



# **Safeguarding Children/Child Protection Policy**

EYFS: Section 3 – Safeguarding  
and welfare requirements

At Little Dragon's Day Nursery, we work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect, be helped to thrive and to be safe from any abuse in whatever form.

We support the children within our care, protect them from maltreatment and have robust procedures in place to prevent the impairment of children's health and development. In our setting we strive to protect children from the risk of radicalisation and we promote acceptance and tolerance of other beliefs and cultures. Safeguarding children is everybody's responsibility. All staff, students, any supply staff and visitors are made aware of and asked to adhere to, the policy.

## **Legal framework and definition of safeguarding**

- Children Act 1989 and 2004
- Childcare Act 2006 (amended 2018)
- Safeguarding Vulnerable Groups Act 2006
- Children and Social Work Act 2017
- The Statutory Framework for the Early Years Foundation Stage (EYFS) 2023
- Working Together to Safeguard Children 2018
- Keeping Children Safe in Education 2023
- Data Protection Act 2018
- What to do if you're worried a child is being abused 2015
- Counter-Terrorism and Security Act 2015.
- Inspecting Safeguarding in Early years, Education and Skills settings 2021
- Prevent Duty (updated 2023)
- Domestic Abuse Act 2021

Safeguarding and promoting the welfare of children, in relation to this policy is defined as:

- Protecting children from maltreatment
- Preventing the impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

*(Definition taken from the HM Government document 'Working together to safeguard children 2018).*



## **Policy Intention**

To safeguard children and promote their welfare we will:

- Create an environment to encourage children to develop a positive self-image
- Provide positive role models and develop a safe culture where staff are confident to raise concerns about professional conduct
- Ensure all staff are able to identify the signs and indicators of abuse, including the softer signs of abuse, and know what action to take
- Encourage children to develop a sense of independence and autonomy in a way that is appropriate to their age and stage of development
- Provide a safe and secure environment for all children
- Promote tolerance and acceptance of different beliefs, cultures and communities
- Help children to understand how they can influence and participate in decision-making and how to promote British values through play, discussion and role modelling
- Always listen to children
- Provide an environment where practitioners are confident to identify where children and families may need intervention and seek the help they need
- Share information with other agencies as appropriate.

The nursery staff are aware that abuse does occur in our society and we are vigilant in identifying signs of abuse and reporting concerns. Our practitioners have a duty to protect and promote the welfare of children. Staff working on the frontline with children and families are often the first people to identify a concern, observe changes in a child's behaviour or receive information relating to indicators of abuse. They may well be the first people in whom children confide information that may suggest abuse or to spot changes in a child's behaviour which may indicate abuse.

Our prime responsibility is the welfare and well-being of each child in our care. As such we believe we have a duty to the children, parents and staff to act quickly and responsibly in any instance that may come to our attention. This includes sharing information with any relevant agencies such as local authority services for Children's Social Care, family support, health professionals including health visitors or the police. All staff will work with other agencies in the best interest of the child, including as part of a multi-agency team, where needed.

The nursery aims to:

- Keep the child at the centre of all we do, providing sensitive interactions that develops and builds children's well-being, confidence and resilience. We will support children to develop an awareness of how to keep themselves safe, healthy and develop positive relationships
- Ensure staff are trained right from induction to understand the safeguarding and child protection policy and procedures, are alert to identify possible signs of abuse (including the signs known as softer signs of abuse), understand what is meant by child protection and are aware of the different ways in which children can be harmed, including by other children through bullying or discriminatory behaviour.
- Be aware of the increased vulnerability of children with Special Educational Needs and Disabilities (SEND), isolated families and vulnerabilities in families; including the impact of toxic trio on children and Adverse Childhood Experiences (ACE's).
- Ensure that all staff feel confident and supported to act in the best interest of the child; maintaining professional curiosity around welfare of children and share information, and seek the help that the child may need at the earliest opportunity.
- Ensure that all staff are familiar and updated regularly with child protection training and procedures and kept informed of changes to local/national procedures, including thorough annual safeguarding newsletters and updates.
- Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the Warwickshire Front Door.
- Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest.



- To keep the setting safe online, we refer to 'Safeguarding children and protecting professionals in early years settings: online safety considerations and use appropriate filters, checks and safeguards, monitoring access at all times and maintaining safeguards around the use of technology by staff, parents and visitors in the setting.
- Ensure that staff identify, minimise and manage risks while caring for children.
- Identify changes in staff behaviour and act on these as per the Staff Behaviour Policy.
- Take any appropriate action relating to allegations of serious harm or abuse against any person working with children or living or working on the nursery premises including reporting such allegations to Ofsted and other relevant authorities including the local authority.
- Ensure parents are fully aware of our safeguarding and child protection policies and procedures when they register with the nursery and are kept informed of all updates when they occur.
- Regularly review and update this policy with staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by Warwickshire County Council.



## **Little Dragon's Day Nursery Key Safeguarding Personnel**

The **Designated Safeguarding Lead (DSL)** is:

**Kerri Scott (Nursery Manager)** tel: 07896132406 email: [kerri@littledragonsnursery.com](mailto:kerri@littledragonsnursery.com)

**Kate McLeod (Nursery Owner)** tel: 07803293745 email: [kate@littledragonsnursery.com](mailto:kate@littledragonsnursery.com)

The **Deputy Designated Safeguarding Lead (DDSL)** is:

Emma Carter (Deputy Manager) tel: 07946730629

Other staff trained to undertake the functions of the **Designated Safeguarding Lead** are:

Helena Swain (Deputy Manager) tel: 07880724305

Rebecca Almond (Head of Room) tel: 07584080513

## **Key Contact telephone Numbers**

### **Local Authority Contact Details:**

Local authority Designated Officer (LADO) **01926 745376**

Warwickshire Front Door **01926 414144**

Warwickshire Front Door Out of Hours **01926 886922**

Warwickshire Family Support Line **01926 412412**

Family Information Service **01926 742274**

Early Years and Childcare Advisors **01926 742547**

Local Authority Prevent Officer (**Geoff Thomas**) **01926 412432**

Child Exploitation Team **01926 684406**

Targeted Support Officer (**Heidi Saunders**) **07879113776** [heidisaunders@warwickshire.gov.uk](mailto:heidisaunders@warwickshire.gov.uk)

### **National Helplines and Contact Numbers:**

NSPCC **0808 800 5000**

Childline **0800 1111**

Domestic Abuse Helpline **08082000247**

FGM Helpline **0800 0283550**

Forced Marriage Unit **020 7008 0151**

Government helpline for extremism concerns **020 7340 7264**

National Whistleblowing Helpline on **0800 072 4725**

Ofsted **0300 123 1231**

Emergency police **999**

Non-emergency police **101**

Child exploitation and Online protection command (CEOP) <https://www.ceop.police.uk/safety-centre/>



## **Recognising abuse**

To ensure that our children are protected from harm, we need to understand what types of behaviour constitute abuse and neglect.

Abuse and neglect are forms of maltreatment of children. Somebody may abuse or neglect a child by inflicting harm, for example by hitting them, or by failing to act to prevent harm, for example by leaving a small child home alone.

Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by adult men or women or by other children or young people. Staff are trained to understand and recognise indicators of all four categories of abuse as defined below.

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

### **Physical abuse**

A form of abuse which 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). All children can suffer injuries during their early years as they explore and develop. If an explanation of how a child received their injury doesn't match the injury itself or if a child's injuries are a regular occurrence or there is a pattern to their injuries, then we will report our concerns.

### **Emotional abuse**

Working Together to Safeguard Children (2018) defines emotional abuse as '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 a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a 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 (including cyber 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, though it may occur alone.

