

Policy Name	Safeguarding Children and Young People Policy
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Safeguarding lead change – edits throughout	Rob Wardle	Dec 2023
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Overhaul of policy, separating out Children from adults and detailing processes for each	Sam Palmer	April 2023
Section added re use of venues for counselling pg.4	Sam Palmer	Aug 2023
Updates to the types of abuse and contact details for Rochdale	Sam Palmer	Oct 2023
Updates in terms of the safeguarding lead and procedure	Rob Wardle	Dec 2023
Update logo and job titles & update to Working Together 2023 link	Rob Wardle	Nov 2024
Compliance review, updated text and formatting.	Sam Palmer	March 2026

1. Aim

It is unacceptable for a child or young person to experience abuse or neglect. Respect for All is committed to safeguarding and promoting the welfare of children by:

- Providing safe environments
- Identifying and responding to harm or risk of harm
- Acting in the child's best interests at all times
- Promoting safe practice and challenging unsafe practice
- Working effectively with partner agencies

2. Scope

This policy applies to all staff, volunteers, trustees, contractors, and students. It includes work with children directly and with adults who may be parents or carers.

3. Legislative Framework

Aligned with:

- Working Together to Safeguard Children 2023
- Children Act 1989 & 2004
- Domestic Abuse Act 2021
- Data Protection Act 2018 / UK GDPR
- Counter-Terrorism and Security Act 2015 (PREVENT)
- Human Rights Act 1998
- Equality Act 2010
- Charity Commission safeguarding guidance (incl. Serious Incident Reporting)

4. Definitions

Safeguarding and promoting welfare means:

- Protecting children from maltreatment
- Preventing impairment of health/development
- Ensuring safe and effective care
- Taking action to enable best outcomes

5. Types of Abuse

Child abuse is maltreatment of a child. Someone may abuse a child either by directly inflicting harm, or by failing to act to prevent harm. Child abuse occurs in family, institutional and community settings. Children may be abused by an adult or adults, or by another child or children. The majority of abuse is perpetrated by someone known to the child, including parents, other relatives and families' friends. Abuse by strangers is much less common.

The types of abuse are described below, along with signs and indicators for each type. Recognising abuse is not straightforward and it is not your responsibility to decide whether or not a child has been or is at risk of being abused. However, you do have a responsibility to act on concerns, to enable appropriate investigations to take place and actions to be taken to protect children.

If in any doubt, always seek advice using the safeguarding escalation procedures which are available in the Policies and Procedure electronic folders *and* in Appendix 1.

If in doubt speak to the safeguarding lead or a manager.

For children's safeguarding, the definitions of abuse are taken from Working Together 2023.

1. **Abuse:** A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults, or another child or children.
2. **Physical abuse:** A form of abuse which may involve hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
3. **Emotional abuse:** The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
4. **Sexual abuse:** Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males.
5. Women can also commit acts of sexual abuse, as can other children.
6. **Neglect:** The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a

child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers);
- Ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

7. Domestic Abuse

Domestic abuse describes negative behaviours that one person exhibits over another within families or relationships. These patterns of behaviour can include threats, put-downs, isolation, violence, and control. Sometimes domestic abuse can be called domestic violence (Domestic Abuse Act 2021).

Domestic abuse can take different forms, including:

- Physical abuse: pushing, hitting, punching, kicking, choking, and using weapons.
- Sexual abuse: forcing or pressuring someone to have sex (rape), unwanted sexual activity, touching, groping someone, or making them watch pornography.
- Financial abuse: taking money, controlling finances, not letting someone work.
- Emotional abuse / coercive control: making someone repeatedly feel bad or scared, stalking, blackmailing, constantly checking up on someone, playing mind games. Coercive control is now a criminal offence under the Serious Crime Act 2015.
- Digital / online abuse: using technology to further isolate, humiliate or control someone.
- Honour-based violence and forced marriage.

