lead on decision-making in relation to blemished DBS disclosures of candidates and referring cases to the DBS

See Annex B of Keeping Children Safe in Education (2026) for details of the role of the Designated Safeguarding Lead.

School Transfers: child protection file

- Where children leave **Noor Ul Islam Inspire Madrassa** the designated safeguarding lead should ensure their child protection file is transferred to the new setting as soon as possible. This should be transferred separately from the main pupil file, ensuring secure transit, and confirmation of receipt should be obtained.
- Receiving settings should ensure key staff such as designated safeguarding leads and SENCOs or the named person with oversight for SEN in colleges, are aware as required.
- In addition to the child protection file, the designated safeguarding lead should also consider if it would be appropriate to share any information with the new school or college in advance of a

child leaving. For example, information that would allow the new school or college to continue supporting victims of abuse and have that support in place for when the child arrives.

Availability

- During term time the designated safeguarding lead (or a deputy) should always be available (during school or college hours) for staff in the school or college to discuss any safeguarding concerns. Whilst generally speaking the designated safeguarding lead (or deputy) would be expected to be available in person, it is a matter for individual schools and colleges, working with the designated safeguarding lead, to define what "available" means and whether in exceptional circumstances availability via phone and or Skype or other such media is acceptable.
- It is a matter for individual schools and colleges and the designated safeguarding lead to arrange adequate and appropriate cover arrangements for any out of hours/out of term activities.

Deputy Designated Leads

- Settings can choose to have one or more deputy designated safeguarding lead(s) who can cover and deputise. Any deputies should be trained to the same standard as the designated safeguarding lead.
- Whilst the activities of the designated safeguarding lead can be delegated to appropriately trained deputies, the ultimate **lead responsibility** for child protection, as set out above, remains with the designated safeguarding lead, this **lead responsibility** should not be delegated.

5. Understanding & Identifying Abuse

All staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

Abuse and neglect are forms of maltreatment – a person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.

Child welfare concerns may arise in many different contexts, and can vary greatly in terms of their nature and seriousness:

- Children may be abused in a family or in an institutional or community setting, by those known to them or by a stranger, including, via the internet.
- In the case of female genital mutilation, children may be taken out of the country to be abused.
- They may be abused by an adult or adults, or another child or children.
- An abused child will often experience more than one type of abuse, as well as other difficulties.
- Abuse reduces resilience in children and puts them at further risk of abuse throughout their lives.

Abuse and neglect can happen over a period of time, but can also be a one-off event. Child abuse and neglect can have major long-term impacts on all aspects of a child's health, development and well-being.

Contextual Safeguarding

Safeguarding incidents and/or behaviours can be associated with factors outside the setting and/or can occur between children outside the setting. All staff, but especially DSLs should consider the context within which such incidents and/or behaviours occur. Examples may be recruitment and exploitation via criminal gangs.

This is known as contextual safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare.

Children's social care assessments should consider such factors so it is important that settings provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and the full context of any abuse.

Definitions

Abuse

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by 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 others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

There are four main categories of abuse and neglect:

- physical abuse
- emotional abuse
- sexual abuse
- neglect.

Physical Abuse

Physical abuse is deliberately physically hurting a child. It might take a variety of different forms, including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child.

Physical abuse can happen in any family, but children may be more at risk if their parents have problems with drugs, alcohol and mental health or if they live in a home where domestic abuse happens.

Babies and disabled children also have a higher risk of suffering physical abuse.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Physical abuse can also occur outside of the family environment.

Indicators may include:

- Children with frequent injuries;
- Children with unexplained or unusual fractures or broken bones; and
- Children with unexplained bruises or cuts, burns or scalds; or bite marks.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development.

Although the effects of emotional abuse might take a long time to be recognisable, practitioners will be in a position to observe it, for example, in the way that a parent interacts with their child. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities. 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 from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), 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.

Indicators may include:

- Children who are excessively withdrawn, fearful, or anxious about doing something wrong;
- Parents or carers who withdraw their attention from their child, giving the child the "cold shoulder";
- Parents or carers blaming their problems on their child;
- Parents or carers who humiliate their child, for example, by name-calling or making negative comparisons.

Sexual Abuse & Exploitation

Sexual abuse is any sexual activity with a child. You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong.

Sexual abuse can have a long-term impact on mental health. Sexual abuse 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 clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch 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 commit acts of sexual abuse, as can other children.

Indicators may include:

- Children who display knowledge or interest in sexual acts inappropriate to their age
- Children who use sexual language / have sexual knowledge that you wouldn't expect them to have
- Children who ask others to behave sexually or play sexual games
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for Money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation doesn't always involve physical contact and can happen online. A

significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.

Indicators may include:

- Children who appear with unexplained gifts or new possessions
- Children who associate with other young people involved in exploitation
- Children who have older boyfriends or girlfriends
- Children who suffer from sexually transmitted infections or become pregnant
- Children who suffer from changes in emotional well-being
- Children who misuse drugs and alcohol
- Children who go missing for periods of time or regularly come home late
- Children who regularly miss school or education or don't take part in education.

Neglect

Neglect is a pattern of failing to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter. It is likely to result in the serious impairment of a child's health or development.

There are many different aspects in which neglect can manifest: educational neglect, medical neglect, emotional neglect, physical neglect, and so on.

Neglect usually indicates a relationship issue between the parent and child. Emotional neglect can be as detrimental if not worse than physical neglect.

Emotional Neglect is a parent's failure to respond *enough* to a child's emotional needs; it's a failure to notice, attend to or respond appropriately to a child's feelings. It results in children having difficulty trusting or knowing their own feelings or others because theirs were never validated.

Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action. However, while you may be concerned about a child, neglect is not always straightforward to identify.

Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

Indicators may include:

- Children who are living in a home that is indisputably dirty or unsafe
- Children who are left hungry or dirty

- Children who are left without adequate clothing – e.g. not having a winter coat
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence
- Children who are often angry, aggressive or self-harm
- Children who fail to receive basic health care
- Parents who fail to seek medical treatment when their children are ill or are injured

Specific Safeguarding Issues

All staff should have an awareness of safeguarding issues that can put children at risk of harm. Behaviours linked to issues such as drug taking, alcohol abuse, deliberately missing education and sexting (also known as **youth produced sexual imagery**) put children in danger.

All staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to:

- bullying (including cyberbullying);
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence and sexual harassment;
- sexting (also known as youth produced sexual imagery); and
- initiation/hazing type violence and rituals.

All staff should be clear as to the school's or college's policy and procedures with regards to peer on peer abuse.

Indicators

The warning signs and symptoms of child abuse and neglect can vary from child to child. Disabled children may be especially vulnerable to abuse, including because they may have an impaired capacity to resist or avoid abuse. They may have speech, language and communication needs which may make it difficult to tell others what is happening. Children also develop and mature at different rates so what appears to be worrying for a younger child might be normal behaviour for an older child.

Parental behaviours may also indicate child abuse or neglect, so you should also be alert to parent-child interactions which are concerning and other parental behaviours:

- This could include parents who are under the influence of drugs or alcohol or if there is a sudden change in their mental health.
- By understanding the warning signs, you can respond to problems as early as possible and provide the right support and services for the child and their family. It is important to recognise that a warning sign doesn't automatically mean a child is being abused.
- There are a number of warning indicators which might suggest that a child may be being abused or neglected.

Some of the following signs might be indicators of abuse or neglect:

- Children whose behaviour changes – they may become aggressive, challenging, disruptive, withdrawn or clingy, or they might have difficulty sleeping or start wetting the bed
- Children with clothes which are ill-fitting and/or dirty
- Children with consistently poor hygiene
- Children who make strong efforts to avoid specific family members or friends
- Children who don't want to change clothes in front of others or participate in physical activities
- Children who are having problems at school
- Children who appear to be tired and hungry
- Children who talk about being left home alone, with inappropriate carers or with strangers
- Children who reach developmental milestones late, with no medical reason
- Children who are regularly missing from school or education
- Children who are reluctant to go home after school
- Children with poor school attendance and punctuality / consistently late being picked up
- Parents who are dismissive and non-responsive to practitioners' concerns
- Parents who collect their children from school when drunk, or under the influence of drugs
- Children who drink alcohol regularly from an early age
- Children who are concerned for younger siblings without explaining why
- Children who talk about running away
- Children who shy away from being touched or flinch at sudden movements.

Children with special educational needs & disabilities (SEND) and other additional needs

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

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

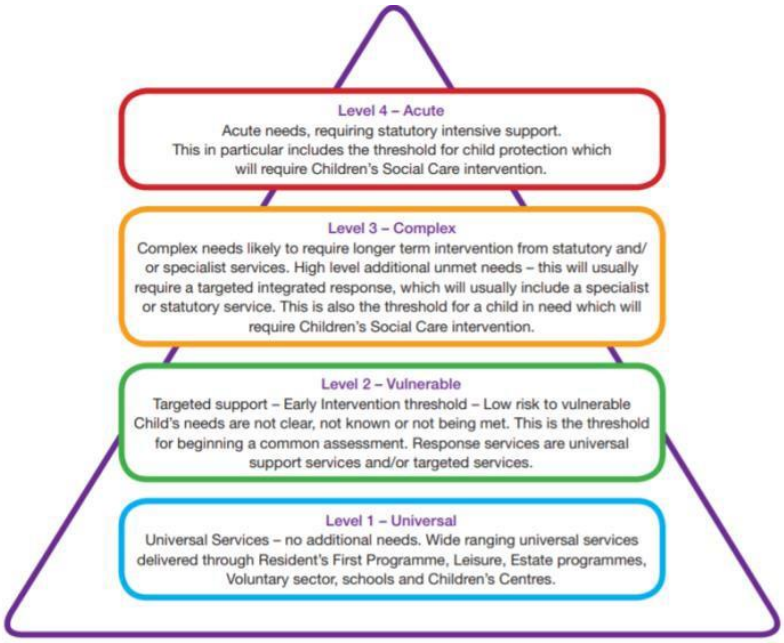
To ensure that all of our pupils receive equal protection we will give special consideration to children who are;

- Young carers
- Transgender children / young people
- 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 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. Thresholds for intervention

Most children will not require intervention beyond the universal level of support within the borough available for all children.



Level 1 – Universal

Universal services are key partners in the delivery of a preventative approach to improving outcomes for children and young people. They provide a range of support and interventions for those children and young people who need some help, usually provided when a parent or professional has a concern about a child or young person's needs. Services delivered at the universal level meet the needs of the majority of children and young people. These 'universal services' are those services (sometimes also referred to as mainstream services) that are provided to or are routinely available to, all children and their families. Universal services are designed to meet the sorts of needs that should enhance the lives and wellbeing of all our children.

They include:

- Early years settings, including registered child minders provision,
- Mainstream schools, including breakfast clubs and extra – curricular activities,
- Health Services provided by GPs, Midwives and Health Visitors,
- The Family Information Service,
- Estate and voluntary sector programmes,
- Leisure and Library activities for all, including free swimming for children and young people.

MASH

Waltham Forest has a Single Request for Help, Support and Protection via the Multi-agency Safeguarding Hub (MASH). This means that referrers do not need to make a thresholds assessment **when referring children for concerns beyond the universal level.**

A referral for Early Help and for acute concerns will go to the same point of contact: the MASH. These referrals will be assessed by professionals from social care, the police, and health. This process helps to ensure that there is:

- Timeliness of screening decisions
- Consistency of threshold decisions
- Outcomes from the single request
- Responses to referrers
- Timeliness of allocations following screening decisions

Following any information raising concern, the designated safeguarding lead will;

- Consider the child's wishes and feelings, but not promise confidentiality
- Consider any urgent medical needs of the child
- Make an immediate referral to Waltham Forest MASH Team if there has been a disclosure and/or allegation of abuse or there are clear grounds for concerns about the child's safety and well-being
- Review Action when a child has suffered or is likely to suffer harm (Appendix 5) and Early help and threshold criteria for intervention
- Consult with a member of Waltham Forest MASH Team if uncertain whether or not a referral is required

Early help

WF Early Help and Threshold Criteria for Intervention lays out the agreed thresholds for intervention at different levels of risk to children and young people within Waltham Forest.

Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Early help can also prevent further problems arising; for example, if it is provided as part of a support plan where a child has returned home to their family from care, or in families where there are emerging parental mental health issues or drug and alcohol misuse.

Effective early help relies upon local organisations and agencies working together to:

- identify children and families who would benefit from early help

- undertake an assessment of the need for early help
- provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to improve the outcomes for the child

Level 2 – Vulnerable

Vulnerable needs requiring targeted support, when the needs of the child can no longer be fully met within Universal provision. These children and their families may have low level additional needs that are likely to be short term and that are sometimes known but unmet.

