

2024-25

Central Film School

Safeguarding Policy

1. Purpose of this Policy

This policy is intended for all employees of Central Film School London Ltd and anyone else who is affected by its work activities. The aim of this Policy is to promote good practice to:

- Provide children and students with appropriate safety and protection whilst visiting/in the care of CFS;
- Allow all staff/volunteers to make informed and confident responses to specific safeguarding issues.

CFS is determined to ensure that all necessary steps are taken to protect from harm those children and students who participate in its provision.

This policy establishes CFS' position, role and responsibilities and clarifies what is expected from everybody involved within the company.

Everyone who participates in CFS activities should be able to participate in an enjoyable and safe environment and be protected from abuse. This is the responsibility of every member of staff involved in this organisation.

CFS recognises its responsibility to safeguard the welfare of all children and students by protecting them from physical, sexual or emotional abuse, neglect and bullying. We will always act in the best interest of a child or vulnerable adult.

2. Policy Statement

At CFS we are committed to safeguarding children and students and we expect everyone who works in our school to share this commitment. Staff have a professional duty to take reasonable steps to see that the children and students are safe from harm while involved in CFS activities.

All children and students have a right to protection, and the needs of disabled students and others who may be particularly vulnerable must be taken into account.

CFS will ensure the safety and protection of all children and students involved in its activities through adherence to the Safeguarding Students guidelines it has adopted.

3. Employer's Responsibility

In our provision for children CFS will ensure that:

- The welfare of the child and student is paramount
- All children and students, whatever their age, culture, disability, gender, language, racial origin, religious beliefs and/or sexual identity have the right to protection from abuse
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately
- All staff have a responsibility to report concerns to the Designated Safeguarding Leads (DSL)
 - o CFS' DSL for students is Donovan Synmoie, Head of School
 - CFS' DSL for children and visitors is Natalia Rajapakse, Senior Admissions Manager
 - CFS' overall DSL is Rory Curley, CEO

4. Employees Responsibilities

CFS' Safeguarding Children and Students Policy will be implemented by adhering to the policy guidelines contained within this document. All staff who work with children and students must comply with this Policy failing which disciplinary action may be taken under the CFS Disciplinary Procedure. Adherence of staff to this Policy will be monitored by line managers and ultimately by the person named above as being responsible for this policy.

The guidelines cover three main areas:

- Staff recruitment, support and training
- Staff conduct
- Safeguarding procedures

5. Children's and Student's Rights

All children and students have needs and rights:

- The need for physical care and attention
- The need for intellectual stimulation
- The need for emotional love and security
- The need for social contact and relationships
- The right to have their needs met and safeguarded
- The right to be protected from neglect, abuse and exploitation
- The right to be protected from discrimination
- The right to be treated as an individual

All these rights will be made transparent before any learning is undertaken.

6. Roles

For all activities and events involving children and students at CFS, at least one member of staff should lead on child and student protection, raising awareness of this policy and its guidelines among other staff and where appropriate the children, students, accompanying school/care staff and parents.

Where staff are likely to engage with a child or a student on a one-to-one basis, it is imperative that they are appropriately trained. The "Lead member of staff" referred to in this Policy is the Designated Safeguarding Lead, or, in their absence, the overall DSL.

7. Staff Recruitment, Support and Training

CFS recognises that anyone may have the potential to abuse children and students in some way and that all reasonable steps are taken to ensure unsuitable people are prevented from working with children and students.

Pre-selection checks must include the following:

- All volunteers/staff should complete an application form. The application form will elicit information about an applicant's past and a self-disclosure about any criminal record.
- Consent should be obtained from an applicant to seek information from the Criminal Records Bureau.
- Where an offer of employment is made for a role that involves regulated activity with Under 18's, new staff will be required to complete a self-declaration form
- Two confidential references, including one regarding previous work with children (if applicable).
- Evidence of identity should be provided (e.g., passport or driving licence with photo).

8. Interview and Induction

All employees (and volunteers) will be required to undergo an interview carried out to acceptable protocol and recommendations. All employees and volunteers should receive formal or informal induction, during which:

- A check should be made that the application form has been completed in full (including sections on criminal records and self-disclosures).
- Their qualifications should be substantiated.
- The job requirements and responsibilities should be clarified.
- Child and student protection procedures are explained and training needs are identified.