Signs and indicators may include:

- Physical, mental and emotional development lags
- Sudden speech disorders
- Overreaction to mistakes
- Extreme fear of any new situation
- Neurotic behaviour (rocking, hair twisting, self-mutilation)
- Extremes of passivity or aggression
- Appear unconfident or lack self-assurance.

Action will be taken if the staff member has reason to believe that there is a severe, adverse effect on the behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection. Children may also experience emotional abuse through witnessing domestic abuse and alcohol and drug misuse by adults caring for them. In England, The Domestic Abuse Act 2021 recognises in law, for the first time, that children are victims if they see, hear or otherwise experience the effects of domestic abuse.



## **Sexual abuse**

Sexual abuse involves forcing, or enticing, a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online and technology can be used to facilitate offline abuse. Adult males do not solely perpetrate sexual abuse; women can also commit acts of sexual abuse, as can other children.

Action must be taken if a staff member witnesses an occasion(s) where a child indicates sexual activity through words, play, drawing, has an excessive preoccupation with sexual matters; or has an inappropriate knowledge of adult sexual behaviour, or language, for their developmental age. This may include acting out sexual activity on dolls/toys or in the role-play area with their peers; drawing pictures that are inappropriate for a child, talking about sexual activities or using sexual language or words.

If a child is being sexually abused staff may observe both emotional and physical symptoms.

### Emotional signs:

- Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age
- Personality changes such as becoming insecure or clingy
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Sudden loss of appetite or compulsive eating
- Being isolated or withdrawn
- Inability to concentrate
- Lack of trust or fear of someone they know well, such as not wanting to be alone with a carer
- Becoming worried about clothing being removed
- Suddenly drawing sexually explicit pictures or acting out actions inappropriate for their age
- Using sexually explicit language.

### Physical Signs:

- Bruises
- Bleeding, discharge, pains or soreness in their genital or anal area
- Sexually transmitted infections
- Pregnancy

Any concerns about a child or family will be reported to the children's social care team.

## **Neglect**

Working Together to Safeguard Children (2018) defines Neglect as 'the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development'. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- a. Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- b. Protect a child from physical and emotional harm or danger
- c. Ensure adequate supervision (including the use of inadequate caregivers)
- d. Ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Signs may include a child persistently arriving at nursery unwashed or unkempt, wearing clothes that are too small (especially shoes that may restrict the child's growth or hurt them), arriving at nursery in the same nappy they went home in or a child having an illness or identified special educational need or disability that is not being addressed



by the parent. A child may also be persistently hungry if a parent is withholding food or not providing enough for a child's needs.

Neglect may also be shown through emotional signs, e.g. a child may not be receiving the attention they need at home and may crave love and support at nursery. In addition, neglect may occur through pregnancy as a result of maternal substance abuse.

Action will be taken if the staff member has reason to believe that there has been any type of neglect of a child.

### **Indicators of abuse**

Physical signs define some types of abuse, for example bruising, bleeding or broken bones resulting from physical or sexual abuse, or injuries sustained while a child has been inadequately supervised. The identification of physical signs is complicated, as children may go to great lengths to hide injuries, often because they are ashamed or embarrassed, or their abuser has threatened further violence or trauma if they 'tell'. It is also quite difficult for anyone without medical training to categorise injuries into accidental or deliberate with any degree of certainty. For those reasons it is vital that staff are also aware of the range of behavioural indicators of abuse and report any concerns to the DSL.

**It is the responsibility of staff to report their concerns. It is not their responsibility to investigate or decide whether a child has been abused.**

The signs and indicators listed below may not necessarily indicate that a child has been abused, but will help us to recognise that something may be wrong, especially if a child shows a number of these symptoms or any of them to a marked degree.

### **Indicators of child abuse**

- Failure to thrive and meet developmental milestones
- Fearful or withdrawn tendencies
- Unexplained injuries to a child or conflicting reports from parents or staff
- Repeated injuries
- Unaddressed illnesses or injuries
- Significant changes to behaviour patterns.

Softer signs of abuse as defined by National Institute for Health and Care Excellence (NICE) include:

Emotional states:

- Fearful
- Withdrawn
- Low self-esteem.

Behaviour:

- Aggressive
- Oppositional habitual body rocking.

Interpersonal behaviours:

- Indiscriminate contact or affection seeking
- Over-friendliness to strangers including healthcare professionals
- Excessive clinginess, persistently resorting to gaining attention
- Demonstrating excessively 'good' behaviour to prevent parental or carer disapproval
- Failing to seek or accept appropriate comfort or affection from an appropriate person when significantly distressed
- Coercive controlling behaviour towards parents or carers
- Lack of ability to understand and recognise emotions
- Very young children showing excessive comforting behaviours when witnessing parental or carer distress.

Individual indicators will rarely, in isolation, provide conclusive evidence of abuse. They should be viewed as





part of a jigsaw and each small piece of information will help the DSL to decide how to proceed.

**It is very important that staff report all of their concerns, however minor or insignificant they may think they are – they do not need ‘absolute proof’ that the child is at risk.**

### **Child-on-Child abuse**

We are aware that Child-on-Child abuse does take place, so we include children in our policies when we talk about potential abusers. This may take the form of bullying, physically hurting another child, emotional abuse, sexual abuse or initiation/hazing. We will report this in the same way we do for adults abusing children, and will take advice from the appropriate bodies on this area to seek support for both the victim and the perpetrator, as they could also be a victim of abuse. We know that children who develop harmful sexual behaviour have often experienced abuse and neglect themselves.

### **Fabricated illness**

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. The parent or carer may seek out unnecessary medical treatment or investigation; they may exaggerate a real illness and symptoms or deliberately induce an illness through poisoning with medication or other substances or they may interfere with medical treatments. Fabricated illness is a form of physical abuse and any concerns will be reported, in line with our safeguarding procedures.

### **Child sexual exploitation (CSE)**

*Keeping Children Safe in Education (2021)* describes CSE as: where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology. CSE can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person’s immediate knowledge (e.g. through others copying videos or images they have created and posted on social media).

Signs and indicators may include:

- Physical injuries such as bruising or bleeding
- Having money or gifts they are unable to explain
- Sudden changes in their appearance
- Becoming involved in drugs or alcohol, particularly if you suspect they are being supplied by older men or women
- Becoming emotionally volatile (mood swings are common in all young people, but more severe changes could indicate that something is wrong)
- Using sexual language that you wouldn’t expect them to know
- Engaging less with their usual friends
- Appearing controlled by their phone
- Switching to a new screen when you come near the computer
- Nightmares or sleeping problems
- Running away, staying out overnight, missing school
- Changes in eating habits
- Talk of a new, older friend, boyfriend or girlfriend
- Losing contact with family and friends or becoming secretive
- Contracting sexually transmitted diseases.





### **Child Criminal Exploitation (CCE)**

CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.

CCE can include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country forced to shoplift or pickpocket, or to threaten other young people. Some of the following can be indicators of CCE:

- Children who appear with unexplained gifts or new possessions;
- Children who associate with other young people involved in exploitation;
- Children who suffer from changes in emotional well-being;
- Children who misuse drugs and alcohol;
- Children who go missing for periods of time or regularly come home late; and
- Children who regularly miss school or education or do not take part in education.

If staff have any concerns regarding CSE or CCE, they will be reported following our safeguarding reporting procedures.

### **County Lines**

The National Crime Agency (NCA) describe county lines as a term used to describe gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of 'deal line.' Customers will live in a different area to where the dealers and networks are based, so drug runners are needed to transport the drugs and collect payment.

Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including schools, further and higher educational institutions, pupil referral units, special educational needs schools, children's homes and care homes.

Children can easily become trapped by this type of exploitation and become victims of modern slavery as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

For further information see:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/741194/HOCCountyLinesGuidanceSept2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/741194/HOCCountyLinesGuidanceSept2018.pdf)).

