

Last updated: **23rd September 2026**

1 Introduction

- 1.1 Bright Heart Education Ltd (company number 11179043) of 20-22 Wenlock Road, London, N1 7GU (the “**Company**”) requires tutors representing it to provide tuition to students in a congenial and safe environment.
- 1.2 The Company has a moral and legal obligation to ensure that, when given responsibility for young people, they are treated with the highest possible standard of care, that we safeguard them and promote their welfare, and that they are provided with a safe working environment. Children and young people with Special Educational Needs and Disabilities (SEND) can face additional safeguarding challenges.
- 1.3 The Company’s staff and tutors have an important role to play in protecting students from harm.
- 1.4 Child protection refers to the process of keeping children safe where there is a serious risk of harm.
- 1.5 Safeguarding is a term which is broader than ‘child protection’ and relates to the action taken to promote the welfare of children and protect them from harm.
- 1.6 The Company recognises its responsibility to report child protection and safeguarding concerns to the relevant social worker or Local Education Authority and will ensure that all tutors are updated on child protection issues.
- 1.7 As a corporate member of The Tutors’ Association, the Company has a duty to promote regard for its code of ethics for tutors, which references compliance with The Tutors’ Association Child Protection Policy (“**TTA CPP**”). The Company’s Safeguarding and Child Protection Policy has been compiled with reference to the TTA CPP (and is more stringent), so complying with this policy is considered to fully satisfy this requirement regarding the TTA CPP.
- 1.8 This policy has been drawn up based on current legislation, policy and guidance that seeks to protect children in the UK.
- 1.9 The Company and the Company’s DSL will keep abreast of any changes to legislation or best practices and update this policy at least annually, or sooner if required for changes in legislation.
- 1.10 This policy statement applies to anyone working on behalf of the Company, including directors, staff, and tutors.
- 1.11 Where the Company provides tuition to learners aged 18 or over, the safeguarding principles in this policy will be applied as appropriate, including in relation to adults who may have care and support needs or otherwise be at risk of abuse or neglect.
- 1.12 The Company’s Online Tutoring and Safeguarding Policy, Anti-bullying Policy and Attendance Policy should be read in conjunction with this policy.
- 1.13 **Carol Minkoulou** is the Company’s **Designated Safeguarding Lead (DSL)**. Carol can be reached on **0203 807 2894**.
- 1.14 **Rosie Gillman** is the Company’s **Deputy DSL**. Rosie can be reached on **0203 807 2894**.
- 1.15 **Rebecca Reidel-Fry** is the Company’s **Deputy DSL**. Rebecca can be reached on **0203 807 2894**.
- 1.16 **Ryan Stevenson** is the Company’s **Executive Lead for Safeguarding**. Ryan can be reached on **0203 807 2894**.
- 1.17 Carol Minkoulou, Ryan Stevenson, Rosie Gillman and Rebecca Reidel-Fry are collectively referred to as the **Safeguarding Team**.
- 1.18 The Company operates a **dedicated safeguarding inbox** at safeguarding@brighthouse.co.uk, which is **monitored by the Safeguarding Team during working hours**. The Deputy DSLs provide cover when the DSL is unavailable.
- 1.19 The Safeguarding Team can be reached in an **after-hours safeguarding emergency** on **0203 807 2894**.

2 The Company's objectives

- 2.1 To screen and interview tutors to evaluate their **suitability** to work with children per the Company's Safer Recruitment Policy.
- 2.2 To ensure that all tutors are **aware of the need to safeguard children**. Part of this responsibility is identifying and reporting possible cases of abuse to Company staff.
- 2.3 To ensure that all tutors follow a **structured procedure** for dealing with any cases arising or any concerns.
- 2.4 To reiterate the need for **open and active communication** channels between the Company and tutors concerning child protection.
- 2.5 To promote **safe practice** and support development that will foster student security.
- 2.6 To further **develop and inform policy** in associated areas of bullying, behaviour, health and safety, and procedures for dealing with any allegations of poor practice or abuse. To collaborate and engage with other agencies and organisations involved with safeguarding and promoting the welfare of children.
- 2.7 To ensure that the Company and the tutor are **approachable** as an avenue of help for the student should a child protection concern arise.
- 2.8 To ensure that all children have the **right to be protected** from harm, abuse, neglect or exploitation and have a right to a safe learning environment.
- 2.9 To provide **continuous professional development** to keep tutors updated on safeguarding and child protection matters.
- 2.10 To ensure that a suitably qualified and experienced **DSL** (supported by a Deputy DSL / DSLs and Safeguarding Lead) is appointed to lead on:
 - 2.10.1 Safeguarding policies and procedures;
 - 2.10.2 Safeguarding training and development;
 - 2.10.3 Reviewing concerns about a child; and

- 2.10.4 Managing the reporting of child protection concerns and maintenance of related records, including risk assessments.

3 Tutor's responsibilities

- 3.1 All tutors have a **duty of care towards their tutees**, according to which they are responsible for ensuring their well-being and protecting their best interests by following the highest standards of professionalism and exemplary practices to foster a safe learning environment for all parties. Additionally, they must provide help and support for all students in accordance with their needs, including any help and support to tackle safeguarding concerns as soon as problems arise.
- 3.2 Tutors should **familiarise themselves with forms and indications of abuse, neglect or exploitation** (Sections 4 and 5), and understand the **heightened risk of abuse for children at risk** (Section 6).
- 3.3 The tutor's main responsibilities are set out below, but this is a non-exhaustive list, and tutors should **use their professional judgement to ensure that they meet their safeguarding obligations** to tutees:
 - 3.3.1 Observing a **professional demeanour and following the Company's guidelines** as outlined in the tutor's contract for services, the Tutor Pack, periodic broadcasts about safeguarding, and the Tutor's Association code of ethics at all times. For each provision, tutors should engage with students and carry out activities strictly in adherence with the job description, the individual learning plan ("ILP"), and the terms and conditions set in the tutor's contract and the Tutor Pack.
 - 3.3.2 Making **students feel safe and building a relationship of trust** where students feel comfortable discussing their concerns.
 - 3.3.3 Maintaining a **professional relationship with the student** - which means no lifts should be given, they should not engage on social media, no contact details should be given to the student and vice versa (unless through special permission from the parent / legal guardian, in which case parents/guardians need to be copied in all communications), and generally refraining from

sharing inappropriate personal information with the student or interacting in any way with the student outside of the boundaries of an appropriate tutor-tutee relationship.

