

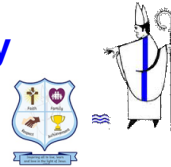


St. Paulinus Catholic Primary Academy

Part of the Blessed Peter Snow Catholic Academy

Inspiring all to live, learn and love in the light of Jesus.

(cf John 8:12)



Child-on Child Abuse Model Policy for schools

Introduction

This school/college recognises that children are vulnerable to and capable of abusing their peers. We take such abuse as seriously as abuse perpetrated by an adult. This includes verbal as well as physical abuse. Child-on-child abuse will not be tolerated or passed off as part of “banter” or “growing up”. We are committed to a whole school approach to ensure the prevention, early identification, and appropriate management of child-on-child abuse within our school and beyond. In cases where child-on-child abuse is identified, we will follow our child protection procedures, taking a contextual approach to support all children and young people who have been affected by the situation. We recognise that girls are more frequently identified as being abused by their peers and, girls are more likely to experience unwanted sexual touching in schools however all child-on-child abuse is unacceptable regardless of gender and will be taken seriously. We recognise that even if there are no reported cases of child-on-child abuse, such abuse may still be taking place and is simply not being reported.

All children can abuse their peers. This can manifest itself in a whole spectrum of behaviours including:

- physical abuse

- prejudice-based and discriminatory bullying
- bullying including cyberbullying
- youth produced imagery (sexting, sharing nudes and semi-nudes)
- abuse in intimate personal relationships between peers
- criminal and sexual exploitation
- upskirting
- initiation/hazing type violence and rituals
- inappropriate harmful sexualised behaviours

The policy will:

- Set out our strategies for preventing, identifying, and managing child-on-child abuse

- Take a contextual approach to safeguarding all children and young people involved.

Acknowledging that children who have allegedly abused their peers or displayed harmful sexual behaviour are themselves vulnerable and may have been abused by peers, parents, or adults in the community.

Responding to Alleged Incidents Responding to reports of sexual violence and sexual harassment

All reports of child-on-child abuse will be made on a case-by-case basis with the designated safeguarding lead or their deputy taking a leading role using their professional judgement and supported by other agencies such as social care or the police as required.

The immediate response to a report

- This school/college will take all reports seriously and will reassure the victim that they will be supported and kept safe.
- All staff will be trained to manage a report.
- Staff will not promise confidentiality as the concern will need to be shared further (for example, with the designated safeguarding lead or social care) staff will however only share the report with those people who are necessary to progress it.
- A written report will be made as soon after the interview as possible recording the facts as presented by the child. These may be used as part of a statutory assessment if the case is escalated later.
- Where the report includes an online element this school/college will follow advice on searching, screening, and confiscation. The staff will not view or forward images unless unavoidable and only if another member of staff (preferably the DSL) is present.
- The DSL will be informed as soon as possible.

Risk Assessment

When there has been a report of sexual violence, the designated safeguarding lead (or a deputy) will make an immediate risk and needs assessment. Where there has been a report of sexual harassment, the need for a risk assessment should be considered on a case-by-case basis. The risk and needs assessment will consider:

- The victim, especially their protection and support.
- The alleged perpetrator; and

For all the other children (and, if appropriate, adult students and staff) at this School, especially any actions that are appropriate to protect them; Risk assessments will be recorded and kept on CPOMs and be kept under review. The designated safeguarding lead (or a deputy) will ensure they are engaging with Children's Social Care

Action following a report of sexual violence and/or sexual harassment

Following an incident, we will consider

- The wishes of the victim in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment.
- The nature of the alleged incident(s), including whether a crime may have been committed and consideration of harmful sexual behaviour.
- The ages of the children involved.
- The developmental stages of the children involved.
- Any power imbalance between the children. For example, is the alleged perpetrator significantly older, more mature, or more confident? Does the victim have a disability or learning difficulty?
- If the alleged incident is a one-off or a sustained pattern of abuse.
- Are there ongoing risks to the victim, other children, adult students or school or college staff, and other related issues and wider context?

Children sharing a classroom:

Whilst we establish the facts of the case and start the process of liaising with children's social care and the police:

- The perpetrator will be removed from any classes they share with the victim.
- We will consider how best to keep the victim and alleged perpetrator a reasonable distance apart on school or college premises and on transport to and from this school/college. These actions are in the best interests of both children and should not be perceived to be a judgment on the guilt of the alleged perpetrator.

