

Safe Guarding and Child Protection Policy

Introduction

We recognise our moral and statutory responsibility to safe guard and promote the welfare of all children. We endeavour to provide a safe and welcoming environment where children are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice.

Safe guarding is not just about protecting children from deliberate harm. For our nurseries it includes things such as pupil safety and protecting our children from bullying, harassment, missing nursery sessions and online abuse. The witnessing of abuse can also have a damaging effect on those who are a party to it, as well as the child subjected to the actual abuse, in itself will have a significant impact on the health and emotional wellbeing of the child.

Abuse can take place in any family, institution or community centre, by person, on the telephone, on the internet and in many other forms. Abuse can often be difficult to recognise as children may behave differently or seem unhappy for many reasons, as they move through the stages of childhood or their family circumstance change. However, it is important to know the indicators of abuse and to be alert to the need to consult further.

Safe guarding and promoting the welfare of children refers to the process of protecting children from abuse or neglect, preventing the impairment of their health or development, ensuring that children grow up in circumstances consistent with the provision of safe, effective and nurturing care and undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.

Legislation

Child Protection refers to the processes undertaken to meet statutory obligations laid out in the <u>Children Act 1989</u> and associated guidance (see Working Together to Safeguarding Children, An Interagency Guide to Safeguard and Promote the Welfare of Children) in respect of those children who have been identified as suffering, or being at risk from suffering.

The Children Act 1989 states that the child's welfare is paramount and that every child has a right to protection from abuse, neglect and exploitation.

The primary legislations we refer to, to protect the children in our care include:

The Children's Act 1989 (section 47)

The Protection of Children Act 1999

Data Protection Act 1998

The Children's Act 2004 Every Child Matters

The guidance we refer to includes:

What to do if you are worried a child is being abused (2004)

The Framework for assessment of children in need and their families (2000)

Working together to Safeguard Children (revised 1999)

The Common Assessment framework (2005)

Suffolk Safeguarding Children Board – website www.suffolkscb.org.uk

Suffolk Safeguarding Children Board – Flow chart for referral

Suffolk Safeguarding Children Board – Are you concerned about a child?

The secondary legislation we refer to, to protect children in our care includes:

Sexual Offences Act (2003)

Criminal Justice and Court Services Act (200)

Human Rights Act (1999)

Race Relations Act (1999)

Race Relations (amendment) Act (20000

Race Relations (amendment) Act (1976 regulations)

Rehabilitation of Offenders Act (1974)

Section 26 of the counter terrorism act and security act 2015

Roles and Responsibilities

Everyone involved in the nursery is **obliged** to make sure that children and young people using the provision are safe. If we are concerned about a child we have a professional responsibility to take action.

The designated person for child protection is:

The deputy designated person for child protection is:

We ensure that every staff member (including temporary / supply staff / volunteers / assistance) and Bows and Arrows Committee Members know the name of the designated person responsible for safe guarding children at each of the settings.

All early years settings must nominate a senior member of staff to co-ordinate child protection arrangements.

The person in charge will ensure that the designated person:

- Ensures that a designated member of staff for safeguarding is either on site during opening hours or contactable via telephone at all times.
- · Acts as a source of support and expertise to the setting
- Has an understanding of Suffolk Safeguarding Children Board procedures
- keeps written records of all concerns when noted and reported by staff or when disclosed by a child, ensuring that such records are stored securely and reported onward in accordance with this policy guidance, but kept separately from the child's general file.
- refers cases of suspected neglect and/or abuse to children's social care or police in accordance with this guidance and local procedure
- develops effective links with relevant statutory and voluntary agencies
- ensures that all staff sign to indicate that they have read and understood this policy
- ensures that the child protection policy is updated annually
- keeps a record of staff attendance at child protection training and makes this policy available to parents.