- 3.3.4 **Observing appropriate boundaries with all stakeholders** (parents, students, other tutors or Company staff) and not using their position for personal benefit or gain outside of an appropriate educational provision.
- 3.3.5 Observing **respect for all other stakeholders**, including their background, sexual orientation, beliefs, values, relationships and affiliations, and refraining from any form of discrimination.
- 3.3.6 **Working collaboratively with parents or carers** to communicate expectations, build a trusting relationship and capitalise on strengths to support the student in the best possible manner, invariably observing an empathetic and sensitive approach that is mindful of family dynamics and practices without ever resorting to blaming or shaming families in any way for their parenting.
- 3.3.7 **Refraining from entering discussions with parents, students or other tutors if they have any concerns about a third party**, be it another student, parent, local authority, school, or other stakeholder involved in the child's education, such as a social worker, psychologist or tutor. Any concerns should be kept confidential and communicated to the DSL or Deputy DSLs. Tutors should also refrain from offering opinions about third parties, advocating on someone's behalf, making any promises, or raising expectations that they cannot meet.
- 3.3.8 Ensuring that a **parent or legal guardian is present** when tutoring in the home and that, **where tuition takes place away from home, the student is accompanied by an appointed carer and / or a parent or legal guardian** – this could be another responsible adult who has been granted permission from the parent or legal guardian to fulfil this role or a support person designated by the Company for 2:1 or 3:1 provisions.
- 3.3.9 Carefully following procedures where **any provision takes place**

outside the student's home without an appointed carer and / or a parent or legal guardian present:

- a) **Obtaining explicit consent in writing (text or email) from the parent or legal guardian** or the Company (where the Company has received such consent);
 - b) **Conducting a risk assessment** of the specific venue(s), including travel to and from the venue, which includes reviewing the venue's own risk assessment (obtained by the assigned education consultant), and arriving at the first session at least 15 minutes in advance;
 - c) Ensuring that a **responsible adult** at the venue (e.g. librarian or centre staff) is **on site, aware of the session** and contactable during it;
 - d) Recognising this as a **heightened risk context**, meaning **first-day calling procedures outlined** in the Company's Attendance Policy apply with urgency (i.e. immediately contacting the Company if there is an unexplained absence).
- 3.3.10 Where a student is aged 18 or over, the assigned Education Consultant will consider whether lone tuition is appropriate, taking into account the student's individual needs, vulnerabilities, capacity, proposed learning environment and any relevant care or support arrangements. Where appropriate, an individual risk assessment will be completed and additional safeguards may be required, including the presence or availability of a carer or responsible adult. Any uncertainty about capacity or adult safeguarding risk must be escalated to the Safeguarding Team before lone tuition proceeds.
 - 3.3.11 As a reminder, it is recommended that tutors always have insurance in place.
 - 3.3.12 Monitoring the student's language (including body language and other forms of expression), their behaviour and the behaviour of others around them (especially if any abrupt changes are observed), and **being vigilant of any signs of abuse, neglect or exploitation**. This includes any online behaviour or activity that

is cause for concern, such as exposure to inappropriate content or engaging in relationships that may be potentially harmful.

- 3.3.13 **Checking what filtering measures are in place in the student's learning environment** (including the venue and the devices used by the student). Tutors should communicate with parents and Bright Heart if they witness any dangerous online activity or if students mention any sites that may be cause for concern. Tutors should consider the student's vulnerability to outside influences such as grooming or county lines and the student's digital resilience. Should a risk be identified, it must be immediately included in the risk assessment, and the tutor is responsible for writing recommendations and strategies for prevention and mitigation. Tutors should consider risks across the '4Cs' (content, contact, conduct, commerce) and emerging risks from generative AI, including harmful AI-generated or manipulated content and harmful interactions with generative AI applications.
- 3.3.14 **Recording and reporting anything that may be a cause for concern to the DSL (Carol Minkoulou) or Deputy DSLs (Rosie Gillman or Rebecca Reidel-Fry)**, or via the Company's dedicated safeguarding inbox at safeguarding@brighthouse.co.uk, always remembering to be factual and not to make assumptions, regardless of the nature of the concern. Reports may include concerns about the student, the student's family members or any other party, including other staff members. Where you are unsure whether something that concerns you needs to be reported, always err on the side of caution and discuss this with the Safeguarding Team.
- 3.3.15 **Ryan Stevenson**, as Executive Lead for Safeguarding, provides **senior oversight and may be contacted where a safeguarding matter requires escalation** beyond the DSL/Deputy DSLs.
- 3.3.16 **Keeping any personal information about students confidential**, especially if it is sensitive, and taking all reasonable measures to prevent any third parties from gaining access to this information, for example, through a computer, mobile phone or

other electronic device. Documents that include confidential or sensitive information about a student should be accessed through a secure system such as Egress and must be password protected.

- 3.3.17 **Conducting risk assessments** at the start of a provision to ensure that the student is working in a safe learning environment as part of our duty of care to all tutees. The Company also conducts risk assessments as part of its consultation process before the start of a provision, and will highlight any concerns identified to the tutor.
- 3.3.18 **Attendance and absence escalation** procedures must be followed in line with the Company's Attendance Policy with respect to unexplained absences (**first-day calling**). Where a pupil does not attend as scheduled and their whereabouts cannot be confirmed, the tutor must immediately attempt to contact the parent/carer and, if unsuccessful, escalate to the Education Consultant or Safeguarding Team within 1 hour of the lesson's scheduled start. These processes align with 'Working together to improve school attendance', which is statutory guidance.
- 3.3.19 **Avoiding any direct confrontation** with anyone allegedly involved in a situation of abuse or other safeguarding concern and allowing the appropriate authorities to take action. Tutors must refrain from taking justice into their own hands and should only intervene if there is an imminent risk of harm to the student or anyone around the student. Any physical intervention must use no more force than is necessary for the least amount of time and must be reported to the Safeguarding Team.
- 3.3.20 **Collaborating with protection agencies or authorities in providing information about a concern** when asked to do so by the latter, always remembering to be completely factual and avoid making assumptions.
- 3.3.21 Ensuring you hold an **up-to-date Enhanced DBS certificate with children's barred list check** – less than 12 months old or registered on the update service – at all times.

