



# **TCAT SAFEGUARDING RECORDING & REPORTING POLICY**

**December 2025**

**SERVE CHALLENGE EMPOWER**

## Document Control

<b>Version</b>	<b>Date</b>	<b>Action</b>
<b>1.1</b>	28/01/26	Page 7 - Amended examples for mark description. Page 8 - Clarity around reasonable force and physical intervention in line with updated DfE guidance

**This policy is a Trust-wide policy and applies without exception to all staff, students, trustees and governors who attend or work at all academies and settings in the Trust or in the central Trust structure.**



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## 1. PURPOSE

This policy outlines expectations for the accurate, consistent, and safe recording of safeguarding, pastoral, SEND, attendance and behaviour information on TCAT agreed platforms.

It ensures that all staff understand their responsibilities in maintaining high-quality records that may one day be accessed by the child or used in safeguarding reviews.

It aligns with Keeping Children Safe in Education (KCSIE), Working Together to Safeguard Children, and UK GDPR.

## 2. CONTACTS

This policy has been developed in collaboration with lead practitioners, ensuring it reflects the priorities and interests of their respective Hubs. Their expertise has shaped the content to align with best practice across safeguarding, SEND, behaviour, and wellbeing.

For ease of reference, the contact details of these Lead Practitioners are provided below should further clarification or support be required.

ROLE/ORGANISATION	NAME	CONTACT DETAILS
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## 3. KEY PRINCIPLES

All records must reflect the child's lived experience and contribute to a clear, factual chronology of events and interventions.

**CPOMS:** the single system for recording all safeguarding concerns, actions, and case files.

**Arbor/Portal:** the system for holding statutory pupil data (attendance, demographics) but must not contain safeguarding detail.

**Transfers:** CPOMS electronic transfer within 5 school days when a pupil moves. Where a setting does not have CPOMS to transfer electronically, we send a PDF report from CPOMS via encrypted email via Office 365/Outlook.

**Retention:** Child protection files are kept as per the TCAT Data Protection Policy

The Recording with Care Principles adopted by TCAT are:

**C – Confidential**

Keep information private and share only what’s necessary for safeguarding and wellbeing.

**A – Accurate**

Record facts clearly, separate from opinion, and include dates/times.

**R – Relevant**

Focus on details that impact safety or wellbeing; use respectful, professional language.

**E – Evidence-based**

Support entries with what was seen, heard, or disclosed, and link to actions or next steps.

**4. WHAT MUST BE RECORDED ON CPOMS**

Accurate and timely record keeping is essential to safeguarding practice. CPOMS is the Trust’s single system for recording all safeguarding concerns, actions, and outcomes. If an incident, disclosure, or action is not recorded on CPOMS, it is treated as though it did not happen. Every concern, conversation, and decision must be logged promptly and in sufficient detail to provide a clear chronology.

This level of accuracy is crucial for the effective management of safeguarding cases and may be required for court reports, Subject Access Requests (SARs), complaints, and other formal processes. Comprehensive records protect both the child and the staff involved by evidencing actions taken.

WHAT TO RECORD	NOTES/EXAMPLE
Safeguarding, welfare, SEND, attendance, and behaviour concerns	Child appeared withdrawn and tearful during morning registration. No explanation given.
Low-level concerns	Child arrived without glasses for the third time this week. Spoke to parent who said they are broken. Discussed impact on learning and Mum agreed to take her for a replacement pair this weekend.
Conversations with families	Mum informed me she has separated from Dad. All staff to monitor for emotional impact or behavioural changes.
External professional visits	Speech and Language Therapist visited child today. Session notes uploaded.
Disclosures	Child disclosed: "Dad shouted at Mum last night and threw a plate at her."
Physical interventions	Child attempted to leave the building. Held by both arms and guided back to classroom. No injuries observed.
Actions taken	Called Mum to collect child due to illness. Advised to monitor symptoms and seek medical advice.

