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Contents

1. Introduction
2. Legislation and Statutory Guidance
3. Tutor Train Ltd.'s responsibilities
4. The Tutor's Responsibilities
5. Types of abuse
6. Additional Vulnerabilities
7. Indications of abuse
8. Taking action - Roles and Responsibilities of the Designated Safeguarding Lead (DSL)
9. Roles and Responsibilities of the Tutor
10. Filtering and Monitoring
11. Reporting a concern/disclosure
12. Safeguarding Structure
13. Child protection concerns
14. Record-Keeping
15. Screening, searching and confiscating
16. Mobile phones and cameras

1. Introduction

- 1.1. 2.1 Tutor Train Ltd (company number 14777030) of 76 High Street Sharnbrook, Bedfordshire, MK44 1PE (the “Company”) requires tutors representing it to provide tuition to students in a safe and nurturing environment.
- 1.2. Tutor Train Ltd believes all young people have the right to learn in a safe and caring environment and that safeguarding children is everyone's responsibility.
- 1.3. The Company bears a moral and legal responsibility to guarantee that, when entrusted with young individuals, they receive the utmost care and are afforded a secure work environment. As per the Children Act 2004, a child or young person is defined as someone below 18 years of age. Tutors representing the company play a crucial role in safeguarding students from harm.
- 1.4. *Child protection* refers to keeping children safe where there is a serious risk of harm.
- 1.5. *Safeguarding* is a term broader than ‘child protection’ and relates to the action taken to promote the welfare of children and protect them from harm.
- 1.6. As a corporate member of the Tutors’ Association, Tutor Train Ltd has a duty to promote regard for its code of ethics for tutors, which references compliance with the Tutor’s Association Child Protection Policy (“TTA CPP”). Our Safeguarding and Child Protection Policy has been compiled with reference to the TTA CPP (and is more stringent), so complying with the Company Safeguarding and Child Protection Policy is considered to fully satisfy this requirement regarding the TTA CPP
- 1.7. The Online Tutoring Policy should be read in conjunction with this policy.
- 1.8. Tutor Trains Ltd’s designated safeguarding lead is Praema Stelling and is contactable on 07500862722 or hello@tutortrain.co.uk and is contactable 24 hours a day, 7 days a week.

Who does the Tutor Train Ltd Safeguarding Policy apply to?

- 1.9. The Tutor Train Ltd Safeguarding Policy applies to everybody who is providing tuition on behalf of the Tutor Train. The Tutor Train Ltd Safeguarding Policy is available to all tutors, clients and schools.

2. Legislation and statutory guidance

- 2.1. This policy has been compiled with reference to the following key Legislation/ Guidance:
- 2.2. The Education Act 2002
- 2.3. Sexual Offences Act 2003
- 2.4. The Children Acts 1989 and 2004
- 2.5. The Childcare Act 2006

- 2.6. Safeguarding Vulnerable Groups Act 2006
- 2.7. Safeguarding Children and Safer Recruitment in Education (DfE 2006)
- 2.8. Childcare (Disqualification) Regulations 2009
- 2.9. Working Together to Safeguard Children (2018)
- 2.10. Keeping Children Safe in Education 2023
- 2.11. Domestic Abuse Act 2021
- 2.12. Prevent Guidance

3. How Tutor Train Ltd keep students safe:

- 3.1. Valuing, listening to and respecting them.
- 3.2. Appointing a nominated Designated Safeguarding Lead.
- 3.3. Adopting child protection and safeguarding best practices through our policies, procedures and code of conduct for Tutors, Tutees and Clients.
- 3.4. Developing and implementing effective online safety.
- 3.5. Following safer recruitment procedures.
- 3.6. Recording, storing and using information professionally and securely, in line with data protection legislation and guidance.
- 3.7. Sharing information about safeguarding and good practice.
- 3.8. Using our procedures to manage any allegations against anyone working for or on behalf of Tutor Train Ltd.
- 3.9. Creating and maintaining an anti-bullying environment and deal effectively with any bullying that may arise.
- 3.10. Ensuring that we have effective complaints and whistleblowing measures in place.
- 3.11. Building a safeguarding culture where we treat each other respectfully and are comfortable sharing concerns.
- 3.12. Ensure Tutors have up-to-date safeguard training.
- 3.13. All young people, whatever their age, culture, disability, gender, language, racial origin, religious belief and/or sexual identity, have the right to protection from abuse.
- 3.14. All suspicions and allegations of inappropriate behaviour will be taken seriously and responded to swiftly and appropriately.

4. The Tutors' Responsibilities

- 4.1.** Every Tutor is bound by a duty of care to their tutees, which means they safeguard their well-being and promote their best interests. This obligation entails adhering to the highest standards of professionalism and exemplary practices to cultivate a secure learning environment for everyone involved.
- 4.2.** The primary responsibilities of the tutor are outlined below; however, it's important to note that this list is not exhaustive. Tutors should:
- 4.2.1. Maintain a professional demeanour and adhere to the Tutor Train Code of Conduct.
 - 4.2.2. Create a sense of security for students and establish a trust-based relationship where students feel at ease discussing their concerns.
 - 4.2.3. Uphold a professional rapport with the student and avoid sharing inappropriate personal details or interactions beyond the bounds of an appropriate tutor-tutee relationship.
 - 4.2.4. Maintain appropriate boundaries with all parties and refrain from leveraging one's position for personal advantage or gain beyond the scope of appropriate educational provision.
 - 4.2.5. Demonstrate respect for all other stakeholders, irrespective of their background, sexual orientation, beliefs, values, relationships, or affiliations, and abstain from discrimination.
 - 4.2.6. Avoid discussing concerns about third parties with parents, students, or other tutors.
 - 4.2.7. Ensure a parent or legal guardian (over 18 years of age) is in attendance for online and in-person lessons. When tutoring occurs outside the home, the student is always accompanied by an appointed caregiver and/or a parent or legal guardian.
 - 4.2.8. Obtain explicit written consent (via text or email) from a parent/guardian if the client wishes the lesson to be conducted without the presence of an appointed caregiver or a parent/legal guardian outside of the student's home. It's important to emphasise that tutors must maintain appropriate insurance coverage, especially when making such arrangements with clients.
 - 4.2.9. Monitor student communication (including body language and other means of expression) for any indicators of potential abuse.
 - 4.2.10. Document and report all potential causes for concern to the DSL (Praema Stelling) in a factual manner and refrain from making assumptions, irrespective of the nature of the concern.
 - 4.2.11. Maintain strict confidentiality of any personal information concerning students, particularly if it pertains to sensitive matters, and implementing all reasonable precautions to prevent unauthorised access by third parties, including through computers, mobile phones, or other

