

Volunteer
Safeguarding Briefing
Sept 2026

Welcome and Thank you for your time

1. Keeping Children Safe in Education - what is it?
2. Levels of incidents logged
3. What to do if a child discloses
4. Document you are signing
5. What to do next

Safeguarding and Child Protection

Safeguarding is Everyone's Business - we recognise our moral and statutory responsibility to safeguard and promote the welfare of all children.

Safeguarding children:

- Providing help and support to meet the needs of children as soon as problems emerge
- Protecting children from maltreatment, whether that is within or outside the home, including online
- Preventing impairment of children's mental and physical health or development.
- Making sure 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.

Child protection:

- Refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Early Help

- Early help is support for children of all ages that improves a family's resilience and outcomes or reduces the chance of a problem getting worse.

1. Keeping Children Safe in Education (KCSIE) - what is it?

Government document detailing actions and responsibilities regarding safeguarding in school - This will be shared with you electronically after this meeting.

PLEASE READ PART 1 - This document has been sent to you along with this presentation

- It is essential that everybody working in a school or college understands their safeguarding responsibilities.
- Safeguarding and promoting the welfare of children is everyone's responsibility. This means that they should consider, at all times, what is in the best interests of the child.
- No single practitioner can have a full picture of a child's needs and circumstances.

1. Working with children

All staff/volunteers should be aware that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. Children may feel embarrassed, humiliated, or being threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent a curiosity - speaking to the DSL/Class teacher if they have concerns about a child.

- Please note that at no point should you touch or have physical contact with the children you are supporting.

2. Online Behaviour

The major change which educational settings need to be aware of relates to increased expectations and responsibilities regarding the school's filtering and monitoring systems for IT.

In terms of action please report any activity you observe to the class teacher or an LSA/TA, in the room. They will advise on the next steps.

3. Child On Child Sexual Violence And Sexual Harassment : Recognise the scale and impact of harassment and abuse, and that non-recognition / downplaying the scale and scope leads to a dangerous culture in the setting. Staff/Parents volunteers must be vigilant and, rather than waiting for a disclosure.

4. Focus on ‘early intervention’

What was previously referred to as “early help” in the KCSIE guidance has now been renamed “**Early help assessment**”. These additions and changes indicate a closer focus on record keeping around low-level concerns, and schools should ensure that this closer focus on early intervention is included in their safeguarding training for all staff. ----- **Vulnerable pupils**

- **Share any concerns with either class teacher or a member of the Safeguarding team:**
Diarmuid Skehan / Natasha Green / Beccy Flaherty / Hugh Thomas /Michelle Taylor (GAP club).
- **Avoid any physical contact with the child in question (unless protecting them from injury)**

2. Levels of incidents logged

1. Pastoral / Incident log - recorded by CT and discussed on a regular basis by pastoral team
2. Vulnerable level of need - students that cover a range of criteria (set out by SCC) who may be in need of support individual/family - monitored by Pastoral / safeguarding team
3. Disclosure - serious allegation - Listen carefully to the child and offer support
immediately dealt with by DSL

All of these need to be logged on our **new online system CPOMS** - This is not your responsibility however it will happen following a conversation with the class teacher or one of the Safeguarding team.

Vulnerable Level of Needs Criteria - Updated

Class Teachers will have vulnerable child indicators stuck up in their room.

