SAFEGUARDING CHILDREN – POLICY AND PROCEDURE

We intend to create in our Nursery an environment in which children are safe from abuse and in which any suspicion of abuse is promptly and appropriately responded to.

We have a duty to promote and safeguard the welfare of children in our care.

We comply with the procedures approved by the Stoke-on-Trent Safeguarding Children's Board.

These guidelines are in line with the Local Safeguarding Children's' Board

Designated Safeguarding Officers, Prevent and British Values Co-ordinator – Val Brown (Manager), Maureen Cunnington (Deputy) Mel Platt (Assistant Deputy) Amanda Taylor (Lead Practitioner)

Roles and Responsibilities

- On induction inform members of staff/students of the Safeguarding Policy and Procedures
- Liaise with staff over any concerns about a child that they are concerned about.
- Collect all evidence, notes, observations from staff
- Complete relevant forms of concern
- Liaise with parents –Refer child to the Children's Specialist Services Safeguarding Referral Team (S.R.T) duty team if needs be (unless having consent may put the child at risk of significant harm).
- Follow this concern up in writing to **Children's Specialist Services Safeguarding Referral Team (S.R.T.)** within **24 hours** of a verbal referral.
- Liaise with relevant organisations e.g. Children's Specialist Services, Ofsted, Police, and take action e.g. be involved in an assessment of the child.
- Inform Ofsted as soon as possible but at least **14 days** of the event occurring only if it happens on our premises.
- Attend meetings with the parents and any other Safeguarding conferences.
- Attend regular Safeguarding Training and feedback to nursery Practitioners
- To ensure that all relevant people are kept informed on issues such as case reports, referrals and where appropriate disciplinary action.
- To provide information, advice and support to nursery Practitioners
- Ensure Safeguarding Children policies and procedures are kept up to date according to Local Safeguarding Children's Board procedures
- Maintain case records
- Keep up to date with legislation

Staff

- Staff are given a copy of the Safeguarding Policy and Procedure, a diagram of the procedure when a child is referred to the Safeguarding Referral Team (S.R.T.) and a copy of signs and symptoms of abuse. Updated copies are issued if legislation changes.

- All staff will liaise with parents verbally and ask them to fill in an existing injuries form. (Signed by both staff and parents), if their child arrives at nursery with any injuries from home.
- Staff to be aware of any significant changes in children's behaviour, deterioration in child's well-being, unexplained bruising, marks or signs of possible abuse, neglect or comments made by children that give cause for concern..
- It is then the member of staff's responsibility to discuss these issues with their Lead Practitioner and Safeguarding officer on duty straight away.
- Complete relevant forms of concern
- Any member of staff involved in these concerns will then attend a meeting between the Manager and Development Officer, and if necessary a decision will then be made on what to do next.
- Observations are continually carried out on children in our nursery.
- Extra notes will be written, signed and dated and monitored closely
- All records are stored in a locked file and kept confidential.
- The Local Safeguarding Children's Board Booklet and what to do if your child is being abused booklet are stored in a Safeguarding file in the Managers Office with other important information on safeguarding.
- All staff will attend refresher Safeguarding training every 3 years
- Confidentiality will be maintained at all times

Parents

- A brief statement about the Safeguarding policy and how we safeguard our children in nursery is included in the welcome pack.
- Our full set of policies can be found on our Parents Notice Board in the nursery entrance.
- Parents will be informed by Manager and Development Officer of the correct procedure that will follow, due to concerns about their child after 24 hours.
- Parents receive a copy of the admissions policy to the setting on induction
- If a child is born before 2003 and their parents are not married the father doesn't have any parental responsibility.

Types of abuse

Child abuse is any action by another person (adult or child) that causes significant harm to a child. It can be physical, sexual and emotional or neglect.

Physical abuse

Physical abuse is deliberately hurting a child causing injuries such as bruises, broken bones, burns or cuts. Children who are physically abused suffer violence such as being hit, kicked, poisoned, burned, slapped or having objects thrown at them.