In this context, a Common Assessment should be completed with the family and child or young person. At this point the Team around the Child and Family processes should commence if support is required from more than one professional service. The team is coordinated by a Lead Professional to provide a consistent link for the family.

The team will consider:

- If a child is in need
- Her/his stage of needs
- Which needs must be met as a priority and
- Which is the most appropriate service or services to meet these needs

These referrals to Early Help and Intervention Services will also highlight the level of need and may sometimes accelerate the intervention to Level 3 services through the Early Intervention Multi Agency Panel.

In addition, a lack of progress and improved outcomes for children and families through Level 2 intervention could trigger more robust support and intervention, meeting the Level 3 threshold.

Identifying children and families who would benefit from early help

Practitioners must be able to identify new and emerging threats, including online abuse, grooming, sexual exploitation, criminal exploitation and radicalisation. To enable this, the three safeguarding partners should consider what training is needed locally and how they will monitor and evaluate the effectiveness of any training they commission.

Effective assessment of the need for early help

Children and families may need support from a wide range of local organisations and agencies. Where a child and family would benefit from coordinated support from more than one organisation or agency (e.g. education, health, housing, police) there should be an inter-agency assessment.

These early help assessments should be evidence-based, be clear about the action to be taken and services to be provided and identify what help the child and family require to prevent needs escalating to a point where intervention would be needed through a statutory assessment under the Children Act 1989.

A lead practitioner should undertake the assessment, provide help to the child and family, and act as an advocate on their behalf and co-ordinate the delivery of support services.

For an early help assessment to be effective:

- It should be undertaken with the agreement of the child and their parents or carers, involving the child and family as well as all the practitioners who are working with them. It should take account of the child's wishes and feelings wherever possible, their age, family circumstances and the wider community context in which they are living
- Practitioners should be able to discuss concerns they may have about a child and family with a social worker in the local authority. Local authority children's social care should set out the process for how this will happen

In cases where consent is not given for an early help assessment, practitioners should consider how the needs of the child might be met. If at any time it is considered that the child may be a child in need, as defined in the Children Act 1989, or that the child has suffered significant harm or is likely to do so, a referral should be made immediately to local authority children's social care. This referral can be made by any practitioner.

Child In Need (s17)

"A child in need is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. Local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17 of the Children Act 1989".

Level 3 – Complex

For children and young people whose needs are complex, the lead professional will be a social worker who will work closely with the child and family to ensure a single assessment and deliver the right support and intervention. These children will be eligible for social care services, outlined in a Children in Need plan, because they are at risk of moving to a higher threshold for intervention from specialist services. In most cases the social worker will act as the lead professional to coordinate the work of all agencies with the child and family. "Asset" is the risk assessment tool used to assess the likelihood of a Young Person going on to commit an offence and to identify what areas of work need to be undertaken to reduce this risk.

Section 17 of the Children Act 1989 places a general duty on every Local Authority to safeguard and promote the welfare of children living within their area who are in need and to promote the upbringing of such children, wherever possible by their families, through providing an appropriate range of services.

Children with Learning Difficulties and Disabilities

Children with Learning Difficulties or Disabilities (LDD) have needs that will cross the four levels of intervention dependent on the severity of their needs, the changing family circumstances and the child's needs over their life journey.

Children and young people who have a EHCP at Levels 3 and 4 have an action plan and targets to meet the aims of their statement. This agreed plan is monitored by the school and other professionals, contributing to a review of progress at the Annual Review. Schools are required to seek updated information from professionals working with the pupil and also seek views from parents and the pupil to inform the review process. Some of these children and young people with a statement of special educational needs have learning as a main presenting need and have no link with social care or health services. Others have more complex needs, including lifelong disability and will meet the threshold for Levels 3 and 4, with a lead social worker and registered with the Children with Disabilities team in Children and Families.

Stepping Up and Stepping Down

Children and young people whose needs are more complex in range, depth or significance and cannot be met by the Team Around the Child and Family process at Level 2, or if significant progress has not been made against expected outcomes in the Common Assessment Framework, can and should stepped up. Alternatively, significant progress has been made through working with Specialist services and so the child/young person no longer needs to remain at Level 4 and can be 'Stepped Down' to Level 3 or maybe even Level 2 services For example, the child/young person can 'Step Down' into Level 3, if the family have complex needs and require multi agency support that can be met via services under the Common Assessment Framework.

Child Protection (s47)

"The processes for children where there is reasonable cause to suspect that the child is suffering or likely to suffer significant harm (this includes immediate protection for children at serious risk of harm)"

Level 4 – Acute

Acute Specialist Services are required where the needs of the child or young person are so great that statutory and /or specialist help and intervention is required to keep them safe or to ensure their continued development. These span the multi-agency partnership including; Children's Social Care, Child and Adolescent Mental Health Services and Level 3 and 4 Youth Offending Services.

By effective integrated working in Waltham Forest, we aim to reduce the escalation of those children and families requiring targeted support to prevent more children requiring specialist and statutory interventions. To ensure the right support, in the right place at the right time.

In Waltham Forest we are developing a confident integrated workforce with a common core of knowledge and understanding to support and intervene effectively to safeguard children young people and families.

Children with Acute Needs Including Those in Need of Protection

A very small number of children for whom targeted support will not be sufficient will have more significant and acute needs which meet the threshold for Stage 4 intervention. This includes children who are experiencing significant harm or where there is a likelihood of significant harm and children at risk of removal from home.

When a referral comes in an assessment is made as to whether the needs presented are acute and therefore at this point requires an immediate Level 4 response. The decision to undertake a Single Assessment or to instigate Section 47 Procedures will be made by a Team Manager or an appropriately qualified and experienced Social Worker deputising for the Manager, such as a Practice Manager or a Senior Practitioner. There is often a further stage of oversight and scrutiny by the Service Manager, in order to check that thresholds are being appropriately and consistently applied.

In the event that Stage 4 intervention is not appropriate, other services will be signposted and referrers advised in writing of the decision, reasons why and any action taken. The EIP Area Managers will receive a notification/ recommendation for Level 2 and 3 interventions.

Possible Indicators/Descriptors to be Determined by the Assessment for Level 4 Intervention:

- Children who have been physically sexually and/or emotionally abused
- Children whose life is endangered; they are suffering from significant injury or illness; they are experiencing exploitation or abuse
- Children who are left alone under the age of 8 years.
- Children who suffer from severe mental health problems or whose parents do

- Children who have been abandoned or who are missing from home regularly or for long periods
- Children with a substantial learning or physical disability whose needs cannot be met by the family
- Children whose parents are unable to meet their physical, emotional, intellectual, social or behavioural needs, including children who have frequent minor injuries and there is a delay in seeking medical attention by their primary care giver
- Unaccompanied children who are refugees or seeking asylum
- Children who are unlikely to achieve or maintain a reasonable standard of health and development without the provision of services
- Significant concerns about hygiene, clothing and diet (inorganic failure to thrive)
- Children who lives are threatened or impaired, resulting in likelihood of significant harm, by their offending behaviours
- Behaviour from themselves which presents a risk to themselves and/or others, including risk of sexual exploitation
- Living in a household where parents/carers are experiencing all, or a combination, of the following problems:
    - poor mental health,
    - substance/alcohol dependency and
    - domestic violence to a degree which may lead to significant harm for the child
- Household members subject to Multi-Agency Public Protection Arrangements (MAPPA) or Multi-Agency Risk Assessment Conference (MARAC) meetings
- Children who are Privately Fostered
- Teenage parents under 16

In common with many London boroughs, we have adopted and embedded the London Continuum Charts and thresholds of need, outlined in this document. This enables us to extend the integrated working across borough boundaries more effectively and to start from a common base of knowledge and understanding when members of staff are recruited from the local area and managers are promoted to join Waltham Forest from neighbouring boroughs. It is also very productive in our cross borough 'working together 'arrangements for practitioners to learn and share good practice.

Referrals

Referrals to local authority children's social care should be made immediately when concerns arise about a child's welfare if there is a concern that the child is suffering significant harm or is likely to do so.

Practitioners who make a referral should always follow up their concerns if they are not satisfied with the response.

In Noor Ul Islam Inspire Madrassa the DSL ordinarily takes responsibility for deciding whether to refer and they should be consulted prior to making a referral, where possible.

If the DSL is not available, the referral should be made without delay by any other member of school staff as a matter of priority.

When practitioners refer a child, they should include any information they have on the child's developmental needs, the capacity of the child's parents or carers to meet those needs and any external factors that may be undermining their capacity to parent.

Failure to accurately transmit the level of concern regarding a child by way of evidence (e.g., chronology, body map, disclosure) may result in the referral failing to meet threshold for statutory intervention; in turn, the child is not adequately safeguarded.

If practitioners have concerns that a child may be a potential victim of modern slavery or human trafficking then a referral should be made to the National Referral Mechanism, as soon as possible.

Feedback should be given by local authority children's social care to the referrer on the decisions taken. Where appropriate, this feedback should include the reasons why a case may not meet the statutory threshold and offer suggestions for other sources of more suitable support. Practitioners should always follow up their concerns if they are not satisfied with the local authority children's social care response and should escalate their concerns if they remain dissatisfied.

Referral guides

- Multi-agency referral form/single request for help and support or protection
- MASH information sharing guidance
- MASH practice guide

7. Procedures for reporting concerns

If you are concerned about a child's welfare

There will be occasions when staff may suspect that a pupil may be at risk. The child's behaviour may have changed, their artwork could be concerning, they may write stories or poetry that reveal confusion or distress, or display physical but inconclusive indicators of abuse. In these circumstances, staff will try to give the child/young person the opportunity to talk.

Staff should use the welfare concern form to record these early concerns, with a view to ongoing monitoring and assessment by the DSL, and can be referred to Early Help as required.

Staff Response

Staff will not investigate but will, wherever possible, listen, record and pass on information to the designated safeguarding lead in order that s/he can make an informed decision of what to do next.

- Listen to and take seriously any disclosure or information that a child may be at risk of harm
- Clarify the information by asking open questions (usually beginning with words such as 'what', 'when', 'where', 'how' – in other words, questions that do not predict the answer). Sometimes just repeating the last statement made with a question intonation can keep someone talking.
- Make a written record of what the child has said (do not ask a child to write a statement)
- Try not to show signs of shock, horror, disbelief or surprise
- Not express feelings or judgements regarding any person alleged to have harmed the child
- Reassure and support the person as far as possible
- Explain that only those who 'need to know' will be told
- Explain what will happen next and keep them informed
- Report your concern as soon as possible to the DSL, definitely by the end of the day

Designated Safeguarding Lead Response

- In an emergency take the action necessary to help the child; if necessary call 999
- Without delay, inform social care by phone that a referral is on its way
- Gather information from staff in school
- Produce detailed chronology from CP recording system if and when required.
- Share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family

- Complete a record of concern
- Seek support for yourself if you are distressed

Decision-Making

In consultation with Waltham Forest MASH Team if necessary, Noor Ul Islam Inspire Madrassa DSLs and involved staff will decide together:

- Wherever possible, to talk to parents, unless to do so may place a child at risk of significant harm, impede any police investigation and/or place the member of staff or others at risk.
- Whether to make a child protection referral to social care because a child is suffering or is likely to suffer significant harm and if this needs to be undertaken immediately.
- Contact the designated officer for safeguarding in another agency if that agency is working with the family.

OR

- Not to make a referral at this stage, but retain the information in written notes on the child's confidential child protection file
- If further monitoring is necessary and agree who and how this will be undertaken
- If it would be appropriate to undertake an Early Help Assessment and/or make a referral for other services.

All information and actions taken, including the reasons for any decisions made, will be fully documented.