9. Training

In addition to pre-selection checks, the safeguarding process includes training after recruitment to help staff and volunteers to:

- Analyse their own practice against established good practice, and to ensure their practice is likely to protect them from false allegations.
- Recognise their responsibilities and report any concerns about suspected poor practice or possible abuse.
- Respond to concerns expressed by a child or student.
- Work safely and effectively with children and students.

10. Staff Conduct

All staff should demonstrate exemplary behaviour in order to protect themselves from allegations of misconduct. Staff should maintain their standards of behaviour therefore acting as a role model.

The following are common sense examples of how to create a positive culture and climate.

10.1 Good Practice

- Always work in an open environment (e.g. avoiding private or unobserved situations and encouraging open communication with no secrets). There may be occasions when a confidential interview or a one-to-one meeting is necessary and in such circumstances, if the meeting is with a child, it should be conducted in a room with an open door or visual access. Where this is not possible, the member of staff should ensure that there is another adult nearby.
- Never make gratuitous physical contact with a participant. [There may be
 occasions where a distressed participant needs comfort which may include
 physical comforting and staff should use their discretion to ensure that it is
 appropriate and not unnecessary or unjustified contact.] Be cautious about
 physical contact in games. Where physical contact is inescapable (e.g. to
 demonstrate equipment or a particular exercise/move) staff should be aware
 of the limits within which such contact should take place and of the possibility
 for misinterpretation of such contact.
- Treat all children and students equitably and with respect and dignity. CFS will take positive action to eliminate discrimination against any person or group of people.
- Staff should ensure that children and students are protected from discrimination on any grounds, including ability and challenge discriminating comments and behaviour. Activities should be designed to include everyone and to promote positive attitudes towards differences.
- Be clear about what the objectives of the activity are before it begins and always put the welfare of each child and student first, before winning or achieving goals.
- Never contradict an instruction given by an instructor/project manager or other member of staff.

- Maintaining a safe and appropriate distance with children and students (e.g. it
 is not appropriate for staff or volunteers to have an intimate relationship with a
 child or student, or to share a room with them during residential activities).
- Building balanced relationships based on mutual trust which empowers children and students to share in the decision-making process.
- Ensuring that if children or students of mixed genders are to be supervised, they should always be accompanied by a male and female member of staff. However, remember that same gender abuse can also occur.
- Ensuring that at residential events, adults should not enter children's or students' rooms (unless it is essential because someone is ill and in these circumstances, adopt the procedures set out above in relation to private interviews). Staff should never invite children or students into their rooms.
- Conducting yourself in a manner that sets a good example to the participants. Be an excellent role model.
- Always give enthusiastic and constructive feedback rather than negative criticism.
- Never use physical force against a participant, unless it constitutes
 reasonable restraint to protect them or another person or to protect property. If
 it is necessary to restrain a participant because they are an immediate danger
 to themselves or others or to property then the minimum amount of force
 should be used for the shortest amount of time. Remain calm and get the
 attention and support of other staff. The incident should be recorded in writing,
 with a witness statement (where possible), immediately afterwards.
- Never using physical punishment
- Securing parental consent in writing if the need arises to administer emergency first aid and/or other medical treatment where the participant is under 16. First aid given should be recorded in writing and reported to the lead member of staff who will inform the parent or carer (refer to Health & Safety policy).
- Always keep a written record of any injury that occurs, along with the details
 of any treatment given (refer to Health & Safety policy).
- Request written parental consent if staff are required to transport children in their cars.
- Always refer any problems to the lead member of staff.
- Question any unknown adult who enters CFS' premises and/or who attempts to engage with the children or students.

10.2 Practices never to be sanctioned

- Engaging in rough, physical or sexually provocative games, including horseplay.
- Sharing a room with a child or student.
- Engaging in any form of inappropriate touching.
- Inappropriate use of language and/or behaviour. This should always be challenged.¹
- Sexually suggestive comments to a child or student, even in fun.
- Reducing a child or student to tears as a form of control.
- Allegations made by a child or student to go unchallenged, unrecorded or not acted upon. Do things of a personal nature for children or students that they can do for themselves (e.g. apply sunscreen).²

 Invite or allow children or students to stay with you at your home or arrange meetings outside of CFS.