Good practice guidelines

To meet and maintain our responsibilities towards children, the nursery agrees to the following standards of good practice:

- to treat all children with respect
- to set a good example by conducting ourselves appropriately
- to ensure staff are positive role models to children and other members of the team and never engage in very rough, physical or sexually provocative games
- to involve children in decision-making which affects them (taking age and development of children into account)
- to encourage positive and safe behaviour among children
- to be a good listener
- to be alert to changes in a child's behaviour
- · to recognise that challenging behaviour may be an indicator of abuse

- to read and understand all of the setting's safeguarding and guidance documents on wider safeguarding issues, for example, physical contact and information-sharing
- to ask the child's permission before doing anything for them which is of a physical nature, such as assisting with dressing or administering first aid
- to maintain appropriate standards of conversation and interaction with and between children and avoid the use of sexualised or derogatory language
- to be aware that the personal and family circumstances and lifestyles of some children lead to an increased risk of neglect and or abuse
- to raise awareness of child protection issues and equip children with the skills they need to keep themselves safe
- to provide any form of manual or physical support required, as a last resort and to do so openly and appropriately, and to always consult the children and gain their agreement (taking age and development of children into account)
- to establish a safe environment in which children can learn and develop, particularly in their confidence and self-esteem and to provide opportunities for achievement in accordance with the Statutory Every Child Matters Framework: Being Healthy, Staying Safe, Enjoy and Achieve, Positive Contributions & Economic Wellbeing

Staff Training

It is important that all staff have training to enable them to recognise the possible signs of abuse and neglect and to know what to do if they have a concern. Child protection training is mandatory for all staff and will be part of their induction process. The Designated Safeguarding Person (where applicable) will ensure that the staff's knowledge, understanding and practice of safeguarding children are current and up-to-date at all times through regular discussions during staff meetings, supervisions and an annual training session. Where gaps are identified support and training will be mandatory.

- The designated lead and deputy safeguarding officer should renew their safeguarding children training every two years and further training should be completed when necessary. (See suffolkcpd.co.uk for updates of new courses and when updates are available)
- All members of staff should complete their safeguarding children training and refresh every three years.

Safer Recruitment

We practise robust recruitment procedures in checking the suitability of staff, volunteers to work with children, this will include DBS checks, health checks and references.

Safer recruitment means that applicants will;

- complete an application form, including their work history
- provide two referees including at least one who can comment on the applicant's suitability to work with children
- Provide evidence of identity and qualifications
- Be checked through the DBS as appropriate to their role
- Be interviewed

All new members of staff will undergo an induction that that includes familiarisation with the settings safeguarding policy and identification of their own safeguarding and training needs. All staff sign to confirm that they have read and understand the safeguarding policy.

Intimate/Personal care

Children's dignity will be preserved and a level of privacy ensured. The normal process of nappy changing should not raise child protection concerns. There are no regulations that indicate that a second member of staff must be available to supervise the nappy changing process to ensure that abuse does not occur, but we ensure that staff do not leave themselves vulnerable and will always work in an open environment by avoiding private or unobserved situations or closing doors to toilet areas.

Behavioural expectations to ensure children are safe and to ensure false accusations are avoided.

Whilst caring for other people's children, we are in a position of trust and our responsibilities to them and the organisation must be uppermost in practitioners' minds at all times.

We do not:

- use any kind of physical punishment or chastisement such as smacking, hitting or rough handling □
- behave in a way that frightens or demeans any child
- use any racist, sexist, discriminatory or offensive language
- let allegations a child makes go unchallenged, unrecorded or not acted upon

Use of mobile phones

Mobile phones have a place in settings, especially those without a landline, and on outings. They are often the only means of contact available in settings and can be helpful in ensuring children are kept safe. To protect children I/we will:

- only use mobile phones appropriately, and ensure staff have a clear understanding of what constitutes misuse
- ensure the use of a mobile phone does not detract from the quality of supervision and care of children
- ensure all mobile phone use is open to scrutiny
- provide secure storage facilities for the work mobile
- store mobile phones in the office whilst staff are on duty
- ensure any staff known or seen to be using a mobile phone will be cautioned/disciplined
- prohibit staff from using their mobile phones to take pictures of the children attending the setting
- ask visitors either to turn their mobile phones off or to store them in the office before viewing the nursery
- ensure the use of mobile phones on outings is included as part of the risk assessment; for example, how to keep personal numbers that may be stored on the phone safe

See the mobile phone policy for further information

Allegations made against an employee, volunteer or other adult

It is essential that any allegation of abuse made against a person who works with children and young people including those who work in a voluntary capacity is dealt with fairly, quickly, and consistently, in a way that provides effective protection for the child, and at the same time supports the person who is the subject of the allegation. The framework for managing allegations is set out in statutory guidance contained in Working Together to Safeguard Children [WT]: A guide to inter-agency working to safeguard and promote the welfare of children 2010, and Safeguarding Children and Safer Recruitment in Education 2007.

We follow the advice given by the Suffolk Safeguarding Children's Board and further details on managing allegations can be found on the Suffolk Safeguarding Children Board website at www.suffolkscb.org.uk

If an allegation of abuse is made against a member of staff or volunteer, the nursery manager or the person in charge must be informed immediately. The Group Manager and Chair of Trustees will also be informed within 24 hours.

The flowchart below can be used to manage any allegations or relevant concerns:

An allegation is made or a concern is raised about an adult. Is it alleged that the adult has:

- Behaved in a way that has, or may have harmed a child?
- Possibly committed a criminal offence against, or in relation to a child?
- Behaved in a way that indicates they are unsuitable to be working with young children?

↓

If yes or not sure contact

LADO straight away

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If no, follow Bows and Arrows

disciplinary procedures

DON'T

- Interview or take statements from the adult child or anyone else involved.
- Inform the adult until advised to do so by the LADO
- Delay informing the LADO this must be done straight away, ie on the same day.

DO

- Check with the person making the allegation very basic facts ie when? who? where?
- Make a record of the facts
- Then take further advice from the LADO
- Take all allegations/concerns seriously

LADO involvement:

The Local Authority Designated Officer (LADO) is a local authority representative who is independent of any investigation into an allegation and who:

- Provides advice and guidance to employers and voluntary organisations.
- Liaises with the Police and Social Care in case of criminal or child care investigations.
- Monitors the progress of all investigations to ensure they are dealt with as quickly and consistently as possible.

Usually a strategy meeting will be called by the LADO to coordinate any investigation. This is a meeting bringing together representatives of Bows and Arrows, police, social care and other agencies where appropriate, to share relevant information, agree actions and timescales and consider support available for staff member and child, where appropriate. A summary of the

allegation and its outcome will be provided through the minutes of the strategy meeting(s) for use in the investigation.

Procedures need to be applied with common sense and judgement. Some allegations are so serious as to require immediate referral to social care and the police for investigation. Others are much less serious, and at first sight may not seem to warrant consideration of a police investigation or enquiries by Children and Young People's Service. However, it is important to ensure that even apparently less serious allegations are seen to be followed up and that they are examined objectively by someone independent of the organisation concerned. Consequently, the

Local Authority Designated Officer (LADO) should be informed of all allegations that come to the senior manager's attention and appear to meet the criteria so that s/he can consult police and social care colleagues as appropriate.

The LADO will provide advice and guidance as required, but it is also necessary to inform Ofsted about any allegations of abuse or concerns about a member of staff or volunteer.

Suspension:

Suspension will be considered in any matter where there is cause to suspect that a child is at risk of significant harm, or the allegation warrants a police investigation. Suspension will also be considered if the allegation is of such a serious nature that the behaviour might be grounds for dismissal. The volunteer or employee involved will be suspended on full pay until the matter is resolved. All concerns and allegations will be treated with sensitivity and confidentiality and wherever possible emotional support will be made available to the employee during the investigation.