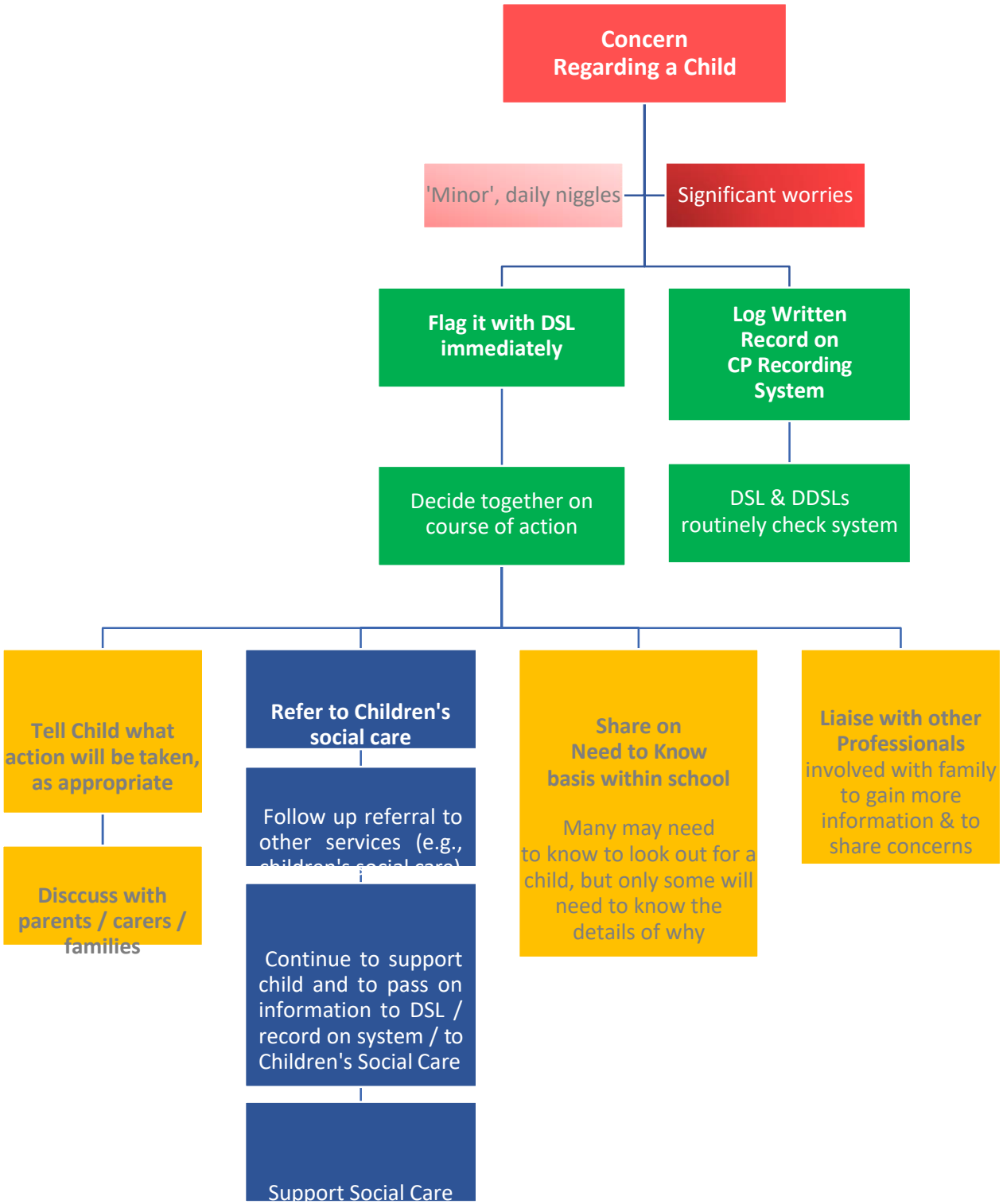
All referrals to social care for children living in Waltham Forest needs to be completed using the Request for Help, Support and Protection.

Action following a child protection referral

The designated safeguarding lead or other appropriate member of staff will;

- Maintain contact with the allocated social worker
- Contribute to the Strategy Discussion and Strategy Meeting
- Provide a report for, attend and contribute to any Initial and Review Child Protection Conference
- Share the content of this report with the parent, prior to the meeting
- Attend Core Group Meetings for any child subject to a Child Protection Plan or Child in Need Meeting for any child subject to a Child in Need Plan
- Where a child on a Child Protection Plan moves from the setting or goes missing, immediately inform the key worker in Social Care

Procedures for Reporting Concerns in Setting



Disclosures by a child

Disclosures or information may be received from pupils, parents or other members of the public.

Noor Ul Islam Inspire Madrassa recognises that those who disclose may do so with difficulty, having chosen carefully to whom they will speak. Accordingly, all staff will handle disclosures with sensitivity.

Staff cannot promise complete confidentiality as staff must report any disclosure of abuse or harm to a child or young person. However, children, young people and others can be reassured that only those who need to know will be told.

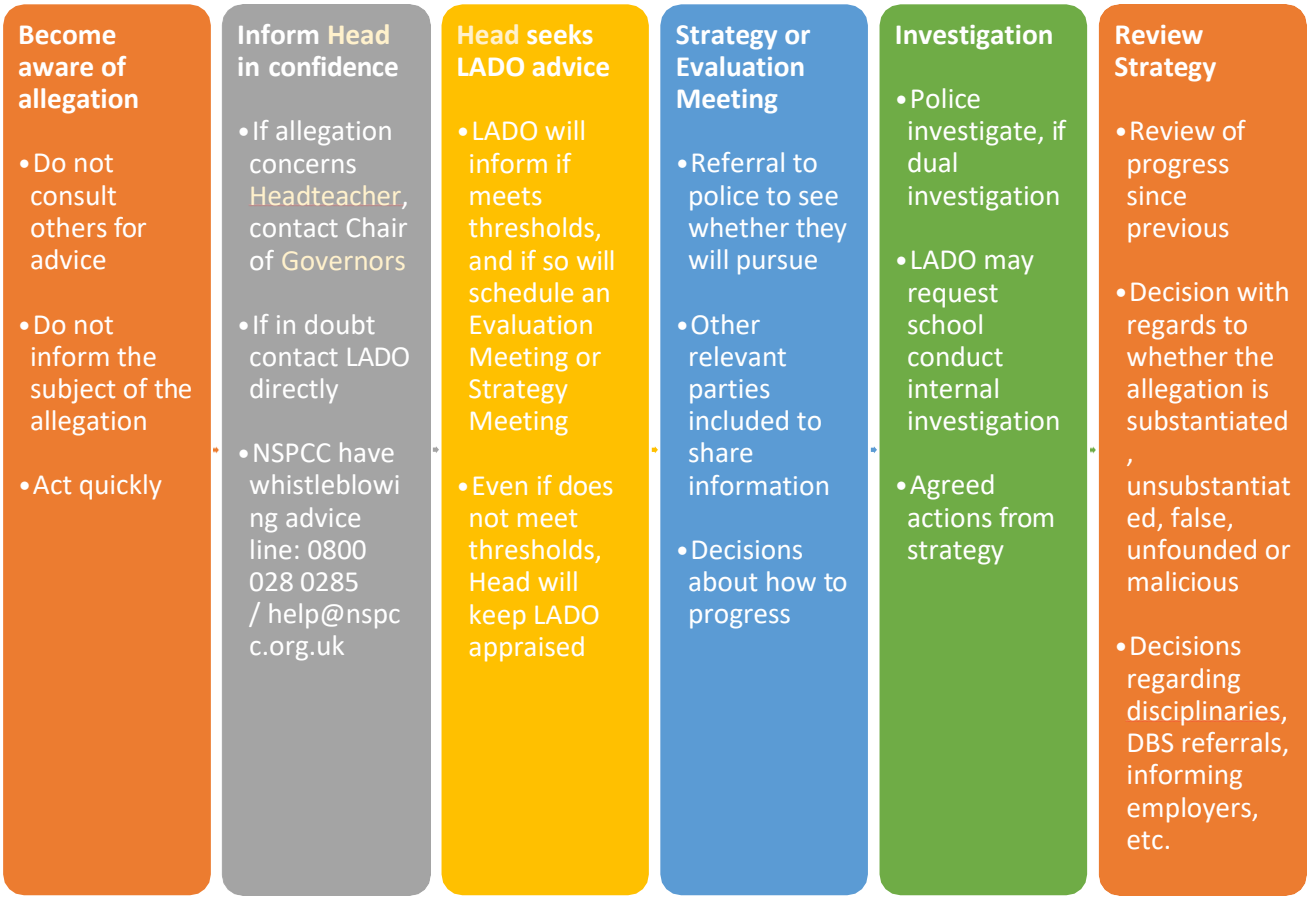
Staff must immediately report any disclosure to the designated safeguarding lead and make a contemporaneous record.

Often a child will disclose information that causes concern but insufficient to making a referral. In such cases, it's important to ensure that staff seek sufficient information to refer successfully to children's social care, and thereby to effectively safeguard the child. In order to do this, staff will have to ask the child open questions that do not lead.

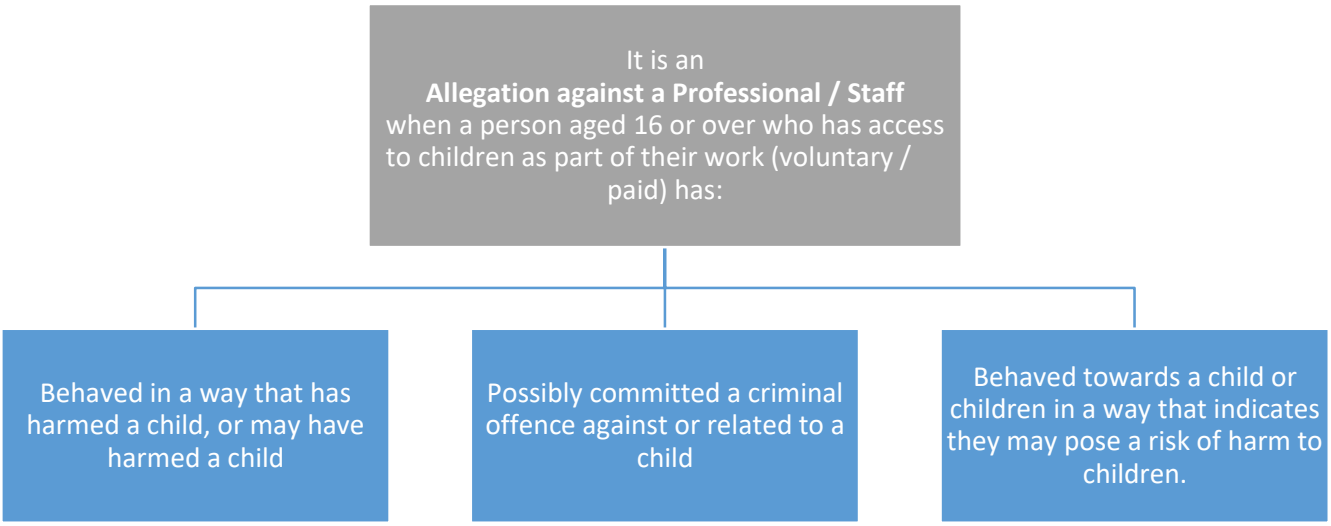
8. Allegations against professionals

Role of the local authority's Designated Officer (LADO)

- Oversee the consistent, fair, unbiased management of allegations against adults who work with children
- Provide advice and guidance to employers
- Liaise with the police, other agencies, incl. Ofsted & professional bodies
- Chair Allegations Meetings and establish agreed outcomes
- Liaise with other local authorities in cross-boundary cases
- Have oversight of reports to ensure safeguarding is met
- Collect strategic data and share & disseminate learning



What's an Allegation?



It is relatively rare for a child to make an entirely false or malicious allegation, although misunderstandings and misinterpretations of events do happen.

If a child does make a false allegation, there may be other concerns regarding their welfare.

The full procedures for dealing with allegations against staff can be found in Keeping Children Safe in Education (2026)**.**

Recognising an Allegation

Sometimes it is those in positions of trust and responsibility for children who cause the harm. It's crucial that all staff can correctly identify allegations in order to report them.

Allegations procedures differ from reporting safeguarding concerns.



In the event of any of the above, all staff must report the concerns to the Headteacher/Proprietor in confidence and without delay.
If an allegation is made against you, to you, you must also report it, even if you know it to be false.

Initial Action by person receiving or identifying an allegation or concern

- Whilst allegations may be false, malicious or misplaced, they may also be founded in truth; all staff must report allegations even if they believe them to be false.
- All allegations must be investigated properly, in line with agreed procedures and outcomes recorded.
- Staff must treat all allegations 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 Manager/proprietor.
- Do not share allegations with any other member of staff, including the subject of the allegation.

Unusual Circumstances

- If the allegation is against the headteacher/proprietor, staff must report to chair of governors
- If there is a lack of faith in the safeguarding governance, all staff can contact the local authority's Designated Officers (also known as LADOs) directly, without delay.
- For independent advice, please contact the **NSPCC whistleblowing advice line: 0800 028 0285**

Initial Action by Manager/Proprietor

- The Lead for Allegations is normally the Manager/proprietor. If the Manager/proprietor is the subject of the allegation, then the Chair of Governors/Chair of Trustees 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 Chair of Governors of the allegation
- Settings with EY Ofsted registration, including Childminders, must contact Ofsted as soon as possible but at least within 14 days on: 0300 1234666 or online.
- Noor Ul Islam Inspire Madrassa will keep records of the whole process.

