

# Child Protection

## Safeguarding children and Child Protection Policy



### Introduction

#### **“The welfare of the child is paramount” – Children Act 1989**

Children learn best when they are healthy, safe, and secure, when their individual needs are met, and when they have positive relationships with the adults caring for them. (Statutory Framework for the EYFS).

### Principles

We aim to provide a high-quality setting which is welcoming, safe, and stimulating, and where children can enjoy learning and grow in confidence. We will take all necessary steps to keep children safe and well and ensure the suitability of adults who have contact with them. We will promote good health, manage behaviour, and maintain records, policies, and procedures.

For the purpose of this policy the “Working Together” 2018 definition of safeguarding and promoting the welfare of children will be used and is defined as:

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

Staff at this setting understand that safeguarding and promoting the welfare of children is everyone’s responsibility they will be alert to any issues or concerns in the child’s life at home or elsewhere and they will maintain a child-centred approach at all times. They will be aware that children with special educational needs or disability are particularly vulnerable to being abused. They will maintain an attitude of “it could happen here” where safeguarding is concerned, and they will always act in the best interests of the child.

#### **The committee and staff at this setting are committed to:**

- Ensuring the setting practises safer recruitment in checking the suitability of staff and volunteers (refer to the [South West Child Protection Procedures \(SWCPP\)](#))
- Following the settings Code of Conduct, Behaviour Policy in line with [Guidance for Safer Working Practice for Adults who Work with Children](#) (Safer Recruitment Consortium)
- Supporting children who have been abused and carrying out specific actions in accordance with the agreed child protection support plan.
- Establishing and maintaining a safe and secure environment.
- Providing a curriculum and experiences to enable children to develop the skills they need to stay safe from abuse including online abuse.
- Ensuring staff and volunteers can identify children who may benefit from Early Help by identifying potential emerging problems or concerns and implementing strategies to avoid them escalating. Support families in accessing Early Help.
- Ensuring that staff and volunteers are aware of the signs and symptoms of abuse and know the correct procedure for reporting and referring concerns. ([Swindon Safeguarding Partnership](#))
- All staff understand their responsibilities under the General Data Protection Regulation and the Data Protection Act 2018, and the circumstances under which they may appropriately and lawfully share information about you and your child with other agencies.

- Ensuring that all staff are aware of the procedures to follow if they have a concern about another adult or a member of staff (Whistleblowing Policy).
- Working in partnership with other agencies. This includes sharing information lawfully and effectively, attending child protection conferences, core groups and other relevant meetings.
- Working in partnership with parents/carers.
- Supporting families to receive appropriate early help by sharing information with other agencies in accordance with statutory requirements and legislation.
- Being transparent about how we lawfully process data.

## Legislation and Guidance

All safeguarding and child protection procedures will be followed in line with guidance from the Swindon Safeguarding Partnership <https://safeguardingpartnership.swindon.gov.uk/> and the South West Child Protection Procedures (SWCPP)

<https://www.proceduresonline.com/swcpp/swindon/index.html>

The following legislation and documents will form the basis of all safeguarding and child protection decisions.

- The Statutory Framework for the Early Years Foundation Stage – 2023
- The Children Act 1989, 2004 and 2006
- Working Together to Safeguard Children 2018
- What to do if you're worried a child is being abused: advice for practitioners - 2015
- Information Sharing: advice for practitioners providing safeguarding services - 2018
- The Prevent Duty-departmental advice for schools and childcare providers – 2022
- Keeping Children Safe in Education – 2023
- General Data Protection Regulations - 2018

This “Safeguarding Children and Child Protection Policy” applies to all staff, managers, committee members and volunteers working in the setting.

Other policies which should be read and used in conjunction alongside this policy include:

- Health and Safety
- Intimate Care
- First Aid
- Medicines
- Behaviour Management
- Staff behaviour policy (guidance for safer working practice/code of conduct)
- Missing Child
- Online safety including Internet, Acceptable Use, Camera & Image, ICT Misuse Policy
- Uncollected Child
- Site Security
- Risk Assessments
- Equal Opportunities
- Special Educational Needs and Disability
- Outings/Visits
- Emergency Evacuation Procedures
- Concerns/Complaints
- Social Networking
- Employment
- Grievance
- Whistleblowing

- Escalation
- Mobile Phone and Mobile Technology Device
- Staff code of conduct

### **The Designated Safeguarding Lead (DSL) and deputy**

Our Designated Safeguarding Lead is Zena Warburton.

Our Deputy DSL is Charlotte Dimbylow.

During working hours there will be a DSL, or deputy, available at all times for staff to discuss safeguarding concerns.

- The EYFS 2021 states; *'a practitioner must be designated to take lead responsibility for safeguarding children in every setting'*.
- The DSL will take lead responsibility for safeguarding children and ensure that all policies and procedures are implemented and shared with staff, parents, and volunteers. They will liaise with local statutory children's services, and with the Swindon Safeguarding Partnership. They will provide support, advice, and guidance to other staff on an on-going basis, and on any specific safeguarding issue as required. They will co-ordinate child protection action within the setting, including making referrals as necessary.
- The DSL and the Deputy DSL will maintain a confidential recording system for safeguarding and child protection concerns.
- The DSL and the deputy will attend level 3 Child Protection training as a minimum (as advised by Swindon Safeguarding Partnership); this will be refreshed every 2 years. The DSL and the deputy will regularly (at least annually) update their knowledge and skills through attendance at training, attendance at update sessions, reading newsletters, email alerts etc. (A record of all training can be found in the DSL passport).

### **Staff training, qualifications, and supervision**

- All staff have a responsibility to identify children who may need extra help or who are suffering, or are likely to suffer, significant harm. All members of staff have a duty of care to take appropriate action and work with other services as needed.
- All staff will complete level 1 (basic awareness) training every 3 years, as advised by Swindon Safeguarding Partnership. Training will enable staff to identify signs of possible abuse and neglect at the earliest opportunity, and to respond in a timely and appropriate way. These may include:
  - Significant changes in children's behaviour.
  - Deterioration in children's well-being.
  - Unexplained bruising, marks or signs of possible abuse or neglect.
  - Children's comments which give cause for concerns.
  - Any reasons to suspect neglect or abuse outside the setting.
  - Inappropriate behaviour displayed by other members of staff, or any other person working with children.
- The DSL will be responsible for representing the setting at inter-agency meetings in particular strategy discussions, child protection conferences and core groups.
- The DSL will ensure all staff receive regular safeguarding updates through staff meetings, email, newsletters etc
- All staff, who have contact with children, will have regular and planned supervision sessions which will include a discussion about children's development and well-being and about any child protection concerns.
- Sharing information with staff about the welfare, safeguarding and child protection issues that children in their setting have experienced with a view to understanding how to best support these children in the setting.
- At least one person who has a current paediatric first aid certificate will be always on the premises when children are present and will accompany children on outings.

- Staff involved in preparing and handling food will receive food hygiene training.
- All staff will have a sufficient understanding and use of English to ensure the well-being of children in their care.

### Staff Induction

- All new staff will receive induction training to help them understand their roles and responsibilities. Induction training will include, as a minimum, information about emergency evacuation procedures, safeguarding/child protection procedures, the provider's equality policy, and the health and safety policy.
- Staff (including temporary staff and volunteers) work within clear behavioural guidelines (refer to the **Code of Conduct** and Guidance [for Safer Working Practice for Adults who work with Children](#)). A record is kept of all training.

### Staff Supervision

- Staff receive regular supervision in accordance with the statutory requirements of the Early Years Foundation Stage. Uninterrupted time will be set aside to ensure supervision sessions are effective for all involved.
- Supervision will be a two-way process, which supports and develops the knowledge, skills and values of an individual, group or team and will support staff to improve the quality of the work they do, thus improving outcomes for children as well as achieving agreed objectives. Supervision will also provide an opportunity to discuss sensitive issues, including the safeguarding of children and concerns about an individual or colleague's practice.

### Safer Working Practice

- We work within clear behavioural guidelines as outlined in the [Guidance for safer working practice for adults who work with children and young people](#), and the setting's behaviour Policy/code of conduct.
- Physical intervention is only used when the child is endangering him/herself or others and such events are recorded and signed by a witness. Staff are made aware of the settings **Behaviour Management Policy** and physical interventions must be in line with the procedures laid out in the policy.
- Staff are made aware of the professional risks associated with the use of social media and electronic communication (email, mobile phones, texting, social network sites etc.) through the setting's **Online Safety Policy** and **Acceptable Use Policy**.
- All staff are made aware of the setting's Whistle-blowing procedure and that it is a disciplinary offence not to report concerns about the conduct of a colleague that could place a child at risk. Staff will be directed to read the setting's "Whistleblowing Policy" and made aware that they can also contact the NSPCC whistleblowing helpline on 0800 028 0285 or by email to [help@nspcc.org.uk](mailto:help@nspcc.org.uk) to report any concerns they have about other staff in the setting.

### Parental Involvement

We are committed to helping parents/carers understand our responsibility for the safety and welfare of all pupils.

- Parents/carers can access the settings Child Protection Policy online or a hard copy is available in the setting on request. Parents will be made aware of the policy during their induction meeting and will be asked to sign a statement to say they understand the setting's child protection responsibilities.
- Child protection or welfare concerns will usually be discussed with parents/carers. Where a referral to FCP/MASH is needed, the agreement of parents/carers will be sought before making the referral, unless to do so may place the child at increased risk

of harm. If a child is subject to a child protection plan, then the allocated social worker will be informed as soon as possible. A lack of agreement from the parent/carer will not stop a referral going ahead.

### **Key Person**

All children will be allocated a key person with whom they can develop a close relationship and who can tailor opportunities to the individual needs of each child. Parents are informed of the key person and given contact details before their child starts at the setting.

### **Recognising abuse**

Abuse is a form of maltreatment of a child and can either be caused through inflicting harm, witnessing harm to others or failing to prevent harm. There are four categories of abuse: physical, emotional, sexual and neglect.

See definitions of Abuse - Working Together 2018 (appendix 1)

We are aware that;

- Abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label, in most cases; multiple issues will overlap with one another.
- Child welfare concerns may arise in many different contexts and can vary greatly in terms of their nature and seriousness. Children may be abused by their peers, family members, in an institutional/ community setting, by those known to them, by a stranger or via the internet.
- In the case of honour-based abuse, including child marriage and female genital mutilation, children may be taken out of the country to be abused.
- Abuse and neglect can happen over a period of time or be a one-off event. This can have major long-term impacts on all aspects of a child's health, development, and well-being.
- The warning signs and symptoms of abuse and neglect can vary from child to child. Children develop and mature at different rates, so what appears to be worrying behaviour for a younger child might be normal for an older child.
- Parental behaviours may also indicate child abuse or neglect, so staff will be alert to parent-child interactions or concerning parental behaviours; this could include parents who are under the influence of drugs or alcohol or if there is a sudden change in their mental health.
- It is important to respond to problems as early as possible and provide the right support and services for the child and their family and recognise that a warning sign does not automatically mean a child is being abused.

All staff will be alert to possible signs of abuse, these may include:

#### **Physical Abuse**

- Unexplained injuries or burns, particularly if they are recurrent.
- Improbable excuses given to explain injuries.
- Refusal to discuss injuries.
- Untreated injuries.
- Admission of punishment which appears excessive.
- Fear of parents being contacted.
- Bald patches on the head.
- Bruises and abrasions around the face.
- Damage or injury around the mouth.
- Bi-lateral injuries such as two bruised eyes.
- Bruising to soft area of the face such as the cheeks.
- Fingertip bruising to the front or back of torso.
- Bite marks.
- Burns or scalds (unusual patterns and spread of injuries).
- Deep contact burns such as cigarette burns.

- Injuries suggesting beatings (strap marks, welts).
- Withdrawal from physical contact.
- Arms and legs kept covered in hot weather.
- Fear of returning home.
- Fear of medical help.
- Self-destructive tendencies.
- Aggression towards others.

#### **Failure to Thrive**

- Child's weight falling below expected centile.
- Height often falling below centile.
- Skin dry and pale.
- Hair thin and straw like. Lack of energy, listless.
- May drink a lot of juice.
- Refuses food. Vomiting and diarrhoea.
- Failure to meet developmental milestones.
- Lack of concentration.
- Behavioural problems.

#### **Emotional Abuse - signs that MAY indicate Emotional Abuse**

- Physical, mental and developmental lags.
- Admission of punishment which appears excessive.
- Over-reaction to mistakes.
- Sudden speech disorders.
- Fear of new situations.
- Inappropriate emotional responses to painful situations.
- Neurotic behaviour (e.g., rocking, hair twisting, thumb sucking).
- Self-mutilation.
- Fear of parents being contacted.
- Compulsive stealing

#### **Sexual Abuse**

- Fearful about certain people like relatives or friends.
- Not allowed to have friends round.
- Soreness/bleeding in the genital or anal areas or in the throat.
- Finding excuses not to go home or to a particular place.
- Having recurring nightmares /afraid of the dark.
- Unable to concentrate, seem to be in a world of their own.
- Chronic ailments such as stomach pains and headaches.
- Sexually abuses or shows inappropriate sexual behaviour towards a sibling or friend.
- Exhibits a sudden change in attitudes at setting.
- Appears withdrawn, isolated, or excessively worried.
- Demonstrates outbursts of anger or irritability.
- Fearful of undressing.

#### **Neglect**

- Constant hunger.
- Poor personal hygiene.
- Constant tiredness.
- Poor state of clothing.
- Emaciation.



- Frequent lateness or non-attendance.
- Untreated medical problems.
- Destructive tendencies.
- Low self-esteem.
- Neurotic behaviour (e.g., rocking, hair twisting, thumb sucking).
- No social relationships.
- Compulsive stealing or scavenging.

## **Other Safeguarding concerns staff will be aware of:**

### **Child on Child Abuse (sexual violence and sexual harassment)**

- This is most likely to include, but is not limited to, bullying, gender-based violence, sexual assaults, and sexting.
- This form of abuse should never be tolerated or passed off as 'banter' or 'part of growing up'.

Children must be appropriately always supervised to avoid these issues arising.

### **Radicalisation and Extremism**

Staff realise that they have a duty to protect children from radicalisation and any form of violent extremism in line with government guidance "Prevent Duty" (June 2015). Any concerns will be reported to the DSL.

In fulfilling this duty, the setting will work closely with the SSP and will have regard to:

- Assessing the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. This will be based on an understanding, shared with partners, of the potential risk in the local area. The setting will protect children from being drawn into terrorism by having robust safeguarding policies in place to identify children at risk and intervening as appropriate.
- Staff training so that staff have the knowledge and confidence to identify children at risk of being drawn into terrorism, and to challenge extremist ideas which can be used to legitimise terrorism and are shared by terrorist groups. Staff should know where and how to refer children for further help.
- Online safety policies will ensure children are safe from terrorist and extremist material when accessing the internet by establishing appropriate levels of filtering.
- Promoting fundamental British values of democracy, rule of law, individual liberty, mutual respect, and tolerance for those with different faiths and beliefs. These values are already implicitly embedded in the Early Years Foundation Stage curriculum.

### **Female Genital Mutilation (FGM)**

Staff recognise that FGM is a form of abuse, with long-lasting consequences, and must be referred to MASH/FCP through the usual channels. FGM comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs.

### **Child Sexual Exploitation (CSE)**

Staff recognise CSE as a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection, or status. Consent cannot be given, even where a child believes they are voluntarily engaging in sexual activity with the person who is exploiting them. CSE can happen online.

### **Child Criminal Exploitation (CE)**

Staff recognise that that criminal exploitation of children and vulnerable young adults is a form of harm, it is geographically widespread and may include drug networks or gangs grooming and exploiting children and young adults to carry drugs and money from urban areas to sub-urban and rural areas

(County Lines exploitation) These cases will be referred to children's social care through the usual channels.

### **Domestic Abuse (DA)**

DA is any violent or abusive behaviour used by one person to dominate and control another within a close personal or family relationship. Children can witness DA in a variety of ways, they may be in the same room and get caught up in an incident, perhaps trying to defend the victim, they may be in a different room but able to hear abuse taking place and witness injuries caused by the abuse, or they may be asked to take part in verbally abusing the victim. All children witnessing domestic abuse are being emotionally abused, recent legislation recognises DA as "significant harm" and must always be referred to MASH/FCP

### **Children missing sessions.**

Staff will be aware that children's non-attendance, particularly repeatedly, can be a vital warning sign of a range of safeguarding possibilities. Early intervention will be taken to identify the risk of any underlying safeguarding concerns and the settings policy for following up on non-attenders will be followed. The setting will have at least 2 emergency contacts for a child.

### **Children with family members in prison**

Staff recognise that there are negative consequences for these children, and they are at risk of poor outcomes, appropriate support will be put in place (<https://www.nicco.org.uk/>)

### **Homelessness**

Staff will be aware that being homeless or being at risk of being homeless presents a real risk to a child's welfare. The DSL will direct families to the Local Housing Authority for support and a referral will be made to children's social care if deemed necessary.

### **Private Fostering**

Staff will be aware that they have a mandatory duty to report any child in a "private fostering" arrangement, to the Local Authority.

Private fostering is defined as an arrangement whereby a child under the age of 16 (or 18 if the child has a disability) is placed for 28 days or more in the care of someone who is not the child's parent(s) or a 'connected person'.

## **Children with Special Educational Needs and Disabilities**

- Arrangements are in place to support children with SEND.
- Staff acknowledge that children with special educational needs (SEN) and disabilities can face additional safeguarding challenges as they may have an impaired capacity to resist or avoid abuse. They may have speech, language and communication needs that may make it difficult to tell others what is happening.
- Staff are encouraged to be aware that children with SEN and disabilities can be disproportionately impacted by safeguarding concerns such as bullying. All members of staff will be encouraged to appropriately explore possible indicators of abuse such as behaviour/mood change or injuries and not to assume that they are related to the child's disability and be aware that children with SEN and disabilities may not always outwardly display indicators of abuse.

## **Disclosures**

If a child discloses abuse, it is important for staff to respond appropriately:

- Listen to the child and avoid interrupting except to clarify.
- Allow the child to make the disclosure at their own pace and in their own way.
- Do not interrogate the child. It is alright to ask for clarification, but leading questions should not be asked. The interviewing of children must be undertaken by trained Social Workers or Police Officers.
- Do not make any promises to the child about not passing on the information – the child needs to know that you have to talk to someone who will be able to help them.



- Record the information as accurately as they can, including the timing, setting and those present, as well as what was said. Do not exaggerate or embellish what you have heard in any way.
- Inform the DSL as soon as possible (within the same working day).

Following a disclosure of abuse children will be supported in the setting by their key person.

### **Visitors to the setting**

Any visitor to the setting who receives a disclosure of abuse, suspects that abuse may have occurred or is concerned for the safety or welfare of a child **must** report immediately to the DSL or if unavailable to the deputy.

### **Record Keeping – Child Protection**

Any member of staff receiving a disclosure of abuse, noticing possible abuse or with a concern about a child, should make an accurate record as soon as possible, noting what was said or seen, putting the event into context, and giving the date, time and location. All records must be dated and signed and discussed with the DSL.

- All hand-written records will be retained, even if they are subsequently typed up in a more formal report.
- Written records of concerns will be kept, even where there is no need to make a referral immediately.
- Any injuries will be marked on a body map, **photographs will never be taken** (Appendix 3) Where concerns do not meet the threshold for a referral to FCP/MASH, consideration will be given to the appropriateness of completing an Early Help Assessment  
<https://localoffer.swindon.gov.uk/content/send-local-offer/landing-pages/early-help-landing-and-content-pages/early-help/>
- All records relating to child protection concerns will be kept in a secure place and will remain confidential. They will not form part of the pupil's developmental records and will be kept separate from other records.
- A chronology will be kept at the front of each individual child protection file. It will be reviewed and updated whenever a new concern is raised or additional relevant information becomes available, noting any action taken.
- The quality of child protection records will be regularly monitored by the DSL and management.
- Where a child transfers to school or moves to a new setting, child protection documentation will be transferred to the receiving school/setting within 14 days, preferably by hand. If hand delivery isn't possible, postal delivery will be followed up with a telephone conversation. The original documents will be transferred and a receipt for handover will be obtained.
- Records will be retained in line with the Local Authorities Guidance on the Transfer and Retention of Child Protection Records.

Templates and guidance for keeping child protection records are available on [Swindon Hub for Early years](#)

### **Procedures for Referral**

We will refer to SSP's guidance document "The Right Help at the Right Time" when assessing a child's level of need and the most appropriate support <https://safeguardingpartnership.swindon.gov.uk/>

If a child is in immediate danger or is at risk of harm a referral to FCP/MASH will be made immediately.

**The DSL/deputy will contact FCP/ MASH by telephone - 01793 466903 or if out of hours 01793 436699 MASH email- [Swindonmash@swindon.gov.uk](mailto:Swindonmash@swindon.gov.uk)**

- A telephone referral will be confirmed in writing using the form RF1 within 24 hours of the initial call (RF1 available at <https://safeguardingpartnership.swindon.gov.uk/downloads/file/630/> ).

- The referral will be shared with the parent/carer, and where appropriate with the child/young person, unless to do so may place the child at increased risk of harm, in which case advice should be sought from FCP/MASH.
- If a child discloses physical or sexual abuse, where the alleged abuser is either a family member or someone resident within the household, FCP/MASH will be consulted before informing parents.
- If the child is already subject to a Child Protection Plan the allocated Social Worker will be contacted, they will advise when, and by whom, the parents should be informed. (See appendix 2 –flow chart)
- Staff will work closely with other agencies in implementing the actions of a child protection plan designed to support and protect the child. They will attend all child protection conferences, core groups and strategy meetings to support the child and family as necessary.

## Escalation Procedures

In circumstances where we feel that decisions made by another agency, on a safeguarding case, are not in the best interests of the child we will follow the stages of the Swindon Escalation Policy.

Pre-escalation – professional to professional

1. DSL to Manager
2. DSL to Senior Manager
3. DSL to Swindon Safeguarding Partnership

[https://safeguardingpartnership.swindon.gov.uk/downloads/download/38/escalation\\_policy](https://safeguardingpartnership.swindon.gov.uk/downloads/download/38/escalation_policy)

## Early Help

**Early Help Hub contact details: 01793 466479 [EHHub@swindon.gov.uk](mailto:EHHub@swindon.gov.uk)**

- Where staff have emerging concerns about a child (as opposed to a child being in immediate danger) they will follow the early help process (Level 2 and Level 3 [The Right Help at the Right Time](#)). This will include identifying emerging problems, discussing concerns with the DSL, sharing information with other professionals to support early identification and assessment and in some cases acting as the lead professional in undertaking an [Early Help Assessment](#) (EHA).
- Early Help cases will be kept under constant review and if the situation doesn't appear to be improving consideration will be given to a referral to FCP/MASH.
- We will engage with any Child in Need or Early Help Plan as agreed.
- EHA guidance and templates are available at;  
<https://localoffer.swindon.gov.uk/content/send-local-offer/landing-pages/early-help-landing-and-content-pages/early-help/>

## Suitable People/Safer Recruitment

We endeavour to create a culture of safe recruitment. We ensure that staff working with children are suitable to fulfil the requirements of their roles. We have effective systems in place to ensure that educators and any other person who is likely to have regular contact with children (including those working on the premises) are suitable. We request enhanced Disclosure and Barring Service checks and disqualification checks for all staff prior to commencing work.

We comply with recruitment procedures as set out in the South West Child Protection Procedures.

(<http://www.proceduresonline.com/swcpp/swindon/contents.html> )

- Interview panels will have at least one person who has completed Safer Recruitment Training. There will be a safeguarding statement in all job advertisements and job descriptions. Any gaps

in employment history or unaccounted for periods of time will be fully investigated. References will be requested prior to interview. At least one reference will be from the applicants' most recent childcare placement.

- We will record information about staff qualifications, identity checks, disqualification and vetting processes that have been completed (including the Disclosure and Barring Service reference number, the date a disclosure was obtained and details of who obtained it) on a central register.
- We will not allow people, whose suitability has not been checked to have unsupervised contact with the children.
- In addition to induction and supervision, staff are provided with clear expectations in relation to their behaviour, outlined in the Staff Code of Conduct.

### **Disqualification under the Childcare Act**

- All staff, students and volunteers are informed during their induction that, under the Childcare Act 2006, they are expected to provide up to date information in relation to any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children, whether received before or during their employment at the setting.
- There is also an expectation that the setting would be informed if staff relationships and associations, both within and outside the workplace (including online), may have implications for the safety of children in the setting.

### **Volunteers**

A risk assessment will be undertaken for volunteers to determine whether an enhanced DBS check should be applied for. This will depend on the level of activity the volunteer is engaged in and whether they are ever left unsupervised with children.

### **Alleged Abuse by Staff and persons in position of trust**

An allegation may indicate that a member of staff has:

- Behaved in a way that has harmed or may have harmed a child.
- Possibly committed a criminal offence against a child; or
- Behaved towards a child that indicates he/she would pose a risk of harm to children.

We follow the SWCPPP for managing allegations against staff;

<http://www.proceduresonline.com/swcpp/swindon/contents.html>

- **As soon as an allegation is made the Local Authority Designated Officer (LADO) will be contacted.**

**The LADOs are:**

**Jon Goddard- 07392103019 (Mon-Wed)**

**Rachel Hull- 07824081177 (Thurs-Fri)**

**Email - Lado@swindon.gov.uk**

- Ofsted will be informed of the allegation within 14 days.
- An Allegations Management referral form will need to be completed  
[https://safeguardingpartnership.swindon.gov.uk/downloads/download/15/allegation\\_management\\_referral\\_form](https://safeguardingpartnership.swindon.gov.uk/downloads/download/15/allegation_management_referral_form)
- Ofsted will be informed within 14 days.
- LADO advice on appropriate action to take will be followed.
- Staff/volunteers will report an allegation about a member of staff immediately to the owner/manager, unless they are the subject of the allegation. The owner/manager will then proceed as above.
- Where the allegation is against the owner/manager, the member of staff/volunteer will contact the LADO as above.
- An allegation must not be discussed with the alleged perpetrator or other members of staff/committee, unless advised to do so by the LADO.
- In exceptional circumstances it may be necessary to protect the child, by contacting the police, before contacting the LADO.

- The setting will make a referral to the Disclosure and Barring Service if at the end of the allegation process a member of staff or volunteer is removed from their position, or if they leave while under investigation.

As part of their induction procedure staff will be directed to read the “Guidance for safer working practice for adults who work with children and young people.” We also ensure that all staff, volunteers and anyone else working in the setting knows how to raise concerns that they may have about the conduct or behaviour of other people including staff/colleagues.

Refer to the setting’s “Whistleblowing Policy.”

If staff don’t feel comfortable alerting someone within the setting of their concerns, they can contact the NSPCC whistleblowing helpline on 0800 028 0285 or by email [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

## **Low-level concerns**

We recognise that staff may display low-level concerns:

- By displaying behaviours that are inconsistent with the staff code of conduct, including inappropriate conduct outside of work.

These concerns don’t meet the threshold of harm and aren’t serious enough to be referred to the LADO, but they are always reported, recorded and dealt with appropriately.

## **The Curriculum**

We will provide a curriculum that encourages children to talk and be listened to. Children will be provided with opportunities to develop the skills they need to recognise and stay safe from abuse across all areas of learning.

- Children will learn that their views are valued and respected.
- They will learn how we treat others with respect.
- They will be taught how to express their emotions and feeling appropriately.
- They will learn about having clear boundaries and what is safe and acceptable behaviour.

## **Online safety**

Children will be taught about keeping safe online through educating them about safe online procedures and by educating their parents about the dangers of the internet through leaflets, posters, newsletters etc. Where children have access to the internet, we will ensure that they are protected from harmful and inappropriate online material by putting effective monitoring and filtering in place.