- 3.3.22 **Completing safeguarding induction training before delivering any tuition** and, in all cases, **within one month of contracting;** and **safeguarding refresher (KCSiE Part 1) within one month of contracting and thereafter at least every 12 months.**
- 3.3.23 **Completing all professional development requirements** pertaining to safeguarding and child protection that the Company deems suitable and necessary for the best quality of care to be delivered to students.

4 Forms of abuse, neglect or exploitation

- 4.1 **Child abuse:** Abuse may be defined as intentional maltreatment leading to injury or harm or a failure to prevent it. It can be physical, sexual or emotional, but it can just as often be about a lack of love, care and attention. Abuse can also include witnessing the ill-treatment of others.

Children and young people may be abused not only within their family, institution or community but also in other settings, such as online. The abuser might be an adult or adults, but also another child or children. We know that neglect, whatever form it takes, can be just as damaging to a child as physical abuse.

Safeguarding issues frequently overlap and should not be viewed in isolation. Children may also cause harm to other family members, including parents or carers (sometimes referred to as child-to-parent or caregiver abuse).

- 4.2 **Physical abuse:** This isn't accidental - children who are physically abused suffer violence such as being hit, kicked, poisoned, burned, slapped or having objects thrown at them. Shaking or hitting babies can cause non-accidental head injuries (NAHI).

Sometimes parents or carers will make up or cause the symptoms of illness in their child, perhaps giving them medicine they don't need and making the child unwell – this is known as fabricated or induced illness (FII) or Munchausen's syndrome by proxy.

- 4.3 **Emotional abuse:** Continuous maltreatment of a child resulting in

impairment of the child's emotional development, self-esteem, and sense of self-worth.

This may include, but is not limited to, belittling, berating, bullying (also cyberbullying), constantly criticising, rejecting, emotionally manipulating or ridiculing the child, depriving them of the opportunity to express their views, silencing them, imposing developmentally inappropriate expectations, verbally or non-verbally conveying that they are unloved or worthless, but also witnessing the ill-treatment of somebody else and overprotecting the child, thus impeding their exploration and learning, as well as participation in social interactions.

Whilst emotional abuse is usually present in all types of maltreatment of a child, it may also occur on its own.

- 4.4 **Sexual Abuse:** Involves forcing, causing or inciting a child to take part in sexual activities, whether or not the child is aware of what is happening. This may involve physical contact, including penetration by a body part or object (for example rape or assault by penetration), or non-penetrative acts such as masturbation, kissing, rubbing and touching over clothing. It may also include non-contact activities, such as involving children in looking at or producing sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse.

Sexual abuse can take place online or offline and may be committed by adults or other children.

- 4.5 **Neglect:** This is the ongoing failure to meet a child's basic physical and/or emotional needs, which adversely affects the child's health or development, and is the most common form of child abuse.

Neglect may occur prenatally e.g. maternal substance abuse, and postnatally e.g. failure by parents or caretakers to provide adequate food, clothing and shelter (including exclusion from home or abandonment); to protect the child from danger, physical and emotional harm; to provide access to appropriate health, education or social care services; to respond to the child's basic emotional needs, or to give the child the love, care and attention they need from their parents.

Children who provide care for a parent or other family member are referred to as young carers. Caring responsibilities are not in themselves neglect, but may affect a child's attendance, attainment, behaviour and wellbeing and may indicate a need for additional support.

- 4.6 **Financial or material abuse:** The act of exerting excessive financial control, harm or exploitation of another. This includes theft or financial exploitation, the misuse or misappropriation of possessions or benefits.
- 4.7 **Discriminatory abuse:** A form of maltreatment based on gender, race or ethnic origin, sexuality, religion, age, disability, size, and marital status. This includes harassment, slurs or similar treatment. This includes racism, faith-based prejudice and other prejudice-based or discriminatory behaviour, which may affect a child's welfare, wellbeing, mental health and willingness to seek help.
- 4.8 **Organisational abuse:** A form of mistreatment caused by inadequate care or support within an institution, e.g. care homes, young offenders' institutions, pupil referral units, services for those with learning difficulties, and substance treatment centres.
- Examples of organisational abuse include letting an organisation's procedures interfere with a person's individual needs, e.g. having restrictive bedtimes and not providing sufficient or adequate activities for mental stimulation or spiritual fulfilment.
- 4.9 **Domestic abuse:** This includes physical, sexual, emotional or psychological and financial abuse mentioned above. This may also include honour-based abuse. Children raised in households where there is domestic violence may suffer from long-term mental health problems.
- 4.10 **Modern slavery:** This includes slavery, human trafficking, sexual exploitation, forced marriage, forced labour, and domestic servitude. Traffickers and slavery masters may also commit physical, sexual, emotional or psychological abuse to their victims. Please refer to the Company's Modern Slavery Policy for further information.
- 4.11 **Self-neglect:** A wide array of behaviours, including neglecting to care for one's basic needs and well-being, e.g. personal hygiene, appropriate

clothing, health or surroundings and includes behaviour such as hoarding.

- 4.12 **Online abuse:** This is any type of abuse that happens on the web, whether through social networks, playing online games or simply using mobile phones, computers or other electronic devices. Children and young people may experience cyberbullying, grooming, peer-to-peer pressure, sexual abuse, sexting, sexual exploitation or emotional abuse. Children can be at risk of online abuse from people they know, as well as from strangers.

Online abuse may be part of abuse that is taking place in the real world (for example, bullying or grooming), or it may be that the abuse only happens online (for example, exchanging inappropriate content with children or persuading children to take part in sexual activity online).