County Lines Toolkit for Professionals - The Children's Society in partnership with Victim Support and National Police Chiefs' Council

Signs and indicators to be aware of include:

- Changes in the way young people you might know dress
- Unexplained, sometimes unaffordable new things (e.g. clothes, jewellery, cars etc.)
- Missing from home or schools and/or significant decline in performance
- New friends or relationships with those who don't share any mutual friendships with the victim or anyone else
- May be carrying a weapon
- Receiving more texts or calls than usual
- Sudden influx of cash, clothes or mobile phones
- Unexplained injuries



- Significant changes in emotional well-being
- Young people seen in different cars/taxis driven by unknown adults
- Young people seeming unfamiliar with your community or where they are
- Truancy, exclusion, disengagement from school
- An increase in anti-social behaviour in the community
- Unexplained injuries
- Gang association or isolation from peers or social networks.

### **Cuckooing**

Cuckooing is a form of county lines crime in which drug dealers take over the home of a vulnerable person in order to criminally exploit them as a base for drug dealing, often in multi-occupancy or social housing properties. Signs that this is happening in a family property may be an increase in people entering or leaving the property, an increase in cars or bikes outside the home; windows covered or curtains closed for long periods, family not being seen for extended periods; signs of drug use or an increase in anti-social behaviour at the home. If we recognise any of these signs, we will report our concerns as per our reporting process.

If staff have any concerns regarding county lines/cuckooing they will follow our safeguarding reporting procedures.

### **Contextual safeguarding**

As young people grow and develop they may be vulnerable to abuse or exploitation from outside their family. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online.

As part of our safeguarding procedures we will work in partnership with parents/carers and other agencies to work together to safeguard children and provide the support around contextual safeguarding concerns.

### **Domestic Abuse**

Domestic Abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse), all of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

### **Domestic Abuse Act 2021**

The Act creates a statutory definition of domestic abuse based on the [existing cross-government definition](#).

'**Abusive behaviour**' is defined in the act as any of the following:

- physical or sexual abuse
- violent or threatening behaviour
- controlling or coercive behaviour
- economic abuse
- psychological, emotional or other abuse

For the definition to apply, both parties must be aged 16 or over and 'personally connected'.

'**Personally connected**' is defined in the act as parties who:

- are married to each other
- are civil partners of each other
- have agreed to marry one another (whether or not the agreement has been terminated)
- have entered into a civil partnership agreement (whether or not the agreement has been terminated)
- are or have been in an intimate personal relationship with each other have, or there has been a time when they each have had, a parental relationship in relation to the same child are relatives

The Act recognises children as victims of domestic abuse in their own right, statutory obligations to victims of



domestic abuse are afforded to children too.

All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members.

Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

All concerns about children being affected by domestic abuse will be reported to the DSL as with any other safeguarding concern. The DSL will respond to the report by consulting Children's Social Care in order to establish whether a referral is required or the situation should be managed by discussion with parents/carers and possibly the offer of Early Help.

### **Honour Based Abuse**

So-called 'honour-based' abuse (HBA) encompasses crimes which have been committed to protect or defend the honour of a family and/or community. Such crimes include Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrator(s). It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take.

Staff will be alert to the possibility of a child being at risk of HBA or already having suffered HBA.

All forms of so-called HBA are abuse (regardless of the motivation) and staff will record and report any concerns about a child who might be at risk of HBA to the Designated Safeguarding Lead as with any other safeguarding concern. The DSL will consider the need to make a referral to the Police and/or Children's Social Care as with any other child protection concern.

### **Female genital mutilation (FGM)**

Female genital mutilation (FGM) is a form of child abuse. It is the collective name given to a range of procedures involving the partial or total removal of the external female genitalia for non-medical reasons or other injury to the female genital organs. It has no health benefits and harms girls and women in many ways. The practice, which is most commonly carried out without anaesthetic, can cause intense pain and distress with long-lasting harmful consequences, including difficulties in childbirth. It can be extremely dangerous and can cause:

- Severe pain
- Shock
- Bleeding
- Infection such as tetanus, HIV and hepatitis B and C
- Organ damage
- Blood loss and infections
- Death in some cases

FGM is carried out on girls of any age, from young babies to older teenagers and adult women, so staff are trained to be aware of risk indicators. Many such procedures are carried out abroad and staff will be particularly alert to suspicions or concerns expressed about going on a long holiday.

In England, Wales and Northern Ireland, the practice is illegal under the Female Genital Mutilation Act 2003. Any person found guilty of an offence under the Female Genital Mutilation Act 2003 is liable to a maximum penalty of 14 years imprisonment or a fine, or both. (See <https://www.gov.uk/government/publications/female-genital-mutilation-guidelines> for further information).

If staff have a concern that a girl may be at risk of FGM, they will record their concern and inform the DSL as they would any other safeguarding concern. The DSL will discuss the concern with Children's Social Care with a view



to making a referral and will inform the Police as appropriate.

**Indications that FGM may already have taken place may include a child:**

- having difficulty or looking uncomfortable when walking, sitting or standing;
- spending longer than normal in the bathroom or toilet due to difficulties urinating;
- spending long periods of time away during the day with bladder or menstrual problems;
- having frequent urinary, menstrual or stomach problems;
- having prolonged or repeated absences, especially with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return;
- being reluctant to undergo normal medical examinations;
- confiding in a member of staff without being explicit about the problem due to embarrassment or fear;
- talking about pain or discomfort between her legs.

Staff are subject to a statutory duty defined by Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) to report to the Police **personally** where they discover (e.g. by means of a disclosure) that an act of FGM appears to have been carried out on a girl who is aged under 18. This is known as **mandatory reporting**. Information on when and how to make a report can be found at: <https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information>.

**Breast ironing/flattening**

Breast ironing also known as "breast flattening" is the process where young girls' breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear, or delay the development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage.

Breast Ironing/Flattening is a form of physical abuse and can cause serious health issues such as:

- Abscesses
- Cysts
- Itching
- Tissue damage
- Infection
- Discharge of milk
- Dissymmetry of the breasts
- Severe fever.

Any concerns about a child or family, will be reported to the children's social care team in the same way as other types of physical abuse.

**Forced Marriages**

A forced marriage is a marriage in which a female (and sometimes a male) does not consent to the marriage but is coerced into it. Coercion may include physical, psychological, financial, sexual and emotional pressure. It may also involve physical or sexual violence and abuse.

A forced marriage is not the same as an arranged marriage. In an arranged marriage, which is common in several cultures, the families of both spouses take a leading role in arranging the marriage but the choice of whether or not to accept the arrangement remains with the prospective spouses.

In a forced marriage situation, children may be married at a very young age, and well below the age of consent in England. Staff will be particularly alert to suspicions or concerns raised by children about being taken abroad and not being allowed to return to England.



Since June 2014, forcing someone to marry has become a criminal offence in England and Wales under s.121 of the Anti-Social Behaviour, Crime and Policing Act 2014, 2023 – see <https://www.gov.uk/forced-marriage> for further information). Advice can be sought through the following: Forced Marriage Unit - 020 7008 0151 or via email at [fm@fco.gov.uk](mailto:fm@fco.gov.uk)

## Protecting Children from Radicalisation and Extremism

All settings are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), 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**.

Some children are vulnerable to extremist ideology and radicalisation. Protecting children from the risk of radicalisation is part of the Nursery's wider safeguarding duties and is similar in nature to protecting children from other forms of harm and abuse. As such, the DSL is responsible for the strategy for protecting children from those risks.

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. Extremism is the vocal or active opposition to fundamental values, including: the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces. Even very young children have been exposed, in rare circumstances, to extremism at home and elsewhere including online.