LADO contact details:

Contact details for Safeguarding Managers who will undertake the role of Local Authority Designated Officer for allegations against all staff and volunteers:

Southern - County Safeguarding Manager Landmark House, 4

Egerton Road,

Contact details for the lead Safeguarding Manager who monitors and reports on all allegations:

Address; Landmark House, 4 Egerton Road, Ipswich IP1 5PF Telephone Number: 01473

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Whistle blowing

Any individual who has reasonable suspicion of malpractice should inform the manager immediately. If they do not feel this is the appropriate person they should approach the Group Manager, Chairman of the board Ofsted, or the Local Authority. It is recognised for some people that this can be a daunting and difficult experience.

All reports will be investigated and dealt with in confidence, including only those staff on a 'need to know' basis.

Whistle blowing at Ofsted Hotline: To contact the hotline call 0300 123 3155 (Monday to Friday from 08.00 to 18.00), email whistleblowing@ofsted.gov.uk or write to WBHL, Ofsted, Royal Exchange Buildings, Piccadilly Gate, Manchester M1 2WD.

A charity called 'Public Concern at Work' give free and confidential advice and can help you to decide whether and/or how to raise your concerns at work first. You can call Public Concern at Work on 020 7404 6609, email helpline@pcaw.co.uk or visit www.pcaw.co.uk/law/uklegislation.htm for useful information about whistle blowing legislation.

All concerns of poor practice or concerns about a child's welfare brought about by the behaviour of colleagues should be reported to the designated safeguarding person and/or Nursery Manager.

Recognising abuse

To ensure that our children are protected from harm, we need to understand what types of behaviour constitute abuse and neglect. We will ensure all staff understands their responsibilities in being alert to indicators of abuse and their responsibility for referring any concerns to the designated person responsible for child protection.

There are four categories of abuse: physical abuse, emotional abuse, sexual abuse and neglect.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child (this used to be called Munchausen's Syndrome by Proxy, but is now more usually referred to as fabricated or induced illness).

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child, such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate or valued only for meeting 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 serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative and non-penetrative acts. They may include noncontact activities, such as involving children in looking at, or in the production of, 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 misuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate food and clothing or 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.

Preventing Radicalisation and Extremism

We are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, that in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism". This duty is known as the Prevent duty.

Alongside this the EYFS states;

Early years providers must take action to protect children from harm and should be alert to harmful behaviour by other adults in the child's life.

- Practitioners will therefore know how to identify children that are at risk from radicalisation and know when, where, and how to refer them for help if necessary

Staff will therefore:

- -Be alert to changes in children's behaviour which could indicate that they may be in need of help or protection
- Be aware that children at risk of radicalisation may seek to hide their views, the key person approach means that we get to know the child and family well and therefore will be aware of any personality, behaviour or demeanour changes quickly
- Seek advice from senior staff or manager where they have concerns about a child at risk of radicalisation and work with Suffolk county council safeguarding board to seek advice or refer where necessary (Customer first 0808 800 4005)

The Department for Education has dedicated a telephone helpline (020 7340 7264) to enable staff to raise concerns relating to extremism directly. Concerns can also be raised by email to counter.extremism@education.gsi.gov.uk. Please note that the helpline is not intended for use in emergency situations, such as a child being at immediate risk of harm or a security incident, in which case the normal emergency procedures should be followed.

- Undertake awareness training to become more aware of extremist ideas and terrorist ideology and signs that children could be at risk

It is unacceptable to

- Actively promote intolerance of other faiths, cultures and races
- Gender stereotype and separate girls and boys
- -Isolate children from the wider to community
- Fail to challenge behaviours from staff, children or parents that are not in line with fundamental British values of democracy, rule of law, individual liberty, mutual respect, and tolerance for different faiths and beliefs.