¹ Challenging Behaviour: 'Bad' behaviour is often a response to a situation, or a way to seek attention. If children and students are occupied there will be less of a need to seek attention and less of a chance for boredom to set in.

The following guidelines can be used to deal with challenging behaviour constructively:

- • Be aware of what unacceptable behaviour is. Ask your lead member of staff if you are unsure. Children and students attending certain activities will have been issued with a code of conduct.
- • Explain to children and students why certain behaviour is unacceptable. This makes them feel responsible for their behaviour and they are less likely to repeat it.
- • Make sure it is the behaviour which is punished and not the person. Always avoid labelling someone as 'bad'.
- If appropriate, ignore the bad behaviour for a while a child or student may only be attention seeking.

²It may sometimes be necessary for staff to do things of a personal nature for children or students, particularly if they are young or are disabled. These tasks should only be carried out with the full understanding and consent of parents, if this relates to a child. There is a need to be responsive to a person's reactions. If a person is fully dependent on you, talk with them about what you are doing and give choices where possible. This is particularly so if you are involved in any dressing or undressing of outer clothing, or where there is physical contact, lifting or assisting a child or student to carry out particular activities. Avoid taking on the responsibility for tasks for which you are not appropriately trained.

10.3 Incidents that must be reported/recorded

If any of the following occur you should report this immediately to another colleague and record the incident. If this relates to a child, you should also ensure the parent/guardian of the child is informed:

- if you accidentally hurt a learner
- If they seem distressed in any manner
- if a learner appears to be sexually aroused by your actions
- if a learner misunderstands or misinterprets something you have done.

10.4 Whistleblowing Policy

Purpose and scope:

- All organisations face the risk of things going wrong or of unknowingly harbouring malpractice. CFS believes it has a duty to identify such situations and take the appropriate measures to remedy the situation. By encouraging a culture of openness within our organisation, CFS believes it can help prevent malpractice—prevention is better than cure. That is the aim of this policy.
- By encouraging a culture of openness, CFS wants to encourage you to raise issues which concern you at work. You may be worried that by reporting such issues you will be opening yourself up to victimisation or detriment, or risking your job security; that is quite understandable. However, all staff now enjoy statutory protection if they raise concerns in the right way. This policy is designed to give you that opportunity and protection. Provided you are acting in good faith, it does not matter if you are mistaken. There is no question of you having to prove anything.
- If there is anything which you think CFS should know about please use the
 procedure outlined in this policy. By knowing about malpractice at an early
 stage CFS stands a good chance of taking the necessary steps to safeguard
 the interests of all staff and protect the organisation. In short, please, do not
 hesitate to "blow the whistle" on malpractice.

Note: This policy is not the normal Grievance Procedure. If you have a complaint about your own personal circumstances then you should use the normal

Grievance Procedure. If you have concerns about malpractice within the organisation then you should use the procedure outlined in this policy.

10.5 Our Guarantee

CFS is committed to this policy. If you use this policy to raise a concern, CFS gives you its assurance that you will not suffer any form of retribution, victimisation or detriment. CFS will treat your concern seriously and act according to this policy. You will not be asked to prove anything. If you ask for a matter to be treated in confidence CFS will respect your request and only make disclosures with your consent. You will be given feedback on any investigation and CFS will be sensitive to any concerns you may have as a result of any steps taken under this procedure.

10.6 How to raise your concerns internally

- Tell your immediate direct line manager/supervisor

 If you are concerned about any form of malpractice you should normally first raise the issue with your immediate superior line manager. There is no special procedure for doing this—you can tell that person about the problem or put it in writing if you prefer.
- If you feel unable to tell your immediate direct line manager/supervisor If you feel you cannot tell your immediate direct line manager/supervisor, for whatever reason, please raise the issue with another manager or CEO.

10.7 How CFS will respond

After you have raised your concern, CFS will decide how to respond in a responsible and appropriate manner under this policy. Usually this will involve making internal enquiries first, but it may be necessary to carry out an investigation at a later stage which may be formal or informal depending on the nature of the concern raised.

As far as possible, CFS will keep you informed of the decisions taken and the outcome of any enquiries and investigations carried out. However, CFS will not be able to inform you of any matters which would infringe the duty of confidentiality owed to others.