Vulnerable Levels of need - Level 2 Early Help

Health - Inadequate, limited or restricted diet; being under or overweight - Missing immunisations / checks - Child is continually slow in reaching developmental milestones - Minor concerns re: hygiene, clothing - Dental problems untreated / decay - Missing routine and non-routine health appointments - Concerns about developmental progress: e.g. bedwetting / soiling; speech impediment; gross motor skills; support and advice required regarding toileting needs (e.g. toilet training and routines, constipation, day-time wetting, night-time wetting). - Vulnerable to emotional problems, perhaps in response to life events such as parental separation e.g. child seems unduly anxious, angry or defiant for their age - Experimenting with tobacco, alcohol or illegal drugs - Frequent accidents - Emerging risk of child exploitation. Current knowledge / information of a key risk - Mild or moderate disability impacting on health as outlined above Housing, work and income - Family seeking asylum or refugees - Periods of unemployment of parent / carer - Parents / carers have limited formal education - Low income / financial / debt problems - Poor state of repair, temporary or overcrowded, or unsafe housing - Intentionally homeless - Serious debts / poverty impact on ability to have basic needs met - Rent arrears put family at risk of eviction or proceedings initiated - Not in Education, Employment or Training post-16	Emotional Development - Some difficulties with family relationships - Some difficulties with peer group relationships and with adults, e.g. 'clinging', anxious or withdrawn - Some evidence of inappropriate responses and actions - Limited engagement in play with others / has few or no friends - Mild or moderate disability impacting on emotional development as outlined above Identity and Self-Esteem - Some insecurities around identity expressed e.g. low self-esteem, sexuality, gender identity - May experience bullying - May be perpetrating bullying behaviour - Lack of confidence is incapacitating - Child subject to persistent discrimination, e.g. racial, sexual or due to disabilities - Victim of crime or bullying Family and Social Relationships - Lack of positive role models - Child has some difficulties sustaining relationships - Low levels of parental conflict / infrequent incidents of domestic dispute - Unresolved issues arising from parents' separation, step-parenting or bereavement - Occasional low level domestic abuse - Children affected by parental imprisonment Social and community including education - Some social exclusion or conflict experiences; low tolerance - Community characterised by negativity towards children / young people - Difficulty accessing community facilities	Learning - Have some identified specific learning needs with targeted support and / or special educational needs and disabilities (SEND) Support Plan - Language and communication difficulties - Regular underachievement or not reaching education potential - Poor punctuality / pattern of regular school absences - Not always engaged in play / learning, e.g. poor concentration - No access to books / toys - Some fixed term exclusions - Mild or moderate disability impacting on learning as outlined above. Behavioural Development - Not always able to understand how own actions impact on others - Finds accepting responsibility for own actions difficult - Responds inappropriately to boundaries / constructive guidance - Finds positive interaction difficult with peers in unstructured contexts - Additional needs from Emotional Well Being and Mental Health Services - One-off / occasional short period missing from home - Mild or moderate disability impacting on behavioural development as outlined above Guidance, boundaries and stimulation - Parent / carer offers inconsistent boundaries - Lack of routine in the home - Child / young person spends considerable time alone, e.g. watching television - Child / young person is not often exposed to new experiences; limited leisure activities - Child / young person can behave in an antisocial way in the neighbourhood, e.g. petty crime	Basic care, ensuring safety and protection - Basic care is not provided consistently - Parent / carer requires advice on parenting issues - Some concerns around child's physical needs being met - Young, inexperienced parents - Teenage pregnancy - Inappropriate child care arrangements and / or too many carers - Some exposure to dangerous situations in the home or community - Unnecessary or frequent visits to GP or unplanned care settings e.g. Emergency Department - Parent / carer stresses starting to affect ability to ensure child's safety Emotional warmth and stability - Inconsistent responses to child / young person by parent / carer - Parents struggling to have their own emotional needs met - Child / young person not able to develop other positive relationships - Starting to show difficulties with attachments Family functioning and well-being - A child / young person is taking on a caring role in relation to their parent / carer, or is looking after younger siblings - No effective support from extended family - Adopted Self-care skills and independence - Mild or moderate disability limits appropriate for age limits amount of self-care possible - Periods of inadequate self-care, e.g. poor hygiene - Child is continually slow to develop age appropriate self-care skills
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No one indicator on its own leads to a child being vulnerable however multiple indicators start to build up a picture of vulnerability which needs immediate action -- **CPOMS - Safeguarding Team awareness**

Level 2 students - 3 or more criteria across different headings on the list - this may lead to Early help Identification

Level 3 students - any 1 criteria listed - further external support may be required.

Being Vigilant - (Your most important role).

Schools are accustomed to monitoring and observing behaviour and are likely to know what is normal for a child.

With regards to safeguarding this may be particularly relevant where there has been no direct disclosure or physical evidence, where there are communication difficulties.

Adopt an attitude of “It is happening here”

Being vigilant may involve monitoring of the following:

Attendance

Behaviour Changes

Mood Change

Demeanor/Appearance

Relationships/Medicals

Injuries/Marks

5. What to do if a child discloses

Do...