If a child or young person under the age of 18 witnesses (including hearing it from another room) when domestic abuse occurs this is a safeguarding issue, and an alert must be made.

Other Types of Abuse

Female genital mutilation (FGM)	Some of the following signs may be indicators of FGM
<p>Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person.</p> <p>Victims of FGM are likely to come from a community that is known to practice FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.</p> <p>From October 2015, the new 'mandatory reporting' duty for professionals requires them to notify the police if they discover that an act of FGM appears to have been carried out on a girl who is under 18 (either if they have visually confirmed it or it has been verbally disclosed by an affected girl).</p>	<ul style="list-style-type: none"> • A female child in a family where other females have undergone FGM. • The family is from a nation, region, or community in which FGM is practiced. • The family makes preparations for the child to take a holiday, planning an absence from school. • The child talks of a special ceremony that is going to happen. • Sudden or repeated failure to attend or engage with health services.
Child Sexual exploitation	Some of the following signs may be indicators of child sexual exploitation
<p>Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups.</p> <p>What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops.</p>	<p>Social</p> <ul style="list-style-type: none"> • Going missing from home or care or school, Estranged from the family. • Being collected from home/school in unknown cars • Secretive mobile phone use • Being friends with significantly older people • Becoming involved in crime e.g., stealing. <p>Physical</p> <p>Physical injuries, drug misuse, sexually transmitted infections, poor mental health self-harm, change in physical appearance.</p>

<p>Sexual exploitation involves varying degrees of coercion, intimidation, or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber-bullying and grooming.</p>	<p>However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.</p>
<p>Radicalisation and Extremism</p>	<p>Some of the following signs may be indicators of radicalization and extremism</p>
<p>Radicalisation refers to the process whereby a person comes to support terrorism and forms of extremism leading to terrorism.</p> <p>Extremism Extremism is defined by the Government in the Prevent Strategy as ‘a Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.’ Respect for All seeks to protect children and young people against the messages of all violent Radicalisation and extremism.</p>	<ul style="list-style-type: none"> • Identity crisis • Personal Crisis • Personal circumstances • Unmet Aspirations- Perceptions of injustice; feeling of failure. • Criminality • Use of inappropriate language • Possession or accessing violent extremist literature. • Behavioural changes • The expression of extremist views.
<p>Children who witness domestic abuse</p>	<p>Some of the following signs may be indicators of domestic abuse.</p>
<p>Parents or carers may underestimate the effects of domestic abuse on their children, but children witnessing abuse is recognised as significant harm in law.</p>	<ul style="list-style-type: none"> • Children who are withdrawn, anxious, clingy, depressed, • Problems sleeping, • Soils clothes, • Aggressive behaviour.
<p>Child trafficking</p>	<p>Some of the following signs may be indicators of child trafficking.</p>
<p>Child trafficking is the recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered trafficking in human beings (council of Europe ratified by the UK government in 2008)</p>	<ul style="list-style-type: none"> • Spends a lot of time doing household chores. • Not registered with a GP or school • Has no access to their parents or guardians. • Isn't sure what country, city, or town they're in.
<p>Forced marriage</p>	<p>Some of the following signs may be indicators of forced marriage.</p>