Signs to look out for

- Unexplained injuries, bruises or marks
- Injuries which have an unusual fracture or are in an unusual place on the body
- Fear, watchfulness, over anxiety to please
- Small round burns or bite marks
- Frequent time off from nursery

If an immobile baby or a baby under 6 months has a bruise or mark, even if an explanation is given it is our responsibility to report this to the Safeguarding Referral Team.

Sexual abuse

A child is sexually abused when they are forced or persuaded to take part in sexual activities. This doesn't have to be physical contact, and it can happen online. Sometimes the child won't understand that's what is happening to them is abuse. They may not even know that what is happening to them is wrong.

Signs to look out for

- Sexual knowledge or comments that you wouldn't expect from a child
- Sexual behavior that you wouldn't expect from a child
- Unexpected reactions, fear or wariness of people
- Repeated urinary or genital infections
- Pregnancy or sexually transmitted diseases
- Self-harming or recurrent abdominal pains

Emotional abuse

Emotional abuse is the on-going emotional maltreatment of a child. It's sometimes called psychological abuse and can seriously damage a child's emotional health and development.

Emotional abuse can involve deliberately trying to scare or humiliate a child or isolating or ignoring them.

Signs to look out for

- Withdrawn, anxious behaviour, lack of self-confidence
- Self-harm and eating disorders
- Demanding or attention seeking behaviour
- Not wanting to communicate
- Repetitive, nervous behaviour such as rocking, hair twisting or scratching

Neglect

Neglect is the on-going failure to meet a child's basic needs and is the most common form of child abuse.

A child may be left hungry or dirty, without adequate clothing, shelter, supervision, medical or health care.

A child may be put in danger or not protected from physical or emotional harm.
They may not get the love, care and attention they need from their parents.

Signs to look out for

- Dirty, scruffy or unsuitable clothes
- The child is smelly, unclean hair and dirty nails
- Dental issues (bad breath)
- The child is hungry and asking or taking food
- The child is left alone or with unsuitable carers

- The child is thin, pale and lacking energy
- Lots of accidents happen to the child
- Child is not taken to the doctors when hurt or ill

FGM (Female genital mutilation)
Female genital mutilation is the partial or total removal of external female genitalia for non-medical reasons. It is also known as female circumcision or cutting.
Religious, social or cultural reasons are sometimes given for FGM. However FGM is child abuse, it's dangerous and is a criminal offence.

WAYS IN WHICH WE SAFEGUARD OUR CHILDREN

- All staff are D.B.S. checked and have a copy of the Safeguarding policy and procedures.
- Staff understand the procedure if a parent does not collect their child on time and also in the event of a child going missing.
- All parents are asked to complete a registration form once they have accepted the nursery place, a password is written on this form so that staff can ask for this if someone different picks up their child.
- Registers are completed daily; children are signed in and out.
- All relevant forms are signed, checked and monitored i.e. medication, accident, incident, sick child, existing injuries at home.
- A risk assessment is carried out on all outings, ratios are 1:2. We ensure that staff have a first aid kit, nursery mobile phone and register with them. Headcount forms are completed every ten minutes throughout the outing.
- Visual checks are carried out before children go out to play and recorded.
- Risk assessments are completed annually and stored in the main office.
- Students/Volunteers are never left unsupervised with a child.
- Inductions are carried out on new staff, students and volunteers. (which include safeguarding)
- There is a first aid kit in every room.
- Children are never left unsupervised on or off the premises.
- There is a safeguarding file in each care room.
- Children's contact details are kept in a locked cupboard with any other confidential information.
- Update data sheets are sent out to parents every 6 months, usually May and November.
- Children have a Keyworker, someone they can feel safe with, trust and feel confident with.
- All children are aware of all rules and regulations.
- Children understand where all equipment goes and staff talk to them about using it safely.
- Police visit – talk about Stranger Danger
- Staff have discussions with children on crossing the road safely, holding hands etc.
- Hats are worn and sun cream applied during hot weather.
- Staff are NOT allowed to use mobile phones in any care room.
- Parents are not allowed to be speaking or texting on their mobiles beyond the security door.