electronic devices. Documents containing confidential or sensitive student information should be accessed through a secure system like Zivver and must be password protected.

- 4.2.12. Tutors should anticipate risks in all learning environments and assess each environment in alignment with Tutor Train Ltd.'s Health and Safety Risk Assessment.
- 4.2.13. All local authority provisions must include a written risk assessment (whether or not significant concerns are identified), which is shared with the Tutor and the Tutor Train Ltd.
- 4.2.14. Refrain from engaging in direct confrontations with individuals who have been purportedly linked to an incident of abuse or any other safeguarding issue, and instead, permit the relevant authorities to handle the matter.
- 4.2.15. Cooperate with protection agencies or authorities by supplying information related to a concern when requested, with strict adherence to factual accuracy and a commitment to avoiding assumptions.
- 4.2.16. Hold an up-to-date enhanced DBS and/or register on the update system. DBS must be renewed every 2 years if not on the update system. Checks on the update system will be conducted annually.
- 4.2.17. Complete and keep up-to-date with all courses related to safeguarding and child protection, which are considered by the Tutor Train Ltd, as essential to ensure the highest quality of care for students. This includes staying up-to-date with the latest guidelines, including Keeping Children Safe in Education 2023, Part 1, and other pertinent documents.

5. Types of abuse

Physical Abuse

- 5.1. This is not a matter of chance; children who endure physical abuse experience acts of violence, including but not limited to being struck, kicked, poisoned, burned, slapped, or subjected to thrown objects. Shaken or struck infants can sustain non-accidental head injuries (NAHI). In certain instances, parents or caregivers may deliberately feign or induce illness symptoms in their child, administering unnecessary medication to make the child unwell. This behaviour is referred to as fabricated or induced illness (FII) or Munchausen's syndrome by proxy.

Emotional Abuse

- 5.2. Persistent emotional maltreatment of a child causing severe and adverse effects on emotional development. Emotional abuse may involve:

- 5.3. Conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- 5.4. Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
- 5.5. 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.
- 5.6. Seeing or hearing the ill-treatment of another (for example, violence in the home).
- 5.7. 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 child maltreatment, although it may occur alone.
- 5.8. Constantly criticising, rejecting, emotionally manipulating or ridiculing the child, depriving them of the opportunity to express their views.

Sexual Abuse

- 5.9. Forcing or enticing a child or young person to participate in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.
- 5.10. Sexual abuse may involve:
- 5.11. 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.
- 5.12. Non-contact activities include 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 (including via the internet).
- 5.13. Discussions relating to sexual behaviour, human reproduction or interpersonal interaction between humans of both/either sex where it is not relevant to the specific lessons being undertaken
Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect

- 5.14. The persistent failure to meet a child's basic physical and/or psychological needs is likely to result in the serious impairment of the child's health or development.

- 5.15.** Neglect may include:
- 5.16.** Maternal substance abuse during pregnancy.
- 5.17.** A parent or carer failing to: -
- 5.17.1. Provide adequate food, clothing and shelter (including exclusion from home or abandonment).
 - 5.17.2. Protect a child from physical and emotional harm or danger.
 - 5.17.3. Ensure adequate supervision (including the use of inadequate caregivers).
 - 5.17.4. Ensure access to appropriate medical care or treatment.
- 5.18.** Neglect of, or unresponsiveness to, a child's basic emotional needs.
- 5.19.** Neglect may also occur when children are looking after parents who are ill or who suffer from addiction – these children are referred to as 'young carers'.
- 5.20.** Neglect also includes deliberately withholding information regarding a person's rights and entitlements.

Financial or material abuse

- 5.21.** Financial or material abuse refers to exerting an undue degree of control, inflicting harm, or exploiting another person's financial resources. This encompasses activities such as theft or financial exploitation, as well as the improper or unauthorised use of assets or entitlements.

Discriminatory abuse

- 5.22.** Discriminatory abuse encompasses mistreatment inflicted upon an individual due to gender, race, ethnic origin, sexuality, religion, age, disability, size, or marital status. It involves harmful actions or exploitation, including but not limited to harassment, using offensive language, or comparable forms of ill-treatment.

Organisation abuse

- 5.23.** Organisational abuse refers to mistreatment from insufficient care or support within an institution, such as care homes, young offenders' institutions, pupil referral units, services for individuals with learning difficulties, or substance treatment centres. Instances of organisational abuse may include situations where an institution's procedures impede an individual's specific needs. This could involve imposing restrictive bedtimes, failing to provide adequate mental stimulation, or neglecting opportunities for spiritual fulfilment, among other examples.

Domestic abuse

5.24. Domestic abuse can have a profound impact on children and young people's well-being and safety. It encompasses various forms of mistreatment, including physical, emotional, psychological, or sexual abuse, occurring within the context of a familial or domestic relationship. This may also include honour-based abuse.

