Newtown School

Child on Child Abuse Policy

2026-2027

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1. Policy Statement

Newtown School is committed to providing a safe, caring and inclusive environment for every child. All staff, governors and volunteers recognise that children can be harmed by their peers, and that this abuse must be taken as seriously as abuse by an adult. This is never seen as "just banter", "just having a laugh", "part of growing up" or "boys being boys", and it is never dismissed or minimised.

This policy sets out how Newtown School — an infant school serving children from preschool through Key Stage 1, including our specialist provision, The Nest — prevents, identifies and responds to child-on-child abuse. Because a proportion of our children have Autism Spectrum Disorder (ASD) or other special educational needs, this policy pays particular attention to how child-on-child abuse may present differently, and how our response must be adapted, for children with communication, social and sensory differences.

This policy should be read alongside our Child Protection Policy, Behaviour for Learning Policy, Anti-Bullying Policy, RSE (Relationships and Sex Education) Policy, Online Safety Policy and SEND Policy.

2. Aims

- To create a school culture where child-on-child abuse is not tolerated, minimised or normalised.
- To ensure all staff understand what child-on-child abuse looks like in young children, including how it may present differently in children with ASD or other SEND.
- To provide clear, consistent procedures for reporting, recording and responding to concerns.
- To safeguard and support both the child who has been harmed and the child who has displayed harmful behaviour.
- To ensure our response is proportionate, developmentally appropriate and never punitive towards behaviour that stems from a child's SEND rather than intent to harm.
- To work in partnership with parents/carers, Buckinghamshire Council and external agencies.

3. Legal and Statutory Framework

This policy has been written with regard to:

- Keeping Children Safe in Education (KCSIE) — statutory guidance for schools and colleges
- Working Together to Safeguard Children
- The Children Act 1989 and 2004
- The Equality Act 2010
- The SEND Code of Practice: 0 to 25 years
- Keeping Children Safe in Education — Part 5, "Child-on-child sexual violence and sexual harassment"
- Buckinghamshire Council multi-agency safeguarding procedures and MASH (Multi-Agency Safeguarding Hub) thresholds
- The Early Years Foundation Stage (EYFS) Statutory Framework, for our preschool and Reception children

Staff should note that statutory guidance is updated periodically; the DSL is responsible for ensuring this policy reflects the current version of KCSIE.

4. What is Child-on-Child Abuse?

Child-on-child abuse is any form of physical, sexual, emotional or online abuse, or coercive control, exercised by one child or young person against another. It can occur between children of any age, gender or developmental stage, and can happen in person or online. In an infant school setting, it most commonly presents as:

- Physical abuse — hitting, biting, hair-pulling, scratching, or other physical hurt, including behaviour that goes beyond developmentally typical toddler/preschool physical exploration.
- Emotional abuse — persistent name-calling, exclusion from play, humiliation, or controlling behaviour towards a peer.
- Bullying (including online bullying where relevant, e.g. via family devices) — repeated, targeted behaviour intended to hurt another child, where there is an imbalance of power.
- Sexualised behaviour that is outside the range of developmentally expected exploration — for example, behaviour that is coercive, involves a significant age/power imbalance, or replicates adult sexual activity (see Section 8).

- Prejudice-based abuse — targeting a child because of a protected characteristic such as race, disability, or family make-up.

At infant age, much of what looks like "conflict" between children is a normal and expected part of development — children are still learning to share, take turns, regulate big feelings and understand the impact of their actions on others. Staff use professional judgement, informed by this policy, to distinguish developmentally typical behaviour from behaviour that constitutes abuse and requires a safeguarding response.

5. Our Context: Pupils with ASD and Other SEND

A proportion of our pupils, including those in The Nest, have a diagnosis of Autism Spectrum Disorder, and many more have other identified or emerging special educational needs. This has direct implications for how child-on-child abuse may present, how it should be understood, and how our response must be shaped. Staff should hold both of the following truths at once:

- Children with ASD and other SEND are statistically more likely to be targeted by peers because of their differences, their communication style, or their difficulty reading social situations — they are often more vulnerable, not less.
- Children with ASD and other SEND may themselves display behaviour that looks superficially like abuse (for example, physical contact, invading another child's space, or repeating something they have seen or heard) but which stems from sensory need, communication difficulty, difficulty understanding social rules or consent, or dysregulation — not from an intent to harm or control.