**5. HOW TO RECORD ON CPOMS**

**LANGUAGE AND TONE**

EXPECTATION	NOTES/EXAMPLE
Write in first person.	<p>✔ I saw Sam looking tired and withdrawn.</p> <p>✘ The staff member noticed Sam appeared tired and withdrawn.</p> <p>✘ It was observed that the pupil appeared tired and withdrawn.</p>

Write in full sentences in a professional manner and avoid jargon.	<input checked="" type="checkbox"/> The incident occurred at 10:15 a.m. in the playground. The pupil reported feeling unwell and was escorted to the medical room by a member of staff. <input checked="" type="checkbox"/> 10:15 playground, pupil sick, taken to medical.
Use correct spelling, grammar, and punctuation	<input checked="" type="checkbox"/> Child was visibly upset. <input checked="" type="checkbox"/> child were visibly upset
Avoid emotive language and personal opinions	<input checked="" type="checkbox"/> The pupil was observed leaving the classroom without permission at 10:30 a.m. The teacher followed and asked the pupil to return. <input checked="" type="checkbox"/> The pupil was being difficult and clearly didn't care about the rules.
Use quotation marks for direct speech	Child said, "I don't want to go home tonight."
Write first names, not initials for staff, and job titles/year groups of people mentioned in logs.	<input checked="" type="checkbox"/> I shared the disclosure with Rebecca (Trust Safeguarding Lead). <input checked="" type="checkbox"/> I shared the disclosure with RL.

## DETAIL AND ACCURACY

EXPECTATION	NOTES/EXAMPLE
Log in a timely manner	Best practice is within 24 hours. If this is not possible, change the date/time on the log to when it occurred. This applies for both new incidents and actions.
Use correct date/time	<input checked="" type="checkbox"/> Change date and time to correlate to when incident occurred <input checked="" type="checkbox"/> Last Monday X happened...
Describe injuries clearly	<input checked="" type="checkbox"/> Red circular mark approx. 2cm on upper left arm. <input checked="" type="checkbox"/> They had a bruise.
Avoid medical diagnosis	<input checked="" type="checkbox"/> A mark was seen on Child A's upper left arm. It is circular, approx. 2cm across, dark purple in colour. When asked what happened Child A said... <input checked="" type="checkbox"/> Child A had a bruise on their upper arm that looks like it was caused by someone grabbing them. The mark seems quite old and is probably from rough play at home. It looks like fingertip bruising.
Log under appropriate categories	<p>Where a "Parent Category" is selected, a "Sub-Category" must also be chosen. More than one "Sub-Category" can be chosen if required for the incident.</p> <p>For example, GENERAL CONCERN – "Child on Child" &amp; "Online"</p> <p>See Appendix 1 and 2</p> <p>"Children in Category" only to be selected once when a child is initially identified in the category. This is to ensure that data held centrally is not distorted.</p>
Copy and paste emails	<p>Copy only the relevant content of the email (subject line, recipients, date and time and body text).</p> <p>Remove any disclaimers, confidentiality notices, or automated signatures that appear at the bottom of emails. These add unnecessary clutter and do not contribute to the chronology.</p> <p>Add one email per action to maintain clarity and improve readability of the chronology.</p>
Upload documents as appropriate	Save documents under an appropriate file name, not just the scan autosave, making them easily identifiable.

Follow agreed local level reporting formats for meetings and incidents	<p><b>MEETING EXAMPLE:</b>  Type of meeting  Present (names and job titles):  Details of updates:  Actions:  Next meeting date:</p> <p><b>INCIDENT EXAMPLE:</b>  Incident detail:  Risk identified:  Action taken or required:</p>
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## LINKING AND DUPLICATION

EXPECTATION	NOTES/EXAMPLE
Only link siblings if relevant	<p>✔ Child reported that police attended domestic incident at the family home last night (link to both siblings)</p> <p>✘ Speech therapy plan attached (only relevant to one child, do not link)</p>
Copy and paste for multiple children	Child A and Child B were involved in a playground altercation. Child A did XYZ. Child B did ABC. (copied onto both pages)

## RECORDING ACTIONS

EXPECTATION	NOTES/EXAMPLE
Parents/carers should be made aware of any incidents that are logged on CPOMS.	The Safeguarding and Child Protection Policy states that CPOMS is the platform used for recording all incidents pertaining to student welfare.
Always include follow-up and actions.	<p>✔ Child reported bullying. Referred to pastoral team. Parent contacted and meeting arranged for tomorrow.</p> <p>Always ensure there is a narrative and it is clear what actions were taken, e.g. speaking to parents, what support/sanctions were put in place.</p>
Tag relevant staff for follow-up	Concern passed to DSL. Tagged [DSL Name] for action.