<p>Forced marriage (FM) where one or both parties do not agree to the marriage and where fear/coercion/duress or force is a factor.</p> <p>Forcing someone to marry is a criminal offence (under the crime and Policing act 2014) and something that can lead to lifelong suffering for the victim from physical abuse, sexual abuse, and servitude. Forcing children to marry is child abuse.</p>	<p>The factors below collectively or individually may be an indication that a person fears that they may be forced to marry, or that a forced marriage has already taken place.</p> <ul style="list-style-type: none"> • Education- truancy from school, extended periods of unauthorised absence for sickness or overseas family commitments, history of other siblings missing education and marrying early. • Health – self harm, attempted suicide, eating disorders, depression isolation.
<p>Peer abuse and bullying (including cyber bullying).</p>	<p>Some of the following signs may be indicators of peer abuse and bullying.</p>
<p>A definition of Bullying is ‘behaviour by an individual or group usually repeated over time, that intentionally hurts another individual or group physically or emotionally.’ There are many different types of cyber bullying including:</p> <ul style="list-style-type: none"> • Harassment • Denigration • Flaming • Impersonation • Outing and trickery • Cyber stalking • Exclusion • Blackmail and grooming • Spreading rumours • Threatening behaviour <p>Peer abuse can also take the form of sexual abuse (see earlier section on sexual abuse)</p>	<ul style="list-style-type: none"> • Children or young people may- be reluctant to attend school. • Not wanting to leave the house. • Have unexplained cuts and bruises. • Become withdrawn/ lack confidence. • Change in appetite increase/ decrease or changing appearance to try to fit in • Low self esteem • Become withdrawn. • Reluctance to let parents or other family members anywhere near mobiles/ laptops etc. • Friends disappearing or being excluded from social events. • Change in personality. • Fresh marks on skin which could indicate self-harm and dressing differently e.g., wearing long sleeved clothing in summer.
<p>Children missing from home</p>	<p>Some of the following signs may be indicators of children going missing from home.</p>
<p>Children who go missing from home are vulnerable to abuse and violence and need to be safeguarded.</p>	<p>Children go missing for a number of reasons, but in general, the factors preceding missing episodes are:</p> <ul style="list-style-type: none"> • Arguments and conflicts (whether a home or in a placement), • Poor family relationships • Abuse and neglect • Boundaries and control <p>Immediate risks</p>

	<ul style="list-style-type: none"> • No means of support or legitimate incomes leading to high-risk activities. • Becoming a victim of abuse. • Missing out on schooling and education. • Increased vulnerability.
<p>Fabricated, fictitious or induced illness (used to be known as Munchausen’s by proxy)</p>	<p>Some of the following signs may be indicators of fabricated illness</p>
<p>This is a rare form of child abuse. It occurs when a parent or carer exaggerates or deliberately causes symptoms of illness in a child.</p>	<ul style="list-style-type: none"> • symptoms only appear when the parent or carer is present, • the only person claiming to notice symptoms is the parent or carer, • the affected child has an inexplicably poor response to medication or other treatment, • if one particular health problem is resolved, the parent or carer may then begin reporting a new set of symptoms, • the child's alleged symptoms don't seem plausible – for example, a child who has supposedly lost a lot of blood but doesn't become unwell, • the parent or carer has a history of frequently changing GPs or visiting different hospitals for treatment, particularly if their views about the child's treatment are challenged by medical staff, • the child's daily activities are being limited far beyond what you would usually expect as a result of having a certain condition – for example, they never go to school or have to wear leg braces even though they can walk properly, • the parent or carer has good medical knowledge or a medical background, • the parent or carer doesn't seem too worried about the child's health, despite being very attentive, • the parent or carer develops close and friendly relationships with healthcare staff, but may become abusive or argumentative if their own views about what's wrong with the child are challenged, • One parent (commonly the father) has little or no involvement in the care of the child, • The parent or carer encourages medical staff to perform often painful tests and procedures on the child (tests that most

	parents would only agree to if they were persuaded that it was absolutely necessary).
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Finally, a child who is being abused may experience more than one type of abuse, but **it is not your responsibility to investigate any of this**. For further information regarding the types of abuse go to your local area safeguarding board website. This is currently different for each Local Authority (see Appendix 2)

6. What to Do if Concerned About a Child

- Follow Safeguarding Escalation Flowchart
- Speak to Safeguarding Lead immediately
- Do not delay action

7. Children Making Disclosures

Staff must:

- Listen calmly
- Reassure the child
- Avoid leading questions
- Record accurately
- Report immediately

Staff must NOT undertake safeguarding investigations:

- Promise confidentiality
- Investigate
- Contact alleged abuser

8. Reporting Procedure

All concerns must be reported immediately.