Modern slavery

5.25. This encompasses slavery, human trafficking, sexual exploitation, coerced marriage, involuntary labour, and domestic servitude. Perpetrators involved in trafficking and enslavement may also inflict physical, sexual, emotional, or psychological abuse upon their victims.

Self-neglect

5.26. Self-neglect refers to situations where individuals, including children and vulnerable adults, fail to adequately care for their own well-being, resulting in harm or the risk of harm to themselves. This could include personal hygiene, appropriate clothing, health or surroundings or behaviours such as hoarding.

Online abuse

5.27. This refers to any form of maltreatment that occurs on the internet, whether through social media platforms, online gaming, or the use of mobile devices. Children and young people may encounter various online risks, including cyberbullying, grooming, peer pressure, sexual abuse, sexual exploitation, or emotional abuse. These dangers can come from both known individuals and strangers. Online abuse may be an extension of offline abuse, such as bullying or grooming, or it may exclusively occur in the digital realm, such as exchanging inappropriate content or persuading children to engage in online sexual activities. Exposure to illegal or inappropriate content, including pornography, false information, or materials promoting racism, misogyny, self-harm, suicide, extremism, discrimination, or hatred towards specific groups, religions, or beliefs, can also be considered a form of online abuse.

Grooming

5.28. This occurs when an individual establishes an emotional bond with a child to earn their trust, with the intent of engaging in sexual abuse, sexual exploitation, or trafficking. Children and young people can be subjected to grooming either through online interactions or in-person encounters, and it can be perpetrated by either strangers or individuals known to the child, such as a family member, friend, or professional. Groomers may be of any gender or age. It's important to note that many

children and young people may not fully comprehend that they have been groomed or that the actions they have experienced constitute abuse.

Bullying and cyberbullying

5.29. Deliberate and persistent offensive behaviour aimed at causing harm, intimidation, harassment, or coercion to another individual constitutes bullying. Bullying can take various forms, including physical acts like hitting or pushing, verbal mistreatment such as name-calling or spreading rumours, nonverbal abuse like making offensive gestures, exclusion (purposeful isolation), and cyberbullying, which involves electronic means such as sending abusive or threatening text messages, sharing embarrassing content, trolling, online shaming, exclusion from digital platforms or social groups, creating hate groups online, sexting, or pressuring someone into sharing explicit images or participating in sexual discussions. The widespread use of the internet has contributed to the prevalence of cyberbullying. All forms of bullying can result in mental health issues, including depression and anxiety, a reduction in social connections, increased wariness or distrust of others, difficulties adapting to school, and decreased academic performance.

Female Genital Mutilation (FGM)

5.30. Female Genital Mutilation (FGM), also known as 'female circumcision,' 'cutting,' 'initiation,' 'sunna,' 'infibulation,' 'gudniin,' 'halalays,' 'tahur,' 'megrez,' or 'khitan,' is a violent and abusive procedure involving the alteration or total/partial removal of external female genital organs. This practice is carried out for non-medical reasons, often with the intention of controlling female sexuality. Typically, it is performed by unqualified individuals using instruments such as knives, razor blades, glass, scalpels, or scissors on girls aged from infancy to 16 years old. FGM is widely recognised as a grave violation of the human rights of girls and women (WHO, 2014), and it is illegal in the UK. According to the NHS (2016), approximately 66,000 girls aged 13 and under are at risk of FGM in the UK. Individuals subjected to FGM may suffer from severe, enduring physical, mental, and psychosexual consequences.

Radicalisation

5.31. Radicalisation is a process in which individuals are influenced to endorse a radical ideology or align themselves with a political or religious movement that supports terrorism and/or violent extremism. Children may be vulnerable to online grooming, often via social media or in-person manipulation by family members, acquaintances, community members, or others who adhere to

harmful and extreme beliefs. During this process, children may encounter violent, anti-social, or extremist propaganda, potentially leading to the development of a distorted worldview in which extremist ideas may appear rational. A notable characteristic of radicalisation is that children and young people often do not recognise themselves as victims of grooming or exploitation.

Radicalisation poses a significant risk to children, as it can lead to their involvement in criminal activities and expose them to substantial harm. Additional information regarding extremism and radicalisation can be found in the Department for Education's Prevent duty guidance, accessible on TutorCruncher.

Criminal exploitation and gangs

- 5.32.** Criminal exploitation refers to the process through which individuals or groups target vulnerable children and young people, manipulating and coercing them into engaging in criminal activities. This may involve their recruitment into street gangs where crime and violence become an integral part of their identity, association with organised criminal gangs driven by personal gain, or participation in organised crime networks, such as 'county lines,' which exploit young people in drug distribution.
- 5.33.** *Street Gangs:* Street gangs may draw children into their activities, where criminal behaviour is intertwined with their sense of belonging.
- 5.34.** *Organised Criminal Gangs:* Children may be lured into organised criminal gangs, engaging in criminal acts for personal benefits, such as financial gain.
- 5.35.** *County Lines:* Urban gangs may exploit young people to transport drugs from central hubs to suburban areas and coastal towns, using dedicated mobile phone lines. Children as young as 12 years old have been known to be involved in such operations.
- 5.36.** *Trafficking:* Vulnerable children might be trafficked away from their home areas, residing temporarily in privately rented accommodations or within the homes of drug users.

Sexual harassment

- 5.37.** Sexual harassment refers to unwelcome and inappropriate behaviour of a sexual nature that creates a hostile, intimidating, or offensive environment for individuals. It can occur in various settings, including the workplace, educational institutions, or within our organisation.