As children get older, they look for adventure and excitement and they may start to ask questions about their identity and belonging. During that stage of their development, they are vulnerable to extremist groups that may claim to offer answers, identity and a social network apparently providing a sense of belonging. Many of those extremist groups make sophisticated use of the internet and social media to target young people and spread their ideology, making young people more vulnerable to being influenced by extremist ideas. Young people who feel isolated or disaffected in some way are particularly vulnerable to radicalisation as they are other forms of abuse and exploitation.

During the process of radicalisation, it is possible to intervene to prevent vulnerable people being radicalised. The Nursery is committed to preventing pupils from being radicalised and drawn into any form of extremism or terrorism. We promote the values of democracy, the rule of law, individual liberty, mutual respect and tolerance of those with different faiths and beliefs by providing children with opportunities through the curriculum to discuss issues of religion, ethnicity and culture and learn how to discuss and debate points of view; and by ensuring that all children are valued and listened to.

Staff receive training that provides them with both the information they need to understand the risks affecting children and young people in this area; and a specific understanding of how to identify individual children who may be at risk of radicalisation and how to support them. Staff are trained to report all concerns about possible radicalisation and extremism to the DSL immediately as they would any other safeguarding concern, identifying early indicators of possible radicalisation including changes in behaviour and attitudes to learning; and expressions of interest in extremist ideas along with a tolerance towards potential violence to certain members of society.

The Nursery recognises the importance of providing a safe space for children to discuss controversial issues; and building their resilience and the critical thinking skills they need in order to challenge extremist perspectives. However, the DSL will make appropriate referrals to the Police PREVENT team and Channel programme in respect of any child whose behaviour or comments suggest that they are vulnerable to being radicalised and drawn into extremism and terrorism in order to ensure that children receive appropriate support.

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for settings to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the



programme is entirely voluntary at all stages.

As a Channel partner, the setting may be asked to attend a Channel panel to discuss the individual referred to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support.

The Nursery will discuss any concerns about possible radicalisation identified with a child's parents/carers as with any other safeguarding or child protection issue unless there is reason to believe that doing so would place the child at risk; and will also support parents/carers who raise concerns about their children being vulnerable to radicalisation. Subject to consultation with the Police PREVENT team and in the interests of making proportionate responses, the setting may offer support to children and their families through the provision of Early Help as appropriate.

The Nursery expects all staff, volunteers, visiting practitioners, contractors and individuals to behave in accordance with the school's Staff Behaviour Policy (code of conduct), will challenge the expression and/or promotion of extremist views and ideas by any adult on school premises or a Nursery events and, when necessary, will make appropriate referrals in respect of any such adult.

Parents and staff may find the website [www.educateagainsthate.com](http://www.educateagainsthate.com) informative and useful. The website is designed to equip leaders, practitioners and parents with the information, tools and resources they need to recognise and address extremism and radicalisation in young people and how best to support them. The website provides information on training resources for teachers, staff and school and college leaders.

As part of the Nursery's overall safeguarding arrangements and ongoing action plan for improvement, the DSL will consider identified local issues; intelligence from pupils, parents, staff and partner agencies; and new information from national issues and learning to review practice and procedures in order to keep pupils safe.

### **Online Safety**

We take the safety of our children very seriously and this includes their online safety. Please refer to the Online Safety policy for a full details.

### **Modern Slavery and Child Trafficking**

The Modern Slavery Act, received Royal Assent on 26 March 2015. The act consolidates slavery and trafficking offenses and introduces tougher penalties and sentencing rules.

Child trafficking and modern slavery is becoming a more frequent form of child abuse. Children are recruited, moved, transported and then exploited, forced to work or are sold on.

Modern slavery is a term that covers:

- Slavery
- Servitude and forced or compulsory labour
- Human trafficking.

Victims of modern slavery are also likely to be subjected to other types of abuse such as physical, sexual and emotional abuse. Staff members and parents/carers under the age of 18 are children and so this may apply to them, as well as the children in our care.

For an adult or child to have been a victim of human trafficking there must have been:

- *Action* (e.g. recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation)
- *Means* (threat or use of force, coercion, abduction, abuse of power or vulnerability) There does not need to be "means" for children as they are not able to give informed consent
- *Purpose* (e.g. sexual exploitation, forced labour or domestic servitude, slavery, financial exploitation, illegal adoption, removal of organs).





### **Signs of Modern Slavery and Child Trafficking**

Action should be taken if they appear to have some of these possible signs including; under the control of someone else and reluctant to interact with others, the victim has few personal belongings and wear the same clothes every day or wear unsuitable clothes for work. The victim is not able to move around freely and is reluctant to talk to strangers or the authorities including appearing frightened, withdrawn, or show signs of physical or psychological abuse.

### **Procedure**

When a concern is raised about slavery or trafficking then we will follow our safeguarding procedure. If the child (or adult) is at risk of immediate harm then the police will be called, otherwise the local authority will be contacted and the referral process will be followed as per the safeguarding procedure.

If you are in the UK and suspect someone might be in slavery, you have several options:

- Call the Modern Slavery Helpline on 08000 121 700 or fill out an online form.
- Contact Crimestoppers on 0800 555 111
- Contact the Police or local children social care teams.

### **Adult sexual exploitation**

As part of our safeguarding procedures we will also ensure that staff and students are safeguarded from sexual exploitation.

### **Up skirting**

Up skirting involves taking a picture of someone's genitals or buttocks under their clothing without them knowing, either for sexual gratification or in order to humiliate, or distress, the individual. This is a criminal offence and any such action would be reported following our reporting procedures.

### **Child abuse linked to faith or belief (CALFB)**

Child abuse linked to faith or belief (CALFB) can happen in families when there is a concept of belief in:

- Witchcraft and spirit possession, demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs)
- The evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context)
- Ritual or multi murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies
- Use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation.

This is not an exhaustive list and there will be other examples where children have been harmed when adults think that their actions have brought bad fortune.

### **Children who are children in care, were previously children in care or who have a social worker**

The most common reason for children becoming children in care is as a result of abuse or neglect. Children who were previously children in care potentially remain vulnerable. Nursery **should** consider extra pastoral support and attention for these children, along with ensuring any appropriate support for communication is in place. Nursery should ensure that staff have the necessary skills and understanding to keep children in care and children who were previously in care safe and ensures that appropriate staff have information about a child's in care status and care arrangements, including the level of authority delegated to the carer by the authority looking after the child. The designated person for children who are children in care (Kerri Scott) and previously children in care and the DSL hold details of the social workers for all children who are children in care or were previously children in care; and the name and contact details of the Local Authority's virtual head for children who are children in care.





### **Children with a social worker**

The Nursery recognises that when a child has a social worker, that is an indicator that she/he may be more vulnerable to harm than other children as well as facing barriers to educational attainment in relation to attendance, learning, behaviour and poor mental health issues.

The setting will take those issues and needs into account when making plans to support children who have a social worker.

### **Private fostering arrangements**

A private fostering arrangement is one that is made privately (without the involvement of a local authority) for the care of a child under the age of 16 years (*under 18 if the child has a disability*) by someone other than a parent or close relative\*, in their own home, with the intention that it should last for 28 days or more. Children looked after by the local authority or who are placed in a residential school, children's home or hospital are not considered to be privately fostered.

\*A close relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins.

On admission to Nursery, we will take steps to verify who has parental responsibility for the child and the relationship of the adults accompanying the child who is being registered.

Private fostering occurs in all cultures including British culture and a private fostering arrangement may start at any age.

Whilst most privately fostered children are appropriately supported, looked after and remain safe and well, they are a potentially vulnerable group who should be monitored by the local authority, particularly when the child has come from another country. In some cases, privately fostered children are affected by abuse and neglect; have been trafficked; are sexually or criminally exploited; or suffer modern-day slavery.