If you are the subject of an allegation

- 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.
- Manager/proprietors will notify the subject of an allegation as soon as possible. They will not be able to share the nature of the allegation, who made the allegation or other concerns at this point.
- Manager/proprietors must consider the nature of the allegation and how to protect both the child and the professional involved and to prevent further allegations. Usually, proprietors will attempt to redeploy employed staff to ensure that they do not come into contact with the child(ren) involved, and to ensure that safeguards are in place to prevent further concerns.
- 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/setting will provide support and a named contact for the member of staff.
- Managers/proprietors are not able to share any details of the allegation with other members of staff.
- 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.

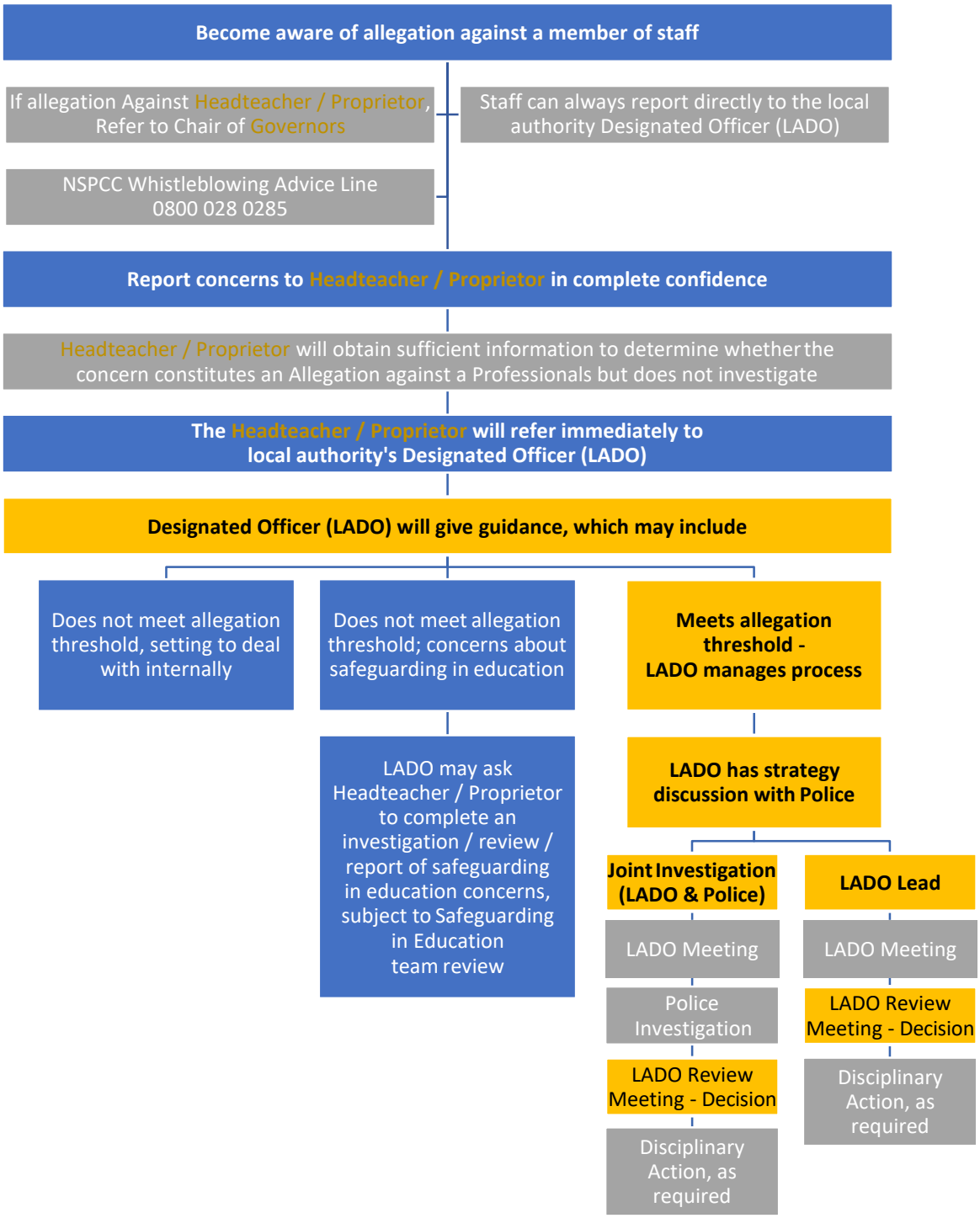
Non-recent & historical allegations of abuse

Allegations concerning staff who no longer work at the setting or historical allegations will be reported to the police without delay.

After LADO & Police Process, Subsequent Action by the Manager /Proprietor

- Conduct a disciplinary investigation, if an allegation outcome indicates it
- Contribute to the child protection process by attending professional strategy meetings
- Maintain contact with the LADO (referred to as the Designated Officer(s) in updated guidance)
- Ensure clear and comprehensive records regarding the allegation, and action taken and outcome are retained on the staff member's personnel file
- Consider along with Human Resources and the LADO whether a referral to the DBS should be made

Allegations Procedures in Setting



- For an allegation to proceed to its conclusion, the police investigation must be completed.
- For the disciplinary process to commence within the setting, the LADO process must be concluded.



Whistleblowing

Whistleblowing is 'making a disclosure in the public interest' and occurs when a worker (or member of the wider school community) raises a concern about danger or illegality that affects others, for example pupils in the school or members of the public.

All staff are made aware of the duty to raise concerns about the attitude or actions of staff in line with the school's Code of Conduct / Whistleblowing policy.

We want everyone to feel able to report any child protection / safeguarding concerns. However, for members of staff, parents or others who feel unable to raise these concerns internally, they can call the NSPCC whistleblowing helpline on: 0800 028 0285 (line is available from 8:00 AM to 8:00 PM, Monday to Friday) or email: help@nspcc.org.uk.

Staff are also able to contact the Local Authority Designated Officer lado@walthamforest.gov.uk or 0208 496 3646

9. Prevention

Qualifications

The quality of care for children depends upon appropriate training, qualifications, skills and knowledge, and an understanding of roles and responsibilities.

Induction

All staff will receive induction training to help them understand their roles and responsibilities.

Induction training must include information about emergency evacuation procedures, safeguarding, child protection, and health and safety issues. It should also identify continuing professional development needs.

Please refer to our Safer Recruitment Policy for further details.

Supervision / Support for Staff

Staff who have contact with children and families will be given appropriate supervision by a suitably more experienced member of staff. Effective supervision provides support, coaching and training for the practitioner and promotes the interests of children. Supervision should foster a culture of mutual support, teamwork and continuous improvement, which encourages the confidential discussion of sensitive issues.

Supervision should provide opportunities for staff to:

- Discuss any issues – particularly concerning children's development or well-being, including child protection concerns
- Identify solutions to address issues as they arise
- Receive support to improve their personal effectiveness

Although supervision should be scheduled into the work schedule, ad hoc supervision may be required at times, especially relating to the management of safeguarding concerns and the impact on individual members of staff.

The manager must hold at least a full and relevant level 3 qualification and at least half of all other staff must hold at least a full and relevant level 2 qualification. The manager should have at least two years' experience of working in an early years setting, or have at least two years' other suitable experience. The provider must ensure there is a named deputy who, in their judgement, is capable and qualified to take charge in the manager's absence.

Paediatric First Aid (PFA)

At least one person who has a current paediatric first aid (PFA) certificate must be on the premises and available at all times when children are present, and must accompany children on outings.

Childminders, and any assistant who might be in sole charge of the children for any period of time, must hold a full current PFA certificate.

PFA training must be renewed every three years and be relevant for workers caring for young children and where relevant, babies.

Noor Ul Islam Inspire Madrassa will always consider the number of children, staff and layout of premises to ensure that a paediatric first aider is able to respond to emergencies quickly.

All newly qualified entrants to the early years workforce who have completed a level 2 and/or level 3 qualification on or after 30 June 2016, must also have either a full PFA or an emergency PFA certificate within three months of starting work in order to be included in the required staff:child ratios at level 2 or level 3 in an early years setting[33]. Providers should display (or make available to parents) staff PFA certificates or a list of staff who have a current PFA certificate.

Language Competency

Noor Ul Islam Inspire Madrassa will ensure that all staff have sufficient understanding and use of English to ensure the well-being of children in their care in order to keep records in English, to liaise with other agencies in English, to summon emergency help, and to understand instructions such as those for the safety of medicines or food hygiene.

Staff - : - child ratios

Noor Ul Islam Inspire Madrassa will ensure that

- staffing arrangements meet the needs of all children and ensure their safety
- children are adequately supervised and decide how to deploy staff to ensure children's needs are met
- parents and/or carers are informed about staff deployment, and, when relevant and practical, aim to involve them in these decisions.
- Children must usually be within sight and hearing of staff and always within sight or hearing.
- Only those aged 17 or over may be included in staff ratios (staff under 17 will be supervised at all times).

- Students on long term placements and volunteers (aged 17 or over) and staff working as apprentices in early education (aged 16 or over) may be included in the ratios if the provider is satisfied that they are competent and responsible.

The ratio and qualification requirements below apply to the total number of staff available to work directly with children. Exceptionally, and where the quality of care and safety and security of children is maintained, changes to the ratios may be made. For group settings providing overnight care, the relevant ratios continue to apply and at least one member of staff must be awake at all times.

The current recommended ratios are as follows:

- 0 - 2 years - 1 staff to 3 children
- 2 - 3 years - 1 staff to 4 children
- 4 - 8 years - 1 staff to 6 children
- 9 - 12 years - 1 staff to 8 children
- 13 - 18 years - 1 staff to 10 children

We will always carry out a risk assessment to determine appropriate levels of supervision for each class size, incorporating the needs of children with special educational needs and emotional and behavioural needs at the beginning of each academic year. Likewise, we will consider the playground layout and appropriate supervision for break as well as the number and ages of the children when carrying out risk assessments to determine suitable ratios.

Medicines

Noor Ul Islam Inspire Madrassa will promote the good health of children in our care, detailed in our procedures for responding to children who are ill or infections **[name of procedures], which is shared and discussed with parents and carers prior to the child starting.** We will take necessary steps to prevent the spread of infection, and take appropriate action if children are ill.

Noor Ul Islam Inspire Madrassa will only administer medicine (eg like asthma pumps) only in exceptional circumstances. We will always refer cases of ill children to their parents /guardian or who has parental responsibility of the child.

We work in line with government Guidance on Infection Control in Schools and other Childcare Settings which sets out when and for how long children need to be excluded from settings, when treatment/medication is required and where to get further advice.

Food and drink

Noor Ul Islam Inspire Madrassa is committed to Healthy diet in Children.

Before a child is admitted to Noor Ul Islam Inspire Madrassa, we will obtain information about any special dietary requirements, preferences and food allergies that the child has, and any special health requirements. We will keep records of and act on information from parents and carers about a child's dietary needs.

Fresh drinking water will be available and accessible at all times.

Accident or injury

Providers must ensure there is a first aid box accessible at all times with appropriate content for use with children. Providers must keep a written record of accidents or injuries and first aid treatment. Providers must inform parents and/or carers of any accident or injury sustained by the child on the same day as, or as soon as reasonably practicable after, and of any first aid treatment given.

Managing behaviour

Noor Ul Islam Inspire Madrassa is responsible for managing children's behaviour in an appropriate way. We will never use corporal punishment and we will take all reasonable steps to ensure that corporal punishment is not given by any person who cares for or is in regular contact with a child, or by any person living or working in the premises where care is provided. Any provider who fails to meet these requirements commits an offence.

There are times where physical intervention must be taken for the purposes of averting immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if absolutely necessary and as a last resort. If this occurs, we will keep a record and parents and/or carers will be informed on the same day, or as soon as reasonably practicable.

No staff will threaten corporal punishment, and must not use or threaten any punishment which could adversely affect a child's well-being.

Safety

Noor Ul Islam Inspire Madrassa will ensure that our premises, including overall floor space and outdoor spaces, are fit for purpose and suitable for the age of children cared for and the activities provided on the premises, and will always comply with requirements of health and safety legislation (including fire safety and hygiene requirements).

We will take reasonable steps to ensure the safety of children, staff and others on the premises in the case of fire or any other emergency, and must have an emergency evacuation procedure. This includes appropriate fire

detection and control equipment (for example, fire alarms, smoke detectors, fire blankets and/or fire extinguishers) in working order. Fire exits are clearly identifiable, and fire doors will be free of obstruction and easily opened from the inside.