Being exposed to illegal or inappropriate content (e.g., pornography; racism; ; misogyny; self-harm; suicide; radicalism and extremism; as well as discrimination or hatred against a particular group of people, religion or belief, including antisemitism, and misleading or harmful material such as misinformation, disinformation (including 'fake news') and conspiracy theories) can also be considered online abuse.

- 4.13 **Grooming:** This is when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking. Children and young people can be groomed online or face-to-face by a stranger or by someone they know - for example, a family member, friend or professional.
- Groomers may be male or female. They could be any age. Many children and young people don't understand that they have been groomed or that what has happened is abuse.
- 4.14 **Female Genital Mutilation (FGM):** FGM (also referred to as 'female circumcision', 'cutting', 'initiation', 'sunna', 'infibulation', 'gudniin', 'halalays', 'tahur', 'megrez', or 'khitan') is a violent and abusive procedure involving alteration or partial or total removal of the external female genital organs, which is performed for non-medical reasons, e.g. control of female sexuality.

It is often performed by medically unqualified individuals on young girls aged between infancy and 16 years old by means of instruments such as knives, razor blades, glass, scalpels or scissors.

FGM is recognised as a violation of the human rights of girls and women (WHO, 2014), and its practice 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. Those with FGM may suffer from very serious long-term physical, mental and psychosexual effects.

4.15 So-called honour-based abuse (HBA): HBA is a collection of practices used to control behaviour within families or communities in order to protect perceived “honour”. It can include coercion, threats and violence, and may co-exist with **forced marriage** and **FGM**. HBA is a safeguarding **and criminal** concern.

4.16 Bullying and cyberbullying: Deliberate persistent offensive and humiliating behaviour intended to harm, harass, intimidate or coerce another person.

Bullying may come in many different forms, some of which are: physical bullying (e.g. hitting, pushing, slapping someone), verbal bullying (e.g. name calling, gossiping, threatening someone), non-verbal abuse (e.g. hand-signs), exclusion (deliberate ostracism) and cyberbullying, which is a form of bullying achieved via electronic means (e.g. abusive or threatening text messages, sharing of embarrassing images or videos, trolling, shaming someone online, exclusion from online games, chats or friendship groups, setting up hate groups about someone, sexting, pressuring someone into sharing sexual images or engaging in sexual conversations).

The growing ubiquity of the internet has contributed to cyberbullying. Any type of bullying may lead to mental health problems such as depression and anxiety, having fewer friendships, being weary or suspicious of others, difficulties adjusting to school, and poor academic performance.

4.17 Child-on-child abuse (including harassment and violence): Children can abuse other children both online and offline. This can include bullying

and discriminatory behaviour, abuse in intimate relationships, serious physical assault or threats involving weapons, sexual harassment and violence, harmful sexual behaviour, and the making or sharing of nudes or semi-nudes. **Child-on-child abuse is a safeguarding concern for both the victim and alleged perpetrator.** Early identification and intervention can help prevent escalation.

4.18 Radicalisation: A process by which people are encouraged to support a radical ideology or a political or religious movement which supports terrorism and/or violent extremism.

Children may be groomed online through social media or in person by family members, friends, people from the community or others who hold harmful, extreme beliefs. Children may be exposed to violent, anti-social, extremist propaganda, which can result in the development of a distorted worldview in which extremist ideology seems reasonable.

A common characteristic of radicalisation is that children and young people fail to recognise themselves as victims of grooming or exploitation. Radicalisation poses a great risk to children as extremists might eventually draw them into criminal activity and expose them to significant harm.

Further information about extremism and radicalisation can be found in the Department for Education’s **Prevent Duty Guidance: for England and Wales, available on TutorCruncher**. For this policy, extremism follows the definition used within Prevent guidance.

4.19 Extremist misogynist ideology (“incel”): A form of extremist ideology characterised by hostility towards women and girls; it is often propagated online and can overlap with **radicalisation** pathways. Concerns may trigger **Prevent** considerations alongside safeguarding.

4.20 Criminal exploitation and gangs: A process by which an individual or a group targets vulnerable children to manipulate and coerce them into committing crimes.

Children might become part of street gangs for whom crime and violence are integral to their identity, organised criminal gangs for whom

involvement in crime is their 'occupation' and is carried out for personal gain (e.g. financial), or a type of organised crime known as 'county lines', where urban gangs exploit young people into moving drugs from a hub (a large city) into other markets in suburban areas and coastal towns by using dedicated mobile phone lines.

Children as young as 12 years old have been known to be exploited for drug-moving purposes. This may also include children being trafficked away from their home area and staying in short-term private rental accommodation or the home of a drug user.

Child criminal exploitation may be committed or facilitated by an organised network or gang and may constitute modern slavery. A child cannot consent to being exploited, abused or trafficked, even where the activity appears voluntary.

- 4.21 **Sexual harassment:** Any unwanted sexual behaviour, conveyed either explicitly or implicitly, that is degrading, humiliating or intimidating, or behaviour that creates a hostile or offensive environment.
- 4.22 **Harmful sexual behaviour (HSB):** HSB can occur online or face-to-face and exists on a continuum from inappropriate or problematic sexual behaviour through to abusive or violent behaviour.
- 4.23 **Making or sharing nudes or semi-nudes:** The creation, sending or posting of nude or semi-nude images by children under the age of 18. This includes photographs, videos and livestreams and includes images that are self-generated, created by another person, digitally altered or wholly generated using artificial intelligence (including 'deepfakes' or 'deep nudes').
- 4.24 **Mental health:** Mental health problems can, in some cases, develop into safeguarding concerns, including self-harm, eating disorders, suicidal ideation or risk of suicide. They may also indicate that a child has suffered or is at risk of suffering abuse, neglect or exploitation.
- 4.25 **Children affected by a family member's imprisonment (contextual risk):** Having a parent/close family member in prison is **not a form of abuse** itself but is a recognised **contextual vulnerability** that can elevate

safeguarding risk and impact attendance, wellbeing and stability.

- 4.26 Further safeguarding issues and indicators that tutors should be aware of include **drug taking and/or alcohol misuse, unexplained and/or persistent absences from education, upskirting, and serious violence** (including carrying, threatening with or using weapons). These issues may overlap with or indicate other forms of abuse, neglect or exploitation.