Parents and private foster carers both have a legal duty to inform Children's Social Care in the relevant local authority at least six weeks before the arrangement is due to start. Not to do so is a criminal offence.

Settings have a mandatory duty to report to Children's Social Care in the local authority where they are aware or suspect that a child is subject to a private fostering arrangement.

Staff **should** notify the DSL when they become aware of or suspect private fostering arrangements. The DSL lead will speak to the family of the child involved to check that they are aware of their duty to inform the LA. The Nursery will also fulfil its duty to inform the local authority of the private fostering arrangement.

### **Monitoring children's attendance**

As part of our requirements under the statutory framework and guidance documents we are required to monitor children's attendance patterns to ensure they are consistent and no cause for concern.

We ask parents to inform the nursery prior to their children taking holidays or days off, and all incidents of sickness absence should be reported to the nursery the same day so the nursery management are able to account for a child's absence.

This should not stop parents taking precious time with their children - by keeping us informed parents can help us to meet our statutory requirements and let us know that children are safe.

If a child has not arrived at nursery within one hour of their normal start time the parents will be called to ensure the child is safe and healthy. If the parents are not contactable then the emergency contacts numbers listed will be used to ensure all parties are safe. Staff will work their way down the emergency contact list until contact is established and we are made aware that all is well with the child and family. It is a parent's responsibility to keep their emergency contact details updated. If contact cannot be established then we would assess if a home visit is



required to establish all parties are safe. If contact is still not established, we would assess if it would be appropriate to contact relevant authorities in order to them to investigate further.

Where a child is part of a child protection plan, or during a referral process, any absences will immediately be reported to the local authority children's social care team to ensure the child remains safe and well.

### **Looked after children**

As part of our safeguarding practice, we will ensure our staff are aware of how to keep looked after children safe. In order to do this, we ask that we are informed of:

- The legal status of the child (e.g. whether the child is being looked after under voluntary arrangements with consent of parents or on an interim or full care order)
- Contact arrangements for the biological parents (or those with parental responsibility)
- The child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her
- The details of the child's social worker and any other support agencies involved
- Any child protection plan or care plan in place for the child in question.

Please refer to the Looked After Children policy for further details.

### **Local issues**

We refer to the Warwickshire Safeguarding website: <https://www.safeguardingwarwickshire.co.uk/> to keep up to date with the latest Safeguarding and Child Protection information. We use the Local Area Specific Safeguarding Information and Procedures page to keep informed about area specific issues using the following link: <https://westmidlands.procedures.org.uk/page/contents#p3>



## **Impact of abuse**

The impact of child abuse, neglect and exploitation **should not** be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach and the rest of their childhood, and their adulthood may be characterised by one or more of the following: anxiety, depression or other mental health difficulties, self-harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships, unfulfilled potential and long-term physical health difficulties.



## **Designated Safeguarding Lead**

All settings are required to appoint a member of the senior leadership team as designated safeguarding lead (DSL) to co-ordinate child protection arrangements and to ensure that there are appropriate cover arrangements (Little Dragon's DSL'S are detailed earlier on in this policy). The designated safeguarding lead should have the appropriate status and authority within the Nursery to carry out the duties of the post. The role of the designated safeguarding lead carries a significant level of responsibility, and they should be given the additional time, funding, training, resources and support they need to carry out the role effectively. Their additional responsibilities include providing advice and support to other staff on child welfare, safeguarding and child protection matters, taking part in strategy discussions and inter-agency meetings, and/or supporting other staff to do so, and to contributing to the assessment of children.' (KCSiE 2023)

We have named persons within the nursery who take lead responsibility for safeguarding and co-ordinate child protection and welfare issues, known as the Designated Safeguarding Leads (DSL), there is always at least one designated person on duty during the opening hours of the setting. The designated persons will receive comprehensive training at least every two years and update their knowledge on an ongoing basis, but at least once a year.

The nursery DSL's liaise with the local authority children's social care team, undertakes specific training, including a child protection training course, and receives regular updates to developments within this field. They in turn support the ongoing development and knowledge of the staff team with regular safeguarding updates.

### **The role of the Designated Safeguarding Lead:**

- Ensure that the settings safeguarding policy and procedures are reviewed and developed in line with current guidance; and develop staff understanding of the settings safeguarding policies
- Take the lead on responding to information from the staff team relating to child protection concerns
- Provide advice, support and guidance on an on-going basis to staff, students and volunteers.
- To identify children who may need early help or who are at risk of abuse
- To help staff to ensure the right support is provided to families
- To liaise with the local authority and other agencies with regard to child protection concerns
- Ensure the setting is meeting the requirements of the EYFS statutory requirements
- To ensure policies are in line with the local safeguarding procedures and details
- Disseminate updates to legislation to ensure all staff are kept up to date with safeguarding practices
- To manage and monitor accidents, incidents and existing injuries; ensuring accurate and appropriate records are kept
- Attend meetings with the child's key person
- Attend case conferences and external safeguarding meetings, as requested, by external agencies.

### **The Nursery safeguards children and staff by:**

- Providing adequate and appropriate staffing resources to meet the needs of all children.
- Informing applicants for posts within the nursery that the positions are exempt from the Rehabilitation of Offenders Act 1974. Candidates are informed of the need to carry out checks before posts can be confirmed. Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.
- Giving staff members, volunteers and students regular opportunities during supervisions and having regular opportunities to declare changes that may affect their suitability to care for the children. This includes information about their health, medication or about changes in their home life which may affect their suitability to work with children.
- Requesting DBS update service checks (with staff consent) to re-check staff's criminal history and suitability to work with children 6 monthly.
- Abiding by the requirements of the EYFS and any Ofsted guidance in respect to obtaining references and suitability checks for staff, students and volunteers, to ensure that all staff, students and volunteers working in the setting are suitable to do so.
- Ensuring we receive at least two written references when a new member of staff commences employment with us.



- Ensuring all students will have enhanced DBS checks completed before their placement starts.
- Volunteers, including students, do not carry out any intimate care routines and are never left to work unsupervised with children.
- Abiding by the requirements of the Safeguarding Vulnerable Groups Act 2006 and the Childcare Act 2006 (amended 2018) in respect of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern will be reported to the Disclosure and Barring Services (DBS).
- Having procedures for recording the details of visitors to the nursery and take security steps to ensure that that no unauthorised person has unsupervised access to the children.
- Ensuring all visitors/contractors are supervised whilst on the premises, especially when in the areas the children use.
- Staying vigilant to safeguard the whole nursery environment and be aware of potential dangers on the nursery boundaries such as drones or strangers lingering. We will ensure the children remain safe at all times.
- Having a Staff Behaviour Policy that sits alongside this policy to enable us to monitor changes in behaviours that may cause concern. All staff sign up to this policy to ensure any changes are reported to management so we are able to support the individual staff member and ensure the safety and care of the children is not compromised.
- Ensuring that staff are aware not to contact parents/carers and children through social media on their own personal social media accounts and they will report any such incidents to the management team to deal with.
- Ensuring that all staff have access to, and comply with, the whistleblowing policy, which provides information on how they can share any concerns that may arise about their colleagues in an appropriate manner. We encourage a culture of openness and transparency, and all concerns are taken seriously.
- Ensuring all staff are aware of the signs to look for of inappropriate staff behaviour, this may include inappropriate sexual comments; excessive one-to-one attention beyond the requirements of their usual role and responsibilities; or inappropriate sharing of images. This is not an exhaustive list, any changes in behaviour must be reported and acted upon immediately.
- Ensuring all staff will receive regular supervision meetings where opportunities will be made available to discuss any issues relating to individual children, child protection training, safeguarding concerns and any needs for further support or training.
- Having peer on peer and manager observations in the setting to ensure that the care we provide for children is at the highest level and any areas for staff development are quickly identified. Peer observations allow us to share constructive feedback, develop practice and build trust so that staff are able to share any concerns they may have. Concerns are raised with the designated lead and dealt with in an appropriate and timely manner.
- Ensuring the deployment of staff within the nursery allows for constant supervision and support. Where children need to spend time away from the rest of the group, the door will be left ajar or other safeguards will be put into action to ensure the safety of the child and the adult.