Options to manage the report

Manage internally with help from external specialists where appropriate and possible

1. In some cases of sexual harassment, for example, one-off incidents, we may decide that the children concerned do not need early help or statutory intervention and that it would be appropriate to handle the incident internally, perhaps through utilising our behaviour and bullying policies and by

providing pastoral support. This decision will be made based on the principle that sexual violence and sexual harassment are never acceptable and will not be tolerated. All decisions and discussions around making these decisions will be recorded and stored.

2. In line with the above, we may decide that the children involved do not require statutory interventions but may benefit from early support. Early support means providing support as soon as a problem emerges, at any point in a child's life. Providing early support is more effective in promoting the welfare of children than reacting later. Early support can be particularly useful to address non-violent harmful sexual behaviour and may prevent the escalation of sexual violence.

Reporting to Children's Social Care (Duty and Advice)

Where a child has been harmed, is at risk of harm, or is in immediate danger, we will make a referral to duty and advice following our school child protection policies and procedures and Kirklees locally agreed protocols which can be viewed via the link below

[Home - KSCP \(kirkleessafeguardingchildren.co.uk\)](https://www.kirkleessafeguardingchildren.co.uk)

Where statutory assessments are appropriate, the designated safeguarding lead or a deputy will be working alongside and cooperating with, the relevant lead social worker. Collaborative working will help ensure the best possible package of coordinated support is implemented for the victim and, where appropriate, the alleged perpetrator and any other children that require support.

Reporting alleged criminal behaviour to the police

Any report to the police will generally be made through duty and advice as above. The designated safeguarding lead (and their deputies) will follow local processes for referrals. When a report of rape, assault by penetration or sexual assault is made, the starting point is the police.

Vulnerable groups

We recognise that all children can be at risk however we acknowledge that some groups are more vulnerable. This can include the experience of abuse within their family, living with domestic abuse young people in care; children who go missing; children with additional needs (SEN and/or disabilities and who identify as LGBT+ and/or have other protected characteristics under the Equalities Act 2010.

Framework and legislation

This policy is supported by the key principles of the Children's Act, 1989 that the child's welfare is paramount, Working Together, 2018, highlighting that every assessment of a child, 'must be informed by the views of the child'. (Working Together, 2018:21) and Keeping Children Safe in Education, 2022 in relation to part 5 Child on child sexual violence and sexual harassment, through ensuring

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procedures are in place in this School to hear the voice of the child. Child-on-child abuse is also embedded in our School safeguarding and child protection policy.

[Keeping children safe in education - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/keeping-children-safe-in-education)

[Working together to safeguard children - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/working-together-to-safeguard-children)

[Beyond Referrals - Schools \(csnetwork.org.uk\)](https://www.csnetwork.org.uk/beyond-referrals-schools)

Appendix 1

Useful definitions

Harmful Sexual Behaviour: (HSB)

Children's sexual behaviour exists on a wide continuum, from normal and developmentally expected to inappropriate, problematic, abusive, and violent. Problematic, abusive, and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. Harmful sexual behaviour can occur online and/or offline and can also occur simultaneously between the two. Harmful sexual behaviour should be considered in a child protection context.

Sexual Harassment:

This can be defined as 'unwanted conduct of a sexual nature' that can occur online and offline. In the context of this guidance this means 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. It 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.

Sharing nudes and semi-nudes: (youth produced sexual imagery, sexting)

Sexting is when someone shares sexual, naked, or semi-naked images or videos of themselves or others or sends sexually explicit messages. They can be sent using mobiles, tablets, smartphones, laptops - any device that allows you to share media and messages. This is also known as youth produced sexual imagery

Handling youth produced sexual imagery incidents:

Refer to the Designated Safeguarding Lead (DSL)

- DSL meets with the young people involved
- Do not view the image unless it is avoidable
- Discuss with parents, unless there is an issue where that is not possible
- contact social care or the police where there is any concern the young person is at risk of harm

Always refer to the police or social care if incident involves:

- an adult
- coercion, extortion, or grooming
- concerns about capacity to consent (e.g., SEND)
- images show atypical sexual behaviour for the child's developmental stage
- violent acts are depicted
- image shows sex acts and includes a child under 13
- a young person at risk of immediate harm because of the disclosure (e.g., self-harm or suicide)

[Sharing nudes and semi-nudes: how to respond to an incident \(overview\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/sharing-nudes-and-semi-nudes-how-to-respond-to-an-incident-overview)

Upskirting:

This typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm. It is now a criminal offence and may constitute sexual harassment. Cases of 'up skirting' have a mandatory requirement for being reported.