Definition of terms:

Collaboration: the action of working with someone to do something

Extremism: The holding of extreme political or religious views

Radicalisation: is a process by which an individual or group comes to adopt increasingly extreme political, social or religious ideas or aspirations, that reject or undermine the status quo or reject and undermine contemporary ideas and expressions of freedom of choice.

Terrorism: The unofficial or unauthorised use of violence and intimidation in the pursuit of political aim

Tolerance: the ability or willingness to tolerate the existence of opinions or behaviour that one dislikes or disagrees with

British Values

We have a policy called British Values that sets out what will do to support children and young people from being drawn into terrorism and how we will promote British values, it also states what staff will be alert to in order to safeguard children from terrorism or radicalisation and what to do if staff have concerns.

Staff will read the British values policy upon induction and sign to say that this has been read an understood.

The DFE has a dedicated helpline for staff to contact to raise concerns direct if relating to extremism.

(020 7340 7264 Dedicated helpline relating to extremism)

FGM

Female Genital mutilation is against the law but in some countries is considered a religious act and a cultural requirement. It is illegal for someone to arrange for a child to go abroad with the intention of having her circumcised. Staff will be made aware of FGM and signs of symptoms to be aware of through their safeguarding training.

The designated lead and safeguarding officer will have training on FGM and any concerns over a child who may be at risk of FGM will be reported immediately.

Indicators of abuse and what you might see

It is vital that staff are aware of the range of behavioural indicators of abuse and report any concerns to the designated person. We are aware that it is our responsibility to report concerns. It is not our responsibility to investigate or decide whether a child has been abused.

A child who is being abused and/or neglected may:

- have bruises, bleeding, burns, fractures or other injuries
- show signs of pain or discomfort
- · look unkempt and uncared for
- change their eating habits
- have difficulty in making or sustaining friendships
- appear fearful
- be reckless with regard to their own or other's safety
- self-harm
- frequently be absent or arrive late

- · show signs of not wanting to go home
- display a change in behaviour from quiet to aggressive, or happy-go-lucky to withdrawn
- become disinterested in play activities
- be constantly tired or preoccupied
- be wary of physical contact
- Over 'cling-iness'
- display sexual knowledge or behaviour beyond that normally expected for their age.

Individual indicators will rarely, in isolation, provide conclusive evidence of abuse. They will be viewed as part of a jigsaw, and each small piece of information will help the Designated Safeguarding Person to decide how to proceed. It is very important that you report your concerns – you do not need 'absolute proof' that the child is at risk.

Taking action

Key points to remember for taking action are:

- in an emergency take the action necessary to help the child, for example, call 999
- report your concern to the Designated Safeguarding Person immediately
- if the Designated Safeguarding Person is not available, ensure the information is shared with the most senior person in the nursery that day and ensure action is taken to report the concern to children's social care
- do not start your own investigation
- share information on a need-to-know basis only do not discuss the issue with colleagues, friends or family
- complete a record of concern about children, even where there is no need to refer the matter immediately (dated and signed on each page) see appendix for 'Record of Concern' form
- If a referral is made please then go on to complete a 'Chronology of Events'
- seek support for yourself if you are distressed.

Parental partnership

Where possible, concerns will be discussed with the parent/carer for an explanation, providing it does not put the child at immediate risk. Parental agreement will be sought for a referral unless seeking agreement is likely to place the child at risk of significant harm through delay or the parent's actions or reactions.

Parents must notify the nursery regarding any concerns they may have about their child and any accidents, incidents or injuries affecting the child, which will be recorded.

We will involve parents and carers wherever possible and ensure they have an understanding of the responsibilities placed on the setting for safeguarding children by setting out its statutory duty in the nursery policy and procedures, prospectus, notice board and newsletter.

Referral to children's social care

The Designated Safeguarding Person will follow the procedures set out by the Suffolk Safeguarding Children Board if it is believed that a child is suffering or is at risk of suffering significant harm. The child (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the child.

Please follow the SSCB Referral Flowchart attached to this policy and displayed in the office at each nursery.

