

Audit Tool – Overall Effectiveness of Safeguarding Procedures - July 2026

This audit tool is intended for **internal use only** and should not be submitted as part of the audit return. All returns should be submitted electronically **on the audit return form** which can be accessed either via the hyperlink on the website. The audit return achieve form is required to be submitted by **30 September**. Once you have submitted the audit return, you will receive a copy of your response to the email address entered on the form.

The additional “Audit guidance” which is accessible from the [audit website](#) highlights the relevant government guidance each question is based on along with some suggested questions that can be used to evidence the requirement.

Please remember that the following questions refer to on-line as well as face to face activity

	Yes	No	In Part	Evidence	Impact	Action Points
1. Culture						
<i>a. Can the setting demonstrate:</i>						
<i>i. an open culture and ethos where safeguarding is an important part of everyday life?</i>	✓			Embedded within school’s vision and values which are understood by all stakeholders. Part of and is a daily priority within the professional conversations of all staff. Approachable DSLs and SLT who immediately action any concerns and then report back to the reporting member of staff. All staff kept up to date with individual cases and on-going developments. This is on-	The safety and welfare of all our children (and their families) is the priority at AIS. If a child is at risk, concerns are referred to Children’s Services in a very timely manner. Assessments and actions from Children’s’ Services are then quickly put into place. Concerns and reported and dealt with swiftly.	Continue to ensure support staff meetings continue to include safeguarding updates, training and updates of vulnerable children. Continue to ensure that lunchtime, office and premises staff have regular update meetings as above.

	Yes	No	In Part	Evidence	Impact	Action Points
				going and part of regular teacher and support staff meetings. Clear and on-going safeguarding communication and training between all staff, DSLs and SLT. Children have a clear understanding of what to do if they have any concerns. Excellent relationships between all staff and children – this enables all staff to pick up potential issues quickly. Excellent communication and relationship between all staff and parents (including DSLs and SLT). Parents find all staff very approachable and are happy to share any issues or concerns. The above was also confirmed and validated by the OFSTED Inspection on 20th June 2024. OFSTED have reported that our safeguarding is effective and that there is a strong safeguarding culture.	All staff have an up-to-date and on-going knowledge of safeguarding updates, vulnerable children and current cases. Staff have a good knowledge and then act upon the different possible forms of abuse or other safeguarding concerns covered in training. OFSTED have confirmed that our children are safeguarded extremely well and that the school work effectively with outside agencies. Children feel happy and safe and know that they can trust and talk to all adults within the school should they be worried or feel unsafe.	
ii. <i>that learning from safeguarding training is embedded across the activities of the setting?</i>	✓			See above	See above	See above
iii. <i>a culture of “it could happen here”?</i>	✓			See above	See above	See above

	Yes	No	In Part	Evidence	Impact	Action Points
iv. <i>Staff can demonstrate appropriate levels of professional curiosity?</i>	✓			See above	See above	See above
v. <i>Settings have identified and addressed any barriers to making disclosures and everyone feels they can talk freely about their concerns, believing that they are listened to and valued?</i>	✓			Termly governor monitoring and on-going DSL monitoring identifies any staff not making disclosures. This is then investigated put into context and appropriate actions or training are put into place. There are now more children with CPOMS entries across the school than not. This shows excellent record keeping and the on-going identification of safeguarding issues.	Every class in the school has an on-going record of referrals and actions over the year	Continue to monitor and identify any training needs or actions to overcome any potential barriers.
2. Policies and Wider Safeguarding						
a. <i>Does the setting have the following policies and have they been reviewed and updated:</i>	✓			Updated annually and tailored to AIS.	All staff have read and understood and signed to say so. Regular updates and training cover the different sections of the CP policy and KCSIE The school's safeguarding culture enables to policy to be 'alive' within the school. OFSTED have confirmed that policies are robust and were seen in action.	Updated policy for 2026-27 in line with new KCSIE to be used in staff training and all staff to read and understand. Polices for 2026-27 to be written and updated in-line with KCSIE 2026-27. Update annual staff and volunteer training in line with the above.