Sexting

5.38. Sexting refers to the act of sending, receiving, or sharing sexually explicit text messages, images, or videos, often through electronic devices and digital communication platforms. It is a highly prevalent issue among teenagers and young adults.

6. Additional vulnerabilities

6.1. It is important to be aware that children who have additional vulnerabilities may be more susceptible to abuse. Therefore, such children may need further safeguards in place to reduce the potential risk of abuse and neglect. Working Together to Safeguard Children 2018 provides useful guidance on children and young people who may be particularly vulnerable to abuse:

6.1.1. The child is disabled and has specific additional needs.

6.1.2. The child is a young carer.

6.1.3. The child is at risk of being radicalised or exploited.

6.1.4. The child is in a family circumstance presenting challenges for the child, such as domestic violence, adult mental health issues or drug/alcohol abuse by the parents.

6.1.5. The child is a looked-after child or has recently returned home after being in care.

6.1.6. A child whose diversity, beliefs and values may influence the identification, prevention and response to safeguarding concerns.

6.1.7. The child frequently goes missing from home. This is not an exhaustive list.

6.1.8. A child where families will not cooperate with services and professionals that deal with protecting children.

6.1.9. The child has recently returned home after being in care. This is not an exhaustive list.

6.2. We recognise that safeguarding individuals with Special Educational Needs (SEN) requires specific attention and considerations due to the unique challenges and vulnerabilities that individuals with SEN may face. In addition to the common barriers to safeguarding, such as lack of awareness, communication issues, and reluctance to report, there are additional barriers that may arise when safeguarding those with SEN. These barriers can include

6.2.1. Assumptions that indicators of possible abuse, such as behaviour, mood and injury, relate to the child's disability without further exploration.

6.2.2. Students are more prone to peer group isolation than other students.

6.2.3. The potential for students with SEN and disabilities to be disproportionately impacted by behaviours such as bullying without outwardly showing any signs.

- 6.2.4. Communication barriers and difficulties in overcoming these barriers
- 6.2.5. Some individuals with SEN, particularly those with sensory processing disorders or autism, may have heightened or diminished sensory sensitivities. These sensitivities can make it difficult to recognise and react to potentially abusive or harmful situations.
- 6.2.6. Individuals with limited cognitive abilities can affect their understanding of what constitutes abuse, neglect, or harm. They may not recognise abusive behaviour or understand the consequences.
- 6.2.7. They may depend highly on caregivers for their daily needs. This dependence can create a power imbalance and increase the risk of abuse by those responsible for their care.
- 6.2.8. They may experience social isolation due to their conditions. This isolation can make it difficult for them to disclose abuse or neglect, as they may not have a network of trusted individuals to confide in.
- 6.2.9. Individuals with complex needs or multiple disabilities may require specialised care and support. It can be challenging to identify and address safeguarding concerns in individuals with intricate, intersecting needs.
- 6.2.10. Stigmatization and discrimination against individuals with SEN can discourage reporting or seeking help, as they may fear judgment or believe that they will not be taken seriously.

Students with a social worker

- 6.3. Students may need a social worker due to safeguarding or welfare needs. We recognise that a child's experiences of adversity and trauma can leave them vulnerable to further harm as well as potentially create barriers to attendance, learning, behaviour and mental health. The DSL and all Tutors will work with and support social workers to help protect vulnerable children.

Looked-after and previously looked-after children

- 6.4. We will ensure that Tutors have relevant information about their student's looked-after legal status, contact arrangements with birth parents or those with parental responsibility, and care arrangements if it impacts or has implications for the tuition they receive.

7. Indications of abuse

- 7.1. Recognizing the signs and indications of abuse is crucial in our commitment to safeguarding the well-being of children. Tutors should remain vigilant and take immediate action if they observe or suspect any of the following indicators:

7.2. Physical Abuse:

Unexplained bruises, burns, cuts, or injuries.

Frequent injuries or injuries in various stages of healing.
Reluctance to explain injuries or providing inconsistent explanations.
Wearing clothing that is inappropriate for the weather to conceal injuries.
Fear or avoidance of physical contact.
Breathing difficulties as a result of drowning, suffocation, and poisoning.
Vomiting, drowsiness or seizures.
Burns or scolds.

7.3. Emotional or Psychological Abuse:

Sudden and significant changes in behaviour, mood, or personality.
Withdrawal from social interactions and activities.
Anxiety, depression, or emotional distress.
Displays of fear, anger, or aggression.
Low self-esteem or self-worth.

7.4. Sexual Abuse:

Inappropriate sexual knowledge or behaviour for their age.
Sexual language, drawings, or play that is age-inappropriate.
Signs of physical discomfort or pain in the genital area.
Fear or avoidance of specific individuals.
Regressive behaviour, such as bedwetting or thumb-sucking.

7.5. Neglect:

Poor hygiene, unwashed clothing, or signs of inadequate care.
Malnourishment or dehydration.
Consistent absenteeism from school or activities.
Lack of appropriate clothing or shelter.
Untreated medical conditions or injuries.

7.6. Self-neglect:

Appearing malnourished and dehydrated.
Appearing unkempt and/or wearing the same clothes.
Poor personal hygiene.
Lack of essential food, clothing or shelter.
Living in unsanitary conditions.
Hoarding.
Gathering a large number of animals in inappropriate conditions.

Non-compliance with health or care services.

Inability or unwillingness to take medication or treat illness or injury.

7.7. Financial or Material Abuse:

Unexplained loss of money or possessions.

Unusual or sudden changes in financial circumstances.

Signs of financial control, exploitation, or manipulation.

7.8. Discriminatory Abuse:

Using derogatory language or slurs based on race, ethnicity, gender, religion, age, disability, or other protected characteristics.

Exclusion or isolation based on discrimination.

Signs of emotional distress due to discriminatory actions or comments.