ALLEGATIONS AGAINST STAFF

PROCEDURE

- All accusations about any adult with access to children will be dealt with in accordance with the Safeguarding Children policy and procedure, in a way that causes them concern about his/her suitability to work with children.
- The source of the concern or complaint is recorded on a complaints and allegation against staff sheet (by the person who witnessed the incident – Manager or Deputy). This will be acknowledged **within 24 hours.** This will be then taken to the Safeguarding Officer, Manager, Deputy, Lead Practitioner.
- Should you have an allegation made against you against a member of staff, the procedure is to report the concern/allegation to the **Local Authority Designated Officer (LADO) on 01782 235100.**
- When reporting the allegation you must make sure that you inform that the allegation is against a Person in a Position of Trust and have all the relevant details.
- They will hold a strategy discussion and will decide if a strategy meeting is needed.
- At this point you should follow the advice given by LADO.
- The allegation must be reported to **Ofsted – 0300 123 1231**.
- When a decision is made a member of staff may be suspended with pay.
- The staff member involved in the allegation must be informed of their rights (ACAS).
- All reports are kept confidential.
- All parties will be kept informed via meetings and reports.
- If an allegation is made against a student, the person witnessing the incident will record it and the Manager (Safeguarding Co-ordinator) Deputy or Senior Practitioner (in Managers absence) will report the allegation to the students assessor at college and Safeguarding Referral Team (S.R.T) who then transfer to LADO
- If one staff member has informed an allegation against another, the Safeguarding Officer will ask that member of staff for written evidence with dates and times. If appropriate both staff members involved will be called to a meeting to discuss the allegation.
- If it cannot be resolved in house then a Development Officer from the Early Years Childcare Services will be involved.
- If allegations are substantiated, staff employment will be terminated; LADO, Police and other professionals will be involved.
- If allegations are unfounded, staff will be allowed to return to work with all privileges reinstated.
- All documentation will be confidential

Physical Support

- There may be times when an adult in the course of their duties has to intervene physically in order to support children and prevent them and others coming to harm. Such intervention will be the minimum necessary to resolve the situation.
- The Manager will require the adult(s) involved in any such incident to report the matter to her immediately.

A Child in Need

There are some children who will have additional needs whereby a plan is required in order to bring together services to support the child. This is achieved through the development of Common Assessment Framework (CAF) assessment.

This assessment brings the parents and services involved with the child together to devise a plan to meet the child's needs. Early Help project.

We will use The Guide to Levels of need (as agreed by Stoke-on-Trent Children and Young Peoples Strategic Planning Board) to:

- Clarify our thinking around our concerns we have for a child
- To promote discussions with parents and carers to identify a course of actions to support their needs
- To identify an appropriate type of service to provide support, advice and guidance for a child.

4 Levels of Need

- Level 1 – Universal services no problems
- Level 2 – Universal Services with additional support
- Level 3 – Early Help
- Level 4 – Safeguarding

Guide to Levels of Need - Early Help and Safeguarding 2016

RESPONSE TO SUSPECTED CHILD ABUSE

A child's behaviour, comment, disclosure, your own observation or details in a report cause you to be concerned for a child's safety

Remain calm, stop and listen, comfort, observe.
Record actions, concern's and your response, then report To the Safeguarding Officer
If necessary, ensure medical attention is received. Complete Report Form including diagrams

Never promise a child or anyone else that you will keep a secret

Do not ask leading questions
Reassure child that you are

Listening to them.
Check the child's records for Previous reports

Where possible the Manager/Deputy will talk with parents to establish how the injuries occurred
If possible, ensure a witness is present. Record the conversation. If you feel that the child is at risk if you inform parents. The Safeguarding Referral Team **(S.R.T.)** will be contacted straight away