Referral Contact Telephone Numbers:

Children's Services:

Customer First freephone No: 0808 800 4005

Emergency Duty Service

Week days: 5.20pm to 8.45am

Weekends: 4.25pm Friday to 8.45am Monday 0808 800 4005

Suffolk Police: Main Switchboard No: 01473 613500

However, if we are seriously concerned about a child's immediate safety, we will dial 999.

All telephoned referrals must be confirmed in writing, and the information given must be as complete and clear as possible. The appropriate referral form should be used unless to do so is impracticable or would cause dangerous delay. This form is available on the Suffolk Safeguarding Children website www.suffolkscb.org.uk and should always be submitted within 24 hours of the telephone referral.

The referral will be confirmed in writing within 24 hours. All referrers should expect to be contacted by a social worker about their referral in order to ensure that their information has been properly understood. You should initiate this contact if you have not heard from a social worker within 24 hours of making the referral.

If you need any advice or support in making a referral you are able to contact the LADO Local Authority Designated Officer.

It is your responsibility to ensure that your concerns have been received and understood, and that they are receiving appropriate attention.

Children's Social Care have a legal duty to determine a course of action within one working day of receipt of referral and should invariably be prompt to confirm receipt and check details with any referrer. The time of receipt of referral by Children's Social Care is to be taken as the time of receipt of the call by Customer First.

Create a precise and detailed written record of the concerns, and share it with the Social Worker. (see appendix for documents to use)

It is important to record precise details of injuries and signs of neglect, and diagrams should be used to illustrate injuries and clinical findings. Care should be taken to record exactly what was said by a child or parent or referrer, because the details and exact words used can be very significant.

A "body map" should be used to record physical injuries. (see appendix for body may)

Care should be taken to distinguish between fact and opinion, and to identify the information and thinking that underpins them.

Much of this detail should normally be included on, or referenced in, the referral form. This must be sent to Children's Social Care (either via Customer First or direct to the Social Worker if this has been agreed with them) within 24 hours of any telephone referral. It is important to give as much detail as possible on the referral form, but care should be taken not to delay referral. Any information not given on the referral form should be sent on as soon as possible.

All referrals should be reported to the CEO and where necessary Ofsted/Lado.

Confidentiality and sharing information

All staff understand that child protection issues warrant a high level of confidentiality, not only out of respect for the child and staff involved but also to ensure that being released into the public domain does not compromise evidence. Staff should only discuss concerns with the designated person or manager. That person will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis.

Child protection information will be stored and handled in line with Data Protection Act 1998 principles. Information is:

- processed for limited purposes
- adequate, relevant and not excessive
- accurate
- kept no longer than necessary

This policy was reviewed on 1st March 2017.

- processed in accordance with the data subject's rights
- secure

Record of concern forms and other written information will be stored in a locked facility. We will develop effective links with relevant agencies and cooperate as required with any enquires regarding child protection matters including attendance of case conferences.

Trustee:-	 ()
Trustee:-	 ()
Trustee:-	 ()



Record of Concern

Child's Full Name:	Date of Birth:
Child's Address:	
Person(s) with parental responsibility:	
Name of Setting:	
Name of Designated Safe Guarding Lead and Deputy	/ :
Signed	Date
Nature of concerns, including dates/times and all pe	ersons involved:
(Use a body map if necessary)	
(Continue on an additional sheet if necessary)	

Any actions taken, including reasons for actions:
, ,
Consultation with parents / if not please state why not:

Date.....

Signed.....

Referral Information:					
Did you ring Customer First for advice?	YES / NO				
Who did you speak to					
Date	Time				
What advice was given?					
Did you make a referral?	YES / NO				
Who did you speak to					
Date	Time				
Information given					
Actions to be taken, including date of when to be completed:					

Signed	Date

Chronology of Events

Date	Significant Event	Professionals Involved	Action Taken	Outcome