	Yes	No	In Part	Evidence	Impact	Action Points
i. <i>A child protection policy and procedure in place that is reviewed at least annually and available publicly?</i>	✓			See above	See above	See above
ii. <i>Appropriate safeguarding responses to the key safeguarding themes (Annex B of KCSiE – Keeping Children Safe in Education) established in the policy?</i>	✓			See above	See above	See above
iii. <i>A staff behaviour policy (code of conduct)?</i>	✓			See above	As above Staff have a good understanding of their professional expectations – especially with regard to safeguarding and professional conduct.	As above
iv. <i>A low-level-concern process?</i>	✓			As above – policy in place.	As above Regular updates and training cover the aspects of the Low Levels Concerns Policy.	As above
v. <i>A behaviour policy for pupils that is published on your website?</i>	✓			As above New policy includes section on child-on-child abuse and sexual abuse. New policy also includes information on suspensions and how low-level behaviour is dealt with.	As above – with regular training and updates.	As above – Policy to be reviewed in the early Autumn Term with new HT.
vi. <i>A safeguarding response to pupils who go missing from education. An understanding of the difference between children missing and children absent from education.</i>	✓			Attendance issues regularly monitored by HT and Attendance Governor and then followed up with actions and formal warnings. Actions put into place that included	Majority of attendance issues usually improved by putting pastoral actions into place.	New HT may put further actions in place for 2026-27 for those pupils with less than 90% attendance. This may include parent attendance contracts and working more with outside agencies.

	Yes	No	In Part	Evidence	Impact	Action Points
				addressing any barriers to low attendance. Pupils referred to the Inclusion Service if they are missing in education.		
vii. <i>A whistleblowing policy which includes reference to the LADO</i>	✓			As above and whistleblowing information, actions and details of who to contact are published around the building. This includes reference and contact details of the LADO.	As above	Update policy and display details around the building.
viii. <i>Are staff aware of how to access local safeguarding policies and procedures through HSCP?</i>			✓	Just DSLs know about this.		Communicate this with all staff.
b. <i>Can the setting demonstrate that:</i>						
i. <i>the governors and/or proprietors have read, followed and acknowledged requirements of KCSiE?</i>	✓			Included, acknowledged and signed for at the first governors' meeting	Governors are aware of the requirements of KCSiE	Ensure any new governors are aware of KCSiE.
ii. <i>the policies, procedures and training are effective and comply with the law at all times?</i>	✓			Annual and on-going training in line with policies takes place each year.	Training is regularly put into effective practice.	Ensure training remained robust and meaningful.
iii. <i>all staff have read at least part 1 and, staff who work with children, Annex B of KCSiE?</i>	✓			Part of annual training and updates	As above	As above
iv. <i>safeguarding related policies and procedures adopted by the governing body are reviewed at least annually?</i>	✓			This takes place each Autumn.	Governors are aware of policies and procedures.	
v. <i>safeguarding related policies and procedures are understood by staff and implemented appropriately?</i> (Policies: Child Protection, Safeguarding, Behaviour Policy,	✓			Part of training as above		

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Code of Conduct, LLC procedure, Whistleblowing, KCSIE Part 1 and Annex B, Attendance).						
vi. <i>the headteacher or the designated safeguarding lead (DSL) reports annually to the governing body on the effectiveness of safeguarding procedures? There is an on-going action plan for safeguarding improvement?</i>	✓			This happens each monthly FGB meeting which then relates into any further actions.	Governors are aware of on-going actions and procedures.	
vii. <i>the DSL or the DDSL(s) is contactable at all times so that staff can discuss any safeguarding concerns?</i>	✓			There is always a DSL on site and available in holidays	All issues are reported and actioned.	
3. Leadership and Management						
a. Designated Safeguarding Lead (DSL)						
<i>Can the setting demonstrate that:</i>						
i. <i>there is a senior member of the leadership team who has the role of DSL explicitly in their job description. The DSL and DDSL have received appropriate (up-dated) training and are aware of national safeguarding updates, policies are updated accordingly, and staff understanding is checked?</i>	✓			HT is DSL and has a separate job description for this role.	DSL training up to date and due to be renewed in this September 2026.	
b. Governance						
<i>Can the setting demonstrate that:</i>						
i. <i>there is a designated safeguarding governor who has the strategic lead for safeguarding.</i>	✓			Safeguarding Governor leads and monitors SG provision with DSL/HT.	This results in positive and on-going updates and developments.	
ii. <i>the Chair of Governors has the skills required to manage investigations into allegations against the Head Teacher?</i>	✓			Chair is knowledgeable of the procedures needed should it be necessary.	Staff know that they can report any concerns about the HT to the C of G.	Recap in staff training.

