Issue 1 | January 2026

SAFEGUARDING NEWSLETTER

News updates from Sheringham Community Primary School & Nursery

Remember, safeguarding is everyone's responsibility.

			
Jonathan Amies Deputy Head Teacher Designated Safeguarding Lead	**Cat Wall** Alternative Designated Safeguarding Lead	**Rachael Carter** Head Teacher Alternative Designated Safeguarding Lead	**Debbie Leahy** Chair of Governors Safeguarding Governor



Jen Tupper

Alternative Designated Safeguarding Lead

Reporting a Safeguarding Concern:

It is really important that we continue to report safeguarding concerns in a timely manner.

https://sheringhamcpsn.cpoms.net

If you need support to do this, please ask Jonathan Amies (DSL) or Clare Webdale (Pastoral Support Assistant).

Safeguarding Headlines

Keeping Children Safe in Education 2025

Types of Abuse

Female Genital Mutilation (FGM)

Harmful Sexual Behaviour

AI Chatbots

Glossary of Safeguarding Acronyms

How to call Children's Services

Keeping Children Safe in Education (Sept' 2025):

'Keeping Children Safe in Education' is the key document that sets out safeguarding procedures for schools.

What's new in KCSIE 2025?

The **2025 guidance replaces the 2024 version and comes into force from 1 September 2025**, with only modest updates overall. A full list of changes is in *Annex F*. GOV.UK

KCSIE continues to emphasise that **all staff must understand their safeguarding responsibilities**, and governing bodies should ensure effective mechanisms for this. GOV.UK

Key updates to be aware of:

Online safety: The guidance now explicitly includes **misinformation, disinformation and conspiracy theories** as potential online harms. There's also stronger emphasis on **cyber security, AI use in education and up-to-date filtering and monitoring expectations**. NSPCC Learning+1

Statutory partnerships: *Working Together to Improve School Attendance* is now treated as **statutory for safeguarding**, reinforcing that persistent absence can be a safeguarding concern. NSPCC Learning

Alternative provision: Schools' ongoing **safeguarding responsibilities for pupils placed in alternative provision** are clarified, including expectations around written confirmation of safeguarding arrangements from providers. NSPCC Learning+1

Virtual School Heads and VSH duties: Updated wording reflects their **non-statutory role** in promoting outcomes for children in kinship care. NSPCC Learning

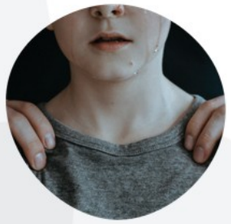
Links to other guidance: KCSIE 2025 includes updated references to evolving statutory guidance such as **RSHE and forthcoming guidance on gender-questioning children**. Geldards

Types Of Abuse

What are the 4 main types of abuse?



Neglect



Physical abuse



Emotional abuse



Sexual abuse

Key points about the 4 main types of abuse

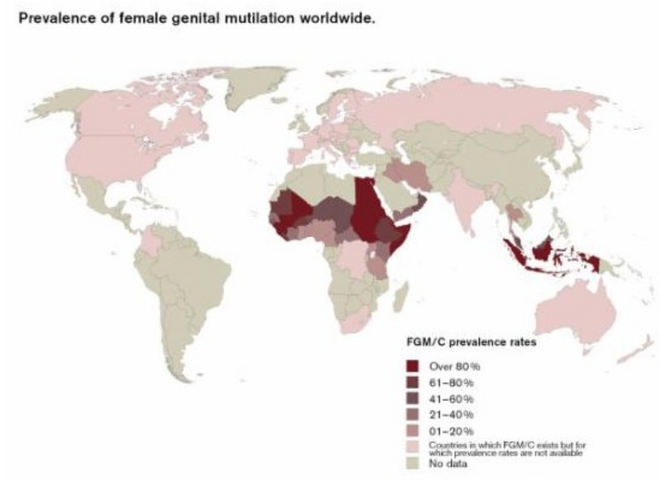
- The 4 main types of abuse are **neglect**, **physical**, **emotional** and **sexual**
- In most cases, multiple **issues will overlap** with each other
- The crucial thing is to be able to spot that something might be wrong – and **act on it**

Indicators that something might be wrong:

- Difficulty concentrating and not doing as well at school
- Becoming withdrawn
- Mood or behaviour changes
- Tiredness
- Mental health needs
- Self-harming
- Risk-taking behaviour
- Using drugs or alcohol

Female Genital Mutilation (FGM)

What is FGM?



FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.

FGM is a criminal offence. There are NO benefits to FGM, but there are many health implications and complications.

The age of FGM varies from a few days old to adulthood depending on the geographical area and community, but it is usually 5 to 14 years.

The prevalence of FGM in England and Wales is difficult to estimate because of the hidden nature of the crime, however, approximately 103,000 women aged 15-49 and approximately 24,000 women aged 50 and over who have migrated to England and Wales are living with the consequences of FGM.

A 2015 study reported that no local authority in England & Wales is likely to be free from FGM entirely.

In 2016, NHS Norfolk reported 15 new cases.

Our duty...

Everybody in school has a duty to safeguard children

With FGM, some staff members have a statutory duty to act.

It is law that teachers must notify the police of 'known' cases of FGM. Suspected cases or the identification of a child at risk must be reported to the DSL.

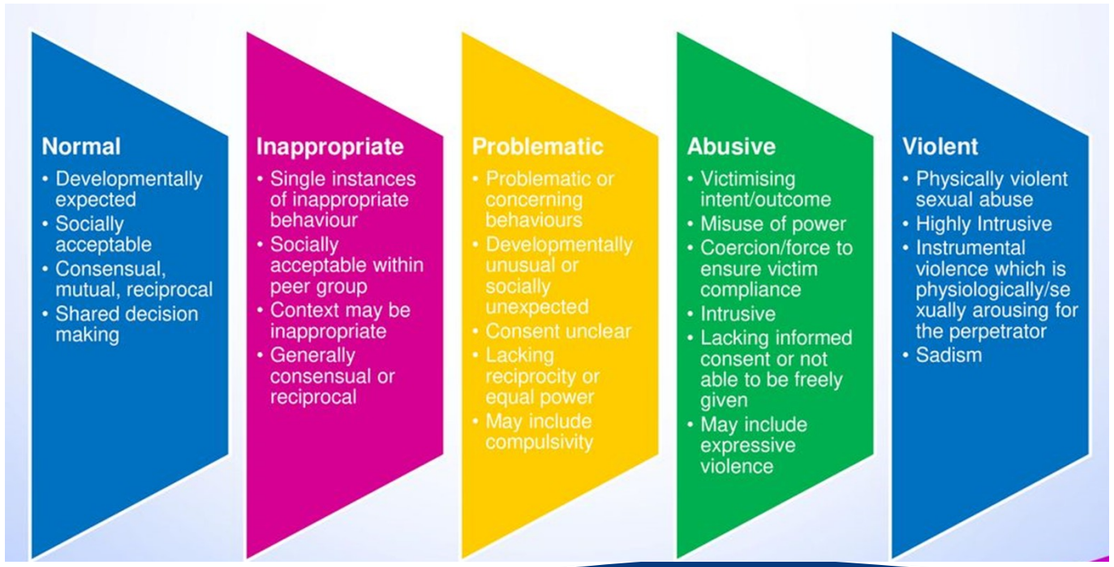
Harmful Sexual Behaviour

Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour which is displayed by children and young people and which may be harmful or abusive (derived from Hackett, 2014).

It may also be referred to as sexually harmful behaviour or sexualised behaviour. It can be displayed towards younger children, peers, older children or adults, and is harmful to the children and young people who display it, as well as the people it is directed towards.

Technology assisted HSB (TA-HSB) is sexualised behaviour which children or young people engage in using the internet or technology such as mobile phones. As with 'offline' HSB, TA-HSB encompasses a range of behaviours including: viewing pornography (including extreme pornography or viewing indecent images of children); consensual and non-consensual sharing of nudes and semi nudes images and or videos13 (also known as sexting or youth produced sexual imagery).