Neither of these facts excuses a lack of safeguarding response. Both the child who has been harmed and the child whose behaviour has caused harm are entitled to be safeguarded, understood and supported. Diagnosis or SEND status is never used to dismiss a concern, and it is never used to unfairly blame or punish a child whose behaviour reflects their needs rather than intent.

5.1 How presentation may differ

- A child with ASD who has been harmed may not verbally disclose. They may show distress through a change in behaviour, increased meltdowns, sleep or eating changes, toileting regression, avoidance of a particular child, adult or area of school, or an increase in self-stimulatory ("stimming") behaviour.
- A child with ASD may struggle to sequence events, use unclear or literal language, or communicate through behaviour, symbols or signing (e.g. Makaton) rather

than speech. Staff must not dismiss a concern because a child cannot give a clear verbal account.

- A child with ASD who displays behaviour that has hurt another child may be responding to sensory overload, a change in routine, difficulty understanding personal space or consent, or frustration at not being understood — this requires a functional behaviour assessment alongside any safeguarding process, not an assumption of malicious intent.
- Children who mask their difficulties, particularly some autistic girls, may appear to cope socially while masking significant distress; staff should not rule out harm because a child "seems fine".

5.2 Our approach

- All concerns are recorded and reported regardless of the SEND status of the children involved.
- The SENCO is consulted alongside the DSL wherever a child with SEND is involved, either as the child harmed or the child displaying the behaviour, so that the response is informed by up-to-date knowledge of the child's needs, communication profile and individual plan (e.g. EHCP, SEN Support Plan, One Page Profile).
- Where a child's communication needs make disclosure difficult, staff use the child's preferred communication method (e.g. Makaton, visuals,) and allow processing time, rather than relying solely on direct questioning.
- Where a child's behaviour has caused harm, we consider whether this reflects an unmet need (sensory, communication, emotional regulation) and whether the child's provision, environment or support needs to be reviewed or increased — this sits alongside, not instead of, keeping the other child safe.
- Social understanding, including body autonomy, personal space and consent, is explicitly and repeatedly taught to all children in ways matched to their developmental and communication level, using visuals, social stories and modelling.

6. Recognising Child-on-Child Abuse in Young Children

Staff should be alert to the following possible indicators, while remembering that any single sign has many possible explanations and should be considered in context:

- Unexplained marks, bruises or injuries, or a child's account of how an injury occurred that doesn't match the injury
- A child becoming withdrawn, anxious, tearful or reluctant to attend school, or reluctant to go to a specific area (e.g. toilets, playground)
- A change in a child's play, including sexualised play or language beyond what would be expected for their age
- A child consistently avoiding, or being avoided by, a particular peer
- Regression in a previously acquired skill (e.g. toileting, speech, sleep)
- A child repeatedly being the target of unkind behaviour from the same peer or group of peers
- For non-verbal or minimally verbal children: increased distress, self-injurious behaviour, changes in stimming, or behavioural communication of distress

Any member of staff who observes or is told about any of the above must follow the reporting procedure in Section 9, without waiting to gather further evidence themselves.

7. Distinguishing Developmentally Typical Behaviour from a Cause for Concern

The table below is a guide, not a checklist, and is applied using professional judgement and knowledge of the individual child, including any SEND. Any doubt is resolved by consulting the DSL.