7.9. Sexual Harassment:

Unwanted sexual advances or comments.

Inappropriate sexual language or behaviour.

Emotional distress, withdrawal, or changes in behaviour related to sexual harassment.

7.10. Bullying:

Persistent and deliberate targeting or mistreatment.

Changes in behaviour, mood, or academic performance.

Withdrawal from social interactions or activities.

7.11. Female genital mutilation (FGM):

A relative or someone known as a 'cutter' visiting from abroad

A girl talks about a long holiday to her country of origin or another country where FGM is practised.

A girl talks about attending a special occasion or ceremony 'to become a woman' or 'to be prepared for marriage'.

Unexpected or long absences from school.

A girl's relative (e.g. mother, sister or aunt) is known to have undergone FGM.

A girl runs away or plans to run away from home.

One may suspect that FGM has already happened if there are the following signs:

Difficulty walking, standing, sitting.

Spending longer than normal in the toilet due to difficulty urinating.

Unexplained differences in behaviour after a long absence from school.

Becoming quiet, anxious or depressed.

Reluctance to go to the doctors or undergo routine medical examinations.

Asking for help (possibly implicitly out of fear or embarrassment).

7.12. Radicalisation:

- Unwillingness to discuss their views.
- Reluctance to listen to other points of view.
- Outbursts of anger.
- Distancing themselves from friends and family.
- Changing friends or appearance.
- Abusive behaviour towards children who are different.
- Sudden disrespectful attitude towards others.
- Talking as if from a script.
- Loss of interest in the activities they used to enjoy doing.
- Spending prolonged periods of time on the phone or online.
- Accessing extremist online content.
- Becoming secretive about their whereabouts or internet use.

7.13. Organisational abuse:

- Rigid and inflexible routine.
- Unsafe, unhygienic or overcrowded environment.
- Harsh disciplinary standards and rough handling.
- Lack of privacy, dignity or respect towards people.
- Lack of respect for one's religion or cultural background

7.14. Domestic abuse:

- Signs of physical abuse listed above
- General poor health.
- Social or emotional withdrawal.
- Low self-esteem.
- Outbursts of anger.
- Fear of being abandoned.
- Nightmares or sleep disturbance.
- Regression behaviour (e.g. bedwetting).
- Substance abuse.
- Depression and anxiety.

7.15. Modern slavery:

- Signs of physical and emotional abuse.

- Appearing malnourished.
- Appearing unkempt and/or wearing the same clothes.
- Social or emotional withdrawal.
- Appearing frightened or hesitant to talk to strangers or law enforcers.
- Avoiding eye contact.
- Isolation from the community, appearing as if under the control or influence of others.
- Dirty, cramped or overcrowded accommodation.
- Living and working at the same address.

8. Taking action - Roles and Responsibilities of the Designated Safeguarding Lead (DSL)

8.1 The DSL in Tutor Train Ltd is Praema Stelling and can be contacted 24 hours a day/7 days a week on 07500862722 or hello@tutortrain.co.uk. Praema Stelling will respond to any safeguarding concerns within 30 minutes of receiving contact. The DSL takes lead responsibility for child protection and wider safeguarding at the Tutor Train. The DSL will complete DSL training every 2 years and keep up-to-date with any statutory changes in legislation.

8.2 A Designated Safeguard Lead,(DSL) plays a critical role in ensuring the safety and well-being of vulnerable individuals, especially children and young people, within the Tutor Train Ltd.

8.3 The Designated Safeguard Lead is responsible for overseeing and coordinating safeguarding measures and procedures within the Tutor Train Ltd to prevent and respond to potential harm, abuse, or neglect of children or vulnerable individuals. This role is critical in maintaining a safe and secure environment.

8.4 Key Responsibilities of the DSL:

- 8.4.1. Develop and implement effective safeguarding policies and procedures in accordance with relevant legislation and guidelines.
- 8.4.2. Identify potential safeguarding risks within the Tutor Train Ltd and develop strategies to mitigate them.
- 8.4.3. Ensure all tutors have up-to-date Safeguard training and to increase awareness of safeguarding issues and procedures.
- 8.4.4. Ensure accurate records are kept of all safeguarding concerns, incidents, and disclosures. Report and document all cases appropriately and in compliance with legal requirements.
- 8.4.5. Collaborate with internal and external agencies, such as social services and law enforcement, to address safeguarding concerns and share information as needed.

- 8.4.6. Provide guidance and support to Tutors in dealing with safeguarding issues and offer advice on appropriate action.
- 8.4.7. Regularly review and evaluate safeguarding practices, policies, and procedures to identify areas for improvement.
- 8.4.8. Communicate effectively with Tutor and clients about safeguarding issues and updates.
- 8.4.9. Manage safeguarding cases from initial referral through to resolution, ensuring that appropriate actions are taken to protect the individual at risk.
- 8.4.10 Lead responsibility for filtering and Monitoring of online material.

9. Roles and Responsibilities of the Tutor

9.1. All Tutors have a responsibility to:

- 9.1.1. Read and understand provided materials relating to child protection.
- 9.1.2. Ask questions or seek clarifications where required policy and guidance are not understood.
- 9.1.3. Follow guidance and procedures appropriately, including responding to disclosures, escalating all referrals or related information to the DSL immediately and respecting confidentiality.
- 9.1.4. Keep up-to-date with safeguard training.
- 9.1.5. Tutor Train Ltd promotes an open culture where everyone feels comfortable and confident, raising concerns about safety and welfare, knowing they will be listened to and taken seriously.