10.8 Raising your concerns externally (exceptional cases)

The main purpose of this policy is to give you the opportunity and protection you need to raise your concerns internally. CFS would expect that in almost all cases raising concerns internally would be the most appropriate action for you to take. However, if for whatever reason, you feel you cannot raise your concerns internally and you honestly and reasonably believe the information and any allegations are true, you should consider raising the matter with the appropriate regulator.

Caution: If you have good reasons for not using the internal or regulatory disclosure procedures described above, you may consider making wider disclosure by reporting the matter to the police or to the media, for example. However, whistleblowers who make wider disclosures of this type will only be protected (from victimisation and suffering detriment) in certain

circumstances. CFS recommends that you take legal advice before following this course of action since we believe it will be in your own interests to do so.

10.9 Use of photographic/filming equipment

Written consent to take and use images of children or students should be obtained prior to the taking of photographs and/or video footage. Parents of children should be made aware of when, where and how the images may be used in order to give their informed consent. This includes comprehensive information regarding use of images e.g. in print, multimedia, broadcast; for what purpose e.g. promotion, publicity, evaluation, audit, review; and where possible an indication of who the audience will be e.g. the general public, the participating children and their families, other organisations and institutes.

11. Equipment/CFS Library

The school has its own on-site library with a wide range of books, magazines and DVDs. Access is granted free to all students to take resources home or to use on the premises. CFS will ensure that borrowing of Certificate 18 items is restricted to users aged 18 and over. This is managed manually by the school's resource team, who check the student's date of birth before approving any request for age restricted items.

12. Child and Student Protection Procedures

12.1 Procedures to follow

- Ensure we have a lead member of staff for child and student protection who has received appropriate training and support for this role.
- Ensure every member of staff knows the name of the lead staff member responsible for child and student protection and their role.
- Ensure all staff understand their responsibilities in being alert to the signs of abuse and
- responsibility for referring any concerns to the lead staff member. However, staff should remember that they are not trained to deal with situations of abuse or to decide if abuse has occurred.
- Ensure that parents of children have an understanding of the responsibility placed on CFS and staff for child protection by supporting documentation available from CFS.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding child and student protection matters including attendance at case conferences.
- Keep written records of concerns about children and students, even where there is no need to refer the matter immediately. Ensure all records are kept securely in locked locations.

- Develop and then follow procedures where an allegation is made against a member of staff or volunteer.
- Adopt a procedure for dealing with concerns about possible abuse.

12.2 Guidance for Managers responsible for working with under 18's or vulnerable adults

Managers should ensure the following:

- Supervision of under 18's and vulnerable adults by a designated adult.
- That the designated adult should have completed a self-declaration form at the minimum
- Completion of a risk assessment of a venue or activity involving under 18's / vulnerable adults and plans for eventualities.
- Organisation of separate accommodation for female and male under 18s, if there is a need for overnight accommodation.

13. Abuse

13.1. Definition of a child

A child is defined as a person under the age of 18 (The Children Act 1989). For the purpose of this policy document:

- The term 'child' will be used to describe all children and young people under the age of 18 years old participating in Central Film School ('CFS') led activities.
- The term 'student' will be used to describe a person over 18 years of age taking part in CFS led activities.
- The term 'staff' will be used to describe those employed on a contract of employment, at CFS including those working on a freelance basis or voluntary/unpaid basis.

13.2 Definition of Child Abuse

A term to describe a range of ways in which people, usually adults, harm children. Often the adult is a person who is known and trusted by the child.

Child abuse is neglect, physical injury, sexual abuse or emotional abuse inflicted or knowingly not prevented, which causes significant harm or death.

NSPCC (1999)

13.3 Abuse and adults

Organisations and individuals should not be limited in their view of what constitutes abuse or neglect, and should always consider the circumstances of the individual case. Types of abuse include – physical abuse, sexual abuse, psychological abuse, modern slavery, financial abuse, neglect, self-neglect,

domestic violence, discriminatory abuse, and organisational abuse. Child abuse can also include exposure to extremist ideology, forced marriage and female genital mutilation.

13.4 Indicators of abuse and neglect (Keeping children safe in education - September 2018)

All school and college 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:

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 (peer on peer abuse).

Physical abuse:

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

Emotional abuse:

the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning or preventing the child 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.

Sexual abuse:

involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of physical violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in

preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education (see ANNEX 1).