- Listen carefully
- Use 'encouragers' to promote the dialogue of the child but not to lead.... eg '...anything else?.....' - ask open ended questions
- Reflect back what the child has said to you, 'So you're telling me that....?'
- Repeat **precisely** what the child has said, '...and then they touched you.....'
- Give the child time to reflect and speak
- Speak to DSL immediately after the disclosure
- Write up the disclosure immediately with a member of the Safeguarding Team - use exact words
- Date, time, sign! - if you have taken notes on paper

Recording disclosures

(not your responsibility - you must talk to member of safeguarding team immediately)

- Do not destroy any original notes in case they are required by court
- Record time, date, place of disclosure on paper, and who else who was around.
- Record child's demeanour and non-verbal behaviours
- Record actual words child uses, do not substitute
- Draw / mark on a body map any bruises
- Be objective in your statements (factual not your opinion)
- This will be uploaded to CPOMS but usually following a conversation with C-SPA

Don't...



- Ask leading questions, 'What did she do next?'
- Substitute child's words/uplevel for correct terminology
- Make promises that you cannot keep - Keep secrets
- Act shocked
- Jump to conclusions
- Speculate or make accusations
- Display any disbelief
- Never delay immediate response to protect a child

It is not your responsibility to decide if the allegation is true or not

7 R's in the disclosure process

Appendix 2 of our CP and Safeguarding Policy

1. Receive
2. Reassure
3. Respond
4. Report
5. Record
6. Remember
7. Review - (Led By DSL)

4. Document you are signing

Cleves School Safeguarding Information for Visitors and Volunteers

Safeguarding is a crucial issue and all adults working at Cleves need to be aware of our Safeguarding policy and the following details.

1. In case of a disclosure of concern

Safeguarding Issues come under **four** categories: Sexual, Physical, Emotional, Neglect. If something happens that you feel is a safeguarding issue or a child discloses information to you:

1. Listen carefully to the child and avoid interrupting if possible
2. Try not to ask leading questions
3. Reassure the child that they have done the right thing and you will let another adult know about their problems (A member of the safeguarding team)
4. Do not agree that you will keep the information secret and to yourself
5. As soon as you get an opportunity write down in as much detail about the disclosure as possible while you can remember accurately what was said.
6. **Bring it to a member of the Safeguarding Team. This must be as soon as possible and before leaving the school.**
 - **Diarmuid Skehan - Deputy Designated Safeguarding Lead (DDSL)**
 - **Natasha Green - Designated Safeguarding Lead (DSL)**
 - **Rebecca Flaherty: Deputy Designated Safeguarding Lead (DDSL)**
 - **Hugh Thomas: Deputy Designated Safeguarding Lead (DDSL)**
 - **Michele Taylor: Deputy Designated Safeguarding Lead (DDSL) - GAP Club**
7. Once shared with the DSL Safeguarding concerns and disclosures must then be kept in strict confidence

There are a number of additional safeguarding categories to be aware of :

1. Pupils at risk of radicalisation or involvement in terrorism,
2. Forced Marriage(FM) where whistleblowing may come from younger siblings,
3. Female Genital Mutilation (FGM)

In all of these circumstances the same procedures apply - Speak to a member of the Safeguarding team

2. Incident Log

If an incident occurs that is not a safeguarding issue but still worth noting it should be recorded. We use CPOMS (Online system) which can often help to build part of a wider picture of a child's situation and can be extremely valuable. If an incident occurs you should:

1. Note down anything you see or are told by a child
2. Speak to the class teacher and give them your report
3. In the absence of the class teacher seek a member of the leadership/safeguarding team and inform them.

3. Whistleblowing

If you wish to contact the Chair of Governor independently of the Cleves email system you can use the following address:

cleveswhistleblowing@outlook.com

If you require a full copy of our safeguarding policy please ask at reception .

Please sign and date a copy of this information sheet to acknowledge you have understand it and will comply with school policy

Signed _____ Date _____

5. What to do next

Thank you for your time:

Your next steps are to contact Mrs Stephenson / Mrs Jacoby / Mrs Poole (Reception) in order to:

1. Complete your DBS application - (**spent and unspent convictions, cautions, reprimands and warnings that are held on the Police National Computer**)
2. Link to docs for reading:
<https://www.cleves.co.uk/our-school/safeguarding/>
3. Complete the Google Form having read all the appropriate documents