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iii. <i>the governing body actively evaluates the effectiveness of the school's safeguarding framework, training provision and monitors progress in meeting the development points from last year's audit?</i>	✓			These are reported on each month in the HT report with actions and developments that have been put into place. These developments are also monitored by the SG governor and seen 'in action'.	Safeguarding continues to be developed positively across the school.	Update HT report as appropriate.
iv. <i>governing bodies and proprietors aware of their obligations around the Data Protection act and the UK Data Protection Regulation?</i>	✓			As above and the safeguarding governor attends safeguarding training. Updates from Clerk allow governors to understand Data Protection obligations – see governor minutes.	As above Governors have on-going updates and knowledge of data protection.	As above Continue with data protection updates and training for governors.
v. <i>the governing body have ensured that the school/setting has appropriate filtering and monitoring systems in place and regularly review their effectiveness?</i>	✓			Part of HT safeguarding report to Governors.		
c. Designated Teacher (DT)						
<i>Can the setting demonstrate that:</i>						
i. <i>there is a designated teacher (DT) to promote and support the educational achievement of children and young people (CYP) who are in local authority care or have previously been looked after?</i>	✓			HT is the designated teacher for LAC and has had relevant and recent training from the HCC Virtual School	Has knowledge of practices and procedures for LAC and has now updated DT training.	HT to update staff re. LAC procedures and guidance on an on-going basis through staff meeting, training and INSET days.
ii. <i>the DT has had the appropriate training?</i>	✓			See above and EY lead is appropriately trained.	As above	New HT will need the training all will need to designate another member of staff.
d. Allegations against staff						
<i>Can the setting demonstrate that:</i>						

	Yes	No	In Part	Evidence	Impact	Action Points
i. <i>There are procedures in place for dealing with allegations against staff and they are in accordance with both HSCP procedures and DfE guidance?</i>	✓			See above section with reference to Whistleblowing Policy. This is also part of staff training.	See above section with reference to Whistleblowing Policy. All staff fully aware of procedures.	See above section with reference to Whistleblowing Policy.
ii. <i>There is a process for reviewing low-level-concerns</i>	✓			See above section with reference to Low Level Concerns Policy. This is also part of staff training.	See above section with reference to Low Level Concerns Policy. All staff fully aware of procedures.	See above section with reference to Low Level Concerns Policy.
iii. <i>the procedure clearly defines the difference between 'concerns, complaints and allegations'?</i>	✓			As above	As above	As above
iv. <i>(Where relevant) there are adequate records of action taken in respect of low-level-concerns, complaints or allegations about an individual member of staff which is then stored in their confidential personnel file?</i>	✓			See above section with reference to Low Level Concerns Policy. Records kept securely in DSL and HR reporting systems.	See above section with reference to Low Level Concerns Policy.	See above section with reference to Low Level Concerns Policy.
v. <i>where a member of staff has been dismissed following an allegation, consideration is given to a referral being made to the TRA and DBS</i>	✓			Although this has not happened, the referrals would be made		
vi. <i>staff should have a working understanding of an allegation, what is a low-level-concern and the role of the LADO</i>	✓			This information in part of the on-going and updated training.	Staff have knowledge of allegations, low level concerns and the LADO	Update and remind staff during annual training
vii. <i>If schools receive an allegation relating to an incident that happened when an individual or organisation was using the school premises for activities relating to children, that the organisation understand the school's safeguarding processes and the</i>	✓			DSL trains and updates organisations using the school premises (e.g., Tennis Club) with regard to the school's safeguarding processes including reports to DSLs and the LADO.	Outside organisations are aware of the school's safeguarding practices and processes	Continue to train and update outside providers.