Sexual Violence:

In this guidance this refers to sexual violence in the context of child-on-child sexual violence. Children can and do abuse other children. Sexual violence covers a spectrum of behaviour. It can refer to sexual offences under the Sexual Offences Act 2013. This includes: -

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.

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.

It is important to know that: -

- A child under the age of 13 can never consent to any sexual activity.
- The age of consent is 16.
- Sexual intercourse without consent is rape.

It is also important to differentiate between consensual sexual activity between children of a similar age and that which involves any power imbalance, coercion, or exploitation. Due to their additional training, our designated safeguarding lead (or deputy) will be involved and leading this schools/college response. If in any doubt, they will seek expert advice.

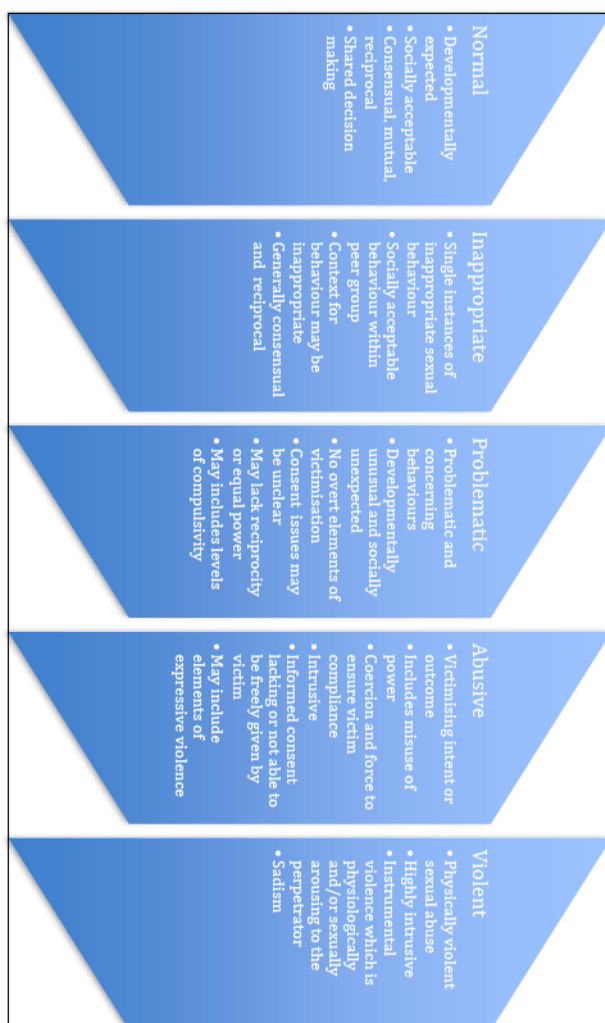
It is important that we as a school/college consider sexual harassment in broad terms. Sexual harassment (as set out above) creates an atmosphere that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence.

Hazing/Initiation:

The practice of rituals, challenges, and other activities involving harassment, abuse or humiliation used as a way of initiating a person into a group. Contextual Safeguarding All staff, but especially the designated safeguarding lead (or deputy) will be considering the context within which incidents and/or behaviours occur. 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.