Staff must:

1. Record facts (using child's words)
2. Report to Safeguarding Lead/manager
3. Complete report within 24 hours

9. Internal Investigation and Statutory Safeguarding

Respect for All may undertake internal fact-finding or investigations where concerns relate to its own services, staff, or volunteers (e.g. disciplinary or service-level concerns).

However, this does not replace statutory safeguarding processes.

All safeguarding concerns that meet thresholds must be referred to Children's Social Care, who lead:

- Section 17 (Child in Need)
- Section 47 (Child Protection)

Respect for All will:

- Cooperate fully with statutory agencies
- Not take actions that could compromise investigations
- Pause or adapt internal investigations where required to avoid compromising statutory safeguarding processes.

10. Referrals to Children's Social Care

Referrals must be made where there is concern a child:

- Is at risk of significant harm (Section 47)
- Is a child in need (Section 17)

Consent should be sought where appropriate unless doing so increases risk.

11. Information Sharing

Information may be shared without consent where there is risk of harm. Information sharing decision must always be recorded.

Lawful basis includes:

- Vital interests
- Public task

Staff must not delay sharing due to GDPR concerns.

12. Allegations Against Staff or Volunteers

- Report immediately
- Follow disciplinary procedures
- Apply LADO/PIPoT processes
- Do not alert individual if risk

13. Whistleblowing

Concerns about unsafe practice must be raised.

No one will be disadvantaged for raising concerns in good faith.

14. Partnership Working

Respect for All works with:

- Local Authorities

- Police
- NHS
- Safeguarding Partnerships

15. Safeguarding Practice Reviews (SPR)

Respect for All will:

- Cooperate fully
- Provide reports
- Implement learning

16. Serious Incident Reporting

Serious safeguarding incidents will be reported to the Charity Commission where required

17. Roles and Responsibilities

Safeguarding Lead: Liz Biggar

Escalation:

- Safeguarding Lead
- COO
- CEO

Safeguarding Lead contact details:

Liz Biggar (Client Coordinator)
Tel: 07902 223743
Email: lbiggar@respectforall.org.uk

If you are unable to contact the above, contact the Chief Operations Officer, COO (any time):

Rob Wardle
Tel: 07908002244
Email: rcwardle@respectforall.org.uk

In the absence of the COO contact the CEO:

Sam Palmer
Tel: 07584519464
Email: spalmer@respectforall.org.uk

18. Key Principles

- Multi-agency working
- Shared responsibility
- Safe working practice

- Safer recruitment
- Risk management

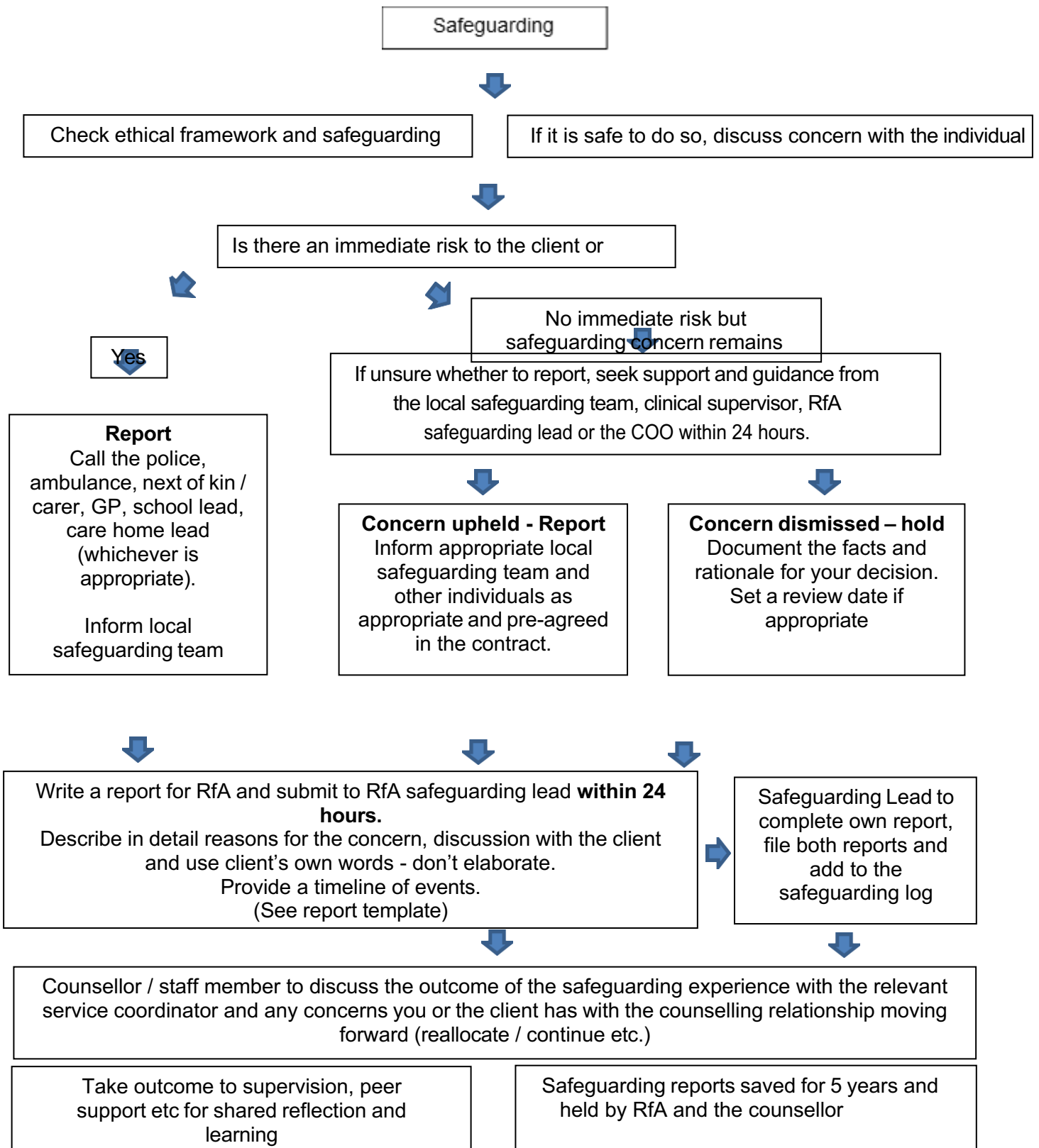
19. Training and Supervision

- Induction includes safeguarding
- Training appropriate to role
- Refresher every 2–3 years
- Safeguarding discussed in supervision

Final Statement

Respect for All is committed to ensuring children are protected, respected, and supported at all times.

Appendix 1: Respect for All - Safeguarding Escalation Flow Chart



Appendix 2: Local Authority Safeguarding Boards

Bolton

<https://www.bolton.gov.uk/safeguarding-protecting-adults/adult-safeguarding-referral/1>

Adults Safeguarding Referral Form

safeguardingadults@bolton.gov.uk

01204337 0000

Social care Integrated Front Door Mon-Fri 8:45-5pm 01204 331 500 – to speak to a social worker dial above and press option 2

Social Services 01204 337 400

[Worried about a child? – Bolton Safeguarding Children](#) Link for Children’s Safeguarding Referral Form

Safeguarding Children

01204 337 448

Emergency Duty Services (Out of Hours)

01204 337777

Bury

Bury Safeguarding Partnership - [Bury Integrated Safeguarding Partnership - Bury Integrated Safeguarding Partnership](#)

Bury Multi-Agency Safeguarding Hub (MASH) Team on 0161-253-5678 or outside of office hours the Emergency Duty Team on 0161-253-6606;

For concerns about a vulnerable adult contact Customer Contact Centre on 0161 253 5151 or on 0161 253 6606 outside of these hours. Service available Monday to Friday, 8.45am to 5.30pm or email adultcareservices@bury.gov.uk