Neglect:

the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

13.5 Female Genital Mutilation (FGM):

Female genital mutilation is a form of child physical abuse. FGM is a collective term for procedures that remove part or all of the external female genitalia for cultural or other non-medical reasons. However, the issue is complex and despite its very severe health consequences, parents and others who have the procedure carried out on their daughters may

not intend it, or regard it, as an act of abuse but as a cultural practice. The impact on children physically and psychologically can be severe, at worst resulting in fatality and it is important that we raise awareness to try and prevent female genital mutilation and to offer support to children who have already been subjected. The Serious Crime Act 2015 introduced a new duty on teachers, social workers and healthcare professionals to report to the police known cases of female genital mutilation (FGM) involving victims aged under 18. Some indicators that female genital mutilation may be about to or has already taken place:

- A conversation with a child may refer to female genital mutilation i.e. she may express anxiety about a "special procedure" or event that is to take place
- A prolonged absence from school and a noticeable change in the child's behaviour on their return, including a reluctance or inability to take part in physical activity
- A prolonged family trip to the country of origin
- A child may spend long periods of time away from class during the day-perhaps indicating bladder or menstrual problems

13.6 Prevent:

Radicalisation is defined as the process by which people come to support terrorism and extremism and, in some cases, to then participate on terrorist activity. Extremism is vocal or active opposition to fundamental British values including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of the armed forces. Children and young people can be drawn

into violence or they can be exposed to the messages of extremist groups by many means. These can include exposure through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet. This can put a young person at risk of being drawn into criminal activity and has the potential to cause significant harm. Examples of extremist causes that have used violence to achieve their ends include animal rights, the far right, internal terrorist and international terrorist organisations.

There is a statutory imperative that we set out the measures we will take in accordance with provisions in the Counter-Terrorism Act 2015 as they apply to higher education providers. We have set out separately to this document the CFS policy with regard to Equality and Diversity, including Religion and Belief, and Freedom of Speech; these policies compliment this strategy and the related action plan. Encouragement of terrorism and/or soliciting support for a proscribed organisation is a criminal offence. Below are outlines of CFS procedures relevant to Prevent.

External Speakers

Procedures for the management of external speakers and events are outlined in the CFS' External Speaker Policy.

IT & Social Media Policy

Procedures for the use and monitoring of IT and Social Media are set out in the relevant policy.

Space for Prayer and Reflection

CFS is a secular organisation which seeks to ensure an inclusive approach to students and staff of all faiths and none. The library is provided as a space for prayer and reflection.

13.7 Staff/Student Training

Staff training will be conducted by the Prevent Lead, who will remind staff about their training obligations. Student training will be ongoing with the Senior Registry & Quality Manager and/or Student Counsellor as a part of the Safeguarding process. Prevent Lead will be reviewing and monitoring on-going training quarterly for staff and students.

Student Council

As a part of CFS, the activities of Student Council fall under the school's Safeguarding policy.

Risk Assessment and Response

CFS recognises the risk that members of our community may be targets for radicalisation and we will take appropriate measures to minimise this risk, working in partnership with relevant agencies through appropriate processes, such as Channel. Where a specific risk is identified, the case will be flagged with the Prevent Lead CEO, who may choose to consult with the Senior Registry & Quality Manager or Student Counsellor. When necessary a case will be referred to the Lambeth's Channel.

13.8 Awareness of actual or likely occurrence of abuse

There are a number of ways in which abuse becomes apparent:

- A child or student discloses abuse.
- Someone else discloses that a child or student has told them or that they strongly believe a child or student has been or is being abused.
- A child or student may show signs of physical injury for which there appears to be no satisfactory explanation.
- A child's or student's behaviour may indicate that it is likely that they are being abused.
- A member of staff's behaviour or in the way in which they relate to a child or student causes concern.

13.9 Issues of Disclosure

Becoming aware of abuse can cause a multitude of emotional reactions, which are personal to each individual. Whatever the reaction and however the abuse has become apparent, actual or suspected, it must be responded to in the correct manner according to the procedure outlined here. Even if the truth of the disclosure is uncertain – an appropriate response has to be made.

A response in accordance with the procedure outlined here will be supported by the lead member of staff and ultimately CFS.