Appendix 2

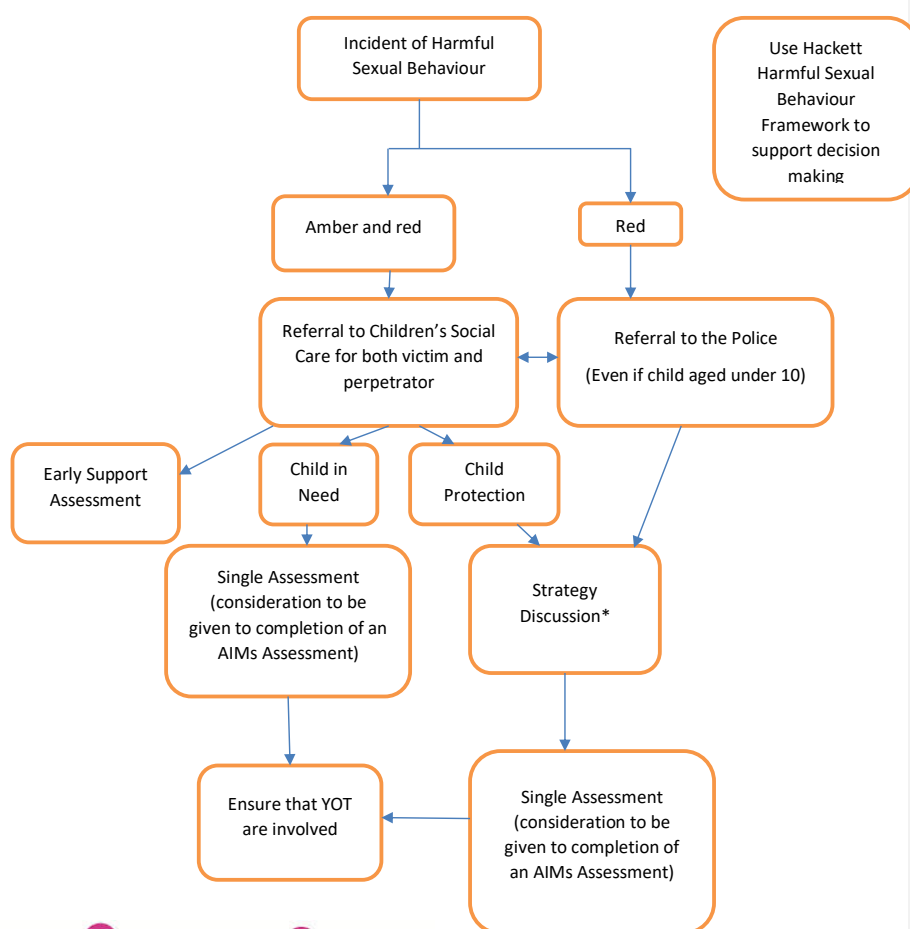
Simon Hackett (2010) has proposed a continuum model to demonstrate the range of sexual behaviours presented by children and young people, from those that are normal, to those that are highly deviant:



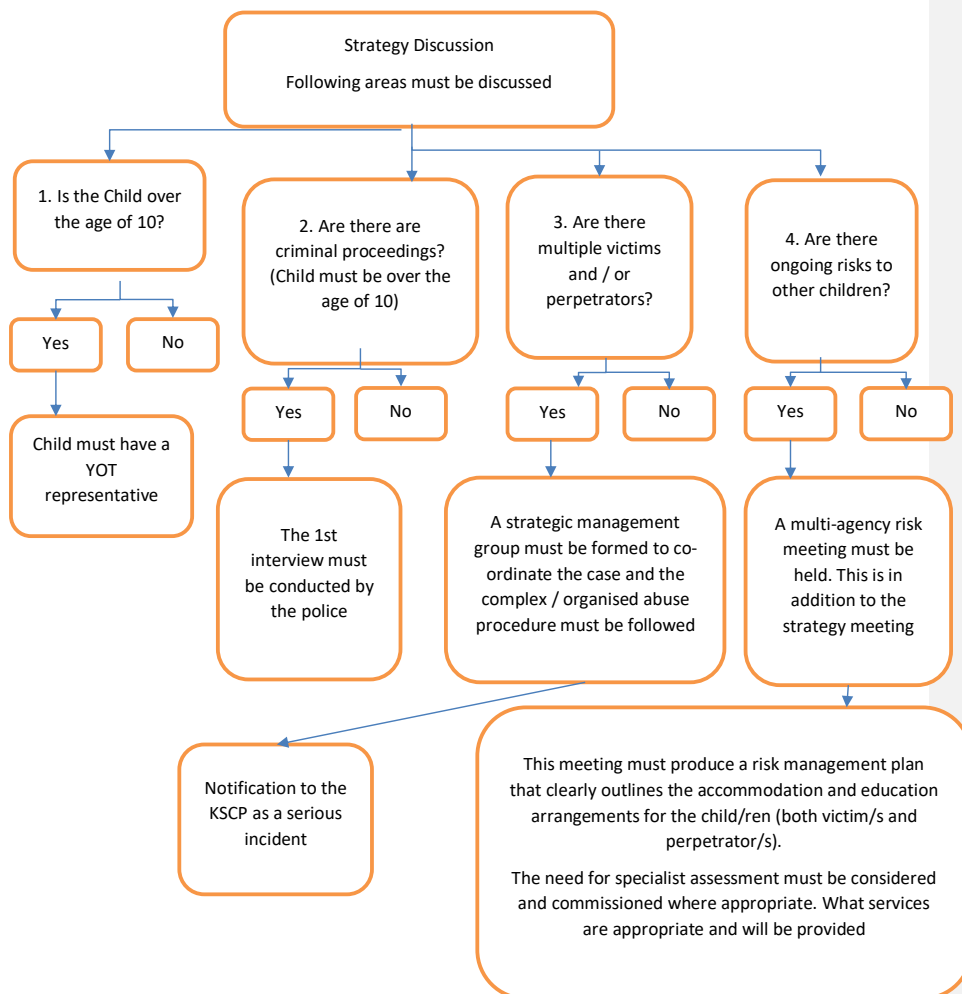
<https://www.nspcc.org.uk/globalassets/documents/publications/harmful-sexual-behaviour-framework.pdf>