## 5. PHYSICAL INTERVENTIONS

We recognise that there are times when physical intervention and reasonable force could be needed within schools and colleges. We work within the statutory DfE guidance as set out below, where further detail can be found:

[Use of reasonable force in schools \(effective until 31 March 2026\)](#)

[Restrictive interventions, including the use of reasonable force, in schools \(effective from 1 April 2026\)](#)

“All members of school staff have the legal power to use reasonable force in limited circumstances. Reasonable means using no more force than is necessary for the least amount of time, the application of which will depend on the circumstances.” DfE 2026

“Staff who are likely to need to use reasonable force and/or other restrictive interventions should be adequately trained in its safe and lawful use and in preventative strategies.” DfE 2026

The Trust's position is clear:

- **Only staff who are Level 2 Team Teach trained** are permitted to carry out physical interventions, unless in an emergency situation, as set out in DfE guidance.
- Where a child has experienced physical intervention, they **must have a Positive Handling Plan** in place.
- If this is the **first incident**, a plan must be written as soon as possible after the event, with **parental input and agreement** included.

All physical interventions must be recorded accurately and promptly in line with the Department for Education's.

Records should include the reason for intervention, strategies attempted prior to intervention, details of the intervention used, staff involved, duration, and any follow-up actions. Accurate documentation is essential for safeguarding, accountability, and compliance with statutory guidance.

When logging a physical intervention on CPOMS the following fields will appear:

Where?	Who?	How long?	Why?	De-escalation?	Which?
Injuries?	Paperwork?	SLT Oversight?	SLT Debrief?		

- Complete all required fields (e.g. reason, method, duration, outcome)
- Describe the event factually and neutrally.
- These entries will be automatically flagged to the designated safeguarding lead.

## 6. PINNED INCIDENTS

Pastoral and SLT staff may use the "pinned" feature to highlight:

- Key case summaries
- Safeguarding status
- Ongoing concerns
- Information that all staff need to be aware of

Example:

"Pinned: Child is subject to Child Protection Plan. Social worker \*NAME\*, \*CONTACT DETAILS\* All staff to be vigilant and report concerns immediately."

## 7. MONITORING AND COMPLIANCE

Designated Safeguarding Leads (DSLs) within each academy will carry out regular monitoring of recording and reporting practices. This includes reviewing safeguarding records to ensure accuracy, timeliness, and adherence to Trust policy. Feedback will be provided internally to staff to support continuous improvement.

Central TCAT colleagues will undertake periodic compliance checks across all academies. These checks will assess consistency with Trust-wide standards and statutory requirements. Any concerns or areas for development identified during these reviews will be raised promptly with the relevant staff and leadership teams within the academies.

Findings from monitoring activities will inform training, guidance updates, and system enhancements to maintain high standards of safeguarding practice across the Trust.

## **8. ARBOR/PORTAL**

Arbor, or Portal for the college, are the primary sources for pupil data and demographics across the Trust. Live information from these systems is pulled into Trust scorecards and dashboards to monitor performance, safeguarding, SEND, and inclusion. It is essential that all entries are accurate and updated promptly to ensure reliable reporting and compliance.

To ensure consistency and accuracy across the Trust, the following information must be recorded in Arbor/Portal:

### **Safeguarding**

- Child Protection (CP) status
- Child in Need (CIN) status
- In Care Status – Children’s Home, Fostered, Other/In Care, With Parents Under the Supervision of Social Services
- Post-Looked After Status – Adopted from Care Inside England or Wales, Adopted from Care Outside England or Wales, Left Care Through Child Arrangement Order, Left Care Through Residents Order, Left Care Through Special Guardianship Order
- Young Carer (YC)
- Early Help involvement

### **SEND**

- Monitoring – for pupils being observed for emerging needs
- SEND Support (K Code) – where additional support is in place
- Education, Health and Care Plan (EHCP) – statutory provision
- No Additional Needs – applied when a pupil is removed from monitoring

### **Behaviour**

- Attendance at Alternative Provision
- Suspensions (fixed-term)
- Internal exclusions
- Permanent exclusions

### **Attendance**

- All attendance data must be recorded in line with the Trust Attendance Policy.