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<i>school follows these in relation to informing the LADO.</i>						
e. Child on Child Abuse						
<i>Can the setting demonstrate that:</i>						
<i>i. there is a protocol/procedure for dealing with allegations against children within the Child Protection policy?</i>	✓			This is articulated in the CP policy.	Staff have an awareness of child-on-child abuse.	Awareness continues to clearer amongst staff – especially the details of the point at which concerns become child on child abuse.
<i>ii. there is a protocol/procedure for responding to sexual violence and sexual harassment between pupils and there is an agreed 'risk and needs assessment tool' in place to respond to reports of sexual violence and sexual harassment between pupils?</i>				As above and in the document entitled the School's Response to Sexual Violence and Harassment.	Staff have a good awareness.	Awareness continues to clearer amongst staff .
f. Curriculum						
<i>Can the setting demonstrate that:</i>						
<i>i. education regarding safeguarding issues is appropriately incorporated within the curriculum?</i>	✓			Within PSHE and Relationship and Health Policy as well as other curriculum areas such as Computing and Science. Child appropriate safeguarding education is also embedded through everyday actions, practices, assemblies, procedures and the lived-out vision and values. The school's safeguarding education has been deemed effective by OFSTED.	Children have a very good understanding of age-appropriate safeguarding issues at what to do and who to talk to should they feel unsafe – this was also reported by OFSTED after talking to pupils.	Continue to monitor the impact of the curriculum.

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ii. <i>pupils are encouraged to adopt safe and responsible practices and deal sensibly with risk?</i>	✓			As above	As above	As above
iii. <i>awareness is raised among pupils to recognise when they are at risk and how and where to get help and support if they need it?</i>	✓			As above	As above	As above
iv. <i>pupils are educated on keeping themselves safe online?</i>	✓			As above and on-line safety is part of every computing lesson.	Pupils have a good understanding of keeping safe on-line and what to do and who to talk to, should they have any worries or concerns.	
v. <i>appropriate online filters and monitoring systems are in place?</i>	✓			Administered and in place through Harrap (technical team).	More robust monitoring now in place via Harrap.	DSL to continue monitoring and follow up as appropriate.
vi. <i>pupils are supported to understand what constitutes a healthy relationship both on-line and off-line?</i>	✓			As above	As above	As above
vii. <i>awareness around grooming, radicalisation and extremism is provided for pupils?</i>	✓			As above – in age-appropriate ways within PSHE and Personal and Health Education. OFSTED reported that pupils have a strong sense of diversity and inclusion and a very good understanding of celebrating difference.	As above	
g. Training						
<i>Can the setting demonstrate that:</i>						
i. <i>the DSL and deputy DSLs have undertaken the required two-yearly training with annual updates?</i>	✓			Training up to date and certificates in place.	DSL and DDSL have to up to date training of current SG	DSL training in September 2026 for new HT.

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					issues, practices and procedures.	
ii. <i>all staff and other adults who work within the setting have received the appropriate training and understand their responsibilities within this?</i>	✓			All staff have annual and on-going training, updates and annual training.	Staff are regularly updated and trained and so have a good awareness of safeguarding issues, practices and procedures.	Continue to meet and update support, lunchtime and office staff more regularly.
iii. <i>regular (at least annual) child protection updates have been provided to all staff?</i>	✓			All staff are given regular CP updates during team meetings, staff meetings and INSET Days	Staff have a good awareness of CP issues and the latest issues within the school	As above
iv. <i>all new staff, temporary staff and volunteers have been given induction which includes information on safeguarding procedures and their responsibilities?</i>	✓			All new staff and volunteers undertake safeguarding training within three weeks of starting in their role. Training to support children with mental health needs is part of the annual safeguarding training.	All new staff and volunteers are quickly inducted with regard to safeguarding issues, practices and procedures.	
v. <i>the governor with leadership for safeguarding is familiar with relevant HSCP and national guidance?</i>	✓			Familiarisation through governor training and in professional role as a Family Support Worker at another setting. Governor safeguarding training is annual and new governors receive training as part of their induction.	Very knowledgeable safeguarding governor who keeps up with national guidance and updates.	
vi. <i>governing bodies are aware of their roles and responsibilities with respect to safeguarding?</i>	✓			As above	As above	As above
vii. <i>Safeguarding is included as part of any Governor Induction Training?</i>	✓			Part of induction for new governors.		