Appendix 3

KSCP Harmful Sexual Behaviour Response Checklist



Kirklees Safeguarding Children Partnership



Kirklees Safeguarding Children Partnership

Kirklees Safeguarding Partnership (KCSP) Assessment guidance:

- Need for separate social workers for victim and perpetrator, even if in the same household

All Assessments should include:

- Details of the incident/s (including impact on victim/s, context of abusive behaviours, age of victim/s, nature of relationship between the children / young people involved)
- Child and young person's development, family, and social circumstances
- Whether the "perpetrator" child / young person acknowledges the alleged behaviour
- Whether there are grounds to suspect that the "perpetrator" child / young person has been abused or are adults involved in the development of the harmful sexual behaviour
- Details of previous incident/s
- Assessment of child's need and the need for any specialist assessments (including capacity / learning disability)
- Safety of other young people including a Risk management plan for school and one for home
- Accommodation and Education arrangements
- What services need to be provided



Appendix 4

Risk Assessment Management Plan (RAMP)

For children/young people, s problematic or harmful sexual behaviour

Name of child/young person	
Date of birth	
School/college	
Class/form	
Date of RAMP	

RAMP agreed by:

Name	Role	Agency

N.B. Parents and the child/young person concerned should be part of the plan, along with key agencies/professionals

Information sharing:

To safeguard children, the contents of this RAMP may need to be shared with other professionals on a need-to-know basis. The parents/carers and child (if appropriate) will be informed of who the RAMP is being shared with and why.

Name	Role	Section of RAMP to be shared

Context of RAMP/overview of the concerns:

Give an overview of the incident / reason you are undertaking this RAMP

Please refer to any existing safeguarding documentation which you may have on file

Factors causing concern and evidence:

Please elaborate nature of harm in behaviour box as necessary, e.g., risk of reprisals

Behaviour	Nature of harm? (Physical, sexual, emotional) P/S/E	Fact or potential risk? F/PR	Deliberate/ Accidental/ Involuntary (if known) D/A/I
Harm to Self			
Harm to Peers			
Harm to Staff			
Other Harm (please specify)			
Other Harm (please specify)			

Other agencies views of concern/s:

Children and young people's needs are often complex and require a joined-up response by a range of agencies. This document should reflect the views of other agencies about the level and nature of risk.

	Factors that heighten risk	Factors that lower risk
School		
Health		
Police		
Children's Services <i>Please identify which service/s specifically are working/have worked with the child below</i>		
Other		

Pre check list

This list is for use when completing the daily management plan' (page 18) and should help you to complete the 'strategies to support' section.

Teaching and learning

- ✓ What is the current level of supervision and is this appropriate?
- ✓ Are all staff aware of the level of supervision required?
- ✓ Who is responsible for discussing the child/ young person's risk and needs to other staff?
- ✓ Has the child/ young person engaged in any worrying sexual behaviours within the classroom setting now or previously?
- ✓ Are there particular times when the child/ young person seems more relaxed and content?
- ✓ Are there particular times or circumstances where the child/ young person seems more unhappy/ upset/ distracted/ irritable / distressed?
- ✓ Can extra support / supervision be put in place during difficult times?
- ✓ Are the seating arrangements satisfactory?
- ✓ Are there times when the child/ young person is allowed to leave the class during class times?
- ✓ How is sex and relationships education managed and does the child/ young person need further information?
- ✓ Are there particular areas of risk in the class e.g., when the teacher is occupied with other pupils, and how can this be managed?
- ✓ How will risk be managed during off site activities - school trips, work experience etc?