13.10 What to do upon suspicion or disclosure

There are some basic principles in reacting to suspicions, allegations, and/or disclosures.

What to do

- Stay calm
- Listen, hear and believe
- Give time to the person to say what they want
- Reassure & explain that they have done the right thing in telling
- Explain that only professionals who need to know will be informed

What not to do

- Don't panic. Don't over-react. It is extremely unlikely that the participant is in immediate danger
- Don't probe for more information
- Questioning the participant may affect how the participant's disclosure is received at a later date
- Don't make assumptions, don't paraphrase and don't offer alternative

- Act immediately in accordance with the procedure in this policy
- Record in writing as near as verbatim as possible what was said as soon as possible
- Report to the lead member of staff
- Make a record of your report

- explanations. Don't promise confidentiality to keep secrets or that everything will be OK (it might not)
- Don't try to deal with it yourself
- Don't make negative comments about the alleged abuser
- Don't "gossip" with colleagues about what has been said to you
- Don't make a child or student repeat a story unnecessarily

It is the duty of anyone who works with children or students to report disclosure of abuse. It is not for staff to decide whether or not a suspicion or allegation is true. All suspicions or allegations must be taken seriously and dealt with according to this procedure.

13.11 Responsibility

Staff made aware of suspicions, allegations or actual abuse, are responsible for taking the appropriate action according to this procedure.

- The primary responsibility of the person who first suspects or who is told of abuse is to report it and to ensure that their concern is taken seriously whilst adhering to the dos and don'ts above.
- The incident should be reported immediately to the lead member of staff who is then responsible for dealing with allegations or suspicions of abuse.
- Staff should never try to deal with a suspicion, allegation or actual incident of abuse by themself.

13.12 Reporting suspected, alleged, or actual incidents of abuse

It may sometimes be difficult to accept that something that has been disclosed in confidence by a child or student should be passed on to a colleague. But the welfare of the child or student must be paramount and you therefore have a duty to report suspicions, allegations or actual incidents to the designated member of staff.

Information should also be reported if you, yourself, have concerns that a child or student may be suffering harm or at risk of abuse, even if you are unsure about your suspicions. Once this initial report has been made, the lead member of staff will consult with the relevant statutory agencies:

- The local Social Services Emergency Duty Team
- Lambeth Adult Safeguarding -https://beta.lambeth.gov.uk/adult-social-care-and-health/safeguarding/report-concern-about-adult
- Lambeth Child Safeguarding -

https://beta.lambeth.gov.uk/children-young-people-and-families/childrens-social-care/safeguarding-children-parents-and-carers

• NSPCC Child Protection Helpline: 0800 800 500

The following information may be required:

Staff name, address, telephone number, position/role within CFS.

- As many details about the child or student as possible, e.g. name, date of birth, address, home telephone number, and school.
- What the reasons are for telephoning, e.g. the suspicions, allegations, what has been said, giving details of times and dates and the child's or student's emotional state, or what the child or student has said in response to the suspicions/concerns. Make a clear distinction between what is fact, opinion or hearsay.
- What has been done so far?
- Where possible, referral to the police or social services should be confirmed in writing within 24 hours and the name of the contact who took the referral should be recorded.

The relevant statutory agency will then give instructions as to what to do next and take the responsibility for further action.

The Serious Crime Act 2015 sets out a duty on professionals (including teachers) to notify police when they discover that FGM appears to have been carried out on a girl under 18. In schools, this will usually come from a disclosure.

Teachers must personally report to the police cases where they discover that an act of FGM appears to have been carried out; and discuss any such cases with the safeguarding lead and children's social care. The duty does not apply in relation to at risk or suspected cases (For more detailed information, please see ANNEX 3: Mandatory Reporting of Female Genital Mutilation – procedural information).

The Counter Terrorism and Security Act 2015 places a duty on universities to have 'due regard to the need to prevent people from being drawn into terrorism' ('the Prevent duty'). Concerns that a child, or vulnerable adult, has been, or may be exposed to inappropriate/ extremist material or activities should be acted upon in accordance with the appropriate procedure below. Where a Prevent-related concern is established, the school's reporting and recording procedures should be followed, which may include the designated safeguarding lead (or deputy) making a referral to the Channel programme (For more detailed information, please see paras 57-76 of ANNEX 4).