10. Filtering and Monitoring

10.1. The DSL is responsible for the filtering and Monitoring. We achieve this by:

- 10.1.1. Online lessons must only be conducted using Lessonspace. Tutors and Tutees can only access the online learning space with a secure password. Tutees wait in a Lobby area where the Tutor will admit only those students who are assigned to the lesson.
- 10.1.2. Our online learning policy specifies that where online content is shared, the web browser must be set up prior to sharing. This also applies to in-person lessons where web pages must be set up in advance of the lesson and appropriate for the student. Live searches are not permitted. Tutees do not have access to conduct their own live searches when in screen sharing mode.
- 10.1.3. Online lessons are monitored every month to ensure Tutors are upholding our policy. Should a Tutor breach this, their contract will be suspended while under further investigation.

11. Reporting a concern/disclosure – procedures

- 11.1.** A child or adult may make a disclosure, leading to a child protection concern. When information is disclosed, you must:
- 11.1.1. Accept what you are being told without judgment and avoid overreacting with a strong emotional response - it is important to remain calm during the disclosure. Tell the child that the matter will only be disclosed to those who need to know about it.
 - 11.1.2. Avoid leading questions. Listen carefully to what is being said and allow the child to speak without interruption as much as possible.
 - 11.1.3. Reassure the child that they have done the right thing in telling you.
 - 11.1.4. Be clear that confidentiality cannot be guaranteed. The safety of children overrules confidentiality concerns.
 - 11.1.5. Immediately after the disclosure, make a comprehensive written record of events (using the 'Safeguarding Concern Report Form' – Appendix A) which must include the date, time, initials of the student and details notes regarding the event witnessed by the tutor, the safeguarding concern or the disclosure made by the student or a third party. Be clear and precise, using the exact words used by the child. Ensure the information recorded are facts (e.g. the child said ...) rather than opinions (I think the child felt ...). This must be shared immediately with the DSL (Praema Stelling).
 - 11.1.6. It is not your role to investigate. You must always refer, never investigate yourself.
 - 11.1.7. Report to the Tutor Train's Designated Safeguarding Lead as soon as practically possible (Praema Stelling).
 - 11.1.8. Contact 999 if there is imminent danger.
 - 11.1.9. Under exceptional circumstances where tutors do not feel comfortable contacting the DSL Praema Stelling, they can contact the Local Authority Designated Officer or the School Designated Safety Lead to report the incident.
- 11.2.** After being notified of a safeguarding concern:
- 11.2.1. The DSL will review the referral and, where appropriate, share the information with the relevant child protection officer at the school/learning trust/virtual school/local authority and other agencies or LADO (Local Authority Designated Officer).
 - 11.2.2. The DSL will confirm to you what actions have been taken and inform you what further involvement may be required of the Tutor. Await instruction, do not make independent decisions regarding, for example, informing the parents or other Tutors – the relevant authority (e.g. Tutor

Train DSL or DDSL, School DSL/LA DSL/LADO/etc.) will manage a coordinated response and inform you of the decisions taken.

11.2.3. All conversations or actions will be recorded in writing.

11.2.4. The DSL will create a regularly updated child protection log of the incident, inform relevant authorities of any disclosure and update the Tutor working with the child, where appropriate.

11.2.5. Information will only be shared with relevant Tutors if there is a clear need for them to become involved. When information is shared internally, consideration will be given to the confidentiality of the child involved and information sharing will be limited to clearly relevant details only. All information sharing will be logged as part of the child protection file.

11.3. What not to do if a child makes a disclosure to you:

11.3.1.1. Express your own views or show shock or disbelief.

11.3.1.2. Promise confidentiality.

11.3.1.3. Investigate, interrogate or decide if the child is telling the truth.

11.3.1.4. Ask questions that imply the child was at fault such as 'why didn't you tell me before?'

11.3.1.5. Talk to the alleged abuser.

11.3.1.6. Delay reporting the abuse.

11.3.2. Appendix B is a flowchart of the disclosure process.

11.4. If you discover that FGM has taken place or a student is at risk of FGM:

11.4.1. The Department for Education's Keeping Children Safe in Education 2022 explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injuries to the female genital organs". FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'. Possible indicators that a student has already been subjected to FGM, and factors that suggest a student may be at risk.

11.4.2. Any tutor who discovers (either through disclosure by the victim or visual evidence) that an act of FGM appears to have been carried out on a student under 18 must immediately report this to the police. Tutors should not

11.4.3. Examine student. If you suspect a student is at risk of FGM or suspect that FGM has been carried out you must speak to the DSL and follow our local safeguarding procedures.

11.5. If you have concerns about extremism

11.5.1. The Department for Education also has a dedicated telephone helpline, 020 7340 7264, to raise concerns about extremism with respect to a student. You can also email counter.extremism@education.gov.uk. Note that

11.5.2. This is not for use in emergency situations. In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you:

11.5.2.1. Think someone is in immediate danger.

11.5.2.2. Think someone may be planning to travel to join an extremist group.

11.5.2.3. See or hear something that may be terrorist-related.

11.6. If you have concerns about mental health

11.6.1. Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Tutors will be alert to behavioural signs that suggest a child may be experiencing a mental health problem or be at risk of developing one.

11.6.2. If you have a mental health concern about a child that is also a safeguarding concern, take immediate action by informing the DSL. Refer to the Department for Education guidance on mental health and behaviour in schools for more information.

11.7. If you have concerns of child-on-child abuse

11.7.1. We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as banter”, “just having a laugh,” or “part of growing up”. We also recognise the gendered nature of child-on-child abuse. However, all child-on-child abuse is unacceptable and will be taken seriously. If you witness abuse, it must be reported to the DSL immediately (and the school if you are providing school tuition).