Unstructured times

- ✓ Have there been concerns about the child/ young person's sexual behaviours in school when out of the classroom? If so, who were the behaviours directed to and in what circumstances? What children may be particularly vulnerable and how can this be managed?
- ✓ Does the location of the toilets cause a problem? Does more than one class share them? Are rules required for going to the toilet?
- ✓ Are there rules about showering, dressing, and undressing for PE that need to be considered? Are staff able to supervise changing appropriately and according to the needs and age of the children concerned?
- ✓ Are there rules about physical contact during play that needs to be considered?
- ✓ Has the child/ young person a history of absconding?
- ✓ Does consideration need to be given to use of school technology? Is school technology (computers,

laptops, tablets, iPads etc) monitored to ensure that children and staff are following the School's Acceptable Use Policy?

- ✓ What are the arrangements for the child/young person to get safely to and from school/college?

- ✓ Are there areas within the school and grounds that are unsupervised?
- ✓ Are there any other building issues that may increase risk? e.g., building works, co-located school, communal playground?
- ✓ Is there a need to make certain areas 'out of bounds' either for the time being or permanently?
- ✓ Can you involve more staff to engage children in constructive play/ conversation to encourage them to be more interactive and, therefore, less open to inappropriate play

- ✓ Have all children been taught about keeping safe? Is any additional input needed due to the current concerns (either individual/group work or as a whole class? Who will take responsibility for coordinating?
- ✓ Are all children aware of who they can go to if they have a worry?
- ✓ Do all children feel that they are listened to and are confident that appropriate action will be taken?
- ✓ If primary, have all children completed a Safety Circle (Foundation/KS1) or a Network of Support (KS2)?
- ✓ If secondary, are young people aware of who they can speak to/who their support networks are in school (including school nurse etc.)?
- ✓ Are children's parents/carers informed of personal safety curriculum Units of Work covered, including E-safety?

Individual work

- ✓ Who will talk to the child/ young person about their sexual behaviours if the need arises? Will this staff member require any support?
- ✓ What are the arrangements for reporting, recording, and monitoring the child's behaviour? Who will be responsible for monitoring and updating the chronology?
- ✓ Are there clear boundaries and expectations of acceptable behaviours?
- ✓ What work is being undertaken to address the child's unmet needs in relation to sexual behaviour? What support has the child/young person been offered to be safe in school?

- ✓ What support is in place to reduce the risk of isolation and to encourage the child to enjoy and achieve?
- ✓ Are there any additional factors to consider in relation to the child's age, sex, race, religion, disability, mental / physical health or other?
- ✓ Who will communicate with parents/carers? What support needs do the parents/carers have? What do parents/carers need to do to support their child

Daily management plan

Please complete the relevant section/s using the '[Checklist of things to consider](#)' on page 15:

1. Teaching and learning		2. Unstructured times	
Potential triggers:	Strategies to support:	Potential triggers:	Strategies to support:
Risk:	Control measures:	Risk:	Control measures:
3. Outside area		4. Children/Young People	
Potential triggers:	Strategies to support:	Potential triggers:	Strategies to support:
Risk:	Control measures:	Risk:	Control measures:
5. Individual work		6. Other triggers (please specify)	
Potential triggers:	Strategies to support:	Potential triggers:	Strategies to support:
Risk:	Control measures:	Risk:	Control measures:

Please ensure that all staff who are involved in the implementation and monitoring of this day-to-day management plan can answer the following questions

Review of RAMP

Evaluate whether any changes need to be made to the RAMP.

A review will consider any new information, change in circumstances, and any work carried out with the child and family.

Agreed actions/amendments for this review:

Summary of progress made	Actions/amendments	Why?	Who and when?
School/ College setting: <i>e.g., have there been any further incidents? If so, what actions were taken and what was the outcome?</i>			
Child / young person: <i>e.g., has the child used the support available in school and from other agencies as part of this plan?</i>			
Response to increased concerns (<i>if there are concerns that the Daily Management Plan on page 18 is ineffective</i>), <i>e.g., can the child remain in school given the current concerns? What additional support can be given?</i>			

Name	Role	Signature