The Hackett Continuum



Children and young people demonstrate a range of sexual behaviours as they grow up, and this is not always harmful. Sexualised behaviour is often seen as a continuum with five stages, as seen on the previous page:

appropriate – the type of sexual behaviour that is considered 'appropriate' for a particular child depends on their age and level of development;

inappropriate – this may be displayed in isolated incidents, but is generally consensual and acceptable within a peer group;

problematic – this may be socially unexpected, developmentally unusual, and impulsive, but have no element of victimisation;

abusive – this often involves manipulation, coercion, or lack of consent;

violent – this is very intrusive and may have an element of sadism (Hackett, 2010).

Healthy sexual development- 5 – 7 years

Concept of social rules around nudity	Know some words considered 'rude' but often without understanding of what they are	Fascination around body parts and 'toilet' words	Gender socialisation more evident
More exploratory behaviours with peers – through games or comparing bodies	Questions and conversations about bodies, babies and relationships	May use terms such as 'boyfriend', mimicking adult world	Greater increase in desire for privacy e.g. not wanting to share a bath with siblings

Healthy Sexual Development 8 – 12 years

'Informed questioning stage' (Carson, 2016)	In older group, puberty likely to start. Feeling strong sexual sensations in their body, though they may not always attribute the feelings to sexual desires	Continuing comparison of bodies, often more competitively
Relationship behaviours remain relatively 'innocent' but top end of age range may begin to feel pressure to explore	Developing sense of themselves as a sexual person and feeling under pressure to be successful	Sexual attraction developing

Healthy Sexual Development 13 – 15 years

Beginning to develop a sense of themselves as sexual people and where they are in the social status	Beginnings of sexual knowledge, developing adult bodies experiencing sexual desires	Considerable pressure to seem knowledgeable and talk confidently about sex
Making emotional or romantic connections begins to be important	Influence of technology can normalise casual sexual behaviour. May result in sense of/actual pressure to act sexually	May have practiced kissing and low key petting behaviours

Healthy Sexual Development 16 – 18 years

'The Adult Phase' (Carson, 2016)	Should have adult sexual knowledge and language including understanding of legal responsibilities around sexual activity	Increasing confidence in own sexual identity
May be engaging in sexual behaviours	Sexual conversations, making comparisons, demonstrating competitiveness	Intimacy and need for emotional closeness more prevalent

AI chatbots: staff factsheet

What are AI chatbots?

Artificial intelligence (AI) chatbots are computer programs that aim to mimic human interaction by responding to questions and simulating conversation. AI chatbots have many uses and are already common in everyday life, e.g. businesses often use them for online customer support.

Chatbot interactions and responses are typically by text but can also involve generating images and voice or video functions.

Around two-thirds of children aged 9 to 17 are using AI chatbots. The most popular AI chatbots include:

- General-purpose chatbots – perform a variety of tasks, such as helping with homework, e.g. ChatGPT and Google Gemini
- Companion-style chatbots – designed to act like friends or even romantic partners, e.g. Replika and character.ai
- Chatbots integrated within social media – e.g. Snapchat's 'My AI'

When AI chatbots are used safely and with robust, effective safeguards in place, they can be helpful tools for children, e.g. for education or entertainment. However, it's important to be aware of the risks associated with AI chatbots.

Why do AI chatbots present safeguarding risks?

A child using an AI chatbot can be a sign of a wider problem, such as loneliness or not having a trusted adult to speak to. It can also impact other safeguarding issues:

- **Emotional dependency** – chatbots are easy to access and available 24/7, which means that children can form intense attachments and become overly reliant on them for support and friendship. They may withdraw from real-life relationships and struggle to seek help from trusted adults. Vulnerable children are especially likely to engage with companion-style chatbots
- **Reinforcing harmful ideas** – chatbots are designed to be friendly and avoid disagreement, which means they can validate dangerous thoughts and behaviours on topics like suicide and eating disorders
- **Promoting stereotypes** – because chatbots source their information from all over the internet, their responses can reproduce existing prejudices, such as gender, racial and ableist stereotypes. This means extremist views can go unchallenged and potentially influence children's views and attitudes
- **Explicit content** – chatbots can engage in sexual conversations with children and some can even generate explicit images, including child abuse material. Children can also be exposed to misogynistic content
- **Privacy and data issues** – pupils can unknowingly share personal and sensitive information, which could be stored or misused. Not all chatbot providers are transparent about what data they collect or how they use it

- **Limiting development** – long-term effects of children using AI chatbots are not yet known, but there is some evidence that it can negatively affect cognitive and critical-thinking abilities, and harm social and emotional development

Signs to look out for

If a pupil is facing a safeguarding issue involving AI chatbots, they might:

- Spend more time online unsupervised. This might be reported by their parents/carers
- Become more withdrawn and distant from real-life relationships, e.g. not engaging with peers and staff as they normally would
- Complain about being tired because they were online all night
- Have stronger emotional responses or outbursts when they are online
- Be secretive about their use of the internet or a device – they may refuse to hand in their phone if you have a 'no phones' policy, or refuse to tell you what they get up to online

What you can do

To minimise the risks of misuse of AI chatbots, make sure you:

- Familiarise yourself with our school's **policy on the use of AI and teaching online safety**. As individuals we may have different opinions on AI, but it's important that pupils receive consistent advice on how to keep themselves safe online and manage risks
- Educate pupils on the risks of AI chatbots, that they should question any advice they receive from an AI chatbot, and how they can access support services such as Childline. If a pupil feels upset or worried, encourage them to speak to a trusted adult
- Report any issues with our filtering and monitoring systems to Rachael Carter – some AI chatbots might avoid detection and can generate inappropriate content that should otherwise be filtered
- Build trusted relationships with pupils so that they feel comfortable talking to you and can disclose any issues they may be facing
- Where you have any concerns about a pupil, report these as soon as possible to our designated safeguarding lead, Jonathan Amies, on CPOMS.

Sources

This factsheet was produced by The Key Safeguarding: **thekeysupport.com/safeguarding**

- Me, myself and AI: understanding and safeguarding children's use of AI chatbots, Internet Matters
- What are AI chatbots and companions?, Internet Matters
- Chatbots and children, The Children's Society
- AI chatbots and child sexual abuse: a wake-up call for urgent safeguards, Internet Watch Foundation

Glossary of Safeguarding Acronyms

DSL – Designated Safeguarding Lead
The person responsible for ensuring that safeguarding and child protection are effectively managed within the school.

ADSL – Alternate Designated Safeguarding Lead
The person who assists the DSL in safeguarding matters and takes on the role in their absence.

LADO – Local Authority Designated Officer
An officer in the local authority who manages allegations against staff, volunteers, or other adults working with children.

SEN – Special Educational Needs
Children who require additional support to access the curriculum due to physical, emotional, or learning difficulties.

CP – Child Protection
The area of safeguarding focused on protecting children from abuse and neglect.

CSP – Child Sexual Exploitation
A form of sexual abuse where a child or young person is manipulated or coerced into engaging in sexual activity.

CSE – Child Sexual Exploitation
Involves the manipulation or coercion of a child into sexual activity for the benefit of the perpetrator.

FGM – Female Genital Mutilation
The illegal and harmful practice of altering or injuring the female genital organs for non-medical reasons.

EH – Early Help
Actions taken early in a child's life to prevent potential harm or abuse.

MASH – Multi-Agency Safeguarding Hub
A collaborative service where various professionals (e.g., police, social workers, health workers) share information to support vulnerable children and families.

MARAC – Multi-Agency Risk Assessment Conference
A meeting where agencies review cases of domestic abuse where there's a high risk of harm to the victim and children.

NHS – National Health Service
Provides healthcare services in the UK, often working in collaboration with schools to support the wellbeing of children.

CIN – Child in Need
A child who is not being adequately cared for, but is not yet at risk of significant harm.