11.8. If you have concerns about domestic abuse

11.8.1. Domestic abuse describes abusive behaviours that take place between two people aged over 16 who are personally connected to each other. This includes people who are, or have previously been married, in civil partnerships or in relationships; or have a child together; or are relatives, including abuse of adult parents or

11.8.2. adult children. Domestic abuse is not gender specific and can happen to anyone regardless of gender, race, religion or sexual orientation. It is a criminal offence and can lead to a criminal conviction.

11.8.3. If you are concerned that domestic abuse might be occurring in a child’s home, it is important to remember it’s not your responsibility to fix the issue, take on the role of counsellor or be an expert on domestic abuse. Contact the DSL and complete the Safeguarding Concern Report form.

11.9. If you have concerns about sexual abuse or sexting

11.9.1. If you are made aware of an incident involving sexting (also known as ‘youth-produced sexual imagery’) or sexual abuse, you must report it to the DSL immediately. You must not:

11.9.1.1. View, download or share the imagery yourself, or ask a student to share or download it.

If you have already viewed the imagery by accident, you must report this to the DSL.

11.9.1.2. Delete the imagery or ask the student to delete it.

11.9.1.3. Ask the student (s) who are involved in the incident to disclose information regarding the imagery (this is the DSL’s responsibility).

11.9.1.4. Share information about the incident with other Tutors, the student (s) it involves or their, or other, parents and/or carers.

11.9.1.5. Say or do anything to blame or shame any young people involved.

11.9.1.6. You should explain that you must report the incident and reassure the student (s) that they will receive support and help.

11.10. If you have concerns about Radicalism/Extremism

11.10.1. If you are made aware of a child at risk of radicalism/extremism, complete a Prevent referral form and report to facts. The DSL must be contacted.

11.10.2. If you suspect that someone is about to put themselves in danger by travelling to join a terrorist organisation, or it appears involved in plans to commit a criminal offence, contact 999 immediately.

12. Safeguarding Structure

12.1. To help decide what action to take, a safeguarding structure enables us to assess a child's needs quickly and appropriately.

Low-level needs

12.2. Low-level needs are where the needs of a child are relatively small.

12.3. Social care are often not required to be involved as these concerns can easily be responded to without intervention.

12.4. A child with low-level needs may:

12.4.1. Regularly be absent from school.

12.4.2. Not be reaching their expected development milestones

12.4.3. Often misbehave

12.4.4. Have health problems that require additional health services

12.4.5. Parents that need help or support.

12.4.6. Need help accessing services.

Emerging Needs:

12.5. 10.6 Emerging needs are where a child's needs cannot be met from one service alone. Instead, a range of services, such as health, housing or education, may need to be involved.

12.6. 10.7 A child with emerging needs may be:

12.6.1.1. Misusing substances

12.6.1.2. Inadequately clothed or fed

12.6.1.3. Self-harming

12.6.1.4. A young carer

12.6.1.5. At risk of exclusion from school due to poor behaviour or attendance

12.6.1.6. Expecting a baby

12.6.1.7. Part of a family with problematic circumstances such as domestic violence.

12.7. 10.7 It may not be evidence of what services the child does need. If this is the case, an Early Help Assessment (EHA) may need to be completed to identify what kind of support the child needs.

12.8. If it is suspected that the child is in need or likely to suffer significant harm, they must make a referral to social care.

Complex Needs

12.9. Complex needs are when a child could be at significant risk of serious harm, or their development damaged if help and services are not provided.

12.10. A child that has complex needs is likely to have problems that need to be resolved urgently.

12.11. A child with complex needs may:

12.11.1. Have significant health needs

12.11.2. Be a young carer who is struggling with the role.

12.11.3. Live in a family unit that is likely to break down.

12.11.4. Live in a household where serious domestic abuse takes place.

12.11.5. Have parents who's standard or parenting is affected by substance misuse, ill health or disability.

12.11.6. Children with complex needs would likely already be part of an Early Help Assessment (EHA). The needs of a child escalate from emerging to complex if the EHA is unsuccessful.

12.11.7. These children will often need support from multiple agencies and social care. If there is no intervention, they may be moved to a higher level of risk.

13. Child protection concerns

- 13.1. Child protection concerns are where there is reason to suspect that a child is suffering or is likely to suffer significant harm because of abuse or neglect.
- 13.2. A child at this level will need help immediately.
- 13.3. A child with child protection needs may:
 - 13.3.1. Have unexplained injuries.
 - 13.3.2. Disclose information about abuse.
 - 13.3.3. Suffer from abuse such as physical, emotional or sexual abuse, etc.
 - 13.3.4. Suffer neglect.
 - 13.3.5. Have contact with someone who is a risk to children.
- 13.4. If information gathered suggests that the child is suffering or likely to suffer significant harm, then social care must make an assessment within 24 hours to determine what action to take next.

14. Record-keeping

- 11.1 All safeguarding concerns, discussions, decisions made and the reasons for those decisions must be recorded in writing. If you are in any doubt about whether to record something, discuss it with the DSL. Non-confidential records will be accessible via TutorCruncher platform.
- 11.2 Confidential information and records will be held securely in a password-protected, encrypted server and are only available to those who have a right or professional need to see them. Safeguarding records relating to individual children will be retained for 4 years after they have ceased tuition with the Tutor Train Ltd.

15. Screening, searching and confiscating

- 15.1. Ensuring Tutors and Students feel safe and secure is vital to establishing calm and supportive environments conducive to learning.
- 15.2. If a Tutor suspects a student is carrying a dangerous weapon or has illegal substances on there being, we will not conduct a body search or search a student's belongings (e.g. bag). Any suspicions will be reported to the DSL and the parent/guardian. Tuition will be suspended immediately while the investigation is underway.
- 15.3. The Tutor will not confiscate a student's items.