5 Indications of abuse, neglect or exploitation

- 5.1 **Students can show that they have been victims of abuse in many ways, including:**
 - 5.1.1 physical signs;
 - 5.1.2 concerning, unusual or inappropriate behaviour or play;
 - 5.1.3 disturbing verbal or written communication, body language or drawings; and
 - 5.1.4 a continuous pattern of absenteeism or avoidance.
- 5.2 **Physical abuse:** One may suspect physical abuse if a child regularly displays **the following injuries:**
 - 5.2.1 Bruises (at various healing stages, i.e. brown or yellow and black or purple);
 - 5.2.2 Broken or fractured bones;
 - 5.2.3 Burns or scalds;
 - 5.2.4 Bite marks;
 - 5.2.5 Scarring;
 - 5.2.6 Vomiting, drowsiness or seizures as a result of poisoning;
 - 5.2.7 Breathing problems as a result of drowning, suffocation, poisoning; or
 - 5.2.8 Head injuries (in babies and toddlers) (e.g. swelling, bruising, fractures, breathing problems, seizures, vomiting, being extremely sleepy or unconscious, and other unusual behaviours

such as being irritable or not feeding properly).

5.3 **Behavioural signs** that may be indicative of **physical abuse** are the following:

- 5.3.1 Unnecessary clothing even when it is hot as an attempt to hide injuries;
- 5.3.2 Discomfort or reluctance with undressing, e.g. for sporting activities;
- 5.3.3 Aggressive behaviour or tantrums;
- 5.3.4 Perceiving or expecting harm from other people when this is not true;
- 5.3.5 Fear of the parents or of going home, attempts to run away;
- 5.3.6 Discomfort with or fear of physical contact;
- 5.3.7 Depression, anxiety or mood swings, loss of interest in common activities; or
- 5.3.8 Emotional and social withdrawal.

5.4 **Emotional or psychological abuse:** As children's emotions change over their development, it might be difficult to identify emotional abuse, especially because signs of emotional abuse may also be different depending on the child's age. However, the following are the **signs to be aware of:**

- 5.4.1 Low self-esteem and confidence;
- 5.4.2 Lack of facial expression;
- 5.4.3 Inability or struggle to control emotions;
- 5.4.4 Emotional or social withdrawal (e.g. they have few or no friends);
- 5.4.5 Extreme outbursts;
- 5.4.6 Desperate need for affection, approval or attention;
- 5.4.7 Extreme deference towards others;
- 5.4.8 Reporting feeling worthless and unloved;
- 5.4.9 Lack of trust in adults (even when kindness or consideration is expressed);
- 5.4.10 Acting or using language inappropriate for their age;

5.4.11 Eating disorders;

5.4.12 Depression, anxiety, loss of interest in common activities; or

5.4.13 Self-harm or suicidal thoughts.

5.5 **Sexual abuse:** One may suspect sexual abuse if a child displays the following **physical signs:**

- 5.5.1 Bruises (particularly, to the thighs, buttocks, upper arms, and marks on the neck);
- 5.5.2 Unexplained bleeding, discharge, pains or soreness in the genital or anal area
- 5.5.3 Unexplained difficulty in walking or sitting;
- 5.5.4 Sexually transmitted diseases (STDs); or
- 5.5.5 Pregnancy in a woman who is unable to consent to sexual intercourse.

5.6 **Behavioural signs** that may be indicative of **sexual abuse** are the following:

- 5.6.1 Social or emotional withdrawal or over-compliance;
- 5.6.2 Language or sexual behaviour inappropriate for their age;
- 5.6.3 Running away from home;
- 5.6.4 Alluding to secrets they cannot reveal;
- 5.6.5 Unexplained fear of certain places or a particular person they know;
- 5.6.6 Unexplained amount of money or gifts;
- 5.6.7 Nightmares or sleep disturbance;
- 5.6.8 Regressive behaviour e.g. bedwetting;
- 5.6.9 Changes in eating habits and/or eating disorders (anorexia or bulimia);
- 5.6.10 Substance abuse;
- 5.6.11 Unexplained depression, anxiety, mood swings or changes in personality; or
- 5.6.12 Self-harm or suicidal thoughts.

5.7 **Recognising possible neglect (Graded Care Profile 2 or GCP2).** Staff and tutors should remain alert to neglect indicators across the four core domains referenced by the GCP2: **physical care, safety, emotional warmth, and stimulation.** While the Company does not administer GCP2, factual observations aligned to these domains should be recorded and reported to the Safeguarding Team

Neglect: A child may be neglected if they display some of the **following signs**, which last a significant period of time:

5.7.1 Poor appearance and hygiene, for example:

- being visibly dirty or smelly;
- being inappropriately or inadequately dressed;
- wearing unwashed clothes; or
- being hungry and stealing or gorging on food.

5.7.2 Health and development problems, for example:

- Frequent illness or infections;
- Medical or dental issues (e.g. decaying teeth);
- Body issues (e.g. thinning hair, poor muscle tone, a protuberant abdomen, prominent joints);
- Skin issues (e.g. sores, rashes, flea bites, scabies or ringworm);
- Missed medical appointments (e.g. vaccinations);
- Anaemia;
- Tiredness or sleep deprivation;
- Weight or growth issues;
- Frequent accidental injuries of the same kind indicating lack of supervision; or
- Poor language or social skills.

5.7.3 Housing and family issues, for example:

- Being left alone for a long time;
- Living in unsuitable conditions (e.g., having no heating); or
- Acting as a carer for other family members.

5.8 **Behavioural signs** that may be indicative of **neglect** are the following:

- 5.8.1 Aggressive behaviour;
- 5.8.2 Being too needy;
- 5.8.3 Loss of interest in academics and frequent or unexplained absences;
- 5.8.4 Poor concentration
- 5.8.5 Reluctance to take part in activities;
- 5.8.6 Social or emotional withdrawal;
- 5.8.7 Changes in eating habits;
- 5.8.8 Substance abuse;
- 5.8.9 Depression or anxiety; or
- 5.8.10 Self-harm.