Behaviour type	Developmentally typical (expected)	Cause for concern — report to DSL/SENCO
Physical contact	Occasional pushing, grabbing a toy, an impulsive hit or bite in the heat of a dispute over a resource; child is remorseful or responsive to adult support to repair	Repeated, targeted, or planned hurting of the same child; hurting that continues once the adult has intervened; injury that is more serious than the incident described; enjoyment of the other child's distress
Social exclusion	"You can't play" in the moment, changing friendship preferences, typical for the age group	Persistent, organised exclusion of one child by a group; using exclusion as a threat or punishment;

Behaviour type	Developmentally typical (expected)	Cause for concern — report to DSL/SENCO
		targeting a child because of a protected characteristic or SEND
Curiosity about bodies	Mutual, spontaneous "looking"/comparing between similarly aged children (e.g. in the toilets), giggling, low-level and easily redirected by an adult	Persistent or coercive behaviour; involving a significant age or power/understanding gap; use of adult sexual language or actions; one child appearing distressed, coerced or secretive
Language/name-calling	Testing out words, occasional unkindness that is not repeated or targeted	Repeated, targeted, prejudice-based, or designed to humiliate a specific child; targeting SEND, appearance, family or identity

8. Sexualised Behaviour in Young Children (See Appendix A)

Some sexualised behaviour is a normal part of early childhood development (for example, curiosity about bodies, or role-play involving "mummies and daddies"). Staff use the guidance in Appendix A and always consider the child's age, understanding, whether behaviour is mutual, and whether it appears to reflect exposure to sexual content or activity beyond what would be expected. Any behaviour that raises concern is reported to the DSL immediately using the same procedure as for any other safeguarding concern (see Section 9); it is never assumed to be "just curiosity" without that professional check, and it is never treated as intentional "harmful sexual behaviour" in the way it might be for an older child without first considering developmental stage, communication needs and possible SEND-related factors.

9. Reporting and Recording Procedure

9.1 If a child discloses, or you observe/suspect harm

1. Stay calm. Listen without leading or asking closed questions. Do not promise confidentiality.
2. Ensure the immediate safety and wellbeing of all children involved, including any first aid needs.
3. Record what was said or observed as close to word-for-word as possible, using the child's own language, communication method or gestures, on the same day.
4. Report to the Designated Safeguarding Lead (Headteacher) or a Deputy DSL the same day — do not investigate the matter yourself.
5. Where a child with SEND is involved, the DSL will consult the SENCO so the response reflects the child's individual profile, communication needs and any relevant plan.
6. The DSL records the concern on our safeguarding recording system and decides next steps, including whether a referral to Buckinghamshire Council's Children's Social Care / MASH, or the Police, is required.

If a DSL is not available phone First Response on 01296 383962 (out of hours number 0800 999 7677). Call 999 if a child is in immediate danger of severe risk or harm.

9.2 Recording principles

- Every concern is recorded on CPOMs, however minor it may seem, so that patterns over time can be identified.
- Records are factual, and kept securely in line with our Child Protection and Safeguarding Policy.
- Both the child harmed and the child whose behaviour caused harm have a record kept, since both may require support.

10. Responding to the Child Who Has Been Harmed

- Reassure the child that they were right to tell, or that the adult is glad they noticed something was wrong.
- Keep the child safe from further contact with the child who caused harm while the matter is addressed, in a way that avoids the harmed child feeling punished or excluded.
- Consider what support the child needs, e.g. access to a trusted adult, a safe space, or referral to the school's pastoral, or external agencies.

- Keep parents/carers informed, in line with our Child Protection and Safeguarding Policy and information-sharing principles.
- For a child with ASD or other SEND, ensure support is delivered through their preferred communication method and consider any sensory or environmental adjustments needed to help them feel safe.

11. Responding to the Child Whose Behaviour Has Caused Harm

Our response is safeguarding-led and restorative wherever appropriate, in line with our Behaviour for Learning Policy. We seek to understand why the behaviour happened before deciding how to respond.

- The DSL and SENCO (where relevant) consider whether the behaviour reflects unmet need — sensory, communication, emotional regulation, exposure to content or experiences at home, or a lack of understanding of social rules — as well as whether it reflects a genuine intent to harm or control.
- Any response is proportionate, developmentally appropriate, and never shaming or punitive towards a child. Consequences are not used as a substitute for understanding and meeting need.
- Where appropriate, a risk assessment and/or individual support plan is put in place, which may include additional adult support, environmental adjustments, a change to the child's timetable, sensory regulation strategies, or a referral for further assessment.
- Parents/carers of the child whose behaviour has caused harm are informed and involved in agreeing next steps, unless doing so would place another child at risk.
- Where the behaviour meets the threshold of significant harm, this is managed as a child protection matter for the child displaying the behaviour as well, since such behaviour can itself be an indicator that the child has experienced harm.