## **9. DUTY OF CARE**

We recognise that raising a safeguarding concern about a child can feel challenging and, at times, emotionally demanding. As part of our duty of care, we will provide support to individuals on a case-by-case basis, ensuring that the level and type of assistance reflects their specific needs. This may include practical guidance, emotional support, or signposting to appropriate resources. Staff are encouraged to reach out for help if they feel uncertain or distressed during the process, and support may involve liaison with HR in line with relevant policies where wellbeing or employment matters are affected.

Please note that safeguarding operates on a strict need-to-know basis, which means individuals may not always receive feedback about the outcomes of specific cases. This is to protect confidentiality and ensure the safety of the child and family involved. However, our duty of care extends not only to the person raising the concern but also to the child at the centre of the safeguarding issue, and we remain committed to acting in their best interests at all times.

## **10. LINKS TO OTHER POLICIES**

This policy should be read in conjunction with the following policies:

- TCAT Safeguarding and Child Protection
- TCAT Behaviour Policy
- TCAT Attendance Policy
- TCAT Code of Conduct
- TCAT Data Protection Policy

## APPENDIX 1 – TRUST WIDE CPOMS CATEGORIES

<b>ATTENDANCE</b>					
Attendance Internal Monitoring	Attendance Officer Involvement	Attendance Legal Action	Part Time Timetable	Alternative Timetable	Elective Home Education
EBSA	Punctuality				
<b>CHILDREN IN CATEGORY</b>					
CP Plan	CIN Plan	Early Help Plan	School Support	Young Carer	LAC
Post LAC	SGO	Child Arrangement Order	Court Order	Historic CP	Historic CIN
Historic EH					
<b>CONTACTS</b>					
Parent/Carer	Professional	Welfare Check/Home Visit			
Escalation Stage 1	Escalation Stage 2	Escalation Stage 3	Escalation Stage 4		
<b>GENERAL CONCERNS</b>					
Absconding	Bereavement	Bullying	Child on Child	Child to Parent	Child to Staff
Dangerous Item	Discrimination – Racial	Discrimination – Transphobic / Homophobic	Discrimination – Other	Emotional Harm / Abuse	Exploitation – CCE
Exploitation – CSE	Extremism	Harmful Sexual Behaviour	Home / Parenting Issues	Low Level Behaviour	Mental Health – Child
Mental Health – Familial	Missing from home	Neglect	Online	Physical Abuse	Physical
Police Involvement	Presentation / Hygiene	SEND	SENSO	Sexual Harm / Abuse	Significant Behaviour
Smoking / Vaping	Substance Related – Child	Substance Related – Familial	Verbal		
<b>MEETINGS</b>					
Initial CP Conference / IDMM	Review CP Conference / RDMM	CP Core Group	CIN Meeting	TAF Meeting	LAC Review
PEP Meeting	Attendance Meeting – School	Attendance Meeting – AO	Parent / Carer Meeting	Strategy Meeting	Professionals Meeting
Virtual Schools Education Meeting	Placement Stability Meeting	IEP / IBP	Annual Review	Transition	Intervention
<b>PHYSICAL INTERVENTION – RESTRICTIVE HOLDS</b>					
<b>Drop down boxes will appear to fill in:</b>					
Where?	Who?	How long?	Why?	De-escalation?	Which?
Injuries?	Paperwork?	SLT Oversight?	SLT Debrief?		
<b>REFERRALS</b>					

Bladder and Bowel	CAMHS	CME Referral	Complex Youth Team	CPA Referral	CSE Referral
CSOG Referral	Drugs and Alcohol Team Referral	Ed Psych	EHCP	ELSA	Food Bank
IDVA Referral	IOM Nomination Form	MARAC Request	MARS Submitted	MASH Screening	MHST
Neurodevelopmental Pathway	Operation Encompass Received	Occupational Therapy	Parenting Referral	Police Support	PREVENT Referral
RASASC Referral	SALT	School Health	St Josephs	SWIS Consultation	Sycamore Services
TAGS Referral	VPA Received	Young Carer Referral	Youth in Mind	Youth Team Referral	Additional Support Referral
<b>SCREENING TOOLS</b>					
Contextual Safeguarding	Branch	DASH Risk Assessment	Drugs and Alcohol Screening	ERASE	GCP2
Internal Mental Health Assessment	Safety Planning	Sexual Behaviour Screening	SDQ	Voice of the Child	
<b>STANDALONE</b>					
Case Study	1:1 Session	ELSA Session	MELSA Session		