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S17 – **Section 17**
Under the Children Act 1989, this section outlines the responsibility of local authorities to provide services to children in need, ensuring their welfare is safeguarded and promoted.

S47 – **Section 47 Enquiry**
A formal investigation following a referral about a child being at risk of significant harm, under the Children Act 1989.

DA – **Domestic Abuse**
Refers to abusive behaviours within the home, typically involving intimate partners or family members, which can also affect children.

VEMT – **Vulnerable and Early Mental Trauma**
Refers to the early recognition and intervention for children experiencing mental health issues related to trauma.

RSE – **Relationships and Sex Education**
The curriculum area covering education on relationships, sex, and emotional wellbeing, which includes safeguarding issues.

ICT – **Information and Communications Technology**
Often refers to the use of digital technology and the internet, with a focus on e-safety to protect children from online risks.

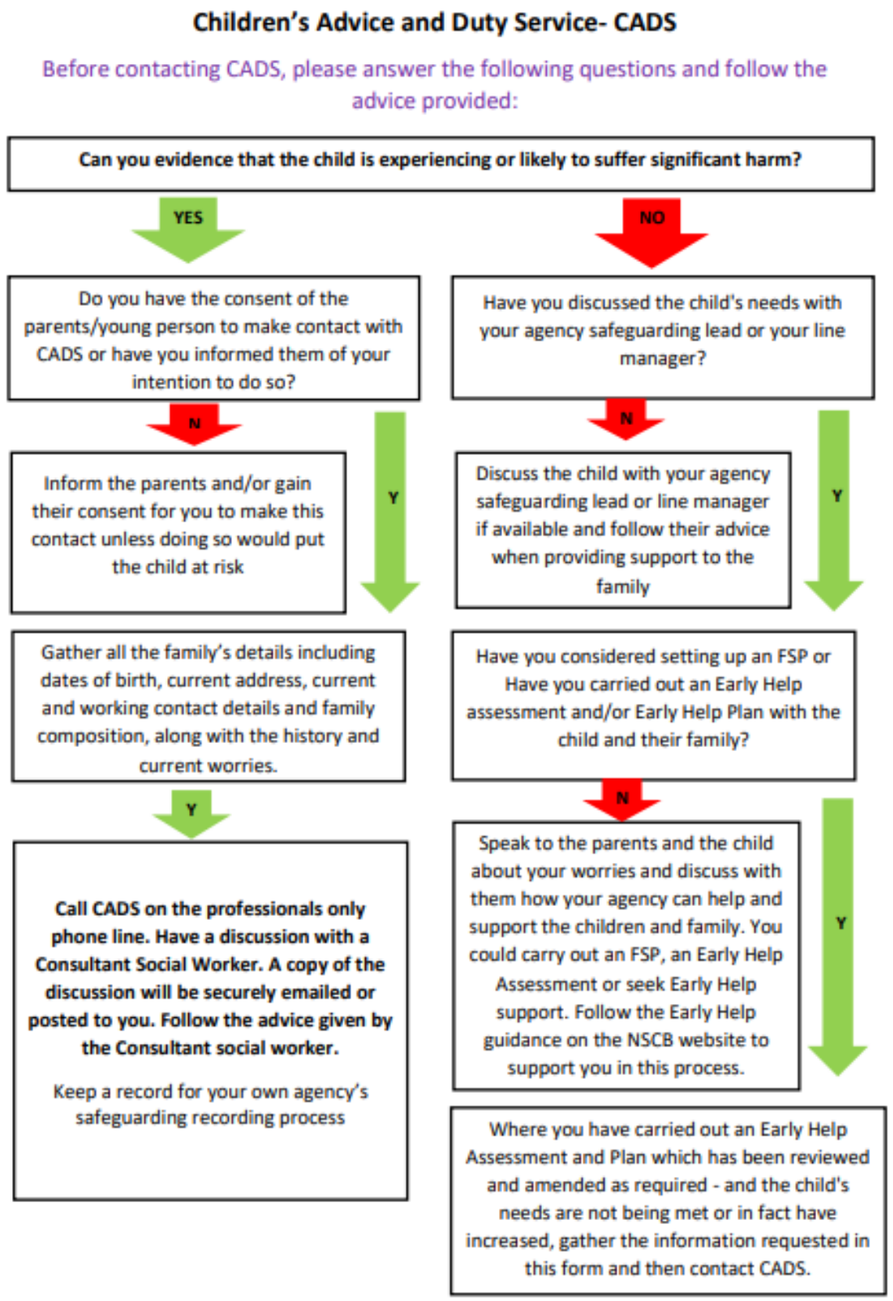
E-Safety – **Electronic Safety**
Refers to safeguarding children in the online environment, protecting them from cyberbullying, online predators, and inappropriate content.