12. Prevention: Culture, Curriculum and Environment

12.1 Whole-school culture

- A consistent, calm, nurturing ethos where kindness and respect are actively taught and modelled, not assumed.
- Effective supervision at all times, with higher adult-to-child ratios and closer supervision in less structured spaces (toilets, cloakrooms, outdoor areas) informed by our risk assessments.

- Staff who know individual children well, including their SEND, communication style and typical presentation, so that changes are noticed quickly.

12.2 Curriculum

- Age-appropriate RSE and PSHE teaching covering body autonomy, consent ("my body belongs to me"), naming body parts, safe and unsafe touch, and how to tell an adult, delivered using visuals, stories and repetition suitable for EYFS and KS1.
- Explicit, structured teaching of social understanding — turn-taking, sharing, personal space, recognising and expressing feelings — using approaches such as Zones of Regulation, social stories, comic strip conversations and visual supports, particularly for children in The Nest and others with SEND.
- Online safety teaching appropriate to age, including safe use of family devices.
- Anti-bullying and difference/diversity teaching that explicitly includes understanding and celebrating SEND, so that children with ASD are not isolated or targeted because of difference.

12.3 Environment

- Risk assessments for areas of the school where child-on-child abuse is more likely to go unseen, reviewed at least annually.
- Reasonable adjustments for children with sensory needs to reduce dysregulation that can contribute to incidents, e.g. quiet spaces, sensory breaks, visual timetables.
- Clear, visual routines so all children, particularly those with ASD, understand expectations and reduce anxiety-driven behaviour.

13. Working with Parents/Carers and External Agencies

We work openly with parents and carers wherever it is safe to do so, recognising that trust is essential, particularly for families of children with SEND who may already be engaged with multiple services. Where a concern meets the threshold for external referral, the DSL will contact:

- Buckinghamshire Council's MASH (Multi-Agency Safeguarding Hub), for concerns meeting the threshold of significant harm
- Buckinghamshire's Early Help services, for lower-level concerns benefiting from family support
- The Police, where a crime may have been committed

- The child's existing professionals (e.g. paediatrician, SALT, Educational Psychologist, Buckinghamshire SEND team) where relevant to understanding the child's needs and informing the response

Safeguarding information for parents can be found on the school website including how to make a referral https://www.newtown.education/safeguarding

14. Roles and Responsibilities

14.1 The Governing Body

- Approves this policy annually and monitors its implementation.
- Ensures the school fulfils its statutory safeguarding duties, including those relating to pupils with SEND.

14.2 The Headteacher / Designated Safeguarding Lead

- Has overall responsibility for safeguarding, including child-on-child abuse.
- Ensures all staff are trained and understand this policy, including its SEND-specific guidance.
- Makes decisions on referrals to external agencies.

14.3 The SENCO

- Is consulted on all concerns involving a child with SEND, either as the child harmed or the child causing harm.
- Ensures individual plans (EHCPs, SEN Support Plans, One Page Profiles, risk assessments) reflect any safeguarding-related needs.
- Advises staff on communication strategies and adjustments for individual children.

14.4 All Staff and Volunteers

- Report any concern immediately, following Section 9.
- Never dismiss behaviour as "just how they are" because a child has SEND, and never assume malicious intent without considering a child's developmental and communication profile.
- Attend all required safeguarding and SEND-related training.

15. Training

- All staff receive child protection training on induction and updates at least annually, covering child-on-child abuse.
- Training includes specific guidance on how abuse and harmful behaviour may present differently in children with ASD and other SEND, delivered in conjunction with the SENCO.
- The DSL and Deputy DSLs receive training in line with statutory requirements.
- Staff working in The Nest receive additional training on communication methods to ensure disclosures are not missed.