16. Mobile phones and cameras

- 16.1. 12.1 Tutors are allowed to bring their personal phones to sessions for their use, but will limit such use to non-contact time when students are not present. The tutor's personal phones will remain

in their bags during contact time with students. Tutors will not take pictures or recordings of students on their personal phones or cameras. We will follow the General Data Protection Regulation and Data Protection Act 2018 when taking and storing photos and recordings for use by Tutor Train Ltd.

- 16.2.** Students are not allowed to use mobile phones during their sessions and taking any recordings during lessons without explicit consent is strictly probated.

Appendix A

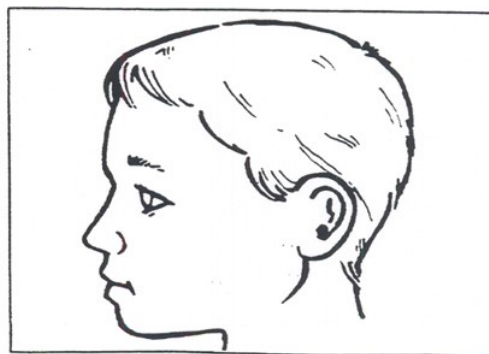
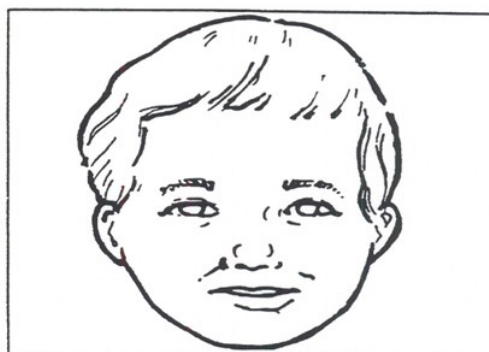
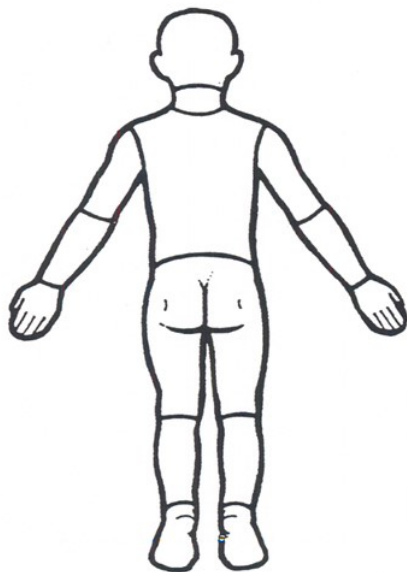
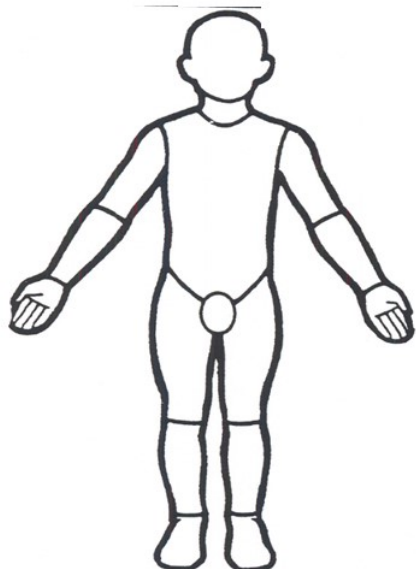
Safeguarding Concern Report Form

Tutors must complete this form and pass it to Praema Stelling (DSL) if they have a safeguarding concern about a child receiving tuition with Tutor Train Ltd.

Date:	
Your full name:	
Your address:	
Contact number and email:	
Child's name	
Nature of concern/disclosure <i>Please include where you were when the child made a disclosure, what you saw, who else was there, what did the child say or do and what you said.</i> <i>[Ensure that if there is an injury this is recorded (size and shape) and a body map is completed]</i>	
Time & date of incident:	
Time and date form completed:	
Time form received by DSL:	
Action Taken by DSL	
Further Action Agreed, if applicable	
Full Name of DSL	
Date of Signature	

Body Map

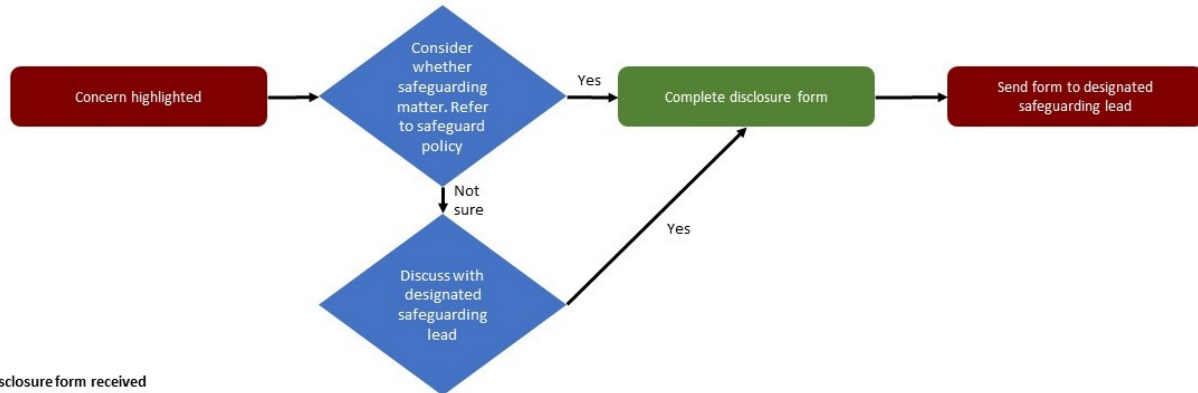
Indicate clearly where the injury was seen and attach this to the referral form



Indicate clearly where the injury was seen and attach this to the referral form

Appendix B

Concern highlighted



Disclosure form received

