

Safeguarding and Child Protection Policy



Introduction

At Clopton Nursery Trust we take all reasonable steps to keep children safe and well and ensure the suitability of adults who have contact with them. The Safeguarding Lead is responsible for the care of children and their families and will listen and keep private any issues or concerns that parents may wish to discuss. However, they have to inform the appropriate agencies if concerned about the care or welfare of a child in their care.

The setting will maintain a safe and secure environment, promote good health, manage behaviour, maintain records and adhere to the settings policies and procedures. The settings child protection procedures apply to all persons at the premises. The Safeguarding Lead and all staff have a legal duty to report any concerns regarding a child's health and /or development, concerns regarding child abuse or neglect or any suspicious incidents as well as accidents to the Safeguarding Children Board.

All staff will be alert to any issues for concern in the child's life at home, whilst attending the setting or elsewhere. All action will be taken in line with the following local and national legislation/guidance:

- The Safeguarding Children Board Procedures and the current ISA Registration Process.
- The Statutory Framework for the Early Years Foundation Stage – Safeguarding and Welfare Requirements 2014
- The Children Act 1989, 2004 and 2006
- “Working Together to Safeguard Children” 2015
- “What to Do If You're Worried a Child is Being Abused” 2015
- Local Safeguarding Children Board guidance.

Definitions of Child Abuse

Abuse and Neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused or neglected in a family or in an institutional or community setting by those known to them or more rarely by others (e.g. via the internet). They may be abused by an adult or adults or by another child or children. For the purpose of this policy the child abuse definitions from the, *‘Working Together to Safeguard Children – Department of Education (2014)* have been used.

Physical abuse: Physical abuse is actual or physical injury to a child or when a person fabricates, or induces, the symptoms of an illness in a child. Physical abuse can involve, hitting or using excessive force, shaking, throwing, poisoning, burning, drowning, slapping or suffocating. A higher risk of suffering from this type of abuse is found in babies and disabled children.

Sexual abuse: Sexual abuse is when a child is forced or enticed to take part in any form of sexual activity. It does not necessarily involve violence and the child may or may not be aware of what is happening to them.

Sexual abuse can occur at the hands of adult men, women and other children and includes:

- Non-contact abuse; (grooming); a child either personally or through the internet with the intention of sexually abusing them
- All forms of penetrative and non-penetrative sex.
- Sexually exploiting a child in return for gifts; money or affection.
- Making, looking at and distributing indecent images of a child. Neglect: Neglect is when there is persistent failure to meet a child's basic physical and/or psychological needs resulting in serious impairment to their health and development. Neglect may involve a failure to:
 - Provide a child with adequate nutrition, appropriate clothing and a clean, safe place to live
 - Protect a child from physical or emotional harm or danger
 - Ensure a child is adequately supervised
 - Ensure a child has access to appropriate medical care or treatment.
 - Be responsive to or unable to support /provide the basic emotional needs of the child

Female Genital Mutilation – All settings must be training on this. Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and a criminal offence. Regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under 18s to the police (Home Office, 2016).

If you are worried about anyone with regards to this, please call the helpline on 0800 028 3550.

Reporting Requirements for FGM:

Regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under 18s to the police (Home Office, 2016).

If you think a child is in immediate danger please call the police on 999 straight away.

Sexual Exploitation: Child sexual exploitation is a form of child sexual abuse. Sexual abuse may involve physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet).

The definition of child sexual exploitation (Ofsted’s Guidance 2017) is as follows: Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 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. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Neglect: Neglect can occur when a parent is no longer capable, (physically or mentally), of caring for their child or when substance misuse occurs in pregnancy.

Emotional abuse: Emotional abuse is described as either active or passive. Active emotional abuse involves a parent / primary carer/ other person deliberately trying to scare, humiliate or verbally abuse a child. Passive emotional abuse is when a parent / primary carer /other person fail’s to provide a child with the love and care they need in order to be healthy and happy.

Emotional abuse that occurs persistently and over time severely impacts a child’s emotional development. A person may;

- Be unable / unavailable to give a child appropriate love and care
- Fail to offer praise and encouragement
- Fail to interact with a child in an age appropriate way
 - Be over protective, limiting their opportunities to explore, learn and make friends
 - Expect a child to meet the person’s own emotional needs
 - Fail to give a child the opportunity to express their views
 - Isolate, silence or corrupt a child
- Have a general negative attitude toward a child
 - Bully a child (including cyber-bullying) Although emotional abuse can occur singularly it can also be used at some level in all types of abuse.

Table indicating some of the signs/symptoms of abuse for each category

Category of Abuse	Common Signs/Symptoms Physical
Physical	<ul style="list-style-type: none"> • Children with frequent injuries • Children with bruises, cuts, scalds or bite marks that cannot be explained <ul style="list-style-type: none"> • Injuries (that are not accidental) to soft tissue areas that would not usually occur from accidentally falling over, such as – bruising to the backs of knees, eye sockets, wrists, upper buttocks and combinations of new and older bruises • Broken bones or fractures that cannot be explained e.g. spiral fractures of the lower legs and upper arms. These types of injuries may indicate abuse as they suggest that the limb has been twisted

	<p>with force as opposed to the type of fracture expected from accidentally falling over</p> <ul style="list-style-type: none"> • Behaviour which is unusual, such as frozen awareness, seen as fixed staring, arching of the back and hand DSI
Sexual	<ul style="list-style-type: none"> • Frequent or unusual instances of bed wetting or soiling of clothes • Frequent kidney and urinary infections • Sexually transmitted infections • Thrush, soreness in the genital and anal areas – these may be noticed when changing nappies or assisting a child with going to the toilet • Fear of physical contact with a particular person • Being over friendly with strangers • The inappropriate use of sexual language or unexpected knowledge for the age of the child • Changes in moods and personality that are not usual for the child <ul style="list-style-type: none"> • Regression in common areas, e.g. toilet training, sleeping, eating and speech. These may be a sign of sexual abuse but these can also happen during normal child development • Asking others to engage in sexual games or play • Low self-esteem/lack of confidence • Lying • Stealing
Emotional	<ul style="list-style-type: none"> • Reduced growth in height • Sudden speech problems/disorders • Lack of confidence • Neurotic behaviours, e.g. self-harm, rocking, thumb sucking • Behavioural and emotional issues, such as anger problems, immaturity, passivity.
Neglect	<ul style="list-style-type: none"> • Immunisations not up to date • Significantly underweight although when observed eats well • Untreated and frequent nappy rash • Lots of accidental injuries – explanations given may indicate a lack of supervision • Disassociation – frozen awareness • Frequently tired due to lack of routine • Lack of parental support and interest in behaviour of child • Poor attendance and often late • Under weight and height by 2+ percentiles (Taylor and Daniel. 2005) • Emaciated • Often appears to be hungry – possible signs of malnourishment e.g. hair falling out.
FGM	<ul style="list-style-type: none"> • Have difficulty walking, standing or sitting • Spend longer in the bathroom or toilet

	<ul style="list-style-type: none"> • Appear withdrawn, anxious or depressed • Have unusual behaviour after an absence from school • Be reluctant to undergo normal medical examinations • Ask for help but embarrassed about the problem • A family arranging a long break abroad • Unexpected, repeated or prolonged absence from school • Academic work suffering
Sexual Exploitation	<ul style="list-style-type: none"> • Acquisition of money, clothes, mobile phones etc without plausible explanation; • Gang-association and/or isolation from peers/social networks; • Exclusion or unexplained absences from school, college or work; • Leaving home/care without explanation and persistently going missing or returning late; • Excessive receipt of texts/phone calls; • Returning home under the influence of drugs/alcohol; • Inappropriate sexualised behaviour for age/sexually transmitted infections; • Evidence of/suspicious of physical or sexual assault; • Relationships with controlling or significantly older individuals or groups; • Multiple callers (unknown adults or peers); • Frequenting areas known for sex work; • Concerning use of internet or other social media; • Increasing secretiveness around behaviours; and • Self-harm or significant changes in emotional well-being.

<https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2>

Other forms of abuse that we are trained to spot are; Domestic abuse, private fostering, fabricated illness, gender-based violence, faith-based abuse, child trafficking, slavery, gang violence, forced marriage, ritual abuse, honour-based violence, hate crimes, breast ironing and sexting.

County Lines

Any child can be exploited, no matter their background. Criminal exploitation is also known as '**county lines**' and is when gangs and organised crime networks groom and exploit children to sell drugs. Often these children are made to travel across **counties**, and they use dedicated mobile phone '**lines**' to supply drugs.

Criminals are deliberately targeting vulnerable children – those who are homeless, experiencing learning difficulties, going through family breakdowns, struggling at school, living in care homes or trapped in poverty.

These criminals groom children into trafficking their drugs for them with promises of money, friendship and status. Once they've been drawn in, these children are controlled using threats, violence and sexual abuse, leaving them traumatised and living in fear.

However, they become trapped in criminal exploitation, the young people involved feel as if they have no choice but to continue doing what the criminals want.

Signs:

- Returning home late, staying out all night or going missing
- Being found in areas away from home
- Increasing drug use, or being found to have large amounts of drugs on them
- Being secretive about who they are talking to and where they are going
- Unexplained absences from school, college, training or work
- Unexplained money, phone(s), clothes or jewellery
- Increasingly disruptive or aggressive behaviour
- Using sexual, drug-related or violent language you wouldn't expect them to know
- Coming home with injuries or looking particularly dishevelled
- Having hotel cards or keys to unknown places.

If you think a young person you know could be in danger call 999, or if you have non-urgent information to share with the police, contact Crimestoppers on 0800 555 111.

If you are concerned about a child's welfare, [contact your local social care department](#). We also have [a guide for parents](#) who may be concerned about their child.

Breast Ironing

Breast Ironing is practiced in some African countries, notably Cameroon. Girls aged between 9 and 15 have hot pestles, stones or other implements rubbed on their developing breast to stop them growing further. In the vast majority of cases breast ironing is carried out by mothers or grandmothers and the men in the family are unaware. Estimates range between 25% and 50% of girls in Cameroon are affected by breast ironing, affecting up to 3.8 million women across Africa.

Why does breast ironing happen?

The practice of breast ironing is seen as a protection to girls by making them seem 'child-like' for longer and reduce the likelihood of pregnancy. Once girls' breasts have developed, they are at risk of sexual harassment, rape, forced marriage and kidnapping; consequently,

breast ironing is more prevalent in cities. Cameroon has one of the highest rates of literacy in Africa and ensuring that girls remain in education is seen as an important outcome of breast ironing.

Breast ironing is physical abuse

Breast ironing is a form of physical abuse that has been condemned by the United Nations and identified as Gender-based Violence. Although, countries where breast ironing is prevalent have ratified the African Charter on Human Rights to prevent harmful traditional practices, it is not against the law.

Breast ironing does not stop the breasts from growing, but development can be slowed down. Damage caused by the 'ironing' can leave women with malformed breasts, difficulty breastfeeding or producing milk, severe chest pains, infections and abscesses. In some cases, it may be related to the onset of breast cancer.

Breast Ironing in the UK

Concerns have been raised that breast ironing is also to be found amongst African communities in the UK, with as many as a 1,000 girls at risk. Keeping Children Safe in Education (2016) mentions breast ironing on page 54, as part of the section on so-called 'Honour Violence'. Staff worried about the risk of breast ironing should speak to the Designated Safeguarding Lead as soon as possible who can speak with social services.

Upskirting

"Upskirting" became a specific criminal offence under the Voyeurism (Offences) Act 2019 on 12 April this year. It typically involves taking a photograph under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks for sexual gratification or causing humiliation, distress or alarm. The revised version of Keeping Children Safe in Education lists upskirting as one example of peer on peer abuse of which school staff should be aware.

Upskirting is now a form of peer-on-peer abuse

It's a criminal offence and is now listed in paragraph 27.

Definition: upskirting is typically when a photograph is taken under a person's clothing without them knowing, for sexual gratification or to cause the victim humiliation, distress or alarm.

New information on serious violent crime

Indicators that may signal that children are at risk from, or are involved with, serious violent crime. Including:

- Unexplained gifts/new possessions – these can indicate children have been approached by/involved with individuals associated with criminal networks/gangs
- Increased absence from school
- Change in friendship/relationships with others/groups
- Significant decline in performance

- Signs of self-harm/significant change in wellbeing
- Signs of assault/unexplained injuries

Staff should also be aware of the associated risks and understand the measures in place to manage them.

THE PREVENT DUTY From 1 July 2015 all childcare settings must comply with The Prevent of Duty to help protect children from extremism. We have responsibility to protect children under section 26 of the Counter-Terrorism and Security Act 2015.

The new common inspection framework makes reference to providers promoting children's welfare and preventing radicalisation and extremism. The government has defined extremism in the Prevent Strategy as: "vocal or active opposition to fundamental British Values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs."

Indicators that may suggest a child's vulnerability to **violent extremism** include:

- Expressed opinions supporting violence, terrorism or the values of extremist organisations
- Possession of extremist literature including that on weapons, explosives or military training, attempts to access extremist websites/ chatrooms,
- Behaviour or behavioural changes – such as withdrawal from family life and peers, hostility towards family and peers, association with organisations that hold extremist views
- Personal history- claims or evidence of involvement in organisations voicing violent extremist ideology or attendance of military/ terrorist training

The purpose of the PREVENT Strategy is:

- To stop people becoming terrorists or supporting violent extremism in all its forms.
- To safeguard children and adults and provide early intervention to protect and divert people away from being drawn into extremism or terrorist activity.
- To provide people with appropriate advice and support.

The setting will:

- Understand own role and responsibilities on how to protect children from extremism by promoting inclusion and Fundamental British Values in the setting.
- Be alert to any reason for concern in the child's life at home or elsewhere that they are being exposed to extremism.
- Understand how to identify children at risk and when to take action after identifying a child at risk e.g. a change in children's behaviour or unexplained/ irregular attendance at the setting.

To undertake training that provides them with the knowledge to identify children at risk.

- Be responsible for observing and recording children's attendance in the setting with an Attendance book

- Be vigilant and inform the necessary agencies if they suspect a child/ children are being exposed to extremism. For advice or reporting of concerns- Customer First: 0800 800 4005,101
- Promote and embed inclusion and Fundamental British Values within the setting as a toolkit for anti-radicalisation.
- Implement the EYFS so that children are taught a broad and balanced curriculum to ensure they 'understand the world' and learn about 'similarities and differences between themselves and others, and among families, communities and traditions'
(www.foundationyears.org.uk/2015/03/fundamental-british-values-in-the-earlyyears/)

The Safeguarding Lead will attend regular and relevant training to enable them to fulfil this role and all staff working at the setting will receive child protection training which will enable them to identify and respond appropriately to signs of possible abuse and neglect at the earliest opportunity. Everyone has the right to make a referral to Children's Services if they are worried about a child. The Safeguarding Lead advises parents of this and about safeguarding responsibilities at the setting in the welcome pack given to them during their child's settling in period.

The staff working at the setting and all adults residing at the premises will hold an up to date Disclosure and Barring Service certificate and be signed up to the update service. The staff working at the setting will hold a current paediatric first aid certificate which will be renewed every three years.

Reporting Procedures: Listen – Record – Report – Follow up

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.

- All staff have a responsibility to report safeguarding concerns and suspicions of abuse.
- Staff will record their concerns on a cause for concern form (green form) and give it to a DSL, (in the absence of the DSL they will be reported to the Deputy DSL)
- Any signs of marks/injuries to a child or information a child has given will be recorded and stored securely with the green form.
- If appropriate, the incident will be discussed with the parent/carer.
- If no action is required after speaking to the parents the form will be filed and kept securely.
- If there are queries/concerns regarding the injury/information given then the DSL will:
 - ✓ Make a referral to the Children and Families Front Door) by completing a Multi-Agency Contact Form (MAC) and submitting it via email to TriageHub@Warwickshire.gov.uk
 - ✓ Record the information and action taken relating to the concern raised
 - ✓ Speak to the parents (unless advised not to do so by LA children's social care team or the Front Door)
 - ✓ The DSL will follow up with the Local Authority children's social care team if they have not contacted the setting. We will never assume that action has been taken.

•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 an immediate concern about a child's safety, 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.

Decision making (all categories of abuse)

- The designated person makes a professional judgement about referring to other agencies, including Social Care using the WSCB Spectrum of Support document.
 - Level 1: Child's needs are being met. Universal support.
 - Level 2: Universal Plus. Additional professional support is needed to meet child's needs.
 - Level 3: Universal Partnership Plus. Targeted Early Help. Coordinated response needed to address multiple or complex problems.
 - Level 4: Specialist/Statutory intervention required. Children in acute need, likely to be experiencing, or at risk of experiencing significant harm.
- Staff are alert to indicators that a family may benefit from early help services and should discuss this with the designated person.

Informing parents when making a child protection referral

In most circumstances consent will not be required to make a child protection referral, because even if consent is refused, there is still a professional duty to act upon concerns and make a referral. When a child protection referral has been made, the designated person contacts the parents (only if agreed with social care) to inform them that a referral has been made, indicating the concerns that have been raised, unless social care advises that the

parent should not be contacted until such time as their investigation, or the police investigation, is concluded. Parents are not informed prior to making a referral if:

- there is a possibility that a child may be put at risk of harm by discussion with a parent/carer, or if a serious offence may have been committed, as it is important that any potential police investigation is not jeopardised
- there are potential concerns about sexual abuse, fabricated illness, FGM or forced marriage
- contacting the parent puts another person at risk; situations where one parent may be at risk of harm, e.g. domestic abuse; situations where it has not been possible to contact parents to seek their consent may cause delay to the referral being made

The designated person makes a professional judgment regarding whether consent (from a parent) should be sought before making a child protection referral as described above. They record their decision about informing or not informing parents along with an explanation for this decision. Advice will be sought from the appropriate children's social work team if there is any doubt.

Further recording

- Discussion with parents and any further discussion with social care is recorded. If recording a conversation with parents that is significant, regarding the incident or a related issue, parents are asked to sign and date it a record of the conversation. It should be clearly recorded what action was taken, what the outcome was and any follow-up.
- If a referral was made, copies of all documents are kept and stored securely and confidentially (including copies in the child's safeguarding file).
- Each member of staff/volunteer who has witnessed an incident or disclosure should also make a written statement on a cause for concern form (green form).
- The referral is recorded on MASH referral form.
- Follow up phone calls to or from social care are recorded in the child's file; with date, time, the name of the social care worker and what was said.
- Safeguarding records are kept up to date and made available for confidential access by the designated person to allow continuity of support during closures or holiday periods.

Professional disagreement/escalation process

- If a practitioner disagrees with a decision made by the designated person not to make a referral to social care they must initially discuss and try to resolve it with them.
- If the disagreement cannot be resolved with the designated person and the practitioner continues to feel a safeguarding referral is required, then they discuss this with the designated safeguarding trustee.
- If issues cannot be resolved the whistle-blowing policy should be used, as set out below.
- Supervision sessions are also used to discuss concerns, but this must not delay making safeguarding referrals.

Child protection records:

- Child protection records must be held separately from a child's personal file.

The DSL will ensure that the records are kept securely in the office and that any sharing of information held in these records is with the consent of parents if appropriate.

- Written records of concerns about children will be kept, even where there is no need to make a referral immediately.
 - A chronology should be kept at the front of each individual child protection file.
 - The record should be regularly reviewed and updated whenever a new concern is raised or additional relevant information becomes available, noting any action taken.
- Transfer and retention of child protection records:
- Where a child transfers to school or to a new setting, copies of child protection documentation must be passed within 14 days, in confidence to the receiving school/setting and that they are sent separately from any personal file information.
 - The DSL must ensure that the documents are received by the new setting/schools DSL.
 - The DSL should arrange a meeting at the new school / setting to hand over the documentation to the receiving DSL.
 - In the event that it is not possible to meet in person the documents should be securely sent to the new DSL and telephone contact made to complete the hand over, (and having confirmed the identity of the person receiving the telephone call).
 - Records will be retained in line with the Local Authorities guidance on the Transfer and Retention of Child Protection Records.

Whistle Blowing:

If anyone at the setting has any concern about a child's safety in the setting or a situation, they feel should be reported they are legally obliged to do this. They MUST call the relevant authorities, Ofsted, LA, Police without delay. Keep written records of procedures followed.

This may mean the setting is reinspected or investigated by the LASB (Local Authority Safeguarding Board).

Reporting an allegation against us.

Allegations about professionals refers to allegations that a person in the course of their work, (including volunteering), with children has behaved in a way that has harmed or may have harmed a child. All such allegations should be referred to the Local Authority Designated Officer, (LADO) without delay.

What is a LADO?

The LADO gives advice and guidance to employers and others who are concerned about an adult who works with children including volunteers and agency staff.

Allegations need to be referred to the team within 24 hours of the allegation being made. No investigation should take place until the LADO has been contacted. An allegation may relate to a person who works with children 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 they may pose a risk of harm to children

Your Local Authority Designated Officer (LADO) is there to support you and us in the event of any safeguarding issue.

01926 745376 lado@warwickshire.gcsx.gov.uk

Procedure during the investigation:

- The DSL will meet with parents to explain the situation and action taken by the setting and undertake to keep parents informed of any factors affecting the agreed childcare arrangements of children attending the setting.
- The DSL will act upon any advice or instruction given by relevant agencies to ensure that any investigation is not jeopardised.
- The DSL will work closely with other agencies in implementing the actions of a child protection plan designed to support and protect the child.
- The DSL may temporarily close the setting whilst an investigation is ongoing in the event that the practitioner at the setting is the subject of the and the adult: child ratios of the setting cannot be met.
 - Ensure that Ofsted are advised of the action taken in respect of the allegation as soon as is practicable and at the latest within 14 days of the allegation being made. And ensure that any action requested by Ofsted is taken in order to comply with the requirements of the registration of the setting.
- The DSL will keep a record of any decisions made and the reasons for making them.

After the investigation is completed:

- Review, amend and implement any appropriate changes to the settings policies and risk assessments if issues are identified during the investigation of the allegation, to ensure that the policies and risk assessments are fit for purpose.
- Ensure that the parents of the children attending the setting are advised of any revisions to working practice that affects their agreed childcare arrangements.
- DSL will review their training needs and will undertake training where a need is identified.
- The DSL has a statutory duty to inform OFSTED and the Local Authority, (if they are not already involved), if they cease work due to a child protection issue.
- The DSL has a statutory duty to inform OFSTED and the Local Authority, (if they are not already involved), if at the end of the investigation a volunteer is removed from the setting or where an adult resident at the premises is being investigated for allegedly causing harm or posing a risk of harm to children at the setting.

Disqualification and disqualification by Association

Everyone in the setting over the age of 16 has a DBS check and these are updated annually via the update service.

We ask staff *** to tell us if they think anything could have changed for themselves or anyone they are associated with.

We are entitled to suspend anyone for not following these procedures.

For more information please see

<https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006>

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Absence Policy:

All parents and carers should report absences to us as soon as possible before the child is due to attend. You can do this by calling 01789269360.

If a child has not turned up and we have not been informed of an absence, we will contact the parents/carers as soon as possible, usually within 15 minutes of registration. If we do not get any reply within 1 hour we will contact the other emergency contacts.

Existing Injuries

If children arrive at the setting with an injury it must be reported to us by whoever is bringing the child in so that we can make a record on Family on the Incident noticed on arrival form.

Peer on peer abuse

If we are concerned that a child is being abused or coerced into doing something they don't want to do by another child for example; smoking, drinking alcohol, taking drugs, being exposed to radicalisation or extremism, online pornography, over 18 video games and films etc. then we shall report to social services.

Discrimination and anti-discriminatory practise

We record any discriminatory incidents including racist comments made by children or parents.

Personal Care routine

Please be aware that we may help children with eating, drinking or toileting, washing and dressing because of age, disability or illness. Where possible we encourage children to be independent as early as possible and would like this to be supported at home.

Admission Information

Parents are asked to provide the following specific information when their child starts attending our setting, which is recorded on our Registration Form and the child's Family profile:

- Parents' Home address and telephone/ mobile number - if the parents do not have a telephone, an alternative number must be given, perhaps a neighbour or close relative.
- Parents' Place of work, address and telephone number (if applicable).
- Who has parental responsibility for the child.
- Names and telephone numbers of adults who are authorised by the parents to collect their child from the setting, for example a family friend or relative.
- Information about any person who does not have legal access to the child.

Authorised collectors

Each child must have at least two authorised collectors, details of which will be outlined on the child's registration form and on the child's Family account. Parents are requested to preferably first introduce authorised collectors to staff or give a detailed description/photograph along with a password for the collector to identify themselves.

A child will not be handed over to a different person unless the parent has given permission for this to happen (or, in an emergency, if the parent rings the nursery and speaks to the manager or person in charge).

If, for any reason, permission has not been obtained and a family member or friend comes to collect a child, contact must be made with the parent/guardian before the child is allowed to leave.

Suitable People

If staff feel that the parent/carer collecting a child may be under the influence of either alcohol or drugs and the safety and well-being of the child may be compromised, the staff must inform the duty manager who will assess the situation. If it is felt that the parent/carer appears unable to take responsibility for the child, they will take appropriate action. This may include contacting another person on the emergency contact list/member of the family. If another designated person is not available, then social care or the police will be contacted.

Relationship breakdown of parents / guardians

We have a clearly defined procedure, which is followed in the event of the relationship between a child's parents or guardians breaking down:

- Unless there is a court order, of which we must have a copy, preventing one parent's contact to the child we are unable to legally deny access.
- Should a 'parent of concern' or an estranged parent ask to access their child, we will contact the first parent to come to the setting as soon as possible, explaining this procedure and asking the second parent to wait.
- If there is concern about violent or aggressive behaviour from either parent we will seek advice from the police and follow their recommendations.

Notifying the setting

- On occasions when parents are aware that they will not be at home or in their usual place of work, they inform us of how they can be contacted.
- On occasions when parents, or the persons normally authorised to collect the child, are not able to collect the child, they provide us with the name of the person who will be collecting their child. We agree with parents how to verify the identity of the person who is to collect their child, (photo/verbal description of the person and a password).
- Parents are informed that if they are not able to collect the child as planned or will be late, they must inform us. Our contact telephone number is 01789269360.

Failure to collect a child

In the event of a parent / carer failing to collect a child the procedure set out below will be followed:

- All contact numbers for parents/carers are repeatedly contacted and messages left.
- The child stays at the setting in the care of two of our fully vetted workers, one of whom will be our manager or deputy manager until the child is safely collected either by the parents or by a social care worker.
- Under no circumstances will we go to look for the parent, nor leave the setting premises with the child.
- We ensure that the child is not anxious and we do not discuss our concerns in front of them.
- If parents/carers are one hour late in collecting their child and the Nursery Manager has been unable to reach parents/carers and emergency contact, it will be assumed that an emergency has arisen. In this event Social Care and/or the police will be notified of a non-collection and the matter will be handed over to their care:
01926 413629 or 01926413628

Or the out of hours duty officer (where applicable):

01926 886922.

- We will make every attempt to call you with any numbers you have provided before calling social services.
- If the children's social care team is unavailable or as our local authority advise we will contact the local police.
- On no account must a child be taken by a person not known by the setting.

Missing Child:

A missing child is described as:

- One whose whereabouts cannot be established and where the circumstances are out of character or context An absent child is described as:
- One who is not at a place where they are expected to be but there is no apparent risk.

Absent children should be monitored over periods of time with consideration given to a child being described as missing if there is a change in circumstances where the level of risk has increased.

A missing child maybe an indicator of:

- Problems at home/ family conflict
- Abuse or neglect
- Mental health problems, bullying
- Peer pressure
- Sexual exploitation/trafficking
- Female Genital Mutilation

If a child fails to attend the setting without explanation and where the parents/ emergency contacts do not contact us or cannot be contacted, we will seek advice and act on their instructions from:

- Children and Young People's Services: Customer First, 0808 800 4005
- Out of Hours Emergency Duty Service, 01926886922

Camera and Mobile Phones

Any images taken of children attending the setting should be in the interest of recording children's learning and development. Parental consent will be sought to use images of children engaging in play activities, crafts and outings for the purposes of learning journals and for use on Facebook or our Website. Where parents request and to reinforce parent partnership, images of their early year's child will be sent to them during the day via WhatsApp. We will ensure that no unauthorised images are taken of persons attending the setting. We will sign up to the Information Commissioners Office (I.C.O) which provides guidance on the data protection requirements of the setting.

- We are not permitted to bring a personal camera or memory card into the designated areas of the setting during operating hours.
- Adults at the premises are not permitted to take their mobile phone or other devices into the designated areas of the setting during operating hours.
- Parents, carers, or other visitors are not permitted to keep mobile telephones, (or other devices capable of taking images), on their person when attending the setting during its operating hours. We will ask any person visiting to hand in such devices for safe storage for the duration of their visit.
- A notice will be placed on display at the entrance of the setting advising all visitors of their responsibility to ensure that they hand in any camera/ mobile telephone or other device in their possession for safe storage during their visit
- Images of children may only be taken using the setting camera/ mobile phone and which we will ensure is securely stored when not in use. Non-Compliance The camera belonging to the setting, images stored on the settings computer and this policy can be scrutinised by the Safeguarding Officer at any time for non-compliance. We reserve the right to refuse entry when a visitor does not hand over a camera or mobile telephone known to be in their possession.
- Visitors entering the setting must place all camera's / mobile devices in the storage box held in the office during open hours.

Internet Safety

We will ensure that we comply with the requirements of the Great Britain, Data Protection Act 1998, (DPA). The DPA outlines the responsibilities of the setting to keep the records of the setting and the information contained within them confidential and having in place measures to ensure access to such information is protected. To respect and protect the privacy of, the staff, parents and children who attend the setting when accessing the settings website and Facebook page. To safeguard children attending the setting from unsupervised internet use. To prevent misuse of internet provided at the setting.

E-Safety <https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/online-safety/>

We will

- Ensure that all personal information held electronically is password protected.
- That access beyond the settings website profile page is restricted by using administrator settings to permit who may view the website.
- In the event that an application is used to set up an online child record service, all staff will use password protection to ensure that parents can only access their own child's information. (Not in use at this time)
- Facebook will be used to advertise the setting, to facilitate contact from prospective clients and to offer an alternative private messaging service to parents. Administration and access to the service is the responsibility of the staff and they must ensure that appropriate privacy settings are in place.

- We use an online child record service called Family. It is password protected to ensure that parents can only access their own child's information. Photographs that have been taken as part of the observations made on children attending the setting may be used to share information to parents about their child's care and learning. Parents will be required to provide written consent to permit us to upload photographs to their child's online records.

- We will ensure that when using electronic devices to provide a play activity that the game is downloaded and that the device's security setting prevents on-line use, appropriate to a child's age and level of development, that the child understands the activity is time limited and ensures they know how to use the device safely. We will supervise the child during the play activity. Use of electronic devices at the setting, are intended for occasional use only.

- All camera's and mobile telephones will be stored securely in the settings office.

Social Media

We will ensure that for each member of staff are talking in closed forums that they never disclose any information whatsoever that could lead anyone to identify a child or a family in our setting.

Lost Child from the Setting

We will take all reasonable steps to prevent a child leaving the setting unsupervised. We will take the following precautions to ensure children remain safely in their care

- Non-registered rooms are locked during contracted hours
- Ensure that any safety gates are secured
- The exterior doors are always remains locked
- All gates surrounding the premises are padlocked at all times and that fencing
- Teach the children the settings ground rules Procedure

In the event that a child is lost we will;

- Check the setting environment, all other areas of the premises and outdoor areas.
- Contact the parent/s concerned immediately after the check has been completed.
- Notify the police for assistance and follow any reasonable advice/instruction given by them.
- Record the incident in the Accident and Incident Book.
- Notify Ofsted and settings insurance company of the situation.
- Ensure the safety of and give reassurance to the other child/ren in their care whilst the incident is managed.

Death of a person at the setting

In the event of a death at the setting the following procedure will take place:

- The Police will be informed immediately and we will take guidance from the emergency service
- The next of kin will be contacted as soon as possible
- All children at the setting at the time of the incident will be cared for away from the incident area.
- Suitable adults or other responsible will be used to ensure the children are appropriately supervised when managing the incident
- Parent/s of the other children attending the setting will be contacted to collect their child as soon as possible.
- The date, time and personal details, witness details, nature of incident and action taken must be recorded accurately as a serious incident in the Accident, Incident & Medication Folder
- Ofsted must be informed as soon as possible after managing the incident.
- The Health and Safety Executive will be informed in compliance with RIDDOR Contact Details of Organisations and Professional Bodies Ofsted Piccadilly Gate Tel: 0161 618 8524 Shore Street E: enquiries@ofsted.gov.uk Manchester W: www.ofsted.gov.uk M1WD PACEY Head Office Tel: 0800 169 4486 Royal Court W: <http://pacey.org.uk> 81 Tweedy Road Bromley, Kent BR11TJ St. John Ambulance <http://www.sia.org.uk/sia'training-courses.aspx>

Health and Safety Executive (RIDDOR) RIDDOR Reports Health and Safety Executive Redgrave Court Merton Road Bootle Merseyside L20 7HS Incident Contact Centre: 0345 300 9923

NHS Non- Emergency Number111

Local Authority Social Services

Business Practice and Confidentiality

We will comply with the requirements of the Great Britain, Data Protection Act 1998, (DPA). The DPA outlines the responsibilities to keep the records of the setting and the information contained within them confidential and having in place measures to ensure access to such information is protected.

We are registered with the Information Commissioners Office, (ICO) .

We will ensure that:

- We only use stored data about children and their families for the purpose that it was obtained and recorded
- Any personal information held at the setting is relevant, accurate and up to date. Such records include but are not restricted to, personal details, emergency contact details, permission / consent forms and copies of completed registration forms.
- Keep a register of attendance

- Maintain accurate written records of a child's chronic ill health, known allergies or pre-existing injury and that accidents and incidents are recorded in the settings, Accident, Incident & Medication folder that is countersigned by the parents.
- Keep an up to date learning journal for all pre-school children as required under the Statutory Framework for Early Years Foundation Stage (EYFS)
- Records relating to individual children are retained for a reasonable period of time after the child has left the setting

Access to confidential information:

- We will ensure that all confidential written records are easily accessible but stored in a locked cupboard
- We will ensure that any personal data held electronically is secured by a password.
- Parents will have ready access to the records and books of their own child/ren but will not have access to information about any other child.
- We will not discuss individual children with anyone other than the parents of that child
- We will request that parents respect their right to privacy when any confidential information about us (or their family), becomes known during their working relationship.

Sharing of information to third parties

Confidential records and information should only be shared or made accessible to outside professionals with parental consent and following individual rights as outlined in the DPA. Parents should give parental consent to specific information they wish to share and understand the purpose for which it is being disclosed. Appropriate protection needs to be in place if personal information is to be disclosed to persons outside of the United Kingdom. Breaching confidentiality without parental consent:

In order to adhere to the Government statutory guidance, Working Together to Safeguard Children 2013, we may in the event of a child protection concern breach confidentiality of a child and their family if seeking parental consent would put a child at risk of significant harm or abuse. In making a judgement to breach confidentiality we will have undertaken appropriate safeguarding training and will consider the following when making an informed decision to do so and;

- The impact the sharing of confidential information without consent will have on the child and their family
- Decide what confidential information is relevant when sharing a concern. The information must be accurate, adequate and relevant in order to share only the information necessary and appropriate when making their report.
- Seek appropriate advice from the relevant local childcare services. In this instance the Suffolk Multi Agency Safeguarding Hub, (known as, the MASH team), will be contacted in the event that we require advice about, the next steps or appropriateness of approaching the child's parents about the concern

- On making an informed decision we will make a record of the concerns they have, the actions that they have taken including seeking advice, the details of why the report is made or not and to whom it is made.

The Children's Act 2004 allows for circumstances under which we may be asked to provide information about a child in their care to other professional bodies. In this instance that we are permitted to breach confidentiality but is only required to provide information that is relevant to the situation. We are not required to inform the parents or obtain parental consent and to do so may put a child at risk of significant harm or abuse. We may be requested by a parent to share information with others such as a doctor or health visitor. Although confidentiality has been breached it has been done with the agreement and informed consent of a parent. In this instance the parent must provide a written consent and detail what information they want us to share. We will only pass on the necessary information in line with The DPA principles.

Document Retention

- Information relating to safeguarding and welfare requirements of the EYFS – until the child is 21 years and 3 months old for insurance purposes.
- Information relating to the learning and development requirements – handed over to next setting when the child leaves or when they start full time school.
- Photos of the child – handed over to parents or destroyed unless the provider has specific written permission from parents to keep them (this permission may be recalled at any time).

Inform parents that if you have a safeguarding concern about their child the information you might need to record and retain on file includes –

- Child's name and date of birth
- Child's address
- Date and time of the record
- Factual details as presented to you by the child or a witness
- Details of any previous concerns
- Parent comments relating to, for example, the injury or incident
- Action taken as a result of the disclosure
- Follow-up records such as a list of other agencies and professionals involved, with dates and times of contact.

Other relevant information might also be attached to a referral such as –

- Accident and first aid record forms
- Incident record forms
- Accident and injury at home record forms

- Documents relating to the child’s care and learning in the provision.

Smoking, Alcohol and Drugs

No one working on the premises will take drugs, drink alcohol or smoke during the working day, even during unpaid breaks.

We will inform Ofsted if medication is prescribed to any staff that may affect their work.

If parents/carers arrive with or to collect a child suspected under the influence of alcohol or drugs we will call the police to report (if driving) and report to the Local Safeguarding Board.

Useful Contacts:

NSPCC: <https://www.nspcc.org.uk/preventing-abuse/safeguarding>

Child line: <https://www.childline.org.uk/>

NHS: Non- Emergency Number 111

Covid 19 – 191

Ofsted - 0300 123 1231

Police – Local 101

FGM Concerns – 0800 028 3550

Local Safeguarding Children Board-

Insurance Company – Childcare.co.uk

Prevent Officer – **0345 050 7666** <https://www.oxfordshire.gov.uk/residents/fire-and-public-safety/safeguarding-extremism>

Department for Education DfE – 0370 000 2288

This policy will be reviewed on an annual basis and updated where appropriate, however if a weakness is identified in the setting’s procedures the policy will be reviewed and revised immediately. It is open to inspection by Ofsted and any recommendations they make will be undertaken by the DSL.

This policy was adopted by	Clopton Nursery Trust	<i>(name of provider)</i>
On	30/09/2021	<i>(date)</i>
Date to be reviewed	30/09/2022	<i>(date)</i>
Name of signatory	Hannah Alexander	

Role of signatory (e.g. chair, director or owner)

Chair of Trustees