5.9 **Financial or material abuse:** One may suspect financial or material abuse if a child displays **the following signs:**

- 5.9.1 Unexplained loss of money or personal possessions;
- 5.9.2 Unpaid bills;
- 5.9.3 Stealing money under coercion (e.g. to give to an abuser); or
- 5.9.4 Insufficient amount of money to pay for basics (e.g. food or clothing).

5.10 **Discriminatory abuse:** One may suspect discriminatory abuse if there are **the following signs:**

- 5.10.1 Racist or sexist slurs, comments or innuendos;
- 5.10.2 Verbal or physical abuse as a result of a disability;
- 5.10.3 Harassment due to a sexual orientation;

5.11 **Behavioural signs** that may be indicative of **discriminatory abuse** are the following:

- 5.11.1 Social or emotional withdrawal;
- 5.11.2 Outbursts of anger when they perceive themselves different from others; or
- 5.11.3 Expressing concern regarding their race, religion or sexual

orientation.

5.12 **Organisational abuse:** Organisational abuse (more applicable to residential care) may **typically take place in organisations where there is:**

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

5.13 **Domestic abuse:** Signs that may be **indicative of domestic abuse** are the following:

- 5.13.1 Signs of physical abuse listed above; or
- 5.13.2 General poor health;

5.14 **Behavioural signs** that may be indicative of **domestic abuse** are the following:

- 5.14.1 Social or emotional withdrawal;
- 5.14.2 Low self-esteem;
- 5.14.3 Outbursts of anger;
- 5.14.4 Fear of being abandoned;
- 5.14.5 Nightmares or sleep disturbance;
- 5.14.6 Regressive behaviour (e.g. bedwetting);
- 5.14.7 Substance abuse; or
- 5.14.8 Depression and anxiety.

5.15 **So-called honour-based abuse (HBA):** signs that may be **indicative of HBA** include:

- 5.15.1 sudden restrictions on movement or social contact;
- 5.15.2 surveillance by family/peers;
- 5.15.3 threats or violence linked to "honour";
- 5.15.4 fear about family discovering relationships;

5.15.5 unexplained withdrawal from tuition/education;

5.15.6 talk of travel abroad for a "ceremony"; or

5.15.7 forced-marriage concerns.

5.16 **Modern slavery:** Signs that may be **indicative of modern slavery** are the following:

- 5.16.1 Signs of physical and emotional abuse;
- 5.16.2 Appearing malnourished;
- 5.16.3 Appearing unkempt and/or wearing the same clothes;
- 5.16.4 Social or emotional withdrawal;
- 5.16.5 Appearing frightened or hesitant to talk to strangers or law enforcers;
- 5.16.6 Avoiding eye contact;
- 5.16.7 Isolation from the community, appearing as if under the control or influence of others;
- 5.16.8 Dirty, cramped or overcrowded accommodation; or
- 5.16.9 Living and working at the same address.

5.17 **Self-neglect:** Signs that may be **indicative of self-neglect** are the following:

- 5.17.1 Appearing malnourished and dehydrated;
- 5.17.2 Appearing unkempt and/or wearing the same clothes;
- 5.17.3 Poor personal hygiene;
- 5.17.4 Lack of essential food, clothing or shelter;
- 5.17.5 Living in unsanitary conditions;
- 5.17.6 Hoarding;
- 5.17.7 Gathering a large number of animals in inappropriate conditions;
- 5.17.8 Non-compliance with health or care services; or
- 5.17.9 Inability or unwillingness to take medication or treat illness or injury.

5.18 **Female genital mutilation (FGM):** One may suspect that **FGM might happen** if there are **the following signs:**

- 5.18.1 A relative or someone known as a 'cutter' visiting from abroad;
 - 5.18.2 A girl talks about a long holiday to her country of origin or another country where FGM is practiced;
 - 5.18.3 A girl talks about attending a special occasion or ceremony 'to become a woman' or 'to be prepared for marriage';
 - 5.18.4 Unexpected, unexplained or long absences from school;
 - 5.18.5 A girl's relative (e.g. mother, sister or aunt) is known to have undergone FGM;
 - 5.18.6 A girl runs away or plans to run away from home;
- 5.19 One may suspect that **FGM has already happened** if there are the following signs:
- 5.19.1 Difficulty walking, standing, sitting;
 - 5.19.2 Spending longer than normal in the toilet due to difficulty urinating;
 - 5.19.3 Unexplained differences in behaviour after a long absence from school;
 - 5.19.4 Becoming quiet, anxious or depressed;
 - 5.19.5 Reluctance to go to the doctors or undergo routine medical examinations; or
 - 5.19.6 Asking for help (possibly implicitly out of fear or embarrassment).
- 5.20 **Radicalisation:** One may suspect radicalisation if a child displays the following symptoms:
- 5.20.1 Unwillingness to discuss their views;
 - 5.20.2 Reluctance to listen to other points of view;
 - 5.20.3 Outbursts of anger;
 - 5.20.4 Distancing themselves from friends and family;
 - 5.20.5 Changing friends or appearance;
 - 5.20.6 Abusive behaviour towards children who are different;
 - 5.20.7 Sudden disrespectful attitude towards others;
 - 5.20.8 Talking as if from a script;
 - 5.20.9 Loss of interest in the activities they used to enjoy doing;
 - 5.20.10 Spending prolonged periods of time on the phone or online;
 - 5.20.11 Accessing extremist online content; or
 - 5.20.12 Becoming secretive about their whereabouts or internet use.
- 5.21 **Extremist misogynist ideology ("incel"):** indicators include:
- 5.21.1 Consumption/sharing of incel or misogynist content;
 - 5.21.2 fixation on male-grievance narratives;
 - 5.21.3 demeaning/hostile attitudes to women and girls;
 - 5.21.4 glorification of incel-aligned attackers; or
 - 5.21.5 increased isolation and secretive online activity.
- 5.22 **Impact of family member in prison — indicators.**
Anxiety, sleep disturbance, secrecy/stigma around family circumstances; distress linked to court/prison visit schedules; **increased absenteeism or punctuality issues**; changes in behaviour (withdrawal, aggression); signs of household instability/financial stress.