If the Manager of Person in Charge for
are satisfied with parents explanation
add the report to the child's records

If there is still serious cause

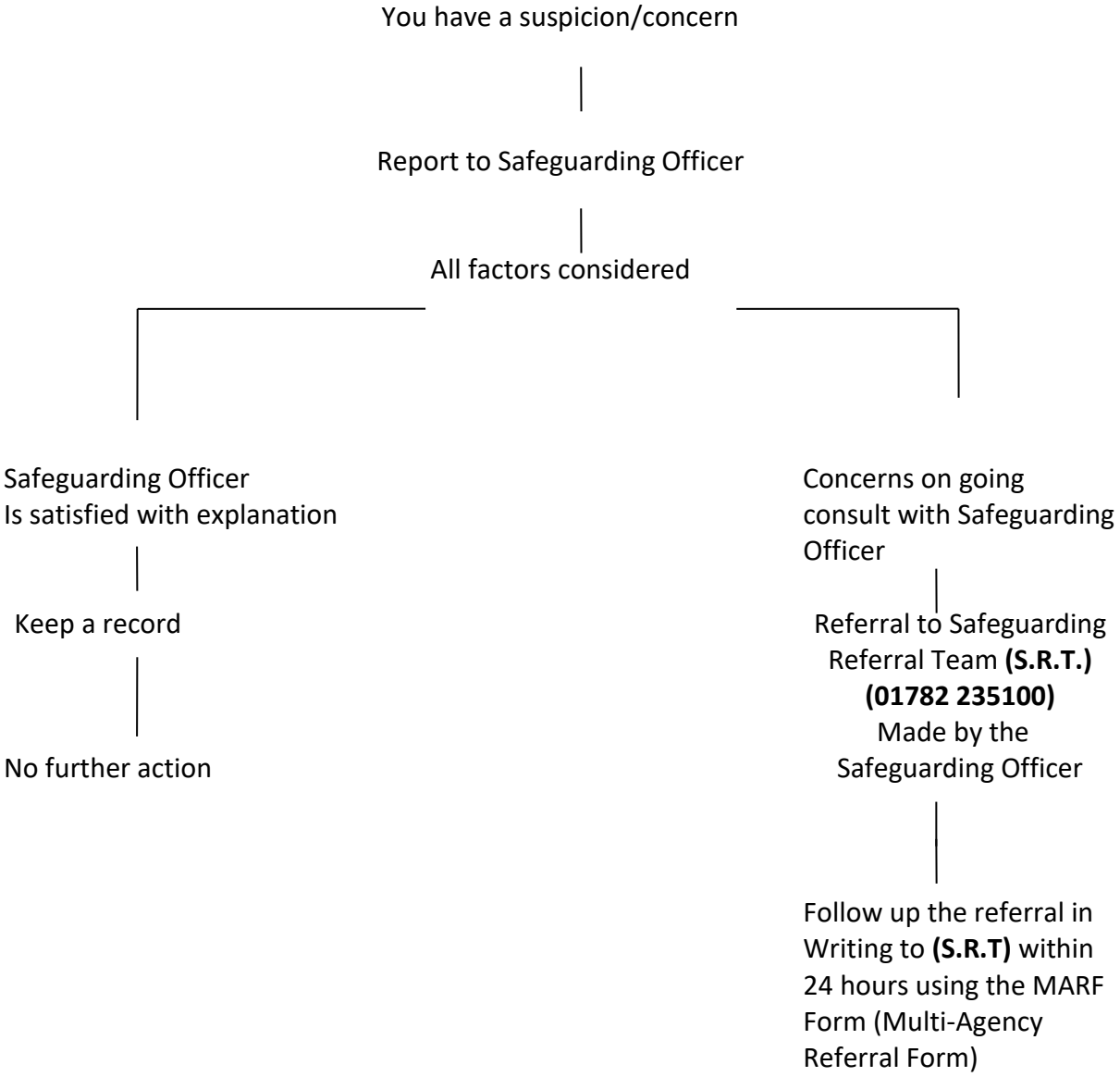
concern, the Manager or Person in Charge to contact Safeguarding Referral Team **(S.R.T.)** or Police