**On receipt of a Green Form, the designated safeguarding lead will:**

- Act immediately, or as soon as it is practical to do so. If deemed necessary, the DSL will contact Warwickshire Front Door to report concerns and seek advice. If it is believed a child is in immediate danger, we will contact the police. If the safeguarding concern relates to an allegation against an adult working or volunteering with children then the DSL will follow the reporting allegations procedure detailed below.
- Record the information and action taken relating to the concern raised via a 'Green Form'
- Speak to the parents when deemed necessary (unless advised not to do so by Warwickshire Front Door)
- If the decision has been made not to speak to parents, the reason must be explained on the Green Form.
- The designated safeguarding lead will follow up with the Warwickshire Front Door if they have not contacted the setting within the timeframe set out in Working Together to Safeguarding Children (2018). We will never assume that action has been taken.
- All 'Green Forms' will be stored securely in the child's Personnel File. A record will also be recorded in our Nursery Safeguarding file to ensure that all DSL's are aware of any recent Green Forms.



- For children who arrive at nursery with an existing injury, an 'Accident/Incident Form' will be completed along with the parent's/carers explanation as to how the injury happened via our FAMILY app. Staff will have professional curiosity around any explanations given - any concerns around existing injury's will be reported.
- If appropriate, any concerns/or incidents will be discussed with the parent/carer and discussions will be recorded. Parents will have access to these records on request in line with GDPR and data protection guidelines.

Keeping children safe is our highest priority and if, for whatever reason, staff do not feel able to report concerns to the DSL or deputy DSL they should call the Warwickshire Front Door, the Police or the NSPCC and report their concerns anonymously. These contact numbers are displayed on all Safeguarding displays in the Nursery (Staff Room, Office, Safeguarding notice boards) and in this Policy.



## **Safer Recruitment**

Our Nursery endeavours to ensure that we do our utmost to employ only 'suitable' staff and allow only 'suitable' volunteers to work with children by complying with the requirements of *Keeping Children Safe in Education 2023* together with the school's and the Warwickshire Safeguarding [Safer Recruitment procedures](#).

Safer recruitment means that all applicants will:

- complete an application form which includes their employment history and explains any gaps in that 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;
- if offered employment, be checked in accordance with the Disclosure and Barring Service (DBS) regulations as appropriate to their role.
  - if offered employment, provide evidence of their right to work in the UK;
  - be interviewed by a panel of at least two members of the management team

The Nursery will also:

- ensure that every job description and person specification for roles includes a description of the role holder's responsibility for safeguarding;
- ask at least one value-based question at interview for every role asks about the candidate's attitude to safeguarding and motivation for working with children;
- verify the preferred candidate's mental and physical fitness to carry out their work responsibilities;
- obtain references for all shortlisted candidates, including internal candidates
- consider carrying out an online search as part of their due diligence on the shortlisted candidates. This may help identify any incidents or issues that have happened, and are publicly available online, which the Nursery might want to explore with the applicant at interview. Nursery should inform shortlisted candidates that online searches may be done as part of due diligence checks;
- carry out additional or alternative checks for applicants who have lived or worked outside the UK;

At least one member of each recruitment panel will have attended safer recruitment training.

All new members of staff and volunteers will undergo an induction that includes familiarisation with the Nursery's child protection and safeguarding policy, staff behaviour policy (code of conduct).

All staff are required to sign to confirm they have received a copy of the child protection and safeguarding policy and staff behaviour policy (code of conduct).

The Nursery obtains written confirmation from supply agencies and third-party organisations that they have satisfactorily undertaken all appropriate checks in respect of individuals they provide to work in the Nursery that the Nursery would have undertaken if they were employing the individual directly; and that those individuals are suitable to work with children.

The Nursery maintains a Single Central Record (SCR) of recruitment checks undertaken and ensures that the record is maintained in accordance with Part 3 of *KCSiE 2023* and guidance issued by the Local Authority.





Ongoing suitability of staff is monitored through:

- regular supervisions
- peer observations
- annual declaration of staff suitability
- safeguarding competencies
- regular review of DBS using the online update service.

### **Staffing and volunteering**

We will obtain enhanced criminal records checks (DBS) for volunteers in the setting. Volunteers and visitors will never have unsupervised access to children.

All staff will attend child protection training and receive initial basic child protection training during their induction period. This will include the procedures for spotting signs and behaviours of abuse and abusers/potential abusers, recording and reporting concerns and creating a safe and secure environment for the children in the nursery. During induction staff will be given contact details for the local authority children's social care team's, the local safeguarding children partnership and Ofsted to enable them to report any safeguarding concerns, independently, if they feel it necessary to do so.



## Reporting Procedures

**Any child in any family in any setting could become a victim of abuse. Staff should always maintain an attitude of: “It could happen here.”**

Key points for staff to remember when taking action are:

- in an emergency take the action necessary to help the child, for example, call 999;
- report your concern to the DSL as quickly as possible – immediately when there is evidence of physical or sexual abuse and certainly by the end of the day;
- 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, using a Green Form and
- seek support for yourself if you are distressed or need to debrief.

All staff have a responsibility to report safeguarding/child protection concerns and suspicions of abuse. The format for all staff to record any safeguarding or child protection observations or concerns about a child is the pro forma *Logging A Concern About A Child's Safety and Welfare* (Form C) also known as the '**Green form**'. The same format will be used by staff to record and report any observations or concerns that suggest a child might benefit from early help.

The records will include, in addition to the name, address and age of the child, timed and dated observations describing the child's behaviour, appearance, statements/remarks made to staff or other children and observations of interactions between the child, other children, members of staff and/or parents/carers that give rise to concern. Where possible and without interpretation, the exact words spoken by the child or parent/carer will be recorded. The contextual location should also be recorded. Records will be signed, dated and timed by the member of staff making the record. All Green Forms are to be passed to the DSL, who should complete the form to confirm what action has been taken.

### **Recording Suspicions of Abuse and Disclosures**

Staff should make an objective record of any observation or disclosure, supported by the nursery manager or designated safeguarding lead (DSL) via the Warwickshire County Council 'Green Form'. This record should include:

- Child's name
- Date of birth
- Date and time of the observation or the disclosure, location
- Exact words spoken by the child (word for word) and non-verbal communication
- Exact position and type of any injuries or marks seen
- Exact observation of any incident including any concern was reported, with date and time; and the names of any other person present at the time
- Any discussion held with the parent(s) (where deemed appropriate).

These records should be signed by the person reporting this and the DSL, dated and kept in the child's Personnel File.

Staff involved in a safeguarding case may be asked to supply details of any information/concerns they have with regard to a child. The nursery expects all members of staff to co-operate with the Warwickshire Front Door, police, and Ofsted in any way necessary to ensure the safety of the children.

Staff must not make any comments either publicly or in private about the supposed or actual behaviour of a parent, child or member of staff.



### Responding to a spontaneous disclosure from a child

If a child starts to talk to an adult about potential abuse it is important not to promise the child complete confidentiality. This promise cannot be kept. It is vital that the child is allowed to talk openly and disclosure is not forced or words put into the child's mouth. As soon as possible after the disclosure details must be logged accurately. It is not the nursery's role to investigate, it is the role of statutory services to complete this.