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viii. <i>all safeguarding training for staff /volunteers/ governors is recorded? That training reflects the current safeguarding trends and risks as set out by the government in national guidance?</i>	✓			Signed records and certificated kept as evidence of training. Training is in-line with KCSIE and latest government and national guidance. This has been validated by OFSTED and was deemed as very good practice as staff signed to say that they had been trained regarding the different aspects of KSCSIE.	All staff and training have up to date knowledge of current safeguarding issues, practices and procedures.	
ix. <i>all staff are aware of the Early Help process?</i>	✓			This is covered within the annual training.	Appropriate and effective EH referrals are made.	Recap during staff training.
h. Safer Recruitment						
i. <i>Are there procedures for safer recruitment and vetting in place and do they have regard to KCSiE?</i>	✓			See above section on safer recruitment. On-line searches are carried out for applicants	See above section on safer recruitment. On-line searches further contribute to effective safer recruitment.	New HT to complete safer recruitment training.
ii. <i>[maintained schools only] Has at least one member of any appointment panel undertaken safer recruitment training?</i>	✓			Two governors are safer recruitment trained.		
iii. <i>Are you compliant with the "Disqualification under the Childcare Act 2006" guidance (DfE 2018)?</i>	✓			Yes all staff complete relevant checks and this is recorded on the SCR. This includes on-line searches for shortlisted candidates.	Checks are up to date and monitored for any issues.	
iv. <i>Is there a Single Central Record in place? Does it include:</i>	✓			Yes and this has been validated by OFSTED as effective. The SCR is also	All safer recruitment checks and information and securely recorded.	

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				monitored each term by the Safeguarding Governor.		
✓ <i>Identity checks carried out, when and by whom?</i>	✓			Yes – by Admin Officer	This contributes to effective safer recruitment	
✓ <i>All staff and volunteers working in regulated activity have a DBS check and have been checked against the Children's Barred List</i>	✓			As above	As above	
✓ <i>A DBS check for all staff appointed on or after 12/05/2006, who come into regular contact with or have unsupervised access to children, and who have had a break in continuous service of more than 3 months immediately prior to appointment?</i>	✓			DBS checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
✓ <i>A Teaching Prohibition Check undertaken for all teaching staff?</i>	✓			Checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
✓ <i>Written confirmation from a supply agency, where relevant, that all the appropriate checks that the school would otherwise perform have been carried out and are satisfactory?</i>	✓			Checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
✓ <i>A record of all dates for completed checks?</i>	✓			Checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
✓ <i>A record of qualifications where this is a requirement of the job e.g. QTS?</i>	✓			Checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
✓ <i>Evidence of the Right to Work in the UK?</i>	✓			Checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
✓ <i>Evidence of lived abroad / overseas Police check and EEA teacher sanctions and restrictions where applicable?</i>	✓			Checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
✓ <i>A Section 128 check for management positions [in non-maintained schools only]?</i>	✓			N/A		