16. Linked Policies

- Child Protection and Safeguarding Policy
- Behaviour for Learning Policy
- Anti-Bullying Policy
- Relationships and Sex Education (RSE) Policy
- Online Safety Policy
- SEND Policy
- Equality Policy
- Restrictive Interventions Policy

Appendix A

Traffic Light Guide: Sexualised Behaviour in Children (Ages 2–7)

This guide sits alongside the Child Protection and Safeguarding Policy and the Child-on-Child Abuse Policy. It is based on the principles of the Brook Sexual Behaviours Traffic Light Tool and Keeping Children Safe in Education.

The traffic light system

Each colour tells staff what the behaviour is likely to mean and what to do next.

Colour	What it means	Staff response
GREEN	Healthy, age-appropriate behaviour. Usually spontaneous, playful, between children of similar age and ability, and stops when redirected.	Respond calmly and without shame. Name body parts correctly, teach privacy and boundaries, and redirect. No safeguarding record is needed unless a pattern develops.
AMBER	Potentially outside the healthy range because of frequency, persistence, the setting or the children involved. Not necessarily a sign of harm.	Redirect calmly. Record on CPOMS the same day and tell the DSL. The DSL decides on monitoring, a conversation with parents and any support plan. DSL may seek advice from first response.
RED	Outside healthy development. May indicate abuse, exploitation or exposure to adult sexual activity or material.	Make all children safe and supervise. Do not question beyond open, clarifying words. Tell the DSL in person immediately, then record on CPOMS. The DSL makes referrals to children's social care or the police.

Ages 2–5 (preschool and Reception)

GREEN – healthy	AMBER – monitor and record	RED – act immediately
• Touching or rubbing own genitals for comfort, e.g. at rest or nap time • Curiosity about other children's bodies, e.g. looking while toileting or changing • Asking questions about bodies, differences, babies and where they come from • Enjoying being naked; taking clothes off without awareness of privacy • Playing families, mums and dads or doctors with children of a similar age • Using child words for body parts; giggling at toilet talk • Hugging and kissing familiar adults and children	• Touching own genitals often, in front of others, and continuing after being redirected • Repeatedly showing private parts to others after being reminded not to • Persistently following others into the toilet to look at their bodies • Pulling other children's clothes down or lifting them against their wishes • Using adult sexual words or showing sexual knowledge beyond their age • Repeated sexual themes in play or drawings	• Touching own genitals so persistently it causes distress, soreness or injury, or stops the child playing • Acting out adult sexual activity in play • Touching another child's private parts using force, threats, bribes or secrecy • Any sexual behaviour with a child who is much younger or less able • Putting objects into their own or another child's private parts • Sexual behaviour involving an adult, or describing adult sexual activity they have seen or experienced

Ages 5–7 (Key Stage 1)

GREEN – healthy	AMBER – monitor and record	RED – act immediately
• Starting to want privacy when changing or using the toilet • Questions about bodies, babies, growing up and relationships • Hugging, kissing on the cheek or holding hands with friends • Occasional touching of own genitals, usually in private • Playing "boyfriend and girlfriend" or weddings with peers • Telling rude jokes or using rude words for body parts with friends	• Touching own genitals in public after being reminded about privacy • Repeatedly trying to see other children naked, including in toilets or changing areas • Persistently showing private parts to others • Sexual language or knowledge clearly beyond their age • Looking at nudity or sexual content on phones, tablets or computers • Teasing or bullying with a sexual element, e.g. pulling down another child's trousers	• Acting out adult sexual activity with others or alone • Forcing, tricking, threatening or bribing another child into sexual behaviour • Any sexual behaviour with a child who is much younger or less able • Sharing or making sexual images, or being asked to • Sexual behaviour that causes distress, pain or injury to themselves or others • Sexual contact with an adult, or disclosing something that suggests it

The lists are examples, not a full checklist. A green behaviour becomes amber if it is persistent, secretive or upsetting to others; an amber behaviour becomes red if it involves force, coercion or a power imbalance.