If a child starts to talk openly to a member of staff about abuse they may be experiencing, then staff will:

- allow the child to speak freely;
- remain calm and not overreact – the pupil may stop talking if they feel they are upsetting their listener.
- give reassuring nods or words of comfort – 'I'm glad you told me'/'Thank you for telling me'; 'You're doing very well'; 'I believe you'; 'What happened to you is not your fault'/'This isn't your fault'; 'I'm going to do what I can to help you';
- not be afraid of silences – staff must remember how hard this must be for the pupil;
- **under no circumstances** ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the pupil's mother think about it; (**however**, it is reasonable to ask questions to clarify understanding and to support a meaningful referral if that is required, e.g., 'when did this happen', 'where did this happen?')
- at an appropriate time tell the child that in order to help them, the member of staff must pass the information on;
- not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused;
- avoid admonishing the child for not disclosing earlier. Saying things such as 'I do wish you had told me about this when it started' or 'I can't believe what I'm hearing' may be the staff member's way of being supportive but may be interpreted by the child to mean that they have done something wrong;
- tell the child what will happen next;
- let the child know that someone (either the member of staff or another named person, e.g. the DSL) will come to see them before the end of the day;
- report verbally to the DSL
- write up their conversation as soon as possible on the **record of concern form** Form C (Green form) and hand it to the DSL; and
- seek support if they feel distressed or need to debrief.

Nursery **should** carefully consider any report of sexual violence and/or sexual harassment. The DSL (or deputy) is likely to have a complete safeguarding picture and be the most appropriate person to advise on the initial response. Important considerations will include:

- the wishes of the victim in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment. Victims should be given as much control as is reasonably possible over decisions regarding how any investigation will be progressed and any support that they will be offered. This will however need to be balanced with the Nursery's duty and responsibilities to protect other children;
- the nature of the alleged incident(s), including whether a crime may have been committed and consideration of harmful sexual behaviour;
- the ages of the children involved;



- the developmental stages of the children involved;
- any power imbalance between the children. For example, is the alleged perpetrator(s) significantly older, more mature or more confident? Does the victim have a disability or learning difficulty?
- if the alleged incident is a one-off or a sustained pattern of abuse (sexual abuse can be accompanied by other forms of abuse and a sustained pattern may not just be of a sexual nature);
- that sexual violence and sexual harassment can take place within intimate personal relationships between peers;
- are there ongoing risks to the victim, other children, adult students or school or college staff; and
- other related issues and wider context, including any links to child sexual exploitation and child criminal exploitation

### **Record Keeping**

The nursery keeps appropriate records to support the early identification of children and families that would benefit from support. Factual records are maintained in a chronological order with parental discussions. Any conversations with parents are recorded on a 'Record of Conversation Form' found in the Room Files. Deputy Managers ensure that these forms are reviewed and transferred into Child Personnel Files. All records are reviewed regularly by the DSL to look holistically at identifying children's needs.

The Nursery will maintain safeguarding (including early help) and child protection records in accordance with the guidance document *Child Protection Record Keeping Guidance*.

Child protection records form a part of a child's pupil record, which parents ordinarily have a right to see. Any pupil or parent wishing to access the pupil's child protection records will need to submit a request for consideration. Access to the record will then be arranged but records may be redacted in line with the requirements of the General Data Protection Regulation (GDPR) if releasing information would place the child, or any other person, at risk of significant harm. The Data Protection Act 2018 and GDPR do not prevent school staff from sharing information with relevant agencies without the consent of parents, where that information may help to protect a child.

The Nursery will:

- Keep clear detailed written records of concerns about children (Green Forms), even where there is no need to refer the matter to Children's Social Care;
- keep records in a meticulous chronological order;
- ensure all records are kept secure and in locked locations;
- ensure all safeguarding records are transferred - separately from the child's main personnel file to the receiving school or setting when a child moves. The DSL will do this as soon as possible, ensuring secure transit, and will ensure that confirmation of receipt of the records is obtained;
- the DSL will also consider whether it is appropriate to share any information with a child's receiving school/setting in advance of the child leaving so that the receiving school/setting is able to support the child as effectively as possible and plan for her/his arrival;
- ensure that incoming safeguarding records are brought to the attention of the DSL, Deputy DSLs and other key staff such as the SENCO when a child transfers in from another setting.
- Safeguarding and child protection case records will be maintained independently from the child's personnel file and the file will be 'tagged' to indicate that separate information is held. Such records



will only be accessible to the DSL and those that need to be aware.

### **Notifying parents**

The Nursery will normally seek to discuss any concerns about a pupil with their parents. This **must** be handled **sensitively**, and the DSL will make contact with the parent in the event of a concern, suspicion or disclosure. Our focus is the safety and wellbeing of the child. Therefore, if we believe that notifying parents could increase the risk to the child or exacerbate the problem, advice will be sought first from Children and Families Front Door.

### **Confidentiality**

All suspicions, enquiries and external investigations are kept confidential and shared only with those who need to know. Any information is shared in line with guidance from the local authority. All staff, students and volunteers are bound by confidentiality and any information will not be discussed out of work, or this will become a disciplinary matter.

The Nursery has due regard to the data protection principles as in the Data Protection Act 2018 and General Data Protection Regulations (GDPR)<sup>1</sup>. These do not prohibit the collection and sharing of personal information, even without consent if this would put the child at further risk. We will follow the principles around data collection and information sharing, and ensure any information is recorded and shared in an appropriate way.

### **Support to families**

The nursery takes every step in its power to build up trusting and supportive relations among families, staff, students and volunteers within the nursery.

The nursery continues to welcome the child and the family whilst enquiries are being made in relation to abuse in the home situation. Parents and families will be treated with respect in a non-judgmental manner whilst any external investigations are carried out in the best interest of the child.

### **Allegations against a member of staff or volunteer**

If an allegation is made against a member of staff, student or volunteer or any other person who works on the nursery premises regardless of whether the allegation relates to the nursery premises or elsewhere, we will follow the procedure below.

An allegation against a member of staff/student/volunteer/supply staff or any other person may relate to a person who has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child;
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children;
- or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

The allegation should be reported to the Nursery Manager or Duty Manager using a Warwickshire Safeguarding '**Yellow Form**'. If this person is the subject of the allegation then this should be reported to the owner or alternative DSL instead.

We will inform the LADO (Local Authority Designated Officer) of any allegations and we would also inform Ofsted immediately in order for this to be investigated by the appropriate bodies promptly. This includes:

- If as an individual you feel this will not be taken seriously or are worried about the allegation getting back to the person in question then it is your duty to inform the local authority children's social care team yourself directly



- The local authority children's social care team will be informed immediately for advice and guidance
- A full investigation will be carried out by the appropriate professionals (local authority children's social care team, Ofsted) to determine how this will be handled
- The nursery will follow all instructions from the local authority children's social care team and Ofsted and ask all staff members to do the same and co-operate where required
- Support will be provided to all those involved in an allegation throughout the external investigation in line with local authority children's social care team support and advice
- The nursery reserves the right to suspend any member of staff during an investigation, Legal advice will be sought to ensure compliance with the law.
- All enquiries/external investigations/interviews will be documented and kept in a locked file for access by the relevant authorities
- Founded allegations will be passed on to the relevant organisations including the local authority children's social care team and where an offence is believed to have been committed, the police will also be informed.
- Founded allegations will be dealt with as gross misconduct in accordance with our disciplinary procedures and may result in the termination of employment, Ofsted will be notified immediately of this decision along with notifying the Disclosure and Barring Service (DBS) to ensure their records are updated.
- All safeguarding records will be kept until the person reaches normal retirement age or for 21 years and 3 months if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary reinvestigation
- The nursery retains the right to dismiss any member of staff in connection with founded allegations following an enquiry
- Unfounded allegations will result in all rights being reinstated
- A return to work plan will be put in place for any member of staff returning to work after an allegation has been deemed unfounded. Individual support will be offered to meet the needs of the individual staff member and the nature of the incident; this may include more frequent supervisions, coaching and mentoring and external support.