6 Children at risk

- 6.1 The following are children and young people who may be particularly at risk of abuse and neglect:
- 6.1.1 Children on the Child Protection Register;
 - 6.1.2 Children in care;
 - 6.1.3 Children whose parents struggle with substance misuse;
 - 6.1.4 Children involved in substance misuse;
 - 6.1.5 Children affected by domestic abuse;
 - 6.1.6 Children with a disability, additional support needs or mental health needs/difficulties, or certain medical or physical health conditions;
 - 6.1.7 Children whose parents or carers suffer from a mental illness;

- 6.1.8 Children who are young carers;
 - 6.1.9 Children who run away, go missing from home or residential foster care;
 - 6.1.10 Children who are homeless or living in temporary accommodation or at risk of sleeping on the streets;
 - 6.1.11 Children who are at risk of being exposed to prostitution or sexual exploitation;
 - 6.1.12 Children who may be vulnerable due to their sexuality, ethnic, cultural or minority group;
 - 6.1.13 Children who display violent, sexually harmful or abusive behaviour;
 - 6.1.14 Children who have been victims of, or witnesses to a crime;
 - 6.1.15 Children in the family justice system;
 - 6.1.16 Children using mental health services;
 - 6.1.17 Children who are asylum-seekers;
 - 6.1.18 Children from families where female genital mutilation is practised; and
 - 6.1.19 Children from families where forced marriage is practised.
 - 6.1.20 Children with a parent or close family member in prison.
 - 6.1.21 Children receiving tuition at third-party venues without a parent/carer present heightens safeguarding risk; first-day calling applies with urgency if the pupil does not attend as scheduled.
 - 6.1.22 Children who have experienced repeated suspension or exclusion, are on a part-time timetable, are at risk of permanent exclusion, or are receiving Alternative Provision.
- 6.2 Children with SEND or certain medical conditions can face additional safeguarding barriers, including communication difficulties; assumptions that signs of abuse relate to the child's condition; greater dependence on adults or intimate care; isolation or bullying; difficulty recognising that behaviour is abusive; and difficulties understanding online risks. Any

concerns should be discussed with the Safeguarding Team and, where appropriate, relevant professionals.

- 6.3 A medical incident does not in itself constitute a safeguarding concern. However, where it indicates that a child may be at increased risk of neglect, abuse or exploitation, the matter must be escalated to the Safeguarding Team.

7 Procedure for handling and reporting a child protection or safeguarding incident

- 7.1 Should the tutor witness or be concerned that there is a form of abuse, neglect or exploitation, or other safeguarding issue taking place, or if the tutor becomes aware of a concern **through a direct or indirect disclosure, observed behaviour, information from another person or other indicators** of a child protection incident, then the **tutor should follow the important procedures** listed below.
- 7.2 In an **emergency, where there is immediate danger**, make the situation as safe as possible, which could include, as necessary:
- 7.2.1 **Seeking medical attention as appropriate** and following professional medical advice; and/or
 - 7.2.2 **Contacting the police by calling 999** and following their advice.
- 7.3 **Make a comprehensive written record of the incident** immediately after the session, including date, time, initials of the student and detailed notes regarding the event witnessed by the tutor or heard by the tutor, which must only include factual information, without opinions or judgements, as well as a description of the safeguarding or child protection concern, or the disclosure made by the student or other party.
- 7.4 **Contact Carol Minkoulou, the DSL, regarding the incident.** In the case of her absence contact Rosie Gillman or Rebecca Reidel-Fry, the Deputy DSLs.
- 7.5 **Produce a detailed written report of the incident using the Company's safeguarding incident reporting form** (which is available on

TutorCruncher or can be emailed directly) and provide this to the Company. No further engagement by the tutor with parents, students or carers about the incident should take place at this stage. The tutor should await further instructions from the Company.

7.6 Tutors should invariably **remain calm and reassure the other person** that they are doing the right thing. Tutors may offer sympathy and comfort to the student or other party, and listen to them attentively, asking open questions in the process.

7.7 Under **no circumstances should tutors:**

- 7.7.1 Make any assumptions or judgements about the student or any other party involved in the safeguarding issue;
- 7.7.2 Lead the student or other party into answering in a certain way or pressure them for more information than they are comfortable disclosing;
- 7.7.3 Take actions into their own hands or encourage others to take any actions, save if strictly necessary when there is immediate risk of harm for any of the parties involved; or
- 7.7.4 Discuss any disclosures made by students or other parties with anyone outside of the DSL and any other Company directors, save when required to do so by protection agencies or authorities.

7.8 Under exceptional circumstances where tutors do not feel comfortable contacting the Safeguarding Team, they can contact the Local Authority Designated Officer or the School Designated Safety Lead to report the incident.

8 Company procedure for handling a safeguarding incident

8.1 After being notified of a child protection or safeguarding incident, the Safeguarding Team will take the following steps:

- 8.1.1 Speak individually with all parties connected to the incident.

8.1.2 If the student is on roll at a school, this will include speaking to the school's DSL.

8.1.3 Produce a written record of these conversations, including providing relevant dates and times.

8.1.4 The DSL will establish the level of concern and the necessary next steps.

8.1.5 If relevant, liaise with the child's school/commissioner, social worker, local authority children's social care and/or other appropriate services. Where concerns do not meet the threshold for statutory intervention, the DSL may support access or referral to appropriate universal/community-based early help or targeted Family Help services. Where a child may be in need or is suffering, or likely to suffer, significant harm, a referral to statutory children's social care will be made in line with local thresholds.

8.1.6 If there is a safeguarding concern or allegation about a tutor that may meet the harm threshold, the Company will consider whether referral to the relevant LADO is required and, where appropriate, contact the LADO without delay. Where the tutor is delivering a school or local-authority commissioned provision, the Company will also liaise with the commissioning organisation as appropriate.

8.1.7 Provide a written report of the incident to the relevant department in the Local Authority and / or the school's DSL.

8.1.8 Where the child is looked-after or in kinship care, liaise with the Virtual School Head in the placing authority to promote educational achievement and coordinate safeguarding actions.