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✓ A Section 128 check carried out for all governors or equivalents?	✓			Checks administered as left and recorded on the SCR.	Robust pre-employment checks in place for all staff, governors and volunteers.	
v. where a member of staff has been dismissed for misconduct, considerations is given to a referral being made to the TRA and DBS	✓			This would happen in a dismissal process.		
4. Behaviour and Safety						
Can the setting demonstrate that:						
i. all staff and volunteers know how to raise concerns about unsafe or poor safeguarding practice or potential failures?	✓			See above with regard to safeguarding training.	See above with regard to safeguarding training	See above with regard to safeguarding training
ii. any concerns have been acted on and appropriate measures put in place?	✓			See first section above.	See first section above.	See first section above.
iii. the DSL is aware of high risk and emerging safeguarding issues highlighted by KCSiE, Ofsted and the HSCP priorities?	✓			See above on DSL training.	See above on DSL training.	See above on DSL training.
iv. the LA has been notified of CYP removed from roll where confirmation has not been received that they have transferred into another setting?	✓			CYP removed from roll administered as left.	Robust attendance monitoring in place.	
v. And the LA has been notified of CYPs who become home educated?						
vi. the application of the procedures and/or policies relating to physical intervention consistent with DfE guidance 'Use of Reasonable Force in Schools' (July 2013)?				Physical Restraint Policy is in place and is in line with DfE guidance. Robust records kept of any physical restraint. These records were deemed as effective by OFSTED.	Physical restraint practices within government guidelines.	New policy to be agreed by governors in-line with updated physical restraint policy (PBS model).

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				SLT and senior teachers have completed physical restraint training.		
vii. <i>there is a strong focus on attendance and punctuality so that all pupils benefit from the education and experiences the school offers?</i>	✓			New attendance policy continually put into action with regular governor monitoring. HT and attendance governor have also attended termly attendance follow-up meetings.	Attendance is now in-line with national average.	Keep monitoring in a robust way.
viii. <i>there are clear routines and expectations for the behaviour of pupils across all aspects of school/setting life, not just in the classroom?</i>	✓			Low level behaviour and consequence plans in place and regularly communicated to pupils.	Pupils are aware of behaviour expectations.	Keep monitoring the impact.
5. Are Pupils Safe on Site?						
<i>Can the setting demonstrate that:</i>						
i. <i>there are adequate security arrangements for the grounds and buildings?</i>	✓			Fencing, locks, alarms, key-pads and gates all deemed adequate by HCC Premises Team.	Children are physically safe within the grounds.	Continue to monitor alongside Premises Manager and Health and Safety Governor. The main front door may need a more robust locking system – particularly when a child is dysregulated and being aggressive near the door.
ii. <i>visitors or volunteers or those using premises are monitored during the 'school day'?</i>	✓			Visitors and volunteers. Visitors show identification and/or DBS. If visitors do not have a DBS they are accompanied by a member of	As above	As above

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				staff and do not work in areas where there are children – e.g. the kitchen, or boiler room. Visitors routinely checked by office or premises staff.		
iii. assurance in writing is sought from users of the premises confirming that they have appropriate policies (Child protection, vetting, health and safety, insurance) in place to safeguard CYP?	✓			Records as detailed left kept in school office from e.g. club providers.	Users of the premises are vetted robustly.	
iv. there is a policy or procedures for ensuring that visitors to the school are suitable and checked and monitored as appropriate, for example external speakers at school assemblies?	✓			As above	As above	
v. There is effective filtering and monitoring in place with all staff being aware of these arrangements.	✓			Filtering and monitoring in place via Harrap ICT. HT receives regular monitoring reports from Harrap ICT.	Harmful content is	Continue to monitor content entering the building
6. Effective Safeguarding Arrangements						
<i>Can the setting demonstrate that:</i>						
i. there are arrangements to identify children who may need early help or at risk of neglect, abuse, grooming or exploitation including witnessing these safeguarding concerns.	✓			Robust identification and reporting arrangements in place.	Early identification of safeguarding needs to established and then appropriately actioned across the school.	
ii. staff are aware of the signs that children may be at risk of harm within the setting, or in the family, or in the wider community?	✓			Covered in annual and on-going staff training. This is also evidenced through the referrals that staff have made.	As above.	