In general, referrals to the Children's Advice and Duty Service (CADS) will be made by the DSL.

However, any professional can call CADS, if, for any reason, they are unable to contact the DSL or Alternates.

The flow chart (below) should be followed.

In an emergency, where a child is deemed to be in immediate risk of harm, call 999.



Useful Links:

'Criminal Exploitation of Children and vulnerable adults: county lines' & **'Advice to schools and colleges on gangs and youth violence':**

https://www.gov.uk/government/publications/criminal-exploitation-of-children-and-vulnerable-adults-county-lines

https://www.gov.uk/government/publications/advice-to-schools-and-colleges-on-gangs-and-youth-violence

Norfolk Safeguarding Children Partnership Child Criminal Exploitation webinar:

https://www.norfolklscb.org/webinar-criminal-exploitation-county-lines-impact/

'Developing an effective response to neglect and emotional harm to children':

https://www.nspcc.org.uk/globalassets/documents/research-reports/developing-effective-response-neglect-emotional-harm-children.pdf

Norfolk Safeguarding Children Partnership Information on Neglect & Neglect Identification Toolkit:

https://www.norfolklscb.org/parents-carers-community/information-on-neglect/

https://norfolklscb.org/people-working-with-children/information-on-neglect/neglect-identification-toolkit-nit-2/

'The Brook Sexual Behaviours Traffic Light Tool':

https://legacy.brook.org.uk/our-work/category/sexual-behaviours-traffic-light-tool

Child Sexual Abuse Information Leaflet:

https://www.norfolk.police.uk/sites/norfolk/files/page/downloads/child_sexual_abuse_booklet.pdf

'Private Fostering Guidance for Schools and other Education Settings':

https://www.norfolklscb.org/wp-content/uploads/2015/04/Private-Fostering-Guidance-for-Schools1.pdf

Forced Marriage Guidance:

https://www.gov.uk/guidance/forced-marriage

'Mandatory Reporting of Female Genital Mutilation—procedural information' & 'Recognising and preventing FGM':

https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information

https://www.virtual-college.co.uk/resources/free-courses/recognising-and-preventing-fgm

'Guidance for safer working practice for those working with children and young people in education settings':

https://www.saferrecruitmentconsortium.org/GSWP%20Sept%202019.pdf

'We have the right to be safe—protecting disabled children from abuse:

https://www.nspcc.org.uk/globalassets/documents/research-reports/right-safe-disabled-children-abuse-report.pdf

Norfolk Safeguarding Children Partnership—Abuse of Disabled Children:

https://www.nspcc.org.uk/globalassets/documents/research-reports/right-safe-disabled-children-abuse-report.pdf

'Mental health and behaviour in schools':

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/755135/Mental_health_and_behaviour_in_schools__.pdf

Young Carers Forum:

https://www.caringtogether.org/support-for-carers/young-carers/nycf

Fabricated and/or induced illness:

https://www.norfolklscb.org/about/policies-procedures/5-10-fabricated-or-induced-illness/

Domestic Violence—HEAR Campaign:

https://www.norfolk.gov.uk/what-we-do-and-how-we-work/campaigns/hear-campaign

NSCP Threshold Guide:

https://www.norfolklscb.org/people-working-with-children/threshold-guide/

TEST YOUR KNOWLEDGE