8.1.9 Follow all further guidance received from the relevant department of the Local Authority and / or the school's DSL.

8.1.10 Maintain a central record with a summary of all reported incidents and concerns, including a brief outline and the ensuing actions and follow-up carried out by the Company's safeguarding team.

8.1.11 Where a safeguarding concern arises from non-attendance, the

Safeguarding Team will apply the Attendance Policy's first-day calling procedure. This includes continuing follow-up attempts with the parent/carers; escalating the same day to the commissioner, and where relevant (e.g. Local Authority placements or tuition at third-party venues without a parent or legal guardian present), to the social worker and/or MASH; and recording the case in the Company's safeguarding log in line with its record-keeping procedures.

Where a parent/legal guardian is present (the normal arrangement), escalation will normally involve confirming arrangements with the parent/carers, unless additional safeguarding concerns arise.

9 Company procedures to ensure compliance

- 9.1 **All tutors should read the Safeguarding and Child Protection Policy, Online Tutoring and Safeguarding Policy, Anti-bullying Policy, Attendance Policy, and the current Keeping Children Safe in Education, Part 1, and fully understand their safeguarding responsibilities.**
- 9.2 The Company and the DSL will keep abreast of any changes to legislation or best practices and update the Safeguarding and Child Protection Policy at least annually, or sooner if required for changes in legislation.
- 9.3 The Company will provide professional development to tutors and staff pertaining to safeguarding and child protection that the Company deems suitable and necessary for the best quality of care to be delivered to students. This will be provided through a combination of emailed broadcasts, online and / or in-person training, and annual refresher training covering Keeping Children Safe in Education, Part 1. Annual training will include recognising early signs of neglect with reference to the four GCP2 domains (physical care, safety, emotional warmth, stimulation).
- 9.4 The DSL, Carol Minkoulou (PGCE in Primary Education, QTS, National Award for SEN Co-ordination, and National Professional Qualification for Senior Leadership, NPQSL), holds a Designated Safeguarding Lead Level

3 certificate dated 15 September 2026, which will be renewed by no later than 15 September 2028. Rosie Gillman and Rebecca Reidel-Fry, the Deputy DSLs, hold Designated Safeguarding Lead Level 3 certificates dated 23 September 2025 and 23 September 2026, respectively. Ryan Stevenson, the Executive Lead for Safeguarding, holds a Designated Safeguarding Lead Level 3 certificate dated 8 September 2025. The Safeguarding Team have also all completed current Prevent Duty training.

- 9.5 Written records are kept of all concerns, which are kept securely.
- 9.6 The Company's board of directors, led by the Executive Lead for Safeguarding, reviews the central record of safeguarding incidents and the safeguarding risk register periodically. These items are also included as agenda items at the Company's board meetings including oversight of cyber-resilience relevant to safeguarding.
- 9.7 For school or local-authority commissioned Alternative Provision, the Company will provide written confirmation, where required, that appropriate safeguarding and safer-recruitment checks have been completed on tutors delivering the provision and will inform the commissioning organisation of material changes to staffing or delivery arrangements that may affect safeguarding.

10 Information sharing and confidentiality

- 10.1 All tutors must be aware that **they cannot promise to maintain confidentiality to a child if the child discloses certain information to them**, which they have a duty to report in terms of this policy.
- 10.2 For the purposes of this policy, 'data protection laws' includes the Data Protection Act 2018, UK GDPR and Data (Use and Access) Act 2025. Data protection laws do not prevent appropriate information sharing for safeguarding purposes.
- 10.3 The **seven golden rules for sharing information (including personal information)** are summarised below (refer to **Information sharing advice for safeguarding practitioners** for detailed information):

- 10.3.1 All children have a right to be protected from abuse and neglect. Protecting a child from such harm takes priority over protecting their privacy, or the privacy rights of the person(s) failing to protect them.
- 10.3.2 When you have a safeguarding concern, wherever it is practicable and safe to do so, engage with the child and/or their carer(s), and explain who you intend to share information with, what information you will be sharing and why.
- 10.3.3 You do not need consent to share personal information about a child and/or members of their family if a child is at risk or there is a perceived risk of harm.
- 10.3.4 Seek advice promptly whenever you are uncertain or do not fully understand how the legal framework supports information sharing in a particular case
- 10.3.5 When sharing information, ensure you and the person or agency/organisation that receives the information take steps to protect the identities of any individuals (e.g., the child, a carer, a neighbour, or a colleague) who might suffer harm if their details became known to an abuser or one of their associates
- 10.3.6 Only share information that is **relevant, necessary and accurate**, with individuals or agencies/organisations that have a role in safeguarding the child and/or supporting their family. Information should be **clearly presented, appropriately contextualised and proportionate to the safeguarding risk**, and limited to what the recipient needs.
- 10.3.7 Record the reasons for your information sharing decision, irrespective of whether or not you decide to share information.
- 10.4 The Company recognises its responsibility in keeping matters related to child protection and safeguarding confidential.
- 10.5 When the Company is privy to sensitive information, tutors will only be informed if it is needed to carry out their duties.
- 10.6 Likewise, the Company will only share information with third parties if it is necessary for safeguarding and child protection purposes or if the appropriate authorities request it.
- 10.7 **All tutors are responsible for keeping any information, including EHC Plans, confidential**, which includes not printing any sensitive information obtained electronically or viewing such information in a public place.

Safeguarding Declaration

I confirm that I have read and, having made any necessary enquiries, fully understood the **Safeguarding and Child Protection Policy**.

I have also read, and, having made any necessary enquiries, fully understood:

- the **Online Tutoring and Safeguarding Policy**;
- the **Attendance Policy**;
- the **Anti-bullying Policy**; and
- **Keeping Children Safe in Education (KCSiE), Part 1**

I acknowledge that I **appreciate the extreme importance of following these policies** and **agree to be bound by all of them**.

I also acknowledge that I **will complete any required safeguarding and child protection training** and **read and be bound by any updated safeguarding and child protection policies** or other communications shared with me by the Company.

Signed:

Print Name:

Date: