

Mary Rose Academy Safeguarding Children Policy

Member of Staff Responsible: Jo Petch, Head of School

Reviewed: July 2017

Next Review Date: July 2018

PCC contact:

Portsmouth Social Care/MASH

0845 6710271

Local Authority Designated Officer (LADO):

Denise Lingham 023 9243 7648

The health, safety, welfare and general wellbeing of all our pupils is an issue which is of paramount importance to all* who work in our school.

We recognise that all our pupils have the right to protection, regardless of age, gender, race, culture or disability.

Our pupils have a right to be safe in our school.

As a staff we must accept that we all have a duty to do our utmost to ensure that this right is recognised and is a reality.

This policy follows statutory guidance from the DfE (Keeping Children Safe in Education 2016)

There are five main elements to our Safeguarding Children/Child Protection Policy

To ensure we practice safe recruitment.

To raise awareness of child protection issues within school, including equipping children with the skills needed to keep them safe.

To establish a set of procedures for identifying and reporting cases or suspected cases of abuse.

To support, if necessary, pupils who have been abused in accordance with their child protection plan.

To establish a safe environment in which children can learn and develop.

Aims

Our policy is designed to ensure that all staff in our school are clear about any action which needs to be taken with regard to any child protection issue. It aims to:

raise staff awareness about the issues of abuse and identify their role of responsibility in reporting possible cases

to ensure immediate and effective communication between all staff when dealing with child protection issues.

to lay down the correct procedures for anyone who encounters an issue of child protection.

* The term all refers to staff, governors and volunteers

The Designated Safeguarding Lead (DSL)

DSL: Jo Petch, Head of School

Deputy DSL: Annie Williams

Senior staff trained to be Safeguarding Officers:

Mel Walton, Assistant Headteacher

Hannah Richardson, Assistant Headteacher

Alison Beane, Executive Headteacher

Role of DSL:

- Ensure that policy and procedure exist within the school for dealing with child protection and that these are reviewed regularly
- Provide full staff training and awareness raising and update their DSL training every 2 years
- Ensure appropriate staff are aware of pupils placed on the CP register, and that their progress is closely monitored
- Keep records of suspected abuse reported to Social Care
- Ensure community users organising on-site activities are aware of the guidelines and procedures
- Co-ordinate information from Social Care on all pupils who have been placed on the CP register, including those who are looked after or on a care order
- Ensure all new staff receive an induction session on the school safeguarding policy

Definition of Abuse

What is 'At Risk' of abuse?

A child is considered to be abused or 'At Risk' when the basic needs of the child are not being met, through avoidable acts of either commission or omission. This includes neglect, physical, emotional and sexual abuse. Abuse can involve children of all ages from all cultures, religions and social classes

If any member of staff suspects that a child with whom he or she work may be a victim of abuse, he or she should immediately inform the DSL about their concerns.

Any action the DSL makes when dealing with this will be in line with procedures outlined in PCCs' Child Protection Document.

Categories of Abuse (*Working Together 2.3-2.7*)

The following categories of abuse are drawn from *Working Together to Safeguard Children*:

Names of children on the Child Protection Register are placed there as suffering harm or at risk of suffering harm in one or more of the following categories:

Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating, or otherwise. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the 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 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 ill treatment of a child, though it may occur alone.

Sexual Abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts (oral sex). They may include non-contact activities, such as involving children in looking at pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Neglect

Neglect is 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 and clothing, shelter including exclusion from home or abandonment, failing to protect a child from physical and emotional harm or danger, failure to ensure adequate supervision including the use of inadequate care-takers, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

There may also be specific safeguarding issues such as:

- child sexual exploitation (CSE)
- bullying including cyberbullying
- domestic violence
- substance misuse
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM)
- forced marriage
- gangs and youth violence
- gender based violence / violence against women and girls (VAWG)
- mental health
- private fostering
- preventing radicalisation
- sexting
- teenage relationship abuse
- trafficking

Female Genital Mutilation (FGM)

It is illegal in the United Kingdom to allow girls to undergo female genital mutilation either in this country or abroad. People guilty of allowing FGM to take place are punished by fines and up to fourteen years in prison.

Teachers have a statutory duty to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18. This duty came into force in October 2015. Such concerns must be reported to the DSL. Annual training is delivered to staff so that this issue is fully understood. The DSL has undertaken necessary training.

Child Sexual Exploitation (CSE)

Any concerns must be reported to the DSL and Academy guidance on making referrals must be followed.

Children Missing from Education (CME)

Any concerns must be reported to the DSL and Academy guidance on making referrals must be followed.

Further information and guidance can be found on these issues can be found on the TES and NSPCC websites or via the GOV.uk website.

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Concept of Significant Harm

Where an allegation of abuse has been made, a judgement has to be made as to whether the child is considered to be suffering or is likely to suffer significant harm.

The definition of significant harm is not prescriptive. Its interpretation will depend largely on professional judgement, based on the known facts. It can include inappropriate touching, an assault, or a series of compounding events e.g. bullying. Other factors to be considered include the age and vulnerability of the child, the degree of force used, the frequency of the harm, the nature of the harm in terms of ill treatment and the impact on the child's health and development.

In simple terms, if the harm or risk of harm to the child falls within the category of either physical, sexual or emotional abuse or neglect, a referral should be made to social care. It is important that advice is sought where there is any doubt as to whether the threshold of significant harm has been reached. 'Working Together' states 'Often, it is only when information from a number of sources has been shared and is then put together that it becomes clear that a child is at risk of or is suffering harm'.

Responding to a disclosure

If a member of staff receives information about abuse from a child, the staff member will need to display sensitivity and tact in responding to the disclosure. They will need to retain the trust of the child whilst also explaining the need for action, which will necessarily involve other adults. The child is likely to be under severe emotional stress, and once they have

disclosed, school systems ensure that the child does not have to repeat the information unnecessarily.

If a child discloses child abuse, the staff member will listen carefully and record accurately what has been alleged, in the language used by the child, at the earliest opportunity. During the disclosure they will not offer alternative explanations for the child's concerns, or ask leading questions.

Recording what has been said

Headteachers are asked to record information confidentially about children, where a concern about known or suspected abuse has been discussed with social care. Given the overall aim of protecting the child, any significant information is being shared with relevant staff on a 'need to know' basis. Social care are informed of relevant matters about the child's health, welfare or development, or involvement by any other agencies such as the Education Welfare Service.

Any child protection information is kept separate along with third party reports, including case conference minutes, from pupil records. Parents, whilst under suspicion, are not entitled to see such information and should have their concerns referred back to social care or the police team who are investigating the matter.

Any referral made verbally is accompanied by a completed version of the Shared Agency Referral Form to social care (See Appendix 1). This is sent to social care within 48 hours. Social care will confirm within one working day whether they intend to take the matter further. A copy is forwarded to the Principal Education Welfare Officer.

What happens next?

Once an investigation by trained professionals is considered necessary, the child will need to be interviewed. This can take place within school, or the child may be taken to a specially designed interview suite. This may have to happen without the consent of the parents, and the Headteacher should agree to this, where he or she considers it to be in the best interests of the child. If the child wishes, the Headteacher, or another member of staff they trust, may be present at the interview. Consideration is given to providing support for the staff member nominated by the child since it can be an emotionally demanding experience.

PROCEDURES FOR DEALING WITH DISCLOSURE

PROCEDURE 1

Where the suspected abuse does not involve an allegation about a member of staff.

1. The Head of School who is Designated Safeguarding Lead (DSL) must be informed when a member of staff has reason to suspect that a pupil has suffered abuse, or is at risk of suffering abuse/significant harm, or in her absence one of the two deputy DSL's.
2. Social Care are contacted and provided with a clear account of:
 - The known facts
 - Any suspicions or allegations,
 - Whether or not there has been any contact with the child's family.
3. The Duty Social Worker, having discussed the matter with an appropriate manager, will advise the school of the next step(s).

4. Out of working hours, child protection referrals will be received by the Emergency Duty Team, who can be contacted via the police.
5. An accurate record of all that has happened is made, stating:
 - the facts of any injury, times, explanations and actions taken
 - exactly what and when staff observed should be carefully noted.
 - physical injury should be described in detail and it may be useful to use the skin map (Appendix 2)
 - comments made by the child or explanations given by adults as to how the injury occurred should be recorded. Where possible, it is preferable to quote the words actually spoken and note them as soon as possible.
6. The Headteacher confirms in writing to social care the actions that have been taken, making use of the Shared Agency Referral form (Appendix 1).
7. **When abuse is suspected, the school does not notify parents, even if the pupil is taken to hospital. In accepting the referral, social care become responsible for determining what happens to the child, and informing the parents. Social care will advise the Head of School/DSL as to what they are telling the parents, so that the school can respond to the parents appropriately.**
8. Where sexual abuse is suspected, under no circumstances are any attempts made to arrange a medical examination before social care have been consulted. Should urgent medical attention be required, plus a suspicion of abuse, the Head of School or DSL will take the pupil to the Accident and Emergency Department of the nearest hospital or medical centre, ensuring social care have been notified. They also notify social care and inform the appropriate medical staff of their suspicions.
9. If the Head of School or DSL feel unsure about what a child has said, or whether what has been said may potentially raise child protection issues, advice will be sought informally from social care.
10. Out of working hours, child protection referrals will be received by the Emergency Duty Service, which may also be contacted by the police. In the event that the Headteacher or DSL is not available, then the primary responsibility of the person suspecting abuse is to contact social care. The Head of School is to be informed as soon as possible after the event.
11. Anyone can make a direct referral to Social Care, however it is best practice for the referral to go through the DSL or for the DSL to be informed.

School Procedures

- If any member of staff is concerned about a child he or she **must** inform **Jo Petch**, the DSL or the deputies **Annie Williams** in her absence. Other senior staff who are safeguarding trained include Mel Walton, Hannah Richardson and Alison Beane
- The member of staff must record information regarding the concerns on **the same day**. The recording must be a **clear, precise, factual** account of the observations. The aim should be to record the interview verbatim without changing the child's language at all. This record must be given to the designated teacher, not kept in the classroom.

Jo Petch or the deputy, will make any referral to the Social Services Department or occasionally the police, in line with the Portsmouth Procedures

- If a referral is made to Social Services, Jo Petch will ensure that a written report of the concerns is sent to the Local Duty Social Worker/Care Manager of the Children and Families Team dealing with the case immediately.
- Consider if urgent medical advice or treatment is needed:
If necessary, refer the pupil to his or her own GP or directly to hospital. The person accompanying the pupil will take an explanatory letter and referral will not be delayed if the parent and/or social worker cannot be contacted.
- Particular attention will be paid to the attendance and development of any child who has been identified as at risk or who has been placed on the Child Protection Register

Guidance for Staff

When to be concerned

Staff should be concerned about a pupil if he or she:

- has an injury which is not typical of the bumps and scrapes normally associated with children's injuries
- regularly has unexplained injuries
- frequently has injuries (even when apparently reasonable explanations are given)
- confused or conflicting explanations are given on how injuries were sustained
- exhibits significant changes in behaviour, performance or attitude
- indulges in sexual behaviour which is unusually explicit and/or inappropriate to his or her age
- discloses an experience in which he or she may have been significantly harmed

Child on Child Abuse

In the event that a disclosure involves abuse by another child or young person, the procedure for staff dealing with the disclosure is the same. Children and young people who abuse others are held responsible for their abusive behaviour, whilst being identified and responded to in a way that meets their own needs as well as protecting others. The needs of the young people involved will be considered separately.

Dealing with a disclosure

If a pupil discloses that he or she has been abused in some way, the member of staff should:

- listen to what is being said **without displaying shock or disbelief**
- **accept** what is being said
- allow the child to talk freely
- reassure the child but **not make promises which it might not be possible to keep**
- **not promise confidentiality** – it might be necessary to refer to Social Services
- reassure him or her that what has happened **not his or her fault**
- stress that it was the right thing to tell
- **listen**, rather than ask direct questions
- **ask open questions** rather than leading questions
- not criticise the perpetrator
- explain what has to be done next and who has to be told

- be prepared to sit in on an interview by social services or the police (in the school) for the sake of the child's welfare.

Record Keeping

When a pupil has disclosed the member of staff should:-

- **inform Jo Petch or the Deputy DSL immediately** regardless of whether they are teaching, in a meeting etc..
- make some brief notes as soon as possible after the conversation, using the school form if possible (see appendix)
- not destroy the original notes in case they are needed by a court
- record **the date, time and place**. Record any noticeable non-verbal behaviour as well as the words used by the child
- Complete a body map to indicate the position of any bruising or other injury (see appendix)
- **do not interpret the situation or make assumptions**, only record statements and observed incidents
- **pass the notes to Jo Petch.**

All records relating to Child Protection are held on CPOMS and hard copies kept in a locked filing cabinet in the Executive Headteachers office. These records are under the protection of the Executive Headteacher and access by parents can be denied (Education (School Records) Regulations 1989). The academy has purchased software called CPOMS, a web-based programme that is secure and is now being used for recording all safeguarding activity.

Confidentiality

Different circumstances will determine what happens in each case, but it is a good principle to limit the spread of information to the minimum number of people.

Considerations:

- If a pupil is in care all staff involved with the pupil will know about their circumstances. There is a need for discretion and sensitivity when working with the pupil.
- Pupil's feelings should be taken into account and respected they may prefer others not to know about the traumatic events in their lives, even at the expense of less sensitive handling in school.
- School staff should pass on any worrying information they pick up about a child from other children, to the Head of School or DSL.
- Personal information about a pupil's family should be regarded as confidential.
- Following a disclosure, staff only need to know enough to prepare them to act sensitively with the pupil. All staff will be informed if a pupil they work with is on the child protection register. They do not need to know all the details
- The pupil will be kept informed of who knows and what they know at all stages of the procedures (depending on age).
- Threats to a pupil's safety and welfare can justify setting aside principles of confidentiality

Support for staff

Dealing with a disclosure from a child, and a child protection case in general, is likely to be a stressful experience. The member of staff will receive support and this will be discussed with the DSL.

If staff have concerns about poor or unsafe practice or about the safeguarding procedures within the school they have a duty to report them directly to the DSL or Chair of Governors.

Working with pupils

Mary Rose Academy works with pupils to provide suitable support and guidance so that they have a range of adults whom they feel confident to approach if they are in difficulty.

As part of the Personal, Social and Health Education programme pupils discuss what to do if they feel that treatment they are receiving is inappropriate or unsafe. They also learn what will happen as a result of any disclosures they make.

The curriculum also teaches pupils how to keep themselves safe including staying safe online as appropriate.

Working with parents

Mary Rose Academy endeavours to work with parents to build an understanding of the school's responsibility to ensure the welfare of all pupils and recognition that this may occasionally require cases to be referred to other investigative agencies as a constructive and helpful measure. All parents receive a copy of the child protection policy.

Working with governors

Governors who are directly involved in the development, monitoring and review of the policy. All governors are involved in ratifying the policy if any major changes are suggested. All governors have a copy of the policy.

Working with outside agencies

In general the person responsible for liaising with outside agencies will be the DSL. It may also be appropriate for the class teacher to liaise with various agencies as part of their pastoral role. In this case a note will always be kept of the date, time and content of the discussion to be passed onto the DSL immediately, thus ensuring good communication.

The DSL will prepare reports for meetings and conferences in consultation with staff and where appropriate, the pupil. The DSL and/or the class teacher will generally attend meetings. Conferences will be attended by the DSL or the deputy DSL.

Outside agencies are actively encouraged to keep in close contact with the school and the school welcomes regular meetings and telephone contact. All contacts must be recorded and reported to the DSL.

Safer recruitment

Safer recruitment procedures follow the PCC safer recruitment guidance. All staff are required to complete enhanced DBS checks which are updated every 3 years and details are kept on a single register. Interviews panels always include at least one person who has completed safer recruitment training.

PROCEDURE 2

WHERE A MEMBER OF STAFF IS ALLEGED TO BE INVOLVED IN THE SUSPECTED ABUSE

(For full details see the Safeguarding Children Procedures Handbook kept in the Executive Headteacher's Office)

If a member of staff has concern regarding the conduct of another staff member this should be immediately reported to the DSL or directly to the Chair of Governors.

Stage One: Initial action by school following an allegation being made against a member of staff.

The Executive Headteacher, in receipt of an allegation of child abuse against a staff member, will instigate the following procedures.

1. Ensure that any complaint/allegation about a member of staff with a child protection element should be responded to as a child protection allegation in the first instance (by following Procedure 1).
2. Ensure that discussion with the LA's Allegation Manager is made at the earliest opportunity to ensure that such cases are dealt with impartially and to determine the next step. There will be one or more of three possible outcomes following this initial discussion:
 - An immediate referral to police/social care for a potential child protection and/or criminal investigation
 - The Allegations Manager may need to take advice regarding the employee elements inherent in any allegation
 - The shared judgement of the Headteacher and Allegations Manager is that the allegations(s) are demonstrably false, displaced or potentially malicious. In making this judgement /decision it may be useful to use the school threshold for child protection referral table (see appendix 4).
3. That the decision agreed with the LA Allegations Manager with the reasoning must be clearly recorded by both parties
4. The Executive Headteacher's record will include an accurate record of dates, times, locations(s) and people allegedly involved and any other initial details should be made. The Headteacher will simply establish
 - That an allegation has been made
 - The general nature of the allegation
 - When and where the incident is alleged to have occurred
 - Who was involved
 - Any other persons present

The Executive Headteacher/manager will not investigate the incident by interviewing either those directly involved or any witnesses.

The Allegations Manager will inform other members of the Children, Families and Learning Directorate who make up the LA's allegation team and takes responsibility for co-ordinating the strategy meeting within two working days.

Keeping safe (staff):

1. A position of trust exists between the staff and a young person when that member of staff is in a position of power or influence over a young person by virtue of the work or nature of the activity being undertaken. Allowing the relationship to develop in a way that might lead to sexual activity is wrong.
2. Private meetings with young people should be:
 - a) conducted in a room with visual access or an open door
 - b) other adults should know the interview is taking place
 - c) if possible another adult should be present or nearby
 - d) interviews should not take place off site without express permission of the Executive Headteacher
3. Staff administering first aid should ideally have another adult present or other children
4. Staff helping pupils with intimate care follow the guidance laid out in the Intimate Care Policy.
5. Contact to offer reassurance to a distressed pupil such as a caring parent would give is acceptable. This should be seen as being necessary and justified. If unsure, check with the Headteacher
6. Staff should take care over comments they make. They should not be able to be misconstrued as having sexual connotations. Insensitive, disparaging and sarcastic comments are also unacceptable. Following any incident where a member of staff feels that his or her comments or actions might be misconstrued, he/she should discuss this with the Headteacher

Use of images and photographs

Portsmouth City Council's Media and Communications Unit has produced guidance for schools on the use of images of children, staff and people. This covers the key areas so that photographs and other images can be used in a managed way and thereby help to safeguard children.

Mary Rose Academy undertakes to:

- Ensure that parents of children have provided written consent and that this is obtained of any other individual who may be photographed, including staff.
- Ensure that parents and all parties are made aware of the extent of where the photograph may be used, which could include a website that can be seen world-wide.
- Ensure that any changes in the child's circumstances are carefully recorded.
- Ensure that a child's photograph is not used once they have left school.

CHILD PROTECTION CONFERENCES

Making decisions about registration

At a Child Protection Case Conference the Chair will seek to obtain a consensus view from all those attending as to whether the child(ren) would be placed on the Child Protection Register. This process of consensus should be sufficient to enable all involved to express their opinion. If it is not possible to obtain a decision by consensus of all involved the Chair will seek a majority view and in doing so will need to establish a single representative from each agency. Where a consensus view is not obtainable then the Chair will make the

decision on behalf of the LSCB. This process will apply for Initial and Review Child Protection Case Conferences.

Reports for Child Protection Case Conferences

All professionals who attend a Child Protection Conference should provide a written report detailing their involvement with the child(ren) and their family. Schools can provide useful information on a child's education, behavioural and social development. Key factors in assessing risk are:

- The capacity of parents to safeguard the child and promote the child's health and development under the dimensions of basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries.
- The implications for the child's future safety, health and development, taking into account risk factors and family strengths.
- All those providing information should take care to distinguish between fact, observation, allegation and opinion.
- Comprehensive guidance on writing Child Protection Conference reports can be found on page 79 (Appendix 5) of ACPC 'Protecting our Children'

Monitoring and assessment

The practices and procedures within the school will be evaluated and reviewed annually focusing on the following:

- The effectiveness of the ways in which pupils welfare at Mary Rose Academy is ensured.
- Communication at all levels – pupil/staff, staff/staff, school/social care, school/other outside agencies, school/parents
- The effectiveness of staff training
- Awareness of procedures and whether disclosures are handled and taken forward appropriately.
- Record keeping
- Confidentiality
- Whether procedures for providing support for pupils, staff and parents are effective.

This policy should be read alongside:

DfE Guidance: Keeping Children Safe in Education in force from September 2016. Contains numerous links to other Guidance

[DfE KCSIE 2016.pdf](#)

Adobe Acrobat document [819.7 KB]



'Working Together' March 2015

[DfE Working Together March 2015.pdf](#)

Adobe Acrobat document [1.6 MB]



Safeguarding: Ofsted Briefing for Inspectors

[Ofsted Safeguarding Guidance June 2015 \(\[...\]](#)

Adobe Acrobat document [395.9 KB]



[DfE PREVENT advice June 2015.pdf](#)

Adobe Acrobat document [233.9 KB]



Guidance on Safer Working Practice in Education 2015

[Safer Working Practice 2015.pdf](#)

Adobe Acrobat document [551.4 KB]

School Policies:

Intimate Care Policy

Sex Education and Relationships Policy

The Acceptable Use of the Internet, E-mail and Related Technologies Policy

Whistleblowing Policy

PCC contact:

Portsmouth Social Care/MASH:

0845 6710271

Local Authority Designated Officer (LADO):

Denise Lingham 023 9243 7648

CHILD PROTECTION INCIDENT RECORDING SHEET

Name of member of Staff Recording Incident

Date Time.....

Name of pupil ClassDOB

Who was present

Date and time reported to DSL

Names of any other staff informed

Names of any other pupils involved

Are parents aware? Give details

Time and place of incident.....

Nature of concerns

Account of incident (use back of sheet if needed)

Action taken

.....