Smoking

Noor Ul Islam Inspire Madrassa does not allow smoking in its premises at any time

Premises

The premises and equipment will be organised in a way that meets the needs of children. We adhere to statutory guidance under EYFS and the Equality Act 2010 (for example, the provisions on reasonable adjustments) for indoor and outdoor spaces.

We provide private areas where staff may talk to parents and/or carers confidentially, as well as an area in group settings for staff to take breaks away from areas being used by children.

Visitors & Collection

Noor Ul Islam Inspire Madrassa will only release children into the care of individuals who have been notified to the provider by the parent, and must ensure that children do not leave the premises unsupervised. We will take all reasonable steps to prevent unauthorised persons entering the premises, and have an agreed procedure for checking the identity of visitors. Providers must consider what additional measures are necessary when children stay overnight.

Risk assessment

Noor Ul Islam Inspire Madrassa takes all reasonable steps to ensure staff and children in our care are not exposed to risks. Where helpful, we use written risk assessments in relation to specific issues, to inform staff practice, and to demonstrate how we manage risks if asked by parents and/or carers or inspectors.

Risk assessments aspects of the environment that need to be checked on a regular basis, when and by whom those aspects will be checked, and how the risk will be removed or minimised.

Outings

Children must be kept safe while on outings. We will assess the risks or hazards which may arise for the children, and identify the steps to be taken to remove, minimise and manage those risks and hazards. The assessment must include consideration of adult to child ratios. The risk assessment does not necessarily need to be in writing; this is for providers to judge.

Vehicles in which children are being transported, and the driver of those vehicles, will be adequately insured.

Special educational needs

We are committed to supporting children with SEN or disabilities. Our Special Educational Needs Co-ordinator (SENCO) will take the lead on meeting the needs of children with and those without EHC Plans.

Complaints

Noor Ul Islam Inspire Madrassa has a written procedure for responding to concerns and complaints from parents and/or carers. We'll keep a written record of any complaints, and their outcome. If parents are unsatisfied with our response to their concerns, they can send their complaint to Governing board or Trustees of Noor Ul Islam.

Code of Conduct

This policy should be read alongside the Staff Code of Conduct/Behaviour Policy.

Professional boundaries and behaviour, including clear expectations and support of children and adult behaviour alike, helps provide children with a sense of safety. Clear boundaries and expectations also mitigate against and prevent allegations against professionals.

All professionals working with children should take care to model good behaviour by presenting themselves appropriately, both in physical attire and appearance, and in behaviour and conduct.

Staff taking medication/other substances

Staff must not be under the influence of alcohol or any other substance which may affect their ability to care for children.

If staff are taking medication which may affect their ability to care for children, they should seek medical advice and only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member's ability to look after children properly. Staff medication on the premises must be securely stored, and out of reach of children, at all times.

Suitable People

Noor Ul Islam Inspire Madrassa will ensure that any people looking after children aged 16 and over are suitable to fulfil the requirements of their roles. We maintain effective systems to ensure that practitioners, and any other person who is likely to have regular contact with children (including those living or working on the premises), are suitable.

Noor Ul Islam Inspire Madrassa will not allow people, whose suitability has not been checked, including via DBS check, to have unsupervised contact with children being cared for.

Ofsted or the agency with which the childminder is registered is responsible for checking the suitability of childminders, of every other person looking after children for whom the childminding is being provided (whether on domestic or non-domestic premises), and of every other person living or working on any domestic premises from which the childminding is being provided, including obtaining enhanced criminal records checks and barred list checks. Registered providers other than childminders must obtain an enhanced criminal records check in respect of every person aged 16 and over (including for unsupervised volunteers, and supervised volunteers who provide personal care[20]) who:

- works directly with children
- lives on the premises on which the childcare is provided and/or
- works on the premises on which the childcare is provided (unless they do not work on the part of the premises where the childcare takes place, or do not work there at times when children are present)

An additional criminal records check (or checks if more than one country) should also be made for anyone who has lived or worked abroad.

Staff Disclosures

Staff are required to disclose any convictions, cautions, court orders, reprimands and warnings that may affect their suitability to work with children (whether received before or during their employment at the setting).

Single Central Record

Noor Ul Islam Inspire Madrassa maintains a single central record of pre-appointment checks, commonly known as the single central record.

MATs must maintain the single central record detailing checks carried out in each academy within the MAT. Whilst there is no requirement for the MAT to maintain an individual record for each academy, the information should be recorded in such a way that allows for details for each individual academy to be provided separately, and without delay, to those entitled to inspect that information, including by inspectors.

The single central record must cover the following people:

- **ALL staff**, including teacher trainees on salaried routes, agency and third party supply staff who work the setting
- In the case of academies and free schools, this means the members and trustees of the academy trust

The single central record must indicate whether the following checks have been carried out or certificates obtained, and the date on which each check was completed/certificate obtained:

- Identity check (see guidelines can be found on the GOV.UK website)
- Barred list check
- Enhanced DBS check/certificate a prohibition from teaching check
- Further checks on people who have lived or worked outside the UK
- Professional qualifications check, where required
- Right to work in the UK check
- s128 check (for management positions for independent schools including academies and free schools).

For agency and third party supply staff, settings must also include whether written confirmation has been received that the employment business supplying the member of supply staff has carried out the relevant checks and obtained the appropriate certificates, and the date that confirmation was received and whether any enhanced DBS certificate check has been provided in respect of the member of staff.

Safer Recruitment

Noor Ul Islam Inspire Madrassa pays full regard to Part 3 of the statutory guidance Keeping Child Safe in Education (2026); please refer to the Safer Recruitment policy for more details.

We ensure that all appropriate measures are applied in relation to everyone who works in the school/setting and who is therefore likely to be perceived by the children as a safe and trustworthy adult. This includes volunteers, supervised volunteers and staff employed by contractors. Safer recruitment practice includes scrutinising applicants, verifying identity and academic or vocational qualifications, obtaining personal references, checking previous employment history and ensuring that a candidate has the health and physical capacity for the job. It also includes undertaking interviews and checks with the Disclosure and Barring Service (DBS).

In terms of childminding all adults who are likely to have regular contact with children (including those living or working on the premises) are checked for their suitability. This check includes ensuring that Ofsted is supplied with timely information about anyone over the age of 16 years on the premises in order to carry out these checks.

Noor Ul Islam Inspire Madrassa endeavours to ensure that we do our utmost to employ safe staff by following the guidance in Keeping Children Safe in Education (2024) together with Noor Ul Islam Inspire Madrassa ’s Safer Recruitment policy and procedures.

Staff Induction

All new staff, including newly qualified teachers and support staff, will receive induction training. The induction process will include staff code of conduct and a good understanding of child protection responsibilities and procedures and expectations.

All staff (including temporary staff, volunteers, supervised volunteers and staff employed by contractors) are provided with the schools'/setting's safeguarding policy and informed of school's/setting's safeguarding arrangements on induction. They must confirm in writing that the policy has been read and understood.

Safeguarding Training

Noor Ul Islam Inspire Madrassa's designated safeguarding lead and deputy designated safeguarding leads will undertake child protection training for designated safeguarding leads and refresher training annually.

Training will cover:

- How to identify signs of abuse
- Know when it is appropriate to make a referral to MASH or the LADO
- Understanding the referral process, escalation policy, the Local Authority Designated Officer (LADO) role, conduct of a child protection case conference and be able to attend and contribute to these;
- Understanding of the school's/settings safeguarding policy and its application in practice;
- Good recording practice and how to keep detailed, accurate and secure written records;
- How to obtain access to resources and attend any relevant or refresher training courses every two years.

Compliance

Staff should complete an acknowledgement form to confirm that they have read and understood the safeguarding policy and how they should implement it in practice.

All staff and volunteers will:

- Fully comply with the school's/setting's policies and procedures, attend appropriate training and inform the designated safeguarding lead of any concerns.
- Staff will be supported by Mr Zafar Syed. The DSL will be supported by (……) and Ms Khadija Vawda.

- The DSL will know how to access the online London Child Protection Procedures.
- Contact the Waltham Forest Multi Agency Safeguarding Hub (MASH) if in any doubt about whether to refer.

See Appendix 1 – Key Contacts for Child Protection Issues in Waltham Forest

All Early Years Providers (includes Childminders) will put in place appropriate arrangements for the supervision of staff who have contact with children and families to ensure safe practice and identify and address staff training needs as per the requirements of the EYFS 2017. The Local Authority has produced a supervision toolkit with a supervision template which can be used for this purpose.

Childminders will be supported by the Development Workers who will provide regular advice and support including on matters of safeguarding.

Any member of staff affected by issues arising from concerns for children's welfare or safety can seek support from the DSL.

Raising Awareness

Noor Ul Islam Inspire Madrassa will ensure the safeguarding policy is updated and reviewed annually in consultation with the Governing Body.

Noor Ul Islam Inspire Madrassa will ensure that parents are made aware of the safeguarding policy which alerts them to the fact that referrals may be made and the role of the establishment in this to avoid conflict later; best practice indicates that parents should sign a form confirming that they have read and understood the policy prior to a child starting.

Children/Young People Leaving

Where a child leaves the establishment, Noor Ul Islam Inspire Madrassa will ensure that the child protection file is copied for the new establishment as soon as possible and transferred to the new school/setting separately from the main pupil files in a secure manner, as well as ensures the pupil's social worker and/or any other involved professionals are informed.

Safe Practice

Our school /setting will comply with the current Guidance for Safer Working Practice for Adults who work with Children and Young People and ensure that information in this guidance regarding conduct, is known to all staff, visitors and volunteers who come into the school/setting.

Safe working practice ensures that pupils are safe and that all staff:

- are responsible for their own actions and behaviour and should avoid any conduct which would lead any reasonable person to question their motivation and intentions;
- work in an open and transparent way;
- work with other colleagues where possible in situations that could be open to question
- discuss and/or take advice from school/setting management over any incident which may give rise for concern;
- record any incidents or decisions made;
- apply the same professional standards regardless of diversity issues;
- be aware of information-sharing and confidentiality policies;
- are aware that breaches of the law and other professional guidelines could result in criminal or disciplinary action being taken against them.

All staff are required to sign a Staff Code of Conduct which details the standards by which we expect staff at Noor Ul Islam Inspire Madrassa to abide by.

Helping children to keep themselves safe

Children's understanding of how to keep themselves safe is key to safeguarding. All children are supported in recognising and managing risks in different situations.

This includes when using the internet and social media. Along with being able to judge what kind of physical contact is acceptable, unacceptable along with recognising when pressure from others, including people they know, threatens their personal safety and well-being. They are also supported in developing effective ways of resisting pressure.

Children are taught to understand and manage risk through our personal, social, health and economic (PSHE) education and sex and relationships lessons and through all aspects of school/setting life. Our approach is designed to help children to think about risks they may encounter and with the support of staff work out how those risks might be reduced or managed. An overview of SG across the curriculum can be found online under the SG section.

Discussions about risk are empowering and enabling for all children and promote sensible behaviour rather than fear or anxiety. Children are taught how to conduct themselves and how to behave in a responsible manner

Children are also reminded regularly about e-safety, the risks of sharing content and images online and tackling bullying, including cyber bullying procedures.

Noor Ul Islam Inspire Madrassa continually promotes an ethos of respect for children. Pupils are encouraged to speak to a member of staff of their choosing about any worries they may have. In the early years setting children know that there are adults in the setting whom they can approach if worried or in difficulty.

Pupils are made aware that they can contact the designated safeguarding lead or any other member of staff to report concerns that they have and that they have a right to speak to this member of staff in confidence. Children are reminded that confidentiality cannot be guaranteed, but that they will be listened to, heard and informed of what steps can be taken to protect them from harm and that feedback will be sought, so that their views about actions are known.

10. Particular Safeguarding Issues

Children and the court system

Children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. There are two age appropriate guides to support children 5-11-year olds and 12-17 year olds.

The guides explain each step of the process and support and special measures that are available. Making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. The Ministry of Justice has launched an online child arrangements information tool with clear and concise information on the dispute resolution service. This may be useful for some parents and carers.

Children missing from education

All staff should be aware that children going missing, particularly repeatedly, can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect, which may include sexual abuse or exploitation and child criminal exploitation. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation or risk of forced marriage. Early intervention is necessary to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future.

Staff should be aware of their unauthorised absence and children missing from education procedures.

Children with family members in prison

Approximately 219,000 children have a parent sent to prison each year. These children are at risk of poor outcomes including poverty, stigma, isolation and poor mental health. NICCO provides information designed to support professionals working with offenders and their children, to help mitigate negative consequences for those children.

Child sexual exploitation

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual.

CSE does not always involve physical contact: it can also occur through the use of technology. Like all forms of child sex abuse, child sexual exploitation:

- can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex;
- can still be abuse even if the sexual activity appears consensual;
- can include both contact (penetrative and non-penetrative acts) and noncontact sexual activity;
- can take place in person or via technology, or a combination of both;
- can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence;
- may occur without the child or young person's immediate knowledge (e.g. through others copying videos or images they have created and posted on social media);
- can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents overtime, and range from opportunistic to complex organised abuse; and
- is typified by some form of power imbalance in favour of those perpetrating the abuse.

Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources.

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

- children who appear with unexplained gifts or new possessions;
- children who associate with other young people involved in exploitation; children who have older boyfriends or girlfriends;
- children who suffer from sexually transmitted infections or become pregnant;
- children who suffer from changes in emotional well-being;
- children who misuse drugs and alcohol;
- children who go missing for periods of time or regularly come home late; and
- children who regularly miss school or education or do not take part in education.

Child criminal exploitation: county lines

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity: drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns.

Key to identifying potential involvement in county lines are missing episodes, when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism should be considered.

Like other forms of abuse and exploitation, county lines exploitation:

- can affect any child or young person (male or female) under the age of 18 years;
- can affect any vulnerable adult over the age of 18 years;
- can still be exploitation even if the activity appears consensual;

- can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence;
- can be perpetrated by individuals or groups, males or females, and young people or adults; and
- is typified by some form of power imbalance in favour of those perpetrating the exploitation.

Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.

Domestic abuse

The cross-government definition of domestic violence and abuse is: Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- psychological;
- physical;
- sexual;
- financial; and
- emotional

Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

Homelessness

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare.

The designated safeguarding lead (and any deputies) should be aware of contact details and referral routes in to the Local Housing Authority so they can raise/progress concerns at the earliest opportunity.

Indicators that a family may be at risk of homelessness include household debt, rent arrears, domestic abuse and anti-social behaviour, as well as the family being asked to leave a property.

Whilst referrals and or discussion with the Local Housing Authority should be progressed as appropriate, and in accordance with local procedures, this does not, and should not, replace a referral into children's social care where a child has been harmed or is at risk of harm.

The Homelessness Reduction Act 2017 places a new legal duty on English councils so that everyone who is homeless or at risk of homelessness will have access to meaningful help including an assessment of their needs and circumstances, the development of a personalised housing plan, and work to help them retain their accommodation or find a new place to live.

The following factsheets usefully summarise the new duties: Homeless Reduction Act Factsheets.

The new duties shift focus to early intervention and encourage those at risk to seek support as soon as possible, before they are facing a homelessness crisis. In most cases school and college staff will be considering homelessness in the context of children who live with their families, and intervention will be on that basis.

In some cases 16 and 17 year olds could be living independently from their parents or guardians, for example through their exclusion from the family home, and will require a different level of intervention and support. Children's services will be the lead agency for these young people and the designated safeguarding lead (or a deputy) should ensure appropriate referrals are made based on the child's circumstances.

The department and the Ministry of Housing, Communities and Local Government have published joint statutory guidance on the provision of accommodation for 16 and 17 year olds who may be homeless and/ or require accommodation.

So-called 'honour-based' violence

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

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

It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBV are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

If staff have a concern regarding a child that might be at risk of HBV or who has suffered from HBV, they should speak to the designated safeguarding lead (or deputy). As appropriate, they will activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.

FGM

FGM is a cultural practice and is illegal in the UK and is considered violation of human rights by the United Nations. It is considered as a form of child abuse with harmful consequences in short and long term. Individuals, groups in relevant communities and professionals in all agencies need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM.

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 care, prevention, enforcement, through promoting protection measures and safeguarding young girls from FGM.

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs.

FGM mandatory reporting duty for teachers under s5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon teachers along with regulated health and social care professionals in England and Wales, 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 or students, but the same definition of what is meant by "to discover that an act of FGM appears to have been carried out" is used for all professionals to whom this mandatory reporting duty applies.

Teachers must personally report to the police cases where they discover that an act of FGM appears to have been carried out and report any such case with the school's or college's designated safeguarding lead (or deputy) and involve children's social care as appropriate.

The duty does not apply in relation to at risk or suspected cases (i.e. where the teacher does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is 18 or over. In these cases, teachers should follow local safeguarding procedures.

Noor Ul Islam Inspire Madrassa will operate in accordance with the statutory requirements relating to this issue, and in line with existing local safeguarding procedures.

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

Mamta Sagar
Specialist Practitioner
Tel: 07966622501
mamta.sagar@walthamforest.gov.uk

Forced marriage

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage.

Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example).

Nevertheless, some communities use religion and culture as a way to coerce a person into marriage. Schools and colleges can play an important role in safeguarding children from forced marriage.

The Forced Marriage Unit has published statutory guidance and Multi-agency guidelines, with pages 35-36 of which focus on the role of schools and colleges. School and college staff can contact the Forced Marriage Unit if they need advice or information: Contact: 020 7008 0151 or email fmu@fco.gov.uk.

Preventing radicalization

Children are vulnerable to extremist ideology and radicalisation.

Similar to protecting children from other forms of harms and abuse, protecting children from this risk should be a part of a schools' or colleges' safeguarding approach.

Extremism is defined as

> *'the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.'*

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

There is no single way of identifying whether a child is likely to be susceptible to an extremist ideology. Background factors combined with specific influences such as family and friends may contribute to a child's vulnerability.

Similarly, radicalisation can occur through many different methods (such as social media) and settings (such as the internet).

However, it is possible to protect vulnerable people from extremist ideology and intervene to prevent those at risk of radicalisation being radicalised.

As with other safeguarding risks, staff should be alert to changes in children's behaviour, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead (or deputy) making a referral to the Channel programme.

The Prevent duty

We are subject to the Prevent duty, under section 26 of the Counter Terrorism and Security Act 2015, to have "due regard to the need to prevent people from being drawn into terrorism". The Prevent duty should be seen as part of the wider safeguarding obligations. Designated safeguarding leads and other senior leaders should familiarise themselves with the revised Prevent duty guidance.

Noor Ul Islam Inspire Madrassa is committed to providing a secure environment for pupils vulnerable to grooming and exploitation into extremist organisations. Staff will be alert to issues including:

- Disclosures by pupils of their exposure to the extremist actions, views or materials of others outside of school/setting, such as in their homes or community groups
- Graffiti symbols, writing or art work promoting extremist messages or images
- Pupils accessing extremist material online, including through social networking sites

- Parental reports of changes in behaviour, friendship or actions and requests for assistance
- Use of extremist or 'hate' terms to exclude others or incite violence
- 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, colour or culture

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.

Aligned with a consistent delivery of a broad and balanced curriculum and use of the Local Authority-sanctioned 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.

We also recognise that further information and support is available from the Multi-Agency Safeguarding Hub (0208 496 2310) and the Local Authority's Community Safety Team (0208 496 3000).

Noor Ul Islam Inspire Madrassa is fully aware and committed to the ongoing protection and safety of our pupils, staff and wider community in accordance with Working together to Safeguard Children 2026 and Keeping Children Safe in Education 2026.

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

As a Channel partner, we may be asked to attend a Channel panel to discuss the individual referred to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support required.

Peer on peer abuse

Children can abuse other children. This is generally referred to as peer on peer abuse and can take many forms. This can include (but is not limited to)

- bullying (including cyberbullying)
- sexual violence and sexual harassment
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, otherwise causing physical harm
- sexting
- initiating/hazing type violence and rituals.

Sexual violence & sexual harassment between children

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment.

Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physical and verbal) and are never acceptable.

It is important that all victims are taken seriously and offered appropriate support. Staff should be aware that some groups are potentially more at risk.

Evidence shows girls, children with SEND and LGBT children are at greater risk.

Staff should be aware of the importance of:

- making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up;
- not tolerating or dismissing sexual violence or sexual harassment as “banter”, “part of growing up”, “just having a laugh” or “boys being boys”; and
- challenging behaviours (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them.

Sexual violence

It is important that school and college staff are aware of sexual violence and the fact children can, and sometimes do, abuse their peers in this way. When referring to sexual violence we are referring to sexual offences under the Sexual Offences Act 2003 as described below:

- **Rape:** A person (A) commits an offence of rape if: he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.
- **Assault by Penetration:** A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.
- **Sexual Assault:** A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents.

What is consent?

- Consent is about having the freedom and capacity to choose.
- Consent to sexual activity may be given to one sort of sexual activity but not another, e.g.to vaginal but not anal sex or penetration with conditions, such as wearing a condom.
- Consent can be withdrawn at any time during sexual activity and each time activity occurs.
- Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

Sexual harassment

When referring to sexual harassment we mean 'unwanted conduct of a sexual nature' that can occur online and offline. When we reference sexual harassment, we do so in the context of child on child sexual harassment.

Sexual harassment is likely to:

- violate a child's dignity,
- and/or make them feel intimidated, degraded or humiliated
- and/or create a hostile, offensive or sexualised environment.

Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names
- sexual "jokes" or taunting
- physical behaviour, such as:
    - deliberately brushing against someone,
    - interfering with someone's clothes (schools and colleges should be considering when any of this crosses a line into sexual violence - it is important to talk to and consider the experience of the victim)
    - displaying pictures, photos or drawings of a sexual nature
- online sexual harassment.

This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include:

- non-consensual sharing of sexual images and videos
- sexualised online bullying
- unwanted sexual comments and messages, including, on social media
- sexual exploitation
- coercion and threats

The response to a report of sexual violence or sexual harassment

The initial response to a report from a child is important. It is essential that all victims are reassured that they are being taken seriously and that they will be supported and kept safe.

A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

If staff have a concern about a child or a child makes a report to them, they should follow the referral process. As always, if staff are in any doubt as to what to do they should speak to the designated safeguarding lead (or a deputy).

Key contact

Tracey Goddard - Borough Lead – Peer on Peer Abuse & Harmful Sexual Behaviour
Tracey.Goddard@walthamforest.gov.uk

Attendance

Attendance, absence and exclusions are closely monitored; a child going missing from education is a potential indicator of abuse and neglect, including sexual abuse and sexual exploitation.

The DSL will monitor unauthorised absence and take appropriate action including notifying the local authority, particularly where children go missing on repeated occasions and/or are missing for periods during the school/setting day. Staff must be alert to signs of children at risk of travelling to conflict zones, female genital mutilation and forced marriage.

The school/setting follows the Safeguarding Children Practice Guidance; Children Missing from School from the London Child Protection Procedures and will refer all cases of concern to their Education Welfare Officer (EWO) or Attendance Lead. The school/setting also refers to the Waltham Forest locally agreed policy and procedures.

http://www.londoncp.co.uk/chapters/not_attend_sch.html

Faith & Belief-based Abuse

Faith is not a protective factor where abuse is concerned. Indeed, sometimes faith can create a screen that prevents would-be protectors from admitting/believing that abuse is occurring.

There is no agreed definition of or consensus about the concept of 'child abuse linked to faith or belief.' Child abuse linked to faith or belief can be separated into four areas as follows;

- Abuse that occurs as a result of a child being accused of witchcraft or of being a witch
- Abuse that occurs as a result of a child being accused of being 'possessed by spirits', that is, 'spirit possession'
- Ritualistic abuse
- Satanic abuse

Where does it take place?

Child abuse linked to faith and/or belief is not confined to one faith, nationality or ethnic community. Examples have been recorded worldwide among Europeans, Africans, Asians and elsewhere as well as in Christian, Muslim, Hindu and pagan faiths among others.

Not all those who believe in witchcraft or spirit possession harm children. Data on numbers of known cases suggests that only a small minority of people with such beliefs go on to abuse children.

Common factors that put a child at risk of harm

- Belief in evil spirits: this is commonly accompanied by a belief that the child could 'infect' others with such 'evil'. The explanation for how a child becomes possessed varies widely, but includes through food that they have been given or through spirits that have flown around them;
- Scapegoating because of a difference: it may be that the child is being looked after by adults who are not their parents (i.e. privately fostered), and who do not have the same affection for the child as their own children;

- Rationalizing misfortune by attributing it to spiritual forces and when a carer views a child as being 'different' because of disobedience, rebelliousness, over-independence, bedwetting, nightmares, illness or because they have a perceived or physical abnormality or a disability; Disabilities involved in documented cases included learning disabilities, mental ill health, epilepsy, autism, a stammer and deafness;
- Changes and / or complexity in family structure or dynamics: there is research evidence (see Stobart, Child Abuse linked to Accusations of Spirit Possession - see related links] that children become more vulnerable to accusations of spirit possession following a change in family structure (e.g. a parent or carer having a new partner or transient or several partners). The family structure also tended to be complex so that exact relationships to the child were not immediately apparent. This may mean the child is living with extended family or in a private fostering arrangement (see Children Living Away from Home Procedure, Private Fostering - see related link). In some cases, this may even take on a form of servitude;
- Change of family circumstances for the worse: a spiritual explanation is sought in order to rationalise misfortune and the child is identified as the source of the problem because they have become possessed by evil spirits. Research evidence is that the family's disillusionment very often had its roots in negative experiences of migration:
- Isolation and immigration: In the vast majority of identified cases in the UK to date, the families were first or second generation migrants suffering from isolation from extended family, a sense of not belonging or feeling threatened or misunderstood. These families can also have significantly unfulfilled expectations of quality of life in the UK;
- Parental difficulties: a parent's mental ill health appears to be attributed to a child being possessed in a significant minority of cases. Illnesses typically involved include post-traumatic stress disorder, depression and schizophrenia.

The law in relation to child abuse linked to faith and belief

There are sufficient existing laws within the UK with which to prosecute those responsible for child abuse linked to faith and/or belief thereby negating any need for further more specific offences.

What to do if you suspect a child is at risk from abuse linked to faith and/or belief

Concerns about a child’s welfare can vary greatly in terms of their nature and seriousness. If you have concerns about a child, you should ask for help. You should discuss your concerns with your manager, a named or designated professional or a designated member of staff. For example;

At Noor Ul Islam Inspire Madrassa (both teaching and non-teaching) concerns should be reported via the schools designated safeguarding lead. The safeguarding lead will usually decide whether to make a referral to children's social care

Private fostering arrangements

A private fostering arrangement is essentially one that is made privately (that is to say without the involvement of a local authority) for the care of a child under the age of 16 (under 18, if disabled) by someone other than a parent or close relative with the intention that it should last for 28 days or more.

Private foster carers may be from the extended family, such as a cousin or great aunt.

However, a person who is a relative under the Children Act 1989 i.e. a grandparent, brother, sister, uncle or aunt (whether of the full or half blood or by marriage) or step-parent will not be a private foster carer.

A private foster carer may be a friend of the family, the parent of a friend of the child, or someone previously unknown to the child's family who is willing to privately foster a child. The period for which the child is cared for and accommodated by the private foster carer should be continuous, but that continuity is not broken by the occasional short break.

Most privately fostered children remain safe and well. Private fostering arrangements can be a positive response from within the community to difficulties experienced by families. Nonetheless, privately fostered children remain a diverse and potentially vulnerable group; safeguarding concerns have been raised in some cases so it is important that schools/settings are alert to possible safeguarding issues, including the possibility that a child has been trafficked into the country.

The private foster carer becomes responsible for providing the day to day care of the child in a way which will promote and safeguard his welfare. Overarching responsibility for safeguarding and promoting the welfare of the privately fostered child remains with the parent or other person with parental responsibility.

Local authorities have a duty to satisfy themselves that the welfare of children who are, or will be, privately fostered within their area is being, or will be, satisfactorily safeguarded and promoted. It is the local

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.

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 notify the local authority of the circumstances.

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 organised crime by

gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber bullying and grooming. However, it also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

The school/setting 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 recognise 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:

- 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.
- 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)

Part 3.

Appendices

Appendix 1. Key Safeguarding Contacts in Waltham Forest

Name	Agency	Contact details
Police Referral Desk	Metropolitan Police Child Abuse & Investigation Team (CAIT)	020 8345 3633 020 8345 3693
Designated Nurse for Safeguarding Children	Clinical Commissioning Group (CCG) – GP Services	020 3688 2638
Duty Child Protection Coordinators	Waltham Forest Children & Families Services	020 8496 8279
Team Manager, Children's Emergency Duty	Waltham Forest Children & Families Services	020 8496 3000
Local Authority Designated Officer (LADO) & Safeguarding in Education	Waltham Forest Children & Families Services	020 8496 3646
Waltham Forest Multi Agency Safeguarding Hub (MASH) Team Team Manager, MASH	Waltham Forest Children & Families Services	cscreferrals@walthamforest.gov.uk 020 8496 2307/2310/2311/2316 020 8496 2317
Designated Doctor for Child Protection	North East London Foundation Trust (NELFT)	020 8430 7893 07795 548987
Named Nurse for Safeguarding Community Health Services, School Nursing, Health Visitors and Child & Adolescent Mental Health Services (CAHMS)	North East London Foundation Trust (NELFT)	020 8430 7827/7822 07568 130143 Fax: 020 8430 7981
Named Nurse for Safeguarding	Barts Health, Whipps Cross Paediatric A&E	020 8535 6855 bleep 514 Pager: 08700555500 ask for 850122 Secretary: Ext 5072

Please print and display this page next to every staff phone in your setting.

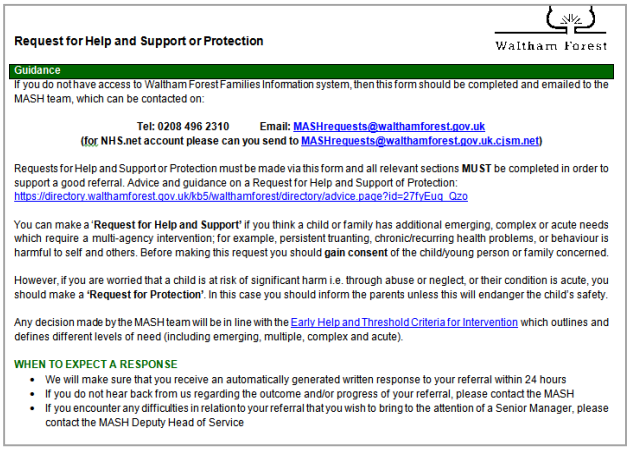
Appendix 2. Related Policies

This policy should be read alongside **Noor Ul Islam Inspire Madrassa** 's policies and procedures on:

- Risk Assessment Policy
- Safer Recruitment policy known as Recruitment and Induction Policy
- Concerns about a member of staff known as Disciplinary Procedure
- Anti Bullying Policy
- Health & Safety

Appendix 3. MASH Referral form

Guide for threshold and practice | MASH Referral form | Early Help Information



Request for Help and Support or Protection

Waltham Forest

Guidance

If you do not have access to Waltham Forest Families Information system, then this form should be completed and emailed to the MASH team, which can be contacted on:

Tel: 0208 496 2310 Email: MASHrequests@walthamforest.gov.uk
(for NHS.net account please can you send to MASHrequests@walthamforest.gov.uk.cism.net)

Requests for Help and Support or Protection must be made via this form and all relevant sections **MUST** be completed in order to support a good referral. Advice and guidance on a Request for Help and Support of Protection: https://directory.walthamforest.gov.uk/kb5/walthamforest/directory/advice.page?id=27fyEug_Qzo

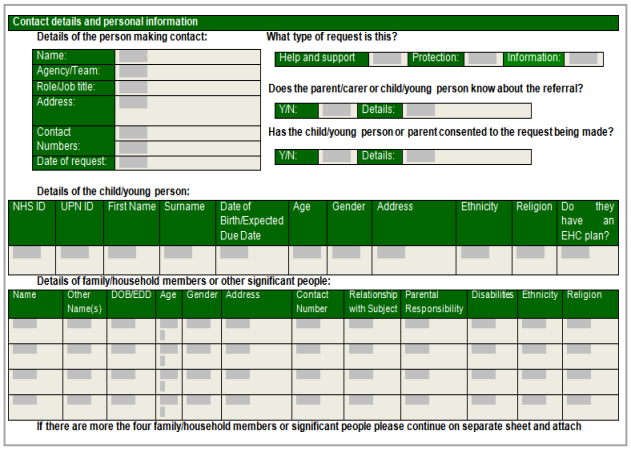
You can make a '**Request for Help and Support**' if you think a child or family has additional emerging, complex or acute needs which require a multi-agency intervention; for example, persistent truanting, chronic/recurring health problems, or behaviour is harmful to self and others. Before making this request you should **gain consent** of the child/young person or family concerned.

However, if you are worried that a child is at risk of significant harm i.e. through abuse or neglect, or their condition is acute, you should make a '**Request for Protection**'. In this case you should inform the parents unless this will endanger the child's safety.

Any decision made by the MASH team will be in line with the Early Help and Threshold Criteria for Intervention which outlines and defines different levels of need (including emerging, multiple, complex and acute).

WHEN TO EXPECT A RESPONSE

- We will make sure that you receive an automatically generated written response to your referral within 24 hours
- If you do not hear back from us regarding the outcome and/or progress of your referral, please contact the MASH
- If you encounter any difficulties in relation to your referral that you wish to bring to the attention of a Senior Manager, please contact the MASH Deputy Head of Service



Contact details and personal information

Details of the person making contact:

Name:	
Agency/Team:	
Role/Job title:	
Address:	
Contact Numbers:	
Date of request:	

What type of request is this?

Help and support | Protection: | Information:

Does the parent/carer or child/young person know about the referral?

Y/N: | Details:

Has the child/young person or parent consented to the request being made?

Y/N: | Details:

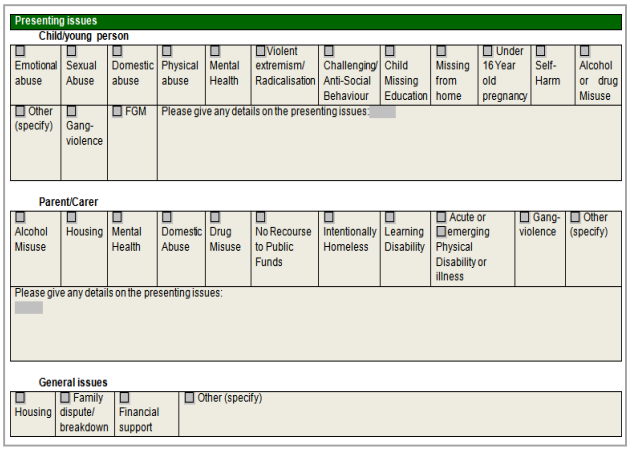
Details of the child/young person:

NHS ID	UPN ID	First Name	Surname	Date of Birth/Expected Due Date	Age	Gender	Address	Ethnicity	Religion	Do they have an EHC plan?

Details of family/household members or other significant people:

Name	Other Name(s)	DOB/EDD	Age	Gender	Address	Contact Number	Relationship with Subject	Parental Responsibility	Disabilities	Ethnicity	Religion

If there are more the four family/household members or significant people please continue on separate sheet and attach



Presenting issues

Child/young person

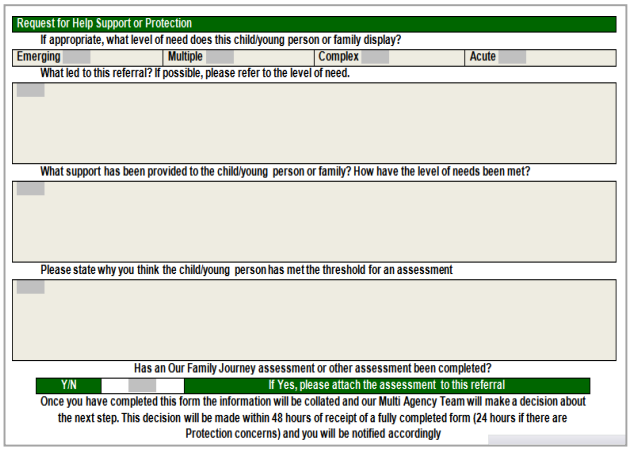
☐ Emotional abuse	☐ Sexual Abuse	☐ Domestic abuse	☐ Physical abuse	☐ Mental Health	☐ Violent extremism/ Radicalisation	☐ Challenging/ Anti-Social Behaviour	☐ Child Missing Education	☐ Missing from home	☐ Under 16 Year old pregnancy	☐ Self-Harm	☐ Alcohol or drug Misuse
☐ Other (specify)	☐ Gang-violence	☐ FGM	Please give any details on the presenting issues:								

Parent/Carer

☐ Alcohol Misuse	☐ Housing	☐ Mental Health	☐ Domestic Abuse	☐ Drug Misuse	☐ No Recourse to Public Funds	☐ Intentionally Homeless	☐ Learning Disability	☐ Acute or ☐ emerging Physical Disability or illness	☐ Gang-violence	☐ Other (specify)
Please give any details on the presenting issues:										

General issues

☐ Housing	☐ Family dispute/ breakdown	☐ Financial support	☐ Other (specify)



Request for Help Support or Protection

If appropriate, what level of need does this child/young person or family display?