13.13 Statutory Protection Procedures

What happens next is entirely up to the relevant statutory agency, usually Social

Services. Enough information passed onto the agency may lead to the suspicion, allegation or actual incident, being dealt with quickly with few complications, or it may lead to thorough checks with several other organisations and possibly a child protection conference, if this relates to a child.

A child protection conference involves as many people as possible, (including the parents/carers and sometimes the child as well), who discuss the issues that have been raised in the suspicions, allegations, or actual abuse that has been reported and investigated. Decisions about what will happen next are made at the conference.

Quite often, the person who has made the initial report may not be contacted again unless further information is required, and it is not usual practice for the relevant statutory agency to feedback developments. However, if you feel that not enough action has been taken, and the child is still at risk, concerns should be reported again or by contacting the NSPCC Child Protection Helpline for advice on: 0800 800 5000 (available 8:00 AM to 8:00 PM) Monday to Friday and email: help@nspcc.org.uk

13.14 Recording suspected or actual incidents

No matter what happens to a suspicion, allegation or actual incident of abuse, (that is whether or not it is processed through a statutory agency or not), all details must be recorded. Important information to record includes:

- The date and time of disclosure, suspicion, allegation or actual abuse incident.
- Details given to you about the above, e.g. date & time of when things occurred.
- An indication of the parties involved.
- Details of what action you and the School have taken.
- Details of reporting on, e.g. who to (statutory agency) and when.

If for any reason it is decided not to consult with a relevant statutory agency, a full explanation of why must be documented. Recording should be factual, that is, no reference made to your own subjective opinions. Records should be kept completely confidential and secure (always locked away) and only shared with those who need to know about the suspicion, allegation or actual incident of abuse.

13.15 Self-Harm/Self-injury: Guidance and process

Self-injurious behaviours can be described as "Any behaviour, initiated by the individual, which directly results in physical harm to that individual. Physical harm will be considered, self-poisoning, self-inflicted damage to skin or organs, cravings — anticipation, self-starvation, overeating, food purging. Self-injury is often carried out in secret and is not usually a demand for attention. Any assessment of self-injurious behaviours should begin with a consideration of the possible triggers of such behaviour. The causes/triggers of self-injurious behaviours can relate to internal factors and/or external factors. When considering triggers, it is important to not only look at the immediate triggers but recognise that past triggers or an accumulation of many triggers over time may well result in the young person showing self-injurious behaviour. Self Injury is not always linked to suicidal intent.

13.6 What to do if someone discloses the wish to harm themselves? Assess the immediate risk, consider whether the risk is low, medium or high.

Low	Medium	High
Lower level habitual self-injury	New behaviour resulting in self-injury	 Suicidal thoughts, tendencies, actions
 Previously assessed behaviour where there is a clear positive behaviour support plan 	 Injury requiring external medical attention 	 Severe self-injury that poses an immediate risk to the student's health of wellbeing
Encourage the student to speak with the School Counsellor Email: counsellor@centralfilmschool.com	Seek medical advice from a GP or 111 or in a medical emergency call 999	Dial 999, ensure that the student is with a member of staff or another student while you wait for further advice from the emergency services
Increased and additional risks from other risky behaviours or environmental factors		
Seek medical advice from a GP or 111 or in a medical emergency call 999		

Initiate Central Film School Process

- All staff and students should do their best to remain calm
- Inform the Head of School and CEO immediately of an incident which involves students
- Inform the Senior Admissions Manager and CEO immediately of an incident which involves child visitors.
- Make the immediate environment safe and contact the emergency services (111 or 999)
- Head of School and Senior Admissions Manager to ensure the student or child is appropriately monitored and an appropriate support plan of action is put in place

Monitor and Review

- Senior Registry & Quality Manager to monitor weekly or for the duration of the activity/short course and provide a report to the CEO
- Head of School to link internal Student Counsellor.

ANNEX 1

Sexual violence and sexual harassment between children in schools and colleges:

Advice for governing bodies, proprietors, headteachers, principals, senior leadership teams and designated safeguarding leads, September 2021

ANNEX 2

<u>Sharing nudes and semi-nudes: advice for education settings working with children and young people</u>

ANNEX 3

<u>Mandatory Reporting of Female Genital Mutilation – procedural information</u>

ANNEX 4

Revised Prevent duty guidance for England and Wales

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