Recording and reporting

Colour	Who to tell	Record	Parents
GREEN	Class teacher if a pattern develops	Not needed unless repeated	Share if helpful, e.g. to agree consistent language about privacy
AMBER	DSL, same day	CPOMS, same day	DSL decides who speaks to parents and when
RED	DSL, in person, immediately	CPOMS, straight after telling the DSL	DSL decides; do not contact parents if this could put a child at risk

Appendix B

What to do if you have a concern

For all staff and volunteers. Based on Section 9 and Appendix A of the policy. If you are unsure at any point, speak to the DSL.

A child tells you something, you see something, or you are worried

This includes changes in behaviour, play or regression, and distress shown through behaviour, signing or symbols by children who don't use speech.

▼

Is a child in immediate danger of serious harm?

If no, carry on down the chart.

IF YES

Call 999 now

Then tell the DSL in person straight away.

▼ **NO**

1. Stay calm and listen

- Let the child talk. Don't lead them or ask closed questions.
- Never promise to keep it a secret.
- Use the child's own communication method (Makaton, visuals) and give them processing time.

▼

2. Make all the children safe

- Give first aid if needed and supervise closely.
- Keep the children apart in a way that doesn't make the harmed child feel punished.
- Reassure the child they were right to tell you.

▼

Is this typical for the child's age, or a cause for concern?

Use your knowledge of the child, including any SEND. A green behaviour becomes amber if it is persistent, secretive or upsetting to others. Amber becomes red if it involves force, coercion or a power

GREEN · TYPICAL

One-off, mutual or impulsive. Children are of similar age and ability. Stops when an adult redirects, and the child responds to support to put things right.

YOU

Respond calmly and without shame. Redirect, name body parts correctly and teach privacy, sharing and turn-taking.

Tell the class teacher if a pattern develops. No CPOMS record unless it is repeated. Not sure? Treat it as amber.

AMBER · MONITOR AND RECORD

Repeated, persistent, or carries on after redirection. Repeatedly targets the same child. Sexual words or knowledge beyond the child's age.

YOU

Redirect calmly. Record on CPOMS the same day and tell the DSL the same day.

Go to step 3.

RED · ACT NOW

Force, threats, bribes or secrecy. An age, power or ability gap. Injury or distress. Acting out adult sexual activity. Targeting a child for SEND or a protected characteristic.

YOU

Supervise all children. Tell the DSL in person immediately, then record on CPOMS.

Go to step 3.

▼ **AMBER AND RED**

3. Report to the DSL and record on CPOMS

- Report to the DSL (Headteacher) or a Deputy DSL (Assistant Headteachers).
- Record on CPOMS the same day, as close to word for word as you can, in the child's own words, signs or gestures.
- Stick to facts: what you saw or heard, when, where and who was there.
- Keep a record for both children: the child harmed and the child whose behaviour caused harm.

▼

Is the DSL or a Deputy DSL available?

If yes, hand over to them.

IF NO

Phone First Response

01296 383962

Out of hours: **0800 999 7677**

▼ **YES**

4. Hand over and don't investigate

Don't question the children further or try to gather evidence yourself. The DSL takes it from here.

▼

WHAT THE DSL DOES NEXT

- Consults the SENCO if either child has SEND.
- Decides next steps: monitoring, a support plan, Early Help, a MASH referral or the Police.
- Decides who speaks to parents and when. Parents are not contacted if that could put a child at risk.
- Puts support in place for both children, including a risk assessment where needed.

Never

- Dismiss it as "banter", "just playing" or "part of growing up".
- Promise to keep a secret.
- Investigate or wait to gather more evidence.
- Dismiss a concern because the child has SEND, or assume intent without thinking about their needs.

Remember for children with ASD or SEND

- They may not tell you in words. Watch for meltdowns, regression, changes in stimming or avoiding a person or place.
- A child who "seems fine" may be masking.
- Hurtful behaviour may come from sensory overload or unmet need. Report it anyway.

Newtown School Child-on-Child Abuse Policy, Sections 5, 7, 9–11 and Appendix A. Approved September 2026, review September 2027.