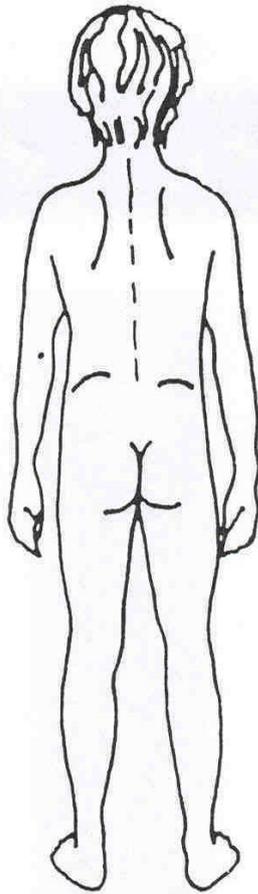
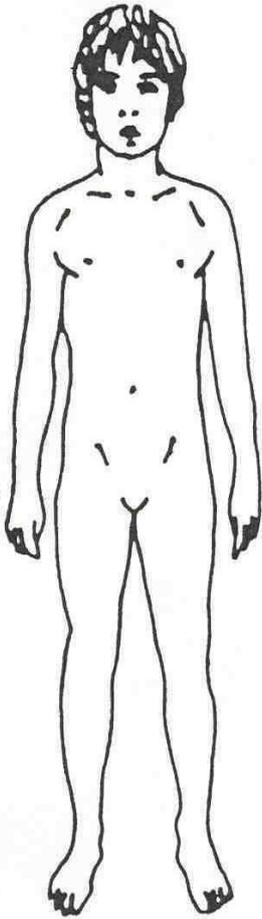
Name of duty worker/soc worker if reported

Name of any other agencies involved

Further action

Signed Date

APPENDIX 2 – Body Map



Skin map of cases of physical abuse

Who witnessed the injuries

.....

When were the injuries seen

.....

Childs name

.....

Date of birth

.....

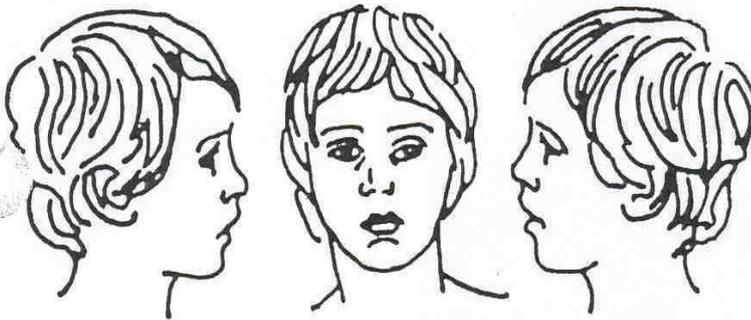
Info recorded on:

Date

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Time

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Legend



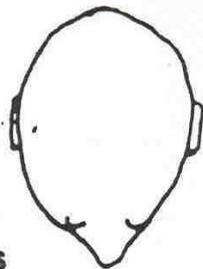
Bruises



Scratches



Cuts



APPENDIX 3

AGE APPROPRIATE BEHAVIOURS

Reproduced from 'Child's Play?' a STOP IT NOW leaflet

	They commonly.....	They rarely.....
Pre-school Children (0-5)	<ul style="list-style-type: none"> • Use childish 'sexual' language to talk about body parts • Ask how babies are made and where they come from • Touch or rub their own genitals • Show and look at private body parts 	<ul style="list-style-type: none"> • Discuss sexual acts or use sexually explicit language • Have physical sexual contact with other children • Show adult-like sexual behaviour or knowledge
School-age (6-12)	<ul style="list-style-type: none"> • Ask questions about menstruation, pregnancy and sexual behaviour • Experiment with other children, often during games, kissing, touching, showing and role-playing eg mums and dads or doctors and nurses • Masturbate in private • (Older children in the age range are also more likely than pre-school children to use sexual words and discuss sexual acts, particularly with their friends) 	<ul style="list-style-type: none"> • Masturbate in public • Show adult-like sexual behaviour or knowledge
Adolescents (13-16)	<ul style="list-style-type: none"> • Ask questions about relationships and sexual behaviour • Use sexual language and talk about sex acts between themselves • Masturbate in private • Experiment sexually with adolescents of similar age • (NB about one-third of adolescents have sexual intercourse before the age of sixteen) 	<ul style="list-style-type: none"> • Masturbate in public • Have sexual contact with much younger children or adults