Manchester

Manchester Safeguarding Partnership - [Manchester Safeguarding Boards \(manchestersafeguardingpartnership.co.uk\)](#)

Reporting abuse or neglect of a child or adult. Report concerns anonymously 0161 234 5001

Email: mcsreply@manchester.gov.uk

Oldham

MASH 8:40am – 5pm Mon-Fri 0161 770 7777

Adult.mash@oldham.gov.uk

Child.mash@oldham.gov.uk

Emergency Duty Team out of hours 061 770 6936

Out-of-Hours emergencies for adults and children 0161 770 6936

E-mail: edt@oldham.gov.uk

Rochdale

Rochdale Children's Social Care (via the Early Help and Safeguarding Hub)

Hours: 8am – 4.45pm Tel: 0300 303 0440

Out of hours service hours: 5pm – 8pm & weekends Tel: 0300 303 8875

Adult Care Services

Tel: 0300 303 8886

Email: adult.care@rochdale.gov.uk

Adult Care Services, Number One Riverside, Smith Street, Rochdale OL16 1XU

Out of hours emergencies

4:45pm – 8:30am – Monday – Friday and anytime at weekends and Bank Holidays

Tel: 0300 303 8875

Salford

Raise safeguarding concern 0161 631 4777 Salford Health & Social Care Team 8:30-4:30 Mon-Fri

Salford.socialservices@nca.nhs.uk

<https://www.salford.gov.uk/children-and-families/safeguarding-children/advice-for-professionals/>

Safeguarding queries, call The Bridge Partnership on 0161 603 4500 (from 8.30am to 4.30pm).

Outside these hours call the Emergency Duty Team on 0161 794 8888.

Early help services: 0161 603 4239

<https://www.salford.gov.uk/health-and-social-care/safeguarding-adults/> To make a referral complete the SG1 form on our secure uploads page.

Stockport

The Adult Social Care team is the first point of contact for general enquiries and concerns 0161 217 6029. Out of normal office hours 0161 718 2118

Email maars@stockport.gov.uk setting out the reasons, do not use the name in an email, just use an initial

Child abuse/neglect: 0161 217 6082 Mon-Turs 8:30-5 Fri 8:30-4:30 / 0161 718 2118 evenings and weekends.

Tameside

Raise safeguarding concern 0161 342 2400 <https://www.tameside.gov.uk/>

Safeguarding concerns can be reported to the Children's Complex Safeguarding Hub using the online form. If you wish to send a referral, do so between the stated times: The inbox is not manned outside of these hours.

If you send a referral out of these times, and the issue is urgent or a child is at risk, then you MUST phone the Emergency Children's Duty Service on 0161 342 2222. you will also need to submit the MARS online.

Children's Multi-agency Safeguarding Hub should be contacted if you need support or advice on safeguarding children/young people and/or if you believe that a child/young person is at risk of significant harm

Monday to Wednesday: 8.30am - 5pm Thurs: 8.30am - 4.30pm

Fri: 8.30am - 4pm

Telephone Contact Number - 0161 342 4101

Monday to Friday outside of normal hours weekends and public holidays

Telephone Contact Number - 0161 342 2222

Advice and support for children, young people and families that have identified needs at Level 1/2 ring the Family Information Service on 0161 342 4260

Adult Services' Safeguarding Adults Team 0161 342 5243 - to report concerns or for more information

Adult Services, Integrated Urgent Care Team 0161 922 4888 communitygateway@tgh.nhs.uk

Trafford

www.trafford.gov.uk/firstresponse

0161 912 5125 General Helpline 8.30am to
4.30pm 0161 912 2020 Emergency Duty Team -
Out of Hours Fax: 0161 912 5056
E-mail firstresponse@trafford.gov.uk

Community Screening Team at Trafford Council to discuss concerns about an adult on
0161 912 2820.