If the Manager or Person in Charge is uncertain, a report must be held on the child's record, and a plan for observations is put in place. The Manager will consult with another agency for confidential advice

REPORTING SAFEGUARDING CONCERNS

Flow Chart 1

Regarding a Child



Flow Chart 2

Regarding the behaviour of staff, volunteer or other

You have a suspicion or concern

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Report to the Safeguarding Officer

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All factors considered

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Appropriate
Steps will be taken to ensure the safety of the child and/or children

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Referral to be made by the Safeguarding Officer to the
LADO (Local Authority Designated Officer). **01782 235100 within 24 hours**
The Reporting and Recording Sheet must be completed and sent
to LADO

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Report to Safeguarding Referral Team **(S.R.T.)** and OfSTED
within 24 hours.

What happens following a referral?

Social Worker and Manager will acknowledge receipt of the referral and feedback to the Manager or Person in Charge regarding the next course of action.

Nursery Practitioners maybe required to produce statements and or liaise with Safeguarding Referral Team and/or Police

Confidentiality

Concerns should be kept confidential and particular care taken when dealing with sensitive information. There is usually implicit consent to disclose information to nursery practitioners within the setting and the Nominated Person; however information may be disclosed to other professionals if circumstances justify the disclosure. Please refer to 'What to do if you're worried a child is being abused'

Working in partnerships with parents

The nursery has a duty to refer to the Safeguarding Referral Team (S.R.T) in the event that they believe a child is at risk of significant harm. Prior to making a referral the Safeguarding Officer will discuss their intentions and the reasons for their concern with the child's parents and where

possible seek consent to share information. Should the Safeguarding Officer believe that this would significantly increase risk of harm to the child; the child's welfare must be the overriding consideration. In the event that consent to share information is not given the Safeguarding officer will respect the family's wishes, unless the Safeguarding officer believes that it is in the best interest of the child to override the lack of consent to safeguard them from significant risk of harm or neglect. Nursery practitioners will refer to 'A guide for people working with children, young people and their families' to ensure effective sharing of confidential information with the parent and Safeguarding Referral Team (S.R.T).

Recording Information

Recording an accurate account of disclosures, conversations, child's behaviour and observations is vital to ensure that factual and clear information is passed on to Children's Specialist Services Safeguarding and Referral Team (A.R.T). Information to include:

- Child's personal details such as, age, date of birth, home address, any disability or particular need
- Name of the person with parental responsibility or primary carer
- Date, time and location of observation or allegation
- Who was present
- Child's and parents behaviour or emotional state
- Child's appearance
- Child's relationship with other children and staff
- Details of any other agencies or professionals involved with the child

All records must be up to date and stored safely

Making a Referral

When making a referral the following details must be to hand:

- Child's details – Name, address, date of birth, parent/carers name, contact telephone number
- Details of child's G.P./Health Visitor
- Your name and contact number
- The reason for referral, any action you have taken so far (contact with carer, consultation with colleagues)
- Any history of concerns with actions taken

Referrals should be made to the Safeguarding referral Team during office hours.

After office hours a referral should be made to the Emergency Duty Team where you will be transferred to an answering machine, please leave your name, the name of the Nursery and a contact telephone number. The Duty Social Worker will contact you as soon as possible. As a last resort the Emergency Duty Team are to be contacted in the event of a child not being collected from Nursery.

The Safeguarding Referral Team (S.R.T) is also available to give advice and support. If you are unsure of any child protection issues do not hesitate to contact them. Alternatively the NSPCC are also available to give confidential advice.

If you have any suspicions that a child in your care is being abused take action quickly, do not delay.

Contact with OfSTED

All referrals that are made to Children's Specialist Services, including allegations against adults at the nursery, must be reported to **OFSTED immediately.** Should an allegation be made against an adult at the nursery and the nursery does not know OFSTED will inform the nursery.