## APPENDIX 2 - TRUST WIDE CPOMS CATEGORIES (GUIDANCE)

ATTENDANCE					
Attendance Internal Monitoring	Attendance Officer Involvement	Attendance Legal Action	Part Time Timetable	Alternative Timetable	Elective Home Education
To log internal school-based attendance monitoring, including punctuality.	To log attendance and punctuality monitoring when liaising with the local authority attendance officer.	To log next steps with attendance and punctuality when legal action is being taken.	To be used when a child is put on a part-time timetable (less than 22.5/25 hours a week).  Paperwork could be uploaded here as part of the child's chronology.	To be used when a child is put on an alternative timetable (accessing 22.5/25 hours a week).	To be used when recording details regarding a parental request or decision to electively home educate their child.
EBSA	Punctuality				
To be used when EBSA strategies / programme has been used to support a student back into school.	To be used to log concerns around punctuality.				
CHILDREN IN CATEGORY					
CP Plan	CIN Plan	Early Help Plan	School Support	Young Carer	LAC
Any child on a Child Protection Plan with the local authority social services.	Any child on a Child in Need Plan with the local authority social services.	Any child on an Early Help Plan, regardless of lead professional.	Any child whose family is receiving additional to or different from support to other families, but it has not yet reached the level of an Early Help Assessment	Any child who is officially identified as a young carer, either by self or school.	Any child currently in care, either fostering, with family or in residential.
Post LAC	SGO	Child Arrangement Order	Court Order	Historic CP	Historic CIN
Any child that we are aware of that was previously looked after, including SGO, long term fostering, reunified with family, child arrangement order etc.	Any child on an SGO and we have seen evidence of this.	Any child on a Child Arrangement Order and we have seen evidence of this.	Any child on a Court Order which does not fit into the previous categories, and we have seen evidence of this.	Previous involvement at Child Protection Level. Use this category when cases close and closure record received for our monitoring records.  <b>Ensure that live CP category is removed from child's overview page.</b>	Previous involvement at Child in Need Level. Use this category when cases close and closure record received for our monitoring records.  <b>Ensure that live CIN category is removed from child's overview page.</b>
Historic EH					
Previous involvement at Early Help Level. Use this category when cases close and closure record received for our					

monitoring records.  <b>Ensure that live EH category is removed from child's overview page.</b>					
<b>CONTACTS</b>					
Parent/Carer	Professional	Welfare Check/Home Visit	Escalation Stage 1	Escalation Stage 2	Escalation Stage 3
To be used to record all contacts (phone, email, face to face etc) from or to parents and carers	To be used to record all contacts (phone, email, face to face etc) from or to social workers, police, early help, housing, youth, etc. All external agencies.	To be used for any home visits or welfare checks (e.g. video calls etc) to see students or families.	To be used when professional challenge to other agencies is required and escalation procedures are employed at Level 1.	To be used when professional challenge to other agencies is required and escalation procedures are employed at Level 2.	To be used when professional challenge to other agencies is required and escalation procedures are employed at Level 3.
Escalation Stage 4	Escalation links for each Local Authority: Warrington - <a href="#">Professional Challenge and Escalation Procedure - September 2020 (warrington.gov.uk)</a> Wirral - <a href="#">10.2 Multi-agency Escalation Procedure - Wirral Safeguarding Children Partnership</a> St Helens - <a href="#">St. Helens Safeguarding Children Partnership - Multi Agency Resolution</a>				
To be used when professional challenge to other agencies is required and escalation procedures are employed at Level 4.					
<b>GENERAL CONCERNS</b>					
Absconding	Bereavement	Bullying	Child on Child	Child to Parent	Child to Staff
For all staff to record incidents of children absconding from lessons or school.	For all staff to log when they are made aware of a bereavement or when safeguarding concerns arise relating to bereavement.	To be used when there is a confirmed bullying issue.  Any records of investigations and contact with parents can be recorded under this.  If not confirmed use Child on Child.	To be used when there is an incident between pupils.  Any records of investigations and contact with parents can be recorded under this.	To be used when there is a concern around Child to Parent abuse.  For more information: <a href="#">Child to parent abuse   Parental Education Growth Support (PEGS)</a>	To be used when there is an alleged or confirmed verbal or physical incident from a child to a staff member. Any records of investigations and contact with parents can be recorded under this.
Dangerous Item	Discrimination – Racial	Discrimination – Transphobic / Homophobic	Discrimination – Other	Emotional Harm / Abuse	Exploitation – CCE
For all staff to log safeguarding concerns relating to a student suspected or confirmed of having a dangerous item.	To be used when there is a confirmed or suspected racism issue. Any records of investigations and contact with parents can be	For all staff to log safeguarding concerns relating to discriminatory behaviour.  This could cover any protected characteristics.	For all staff to log safeguarding concerns relating to discriminatory behaviour.  This could cover any protected characteristics.	For all staff to log safeguarding concerns relating to suspected emotional harm.  Definition to be shared through staff training:	For all staff to log safeguarding concerns relating to criminal exploitation.  Definition to be shared through staff training:

This could be a bladed item, item to self-harm with or any other item deemed to be able to inflict harm to self or others.	recorded under this.	Definition to be shared through staff training.	Definition to be shared through staff training.	<a href="#">What Is Emotional Abuse &amp; Things You Should Know   NSPCC</a>	<a href="#">Criminal exploitation and gangs   NSPCC</a>
<b>Exploitation – CSE</b>	<b>Extremism</b>	<b>Harmful Sexual Behaviour</b>	<b>Home / Parenting Issues</b>	<b>Low Level Behaviour</b>	<b>Mental Health – Child</b>
For all staff to log safeguarding concerns relating to sexual exploitation.  Definition to be shared through staff training: <a href="#">Child Sexual Exploitation &amp; How to Keep Your Child Safe   NSPCC</a>	To be used when there is an incident with alleged or confirmed extremism between pupils. Any records of investigations and contact with parents can be recorded under this.  Definition to be shared through staff training: <a href="#">Radicalisation and child protection   NSPCC Learning</a>	To be used when there is a disclosure of harmful sexual behaviour. This could include unwanted touching, pressure to engage in sexual acts, sexual assault of any kind, unwanted or inappropriate sexual comments, sexist name calling, being sent explicit images or videos. Any records of investigations and contact with parents can be recorded under this.  Definition to be shared through staff training: <a href="#">Harmful sexual behaviour (HSB) or peer-on-peer sexual abuse   NSPCC Learning</a>	For all staff to log safeguarding concerns relating to suspected home conditions or parenting concerns.  Definition to be shared through staff training.	To be used for low level incidents such as not following school rules which are being added to build up a chronology and look for patterns with a child's behaviour.	For all staff to log safeguarding concerns relating to suspected or confirmed mental health and wellbeing concerns.
<b>Mental Health – Familial</b>	<b>Missing from home</b>	<b>Neglect</b>	<b>Online</b>	<b>Physical Abuse</b>	<b>Physical</b>
For all staff to log safeguarding concerns relating to suspected or confirmed mental health and wellbeing concerns of family members and the impact on the child.	For all staff to log safeguarding concerns relating to children confirmed or suspected to be missing from home.	For all staff to log safeguarding concerns relating to suspected neglect.  Definition to be shared through staff training: <a href="#">Neglect is also Child Abuse: Know All About It   NSPCC</a>	To be used when there is an online issue raised. This could be from the pupils, parents or staff and should note what action has been taken to address the concerns.  Definition to be shared through staff training: <a href="#">Keeping children safe online   NSPCC</a>	For all staff to log safeguarding concerns relating to suspected or confirmed Physical abuse harm.  Definition to be shared through staff training: <a href="#">Protecting children from physical abuse   NSPCC Learning</a>	For all staff to log safeguarding concerns relating to physical incidents, for example, this could be physical fights between students.

Police Involvement	Presentation / Hygiene	SEND	SENSO	Sexual Harm / Abuse	Significant Behaviour
To be used when police are involved in an incident with a child. Any records of investigations and contact with parents can be recorded under this.	For all staff to log safeguarding concerns relating to presentation and hygiene concerns.  Definition to be shared through staff training.	This is to be used when an incident relates to a SEND need or concern.  This does not need to be tagged for every incident for a SEND student, only when specifically related to SEND, for example, parents requesting a referral to the neuro pathway.	To be used when uploading or linking any incidents flagged on SENSO that require additional action.	For all staff to log safeguarding concerns relating to suspected sexual harm.  Definition to be shared through staff training: <a href="#">Sexual abuse   NSPCC</a>	For all staff to add behaviour incidents which are significant and could lead to consequences / sanctions such as suspension.  Ensure other subcategories are tagged alongside, for example, "child on child" or "verbal"
Smoking / Vaping	Substance Related – Child	Substance Related – Familial	Verbal		
For all staff to log safeguarding concerns relating to suspected or confirmed smoking or vaping by children.	For all staff to log safeguarding concerns relating to suspected or confirmed child substance issues.  Definition to be shared through staff training.	For all staff to log safeguarding concerns relating to suspected or confirmed parental substance issues.  Definition to be shared through staff training.	To be used when there is an incident with alleged or confirmed verbal abuse between pupils. Any records of investigations and contact with parents can be recorded under this.		
<b>MEETINGS</b>					
Initial CP Conference / IDMM	Review CP Conference / RDMM	CP Core Group	CIN Meeting	TAF Meeting	LAC Review
To be used to record minutes from initial Child Protection Conferences.	To be used to record minutes from review Child Protection Conferences.	To be used to record minutes from Child Protection Core Group meetings.	To be used to record minutes from Child in Need meetings.	To be used to record minutes from Early Help meetings.	To be used to record minutes from care planning meetings or other meetings related to Children in Care which are not PEP meetings.
PEP Meeting	Attendance Meeting – School	Attendance Meeting – AO	Parent / Carer Meeting	Strategy Meeting	Professionals Meeting
To be used to record minutes from PEP meetings.	To be used to record minutes from school level attendance meetings.	To be used to record minutes from attendance meetings with local authority attendance officers.	To be used to record minutes of any other parent/carer meeting including informal face to face conversations.	To be used to record minutes from strategy meetings with multi-agencies.	To be used for any other type of professionals meeting, for example, genogram, mapping, systemic reflections etc.
Virtual Schools Education Meeting	Placement Stability Meeting	IEP / IBP	Annual Review	Transition	Intervention
To be used for any other Virtual School meetings	To be used for placement stability meetings for	To be used for IEP or IBP meetings with parents/carers.	To be used for EHCP Annual Reviews.	To be used for any transition meetings between settings.	To be used for any intervention meetings not

regarding children in care.	children in care or EHCP children.				captured in other headings.
<b>PHYSICAL INTERVENTION – RESTRICTIVE HOLDS</b>					
<b>Drop down boxes will appear to fill in:</b>					
Where?	Who?	How long?	Why?	De-escalation?	Which?
Specify exactly where in the setting the incident took place.	Include who completed the restrictive hold, who witnessed and any child advocates as appropriate.	Specify the duration of the hold including if the hold ended and restarted.	A list will appear, select all that apply. Damage to self, Damage to others, Damage to property, Danger to self, Danger to others, Danger to property, Causing Disorder	List any de-escalation strategies that were employed prior to physical intervention (change of face, use of outside etc)	A list will appear, select all that apply. Single Elbow Single Elbow – 2 person Figure of 4 Figure of 4 – 2 person Double Elbow Double Elbow – 2 person Single Elbow in seats Single Elbow in seats – 2 person Small child sitting on chair Small child help hug
Injuries?	Paperwork?	SLT Oversight?	SLT Debrief?		
Add any injuries to student or staff. Add further detail to IAmCompliant as required.	Tick to say that the parent/carer letter has been shared and then upload the signed copy as an action.	<b>For SLT use only.</b>  For SLT to add detail as to any next steps, onwards referrals, alerts to social care, updates to risk assessments etc.	<b>For SLT use only.</b>  For SLT to add detail around debrief with child, family and staff and any next steps these identify.		
<b>REFERRALS</b>					
Bladder and Bowel	CAMHS	CME Referral	Complex Youth Team	CPA Referral	CSE Referral
To be used when a referral to Bladder and Bowel Services has been submitted.	To be used when a referral to CAMHS has been submitted.	To be used when a Child Missing in Education Referral has been submitted.	To be used when a referral to the Complex Youth Team has been submitted.	To be used when a referral to the Child to Parent Abuse Team has been submitted.	To be used when a Child Sexual Exploitation Referral has been submitted.
CSOG Referral	Drugs and Alcohol Team Referral	Ed Psych	EHCP	ELSA	Food Bank
To be used when a contextual safeguarding referrals is submitted.	To be used when a referral is submitted to the youth drugs and alcohol team.	To be used when a referral to the Educational Psychologist has been submitted.	To be used when an Education Health Care Plan has been submitted.	To be used when an initial ELSA referral / assessment has been submitted.	To be used when a food bank referral is made and/or voucher is created.
IDVA Referral	IOM Nomination Form	MARAC Request	MARS Submitted	MASH Screening	MHST
To be used when a Domestic Violence referral is submitted.	To be used when intelligence is shared with police to support Integrated	To be used when a request for information is received and replied to for MARAC (Multi-	To be used when a MARS referral is submitted to social care / Early Help.	To be used when MASH contact to complete a screening on a child, via email or telephone.	To be used when a Mental Health Support Team has been submitted.

	Offender Management.	Agency Risk Assessment Conference) contribution.			
Neurodevelopmental Pathway	Operation Encompass Received	Occupational Therapy	Parenting Referral	Police Support	PREVENT Referral
To be used when a Neurodevelopmental Pathway referral has been submitted.	To be used when an Operation Encompass alert has been received.	To be used when an Occupational Therapy referral has been submitted.	To be used when a Parenting referral is submitted.	To be used when a request for support from linked police officers or PCSO is submitted.	To be used when a PREVENT Referral has been submitted.
RASASC Referral	SALT	School Health	St Josephs	SWIS Consultation	Sycamore Services
To be used when a Rape and Sexual Abuse Support Centre (RASASC) referral is submitted.	To be used when a referral to Speech and Language Therapy Services has been submitted.	To be used when a referral to School Health, Health Visitor or School Nurse has been submitted.	To be used when a referral to St Josephs has been submitted.	To be used when a Social Worker in Schools referral has been submitted.	To be used when a referral to Sycamore Services (Lynsey Thorniley SEND) has been submitted.
TAGS Referral	VPA Received	Young Carer Referral	Youth in Mind	Youth Team Referral	Additional Support Referral
To be used when a Teenager and Gender Sexuality Youth Support (TAGS) referral is submitted.	To be used when a Vulnerable Pupil Assessment has been received.	To be used when a Young Carers referral is submitted.	To be used when a referral to Youth in Mind has been submitted.	To be used when a Youth Team referral is submitted.	To be used for any additional support referrals such as for White Goods, Christmas Hampers, HAF etc.
<b>SCREENING TOOLS</b>					
Contextual Safeguarding	Branch	DASH Risk Assessment	Drugs and Alcohol Screening	ERASE	GCP2
To be used when a Contextual Safeguarding Screening Tool is completed.	To be used when the Branch website assessment has been submitted.	To be used when a DASH (Domestic abuse, stalking and honour-based violence questionnaire) risk assessment tool is completed.	To be used when a Drugs and Alcohol Screening Tool is completed.	To be used when the Ending Rape, Assault and Sexual Exploitation tool for Harmful Sexual Behaviour has been completed.	To be used when all or part of the Graded Care Profile has been used to support neglect cases.
Internal Mental Health Assessment	Safety Planning	Sexual Behaviour Screening	SDQ	Voice of the Child	
To be used when internal academy specific Mental Health assessments are completed	To be used when a safety plan has been completed.	To be used when a sexual behaviour screening tool is used, for example, Brook traffic light tool.	To be used when a Strengths and Difficulties Questionnaire has been completed.	To be used when 1:1 work has captured the voice of the child.	
<b>STANDALONE</b>					
Case Study	1:1 Session	ELSA Session	MELSA Session		
To be used to summarise key cases to be shared as best practice for example, for reviews.	To be used when direct work is completed with a child. This could be as part of a soft landing, wishes and feelings, time to talk etc.	To be used when an ELSA session is completed with a child.	To be used when a MELSA session is completed with a child or group.		