Trafford Strategic Safeguarding Partnership 0161 911 8687 tssp@trafford.gov.uk
adultsafeguardinghub@trafford.gov.uk

Wigan

Monday to Sunday (24 hours) 01941 828300 Safeguarding Children

Safeguarding adults 01942 828 777 (out of hours: 0161 834 2436)

Head of safeguarding Linda Salt email linda.salt@wwl.nhs.uk
Safeguarding Children Wigan [Report concerns \(wiganlscb.com\)](http://Reportconcerns(wiganlscb.com))

Appendix 3: Descriptions of Training levels in induction and refresher training

Level 1

For those in contact with children and young people and with adults who are parents and carers. These people are in a position to identify concerns about the maltreatment of children, including those that may arise from the use of the Common Assessment Framework (CAF)/ Early Help Assessment. Therefore, as a minimum they need introductory training on how to work together to safeguard and promote the welfare of children.

Level 2

The target audiences for these courses are those who work regularly with children and young people and with adults who are carers and who need a higher minimum level of expertise: a fuller understanding of how to work together to identify and assess concerns and to plan, undertake and review interventions.

Level 3

The target audiences for these courses are those with a particular responsibility for safeguarding children who need to have a thorough understanding of working together to safeguard and promote the welfare of children, including in complex and/or serious cases.

Level 4

The target audience for these courses are those with responsibility for assessing risk in safeguarding cases, and managing complex work.

Appendix 4: Safeguarding Children Statement

Respect for All believes every child has the right to be safe, protected, and supported to achieve their full potential.

We are committed to:

- Listening to children
- Acting quickly on concerns
- Working with partner agencies
- Supporting staff and volunteers
- Promoting a culture of openness and accountability

We recognise that children may not always disclose abuse directly and staff must act on concerns.

Information will be shared appropriately and lawfully to protect children.

Respect for All will comply with Charity Commission safeguarding requirements, including Serious Incident Reporting.

Safeguarding is embedded across all services.

Appendix 5: Looked After Children Statement

Nationally, Looked After Children (LAC) significantly underachieve and are at greater risk of exclusion compared with their peers. We acknowledge that the service has a major part to play in ensuring that LAC are enabled to be healthy, stay safe, enjoy, achieve, make a positive contribution to society and achieve economic wellbeing, in line with Every Child Matters.

Helping LAC succeed and providing a better future for them is a key priority for the service. This statement takes account of:

- DfES Statutory Guidance to Governing Bodies: “Supporting Looked After Learners” 2006.
- The Education (Admission of Looked After Children) (England) Regulations 2007.
- The Local Authority’s duty under Section 52 of the Children Act 2004 to promote the education of looked after children (LAC).
- “Show Me How I Matter: a guide to the education of looked after children” LGA and IDEA publication 2006.

Respect for All approach to supporting the educational achievement of LAC is based on the following principles:

- Having high expectations
- Promoting inclusion through challenging and changing attitudes
- Promoting attendance Early intervention and priority action Targeting support
- Minimising exclusions
- Achieving continuity and promoting stability
- Listening to children
- Promoting a wider learning experience
- Promoting health and wellbeing Working in partnership with carers, parents (where appropriate), social workers and other professionals

Respect for All is committed to helping every LAC to achieve the highest standards they can, including supporting aspirations and will undertake the following responsibilities:

- Ensure staff within services (as appropriate) receive relevant training and are aware of their responsibilities under this policy and related guidance.
- The Safeguarding Lead will have overall responsibility for ensuring that teams work with and support LACs.
- Have high aspirations for the educational and personal achievement of LAC, as for all young people using Respect for All services.
- Maintain LAC’s confidentiality and ensure they are supported sensitively.
- Work to enable LAC to achieve stability and success within the service.
- Promote the self-esteem of LAC.
- Have an understanding of the key issues that affect LACs.
- Be aware that a significant majority of LAC say they are bullied, so work to prevent bullying in line with the anti-bullying policy.