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iii. <i>the setting is working with the Early Help Hub to provide timely intervention?</i>	✓			Cases referred to Early Help Hub through Children's Services and school referrals.	Family get tailored family support as required and as appropriate.	
iv. <i>there are effective systems in place for referring safeguarding concerns to relevant agencies in a timely manner?</i>	✓			CPOMS, multiagency referral systems,(including Early Help), efficient paper based cause for concern referral process in place.	Timely actions and referrals to Children's Services for DSL	
v. <i>the DSL is allocated sufficient time and resource to discharge their responsibilities, including taking part in inter-agency assessments and meetings?</i>	✓			DSL frequently takes part in and provides written and oral information for inter-agency assessments and meetings.	DSL has a good working knowledge of the agency referrals, assessments and meetings.	
vi. <i>the DSL is aware of CYPs in the setting who are, or may be, living in a private fostering arrangement?</i>	✓			The DSL would be aware should we have any cases		
7. Reporting and Recording						
<i>Can the setting demonstrate that:</i>						
i. <i>the child protection (CP) records are of good quality and up to date; and they indicate what action has been taken, and are stored securely and separately from pupil records?</i>	✓			Secure on-line system via CPOMS. Any paper-based information is separately files and locked in a secure filing drawer.	CP records are secure.	
ii.	✓			Robust and regularly updated and monitored in order to chase actions from outside agencies. Our records were reported to be meticulous by OFSTED	Accurate and robust CP records are in place. Actions followed up in a timely manner.	

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iii. <i>where pupils have left, the CP record has been transferred separately from the main pupil file and in a timely manner? That a receipt of transfer has been received and retained?</i>	✓			Files securely transferred and then signed for by receiving school and/or by CPOMS.	Files transferred securely.	
iv. <i>staff are confident about reporting CP concerns and know what action to take if their concerns are not acted on appropriately or in a timely manner?</i>	✓			See statements above. DSL always communicates with staff about any actions or development within a concern that they have reported.	All staff are kept up to date with actions and developments.	
v. <i>all staff are aware of the process for making referrals to children's social care and/or the police according to the HSCP threshold document?</i>	✓			Part of staff training and staff are aware of the displayed referral phone numbers around the building.	Staff have the capacity and knowledge to report concerns to social care.	
vi. <i>the setting encourages a clear culture of open communication between pupils, staff, parents and other adults working with CYP?</i>	✓			See above statements	See above statements	See above statements
vii. <i>the principles from "Information sharing: advice for practitioners providing safeguarding services" are being followed?</i>	✓			Safeguarding concerns and actions constantly and consistency shared between agencies.	All agencies and updated within a timely manner.	
8. Keeping Pupils Safe Outside Normal Provision						
<i>Can the setting demonstrate that:</i>						
i. <i>When using alternative provision, all necessary safeguarding checks are carried out and pupils are regularly monitored?</i>	✓			Visit and checks in place from SENDCO/DDSL	Alternative provision ins throughly checked and is a safe place for children to attend.	
ii. <i>appropriate arrangements are in place to safeguard CYP who take part in, or are affected by, extended services and other activities outside normal 'school' hours?</i>	✓			See statement above about club providers. Breakfast Club run by a trained member of the school staff.		

	Yes	No	In Part	Evidence	Impact	Action Points
				DSL monitors after school club at Anstey Junior School each term. SCR details re. the staff of the after-school care club are kept on file.		
iii. <i>safeguarding arrangements are in place for those on work-based learning, work experience and educational visits?</i>	✓			N/A		
iv. <i>safeguarding arrangements are in place for those children who stay with host families / other settings? i.e. as part of exchange visits or sports tours?</i>	✓			N/A		

Safeguarding Improvement Plan

Development Area	Action Required (please also indicate timescale)	How will you evidence the impact?
New Designated Teacher for children who are in Local Authority or have previously been Local Authority care to be in place. A member of staff is safer recruitment trained. Allow all staff to be aware of and have access to the Hampshire Safeguarding Children's Partnership website	New HT or a designated member of staff to be trained. Source appropriate training for new HT. Train and show staff the website.	Designated teacher is able to provide and ensure appropriate targets and provision for LAC and previously LAC pupils. Safer recruitment training and actions are robust. Staff will be able to have to update knowledge and safeguarding information.

This audit tool is intended for internal use only and should not be submitted as part of the audit return. All returns should be submitted electronically on the audit return. It is imperative all returns are received by the stated deadline of **30 September**.