Emerging	Multiple	Complex	Acute

What led to this referral? If possible, please refer to the level of need.

What support has been provided to the child/young person or family? How have the level of needs been met?

Please state why you think the child/young person has met the threshold for an assessment

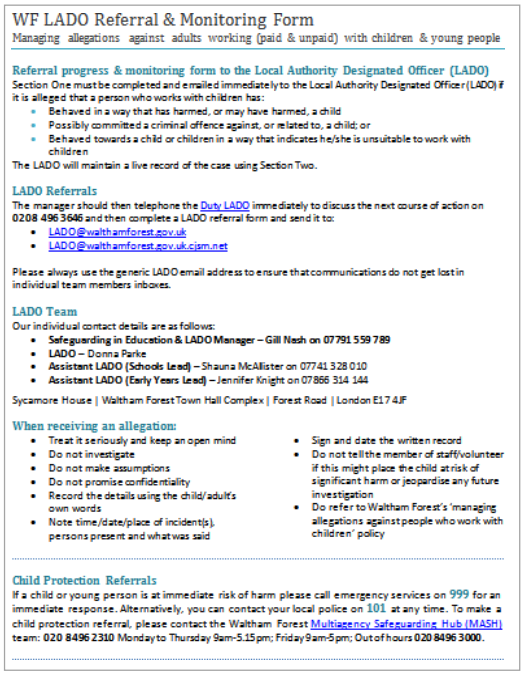
Has an Our Family Journey assessment or other assessment been completed?

Y/N | If Yes, please attach the assessment to this referral

Once you have completed this form the information will be collated and our Multi Agency Team will make a decision about the next step. This decision will be made within 48 hours of receipt of a fully completed form (24 hours if there are Protection concerns) and you will be notified accordingly

Appendix 4: LADO Referral– Staff Allegations

Allegations against professionals webpage | LADO Referral Form



WF LADO Referral & Monitoring Form

Managing allegations against adults working (paid & unpaid) with children & young people

Referral progress & monitoring form to the Local Authority Designated Officer (LADO)

Section One must be completed and emailed immediately to the Local Authority Designated Officer (LADO) if it is alleged that a person who works with children has:

- Behaved in a way that has harmed, or may have harmed, a child
- Possibly committed a criminal offence against, or related to, a child; or
- Behaved towards a child or children in a way that indicates he/she is unsuitable to work with children

The LADO will maintain a live record of the case using Section Two.

LADO Referrals

The manager should then telephone the Duty LADO immediately to discuss the next course of action on **0208 496 3646** and then complete a LADO referral form and send it to:

- LADO@walthamforest.gov.uk
- LADO@walthamforest.gov.uk.cjsm.net

Please always use the generic LADO email address to ensure that communications do not get lost in individual team members inboxes.

LADO Team

Our individual contact details are as follows:

- **Safeguarding in Education & LADO Manager – Gill Nash on 07791 559 789**
- **LADO** – Donna Parke
- **Assistant LADO (Schools Lead)** – Shauna McAllister on 07741 328 010
- **Assistant LADO (Early Years Lead)** – Jennifer Knight on 07866 314 144

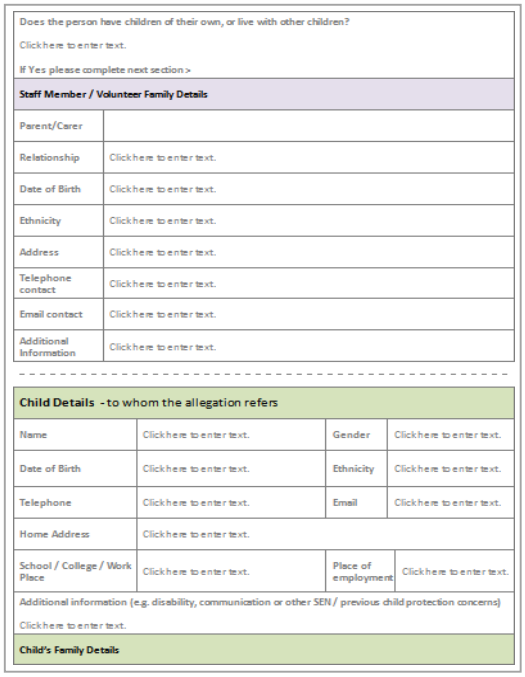
Sycamore House | Waltham Forest Town Hall Complex | Forest Road | London E17 4JF

When receiving an allegation:

- Treat it seriously and keep an open mind
- Do not investigate
- Do not make assumptions
- Do not promise confidentiality
- Record the details using the child/adult's own words
- Note time/date/place of incident(s), persons present and what was said
- Sign and date the written record
- Do not tell the member of staff/volunteer if this might place the child at risk of significant harm or jeopardise any future investigation
- Do refer to Waltham Forest's 'managing allegations against people who work with children' policy

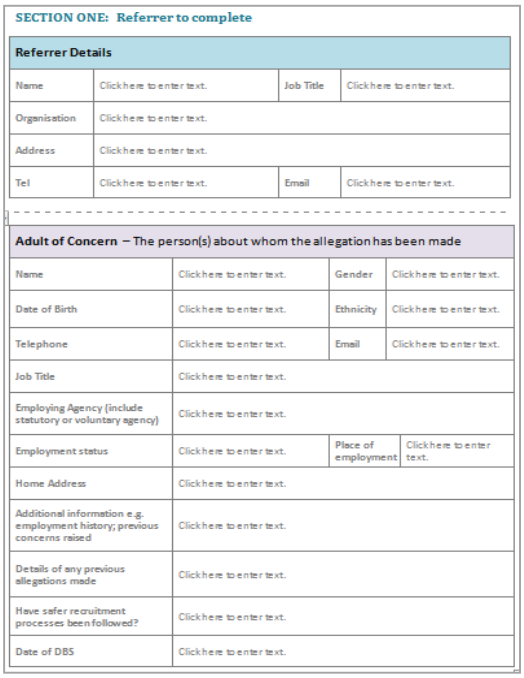
Child Protection Referrals

If a child or young person is at immediate risk of harm please call emergency services on 999 for an immediate response. Alternatively, you can contact your local police on 101 at any time. To make a child protection referral, please contact the Waltham Forest Multiagency Safeguarding Hub (MASH) team: **020 8496 2310** Monday to Thursday 9am-5.15pm; Friday 9am-5pm; Out of hours **020 8496 3000**.



Does the person have children of their own, or live with other children?	
Click here to enter text.	
If Yes please complete next section >	
Staff Member / Volunteer Family Details	
Parent/Carer	
Relationship	Click here to enter text.
Date of Birth	Click here to enter text.
Ethnicity	Click here to enter text.
Address	Click here to enter text.
Telephone contact	Click here to enter text.
Email contact	Click here to enter text.
Additional Information	Click here to enter text.

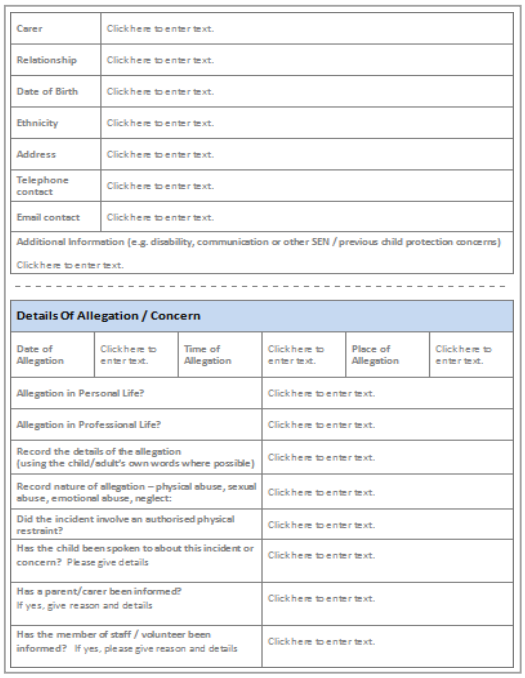
Child Details - to whom the allegation refers			
Name	Click here to enter text.	Gender	Click here to enter text.
Date of Birth	Click here to enter text.	Ethnicity	Click here to enter text.
Telephone	Click here to enter text.	Email	Click here to enter text.
Home Address	Click here to enter text.		
School / College / Work Place	Click here to enter text.	Place of employment	Click here to enter text.
Additional information (e.g. disability, communication or other SEN / previous child protection concerns)			
Click here to enter text.			
Child's Family Details			



SECTION ONE: Referrer to complete

Referrer Details			
Name	Click here to enter text.	Job Title	Click here to enter text.
Organisation	Click here to enter text.		
Address	Click here to enter text.		
Tel	Click here to enter text.	Email	Click here to enter text.

Adult of Concern – The person(s) about whom the allegation has been made			
Name	Click here to enter text.	Gender	Click here to enter text.
Date of Birth	Click here to enter text.	Ethnicity	Click here to enter text.
Telephone	Click here to enter text.	Email	Click here to enter text.
Job Title	Click here to enter text.		
Employing Agency (include statutory or voluntary agency)	Click here to enter text.		
Employment status	Click here to enter text.	Place of employment	Click here to enter text.
Home Address	Click here to enter text.		
Additional information e.g. employment history; previous concerns raised	Click here to enter text.		
Details of any previous allegations made	Click here to enter text.		
Have safer recruitment processes been followed?	Click here to enter text.		
Date of DBS	Click here to enter text.		



Carer	Click here to enter text.
Relationship	Click here to enter text.
Date of Birth	Click here to enter text.
Ethnicity	Click here to enter text.
Address	Click here to enter text.
Telephone contact	Click here to enter text.
Email contact	Click here to enter text.
Additional Information (e.g. disability, communication or other SEN / previous child protection concerns)	
Click here to enter text.	

Details Of Allegation / Concern					
Date of Allegation	Click here to enter text.	Time of Allegation	Click here to enter text.	Place of Allegation	Click here to enter text.
Allegation in Personal Life?			Click here to enter text.		
Allegation in Professional Life?			Click here to enter text.		
Record the details of the allegation (using the child/adult's own words where possible)			Click here to enter text.		
Record nature of allegation – physical abuse, sexual abuse, emotional abuse, neglect:			Click here to enter text.		
Did the incident involve an authorised physical restraint?			Click here to enter text.		
Has the child been spoken to about this incident or concern? Please give details			Click here to enter text.		
Has a parent/carer been informed? If yes, give reason and details			Click here to enter text.		
Has the member of staff / volunteer been informed? If yes, please give reason and details			Click here to enter text.		

What other actions has your agency/organisation undertaken so far?	Click here to enter text.		
Are any other agencies involved?	Click here to enter text.		
Referrers Name	Click here to enter text.	Referrers Agency	Click here to enter text.
Referrer signature	Click here to enter text.		
Date	Click here to enter text.	Time	Click here to enter text.

SECTION TWO – Progress & Monitoring Form (LADO Team Only)

LADO Team to Complete	
Date Allegation Received	Click here to enter text.
Date Opened	Click here to enter text.
Summary of allegation (additional to referral information above)	Click here to enter text.

Chronology of events

Date	Detail of action	Recording officer
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.

Outcome summary

Outcome	Definition	Tick all applicable
Allegation substantiated	Allegations supported or established by evidence or proof	☐
Allegation unsubstantiated	An unsubstantiated allegation is not the same as a false allegation. It simply means that there is insufficient identifiable evidence to prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.	☐
Allegation unfounded	This indicates that the person making the allegation misinterpreted the incident or was mistaken about what they saw. Alternatively they may not have been aware of all the circumstances. For an allegation to be classified as unfounded, it will be necessary to have evidence to disprove the allegation	☐
Malicious allegation	This means there is clear evidence to prove there has been a deliberate act to deceive and the allegation is entirely false.	☐
S47 enquiries	This applies where LB Waltham Forest has made s.47 enquiries (where it has reasonable cause to suspect that a child is suffering or likely to suffer, significant harm).	☐
Criminal investigation and outcome	This applies where the police have been involved in investigating an allegation to determine whether or not a criminal offence has been committed.	☐
Disciplinary proceedings	This applies where the employer has considered the allegation under the terms of their own internal disciplinary investigation	☐
Dismissal	This applies where the employer has decided, following due consideration of the allegation, to dismiss the member of staff from their employment.	☐
Referral to regulatory body	For example the General Teaching Council, General Social Care Council etc.	☐