### **Submitting child protection referrals**

All child protection referrals should be made to the Children and Families Front Door by completing a Multi-Agency Contact (MAC) form and submitting it to the Front Door at [triagehub@warwickshire.gov.uk](mailto:triagehub@warwickshire.gov.uk)

The form can also be completed online.

All urgent child protection referrals, i.e. where there is an immediate concern about a child's safety should be made in the **first instance by telephoning the Front Door on 01926 414144**. This should be followed by submission of a MAC as above.

NB: If a child is already the subject of an open case to Children's Social Care, the DSL will have the name and contact details of the allocated social worker. Further child protection concerns about any child in those circumstances must be referred directly to the allocated social worker, **not** to the Front Door again

Where there is a concern about a child, the DSL **should** contact the social worker by telephone in the first instance. Any difficulties in contacting the social worker must be escalated to their line manager, **not** to the Front Door

Outside of office hours, immediate concerns about a child should be referred to the Emergency Duty Team on telephone number 01926 886922.

If staff are ever concerned that a child is in immediate danger, they will contact the Police by dialling 999.

Staff may seek support directly from the Front Door Education Lead via 01926 418608 should they consider that necessary.



## **Staff reporting directly to child protection agencies**

Staff **should** ordinarily follow the reporting procedures outlined in this policy.

However, as highlighted above, **all staff should** be aware of the early help process and understand their role in it; and **all staff should** be aware of the process for making referrals to Children's Social Care and for statutory assessments under the Children Act 1989. **Any member of staff may therefore refer their concerns directly to Children's Social Care and/or the Police if:**

- the situation is an emergency and the DSL, the deputy DSL are all unavailable;
- they are convinced that a direct report is the only way to ensure the child's safety; or
- for any other reason they make a judgement that a direct referral is in the best interests of the child.

In any of those circumstances, staff may make direct child protection referrals and share information without being subject of censure or disciplinary action. However, staff **should** inform the DSL at the earliest opportunity that they have made a direct referral unless in their judgement doing so would increase the risk of harm to the child.

If in any doubt, members of staff may consult or seek support from the Front Door and / or Education Lead via 01926 418608

## **What will Children's Social Care do?**

Children's Social Care should make a decision about the type of response that is required within one working day of a referral being made; and should let the referrer know the outcome. This will include determining whether:

- the child requires immediate protection and urgent action is required;
- whether the child is in need, and should be assessed under section 17;
- there is reasonable cause to suspect the child is suffering, or likely to suffer, significant harm, and whether enquiries must be made and the child assessed under section 47; (Chapter one of Working Together to Safeguard Children provides details of the assessment process
- any services are required by the child and family and what type of services; and
- further specialist assessments are required in order to help the local authority to decide what further action to take.

The Nursery will follow up if this information is not forthcoming and if, after a referral, the child's situation does not appear to be improving, the school will consider following the Warwickshire Safeguarding escalation protocol to ensure the referred concerns have been addressed and, most importantly, that the child's situation improves.

If Children's Social Care decide to carry out a statutory assessment, school staff will do everything they can to support that assessment, led and supported by the DSL (or deputy) as required.

## **Early help services**

When a child and/or family would benefit from support but do not meet the threshold for Local Authority Social Care Team, a discussion will take place with the family around Early Help services.





Early help provides support as soon as a concern/area of need emerges, helping to improve outcomes and prevent escalation onto local authority services. Sometimes concerns about a child may not be of a safeguarding nature and relate more to their individual family circumstances. The nursery will work in partnership with parents/carers to identify any Early Help services that would benefit your child or your individual circumstances, with your consent, this may include family support, foodbank support, counselling or parenting services.

Nursery staff are particularly important as they are in a position to identify concerns early, provide help for children, promote children's welfare, and prevent concerns from escalating.

The Nursery recognises that providing timely early help is more effective in promoting the welfare of children than reacting later. DSLs are accountable and responsible for ensuring the identified needs of children are acted upon early; without delay and as soon as the problem emerges which may be at any point in a child's life.

*Keeping Children Safe in Education 2023* emphasises that **all** staff should be aware of the early help process and understand their role in it. All DSLs should be trained in the Warwickshire Early Help Processes. All school/college staff are therefore trained and required to notice any concerns about children which may help to identify those that would benefit from early help.

Nursery should record concerns using their safeguarding recording systems.

Early help might be simple pastoral support and something the Nursery is able to address with parents so that the child's needs are met quickly and easily. The Nursery will keep a record of any such help to record clear targets, actions for all parties including parents and progress, using Pathway to Change documentation as appropriate. Early help paperwork is available for settings to use in order to support families prior to the requirement of formalised early help being initiated. Warwickshire's Spectrum of Support document will enable practitioners to understand the level of needs presented by families and what support may be required. The document can be found [here](#).

It will be necessary to take time to understand a child and family's needs and to fully appreciate their circumstances in a more structured way. Children and families may also need support from a range of local agencies beyond Nursery, where it has been identified that a multi-agency coordinated response would best meet their needs and support their family, with parental consent.

- The Early Help Pathway to Change is a restorative approach which helps to identify what support the family require by working WITH them, through the use of a coordinated assessment. The Early Help Pathway to Change aims to prevent the child's needs escalating to a point where intervention would be required via a statutory assessment under the Children Act 1989. Practitioners should seek to reassure Children and Families that this approach is designed to prevent needs from escalating and should be looked on as a positive and proactive way of addressing needs early in partnership with the family.

The Nursery is committed to working in partnership with children, parents and other agencies to:

- identify situations in which children and/or their families would benefit from early help;
- act without delay by signposting to the Family Support Line or Family Information Service for earlier identified needs;
- undertake an assessment of the need for early help when that is appropriate, using the Pathway to Change process; and
- provide targeted early help services to address the assessed needs of a child and their family, developing an action plan that will focus on activity to improve the child's outcomes.



The Nursery will be alert that any child may benefit from early help, but all staff should be particularly alert to the potential need for early help for a child who:

- is disabled or has certain health conditions and has specific additional needs
- has special educational needs (whether or not they have a statutory Education, Health and Care Plan)
- has a mental health need
- is a young carer
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines
- is frequently missing/goes missing from care or from home
- is at risk of modern slavery, trafficking, sexual or criminal exploitation
- is at risk of being radicalised or exploited
- has a family member in prison, or is affected by parental offending
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- is misusing alcohol and other drugs themselves
- has returned home to their family from care
- is at risk of 'honour'- based abuse such as Female Genital Mutilation or Forced Marriage
- is a privately fostered child, and

The Early Help process can only be effective if it is undertaken with the agreement of the child's parents/carers. The Early Help Pathway to Change process must involve the child and family as well as all the practitioners who are working with them.

The Nursery will keep the needs and circumstances of children receiving early help under constant review. If the child's situation does not improve and/or the child's parents and/or the child do not consent to early help, the Nursery will make a judgement about whether, without help, the needs of the child will escalate. If so, the Nursery may wish to consult with:

- Targeted Support Officers
- Early Help Social Worker
- Front Door Education Lead
- Early Help Team Leaders
- Children and Families Front Door

Consultations are available in the Children and Families Front Door for practitioners seeking advice about children they are concerned about. If you have a concern that a child or young person may be in need of protection or significant harm the DSL should contact the Front Door and submit a referral.



Our nursery has a clear commitment to protecting children and promoting welfare. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of the Nursery Manager at the earliest opportunity.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
<i>October 2023</i>	Kate McLeod	<i>October 2024</i>