Contact Names and Details

Safeguarding Officer (Manger) Val Brown

In the absence of Val Brown – Maureen Cunnington (Deputy), Mel Platt (Assistant Deputy) or Amanda Taylor (Senior Practitioner)
Address: Eastwood Neighbourhood Nursery, 100 Franklyn Street, Hanley, Stoke-on-Trent ST1 3HD
Telephone: 01782 283222

Safeguarding Referral Team

Safeguarding and Referral Team (S.R.T)
Telephone: 01782 235100

LADO (Local Authority Designated Officer)

Telephone: 01782 235100

Ofsted

Telephone: 0300 123 123 1

Prevent Contact

Prevent Team – Telephone: 01782 232054
Email: prevent@staffordshire.pnn.police.uk

NSPCC

Telephone: 0844 892 0273

PEER ON PEER ABUSE

Keeping children safe in education, 2016 states that "Governing bodies and proprietors should ensure their child protection policy includes procedures to minimise the risk of peer on peer abuse.

Children and young people may be harmful to one another in a number of ways which would be classified as peer on peer abuse. There are many forms of abuse that may occur between peers, these include:

- Physical abuse e.g. biting, hitting, kicking, hair pulling or otherwise causing physical harm to another person. There may be many reasons why a child would harm another child in this way and it is important to understand why. There may be a completely innocent explanation or it could be an accident but staff should be aware and take action if peer on peer abuse is suspected.
- Sexually harmful behaviour/sexual abuse e.g. inappropriate sexual language, touching, sexual assault etc. sometimes this type of behaviour from children is not always with the intent to harm others. Sometimes this is a clear sign that the child, themselves are being abused at home etc.
- Bullying e.g. physical, name calling etc. where the behaviour is repeated, or has the potential to be repeated bullying also includes actions such as making threats, spreading rumours, attacking someone physically or verbally
- Cyber bullying, where the use of phones, email, instant messaging, social media to harass, threaten or intimidate someone.
- Sexting, this is when someone sends or receives a sexually explicit text, image or video

Although the type of abuse may have a varying effect on the victim and initiator of harm, these simple steps can help clarify the situation and establish the facts before deciding the consequences for those involved in perpetrating harm. It is important to deal with a situation of peer abuse immediately and sensitively. It is necessary to gather the information as soon as possible to get the true facts around what has occurred as soon after the child/children may have forgotten. It is equally important to deal with it sensitively and think about the language used and the impact of that language on both the children and the parents when they become involved.

Gather the facts speak to all children/young people separately, gain a statement of facts from them and use consistent language and open questions. Use TED questions e.g. TELL me about this, EXPLAIN what happened, DESCRIBE this to me. Make sure to record in detail dates, times, location and word to word accounts of any statements made.

Consider the intent has this been a deliberate or accidental situation for a child or young person to be able to harm another? What is the age of the children involved? Where did the incident take place? Was the incident in an open, visible place to others and if so was it observed? If not is more supervision required in this particular area? Has the behaviour been repeated to an individual on more than one occasion? In the same way it must be considered has the behaviour persisted to an individual after the issue has already been discussed or dealt with and appropriately resolved?

Decide on your next course of action if from the information that you gather you believe any child or young person to be at risk of significant harm you must then take the appropriate steps as stated in the safeguarding policy, inform the relevant people and make a referral if appropriate.(See page 23 and 24 of safeguarding response actions)

In the same way as Peer on peer abuse can occur between children and young people, abuse can also happen between staff members. This could be physical abuse, verbal/emotional abuse, bullying (humiliation, spreading rumours, regularly undermining someone), Sexual harassment (un-welcome sexual jokes/comments, advances, touching/sexual assault). The abuse may be done through emails, over the phone, text messages etc. Harassment might take place outside of the workplace. The same principles apply as do with Peer on peer abuse and the same steps should be taken if this abuse is witnessed, reported or if the victim discloses any information to you.