Further information

[https://safeguardingpartnership.swindon.gov.uk/info/3/workers\\_and\\_volunteers/10/workers\\_and\\_volunteers/14](https://safeguardingpartnership.swindon.gov.uk/info/3/workers_and_volunteers/10/workers_and_volunteers/14)

## **Use of Mobile Phones and Digital Photography**

We have a written policy for the acceptable use of mobile phones, cameras and other digital media in our setting. The following should be used in conjunction with the mobile phone and mobile technology device, camera & image and acceptable use policies.

- Staff mobiles and other digital media will be kept in a designated area and will not be carried on a person when children are present. Staff may use appliances in a designated area at designated times e.g., the kitchen during staff breaks or before and after sessions, when children are not present.
- Visitors, parents, contractors etc are made aware that phones and other digital media are not to be used in designated areas and that no photographs, videos, or audio recordings are permitted in the setting.

- Staff will take photographs of children using the work photographic equipment; no personal equipment will be used. The work photographic equipment will be open to scrutiny at all times.
- Photographs will not be taken in sensitive areas such as toilets or nappy changing areas.
- Written permission will be obtained from parents/carers for appropriate use of photographs/digital images to record children's progress.
- Children's images should only be taken off site securely with the prior permission of the manager in line with the settings policy.

## Information Sharing and Records

- We will maintain records and obtain and share information with parents/carers, health professionals, the police, social services and Ofsted as appropriate and in line with "[Information sharing advice for safeguarding practitioners](#)" 2018
- We will enable a regular two-way flow of information with parents/carers, and between providers if a child is attending more than one setting.
- Confidential information and records about staff and children are held securely and only accessible and available to those who have a right or professional need to see them.
- We are aware of our responsibilities under the Data Protection Act 2018 and the General Data Protection Regulations (2018) and that this legislation does not limit the sharing of information in order to keep children safe and includes sharing information without consent.
- All staff read the setting's "Confidentiality Policy" as part of their induction procedure. Information will be shared on a strictly "need to know" basis.
- Records relating to individual children will be retained for a reasonable period in line with the settings retention of records policy.

## Security

- Staff are responsible for maintaining awareness of the safety and security of buildings and grounds and for reporting any concerns that become known. Risk assessments are completed as appropriate.
- Appropriate checks will be undertaken in respect of visitors and volunteers coming into the setting (Staff Personal Safety policy). Any individual who is not known or identifiable will be challenged for clarification and reassurance.
- The setting will not accept the behaviour of any individual (parent/carer/other) who threatens security or leads others (child or adult) to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse access for that individual to the site.

## Complaints

- We operate within a whole-setting community ethos, and we welcome comments from children, parents/carers and others about areas that may need improvements as well as comments about what we are doing well.
- The setting has a **Complaints Procedure** available to parents/carers, children and members of staff who wish to report concerns. This can be found in the main hall or on our website.
- All reported concerns are taken seriously and considered within the relevant and appropriate process. Anything that constitutes an allegation against a member of staff or volunteer will be dealt with under the specific **Procedures for Managing Allegations against Staff**.

## Legal Framework

### Primary Legislation

- Children Act (1989 s47)
- Protection of Children Act (1999)
- The Children Act (2004 s11)

- Children and Social Work Act (2017)
- Safeguarding Vulnerable Groups Act (2006)
- Childcare Act (2006)
- Child Safeguarding Practice Review and Relevant Agency (England) Regulations 2018

#### Secondary Legislation

- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Equality Act (2010)
- General Data Protection Regulations (GDPR) (2018)
- Childcare (Disqualifications) Regulations (2009)
- Children and Families Act (2014)
- Care Act (2014)
- Serious Crime Act (2015)
- Counterterrorism and Security Act (2015)

#### Further guidance

- Working Together to Safeguard Children (HMG, 2018)
- What to do if you're Worried a Child is Being Abused (HMG, 2015)
- Framework for the Assessment of Children in Need and their Families (DoH 2000)
- The Common Assessment Framework for Children and Young People: A Guide for Practitioners (CWDC 2010)
- Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (HMG 2008)
- Hidden Harm – Responding to the Needs of Children of Problem Drug Users (ACMD, 2003)
- Information Sharing: Advice for Practitioners providing Safeguarding Services (DfE 2018)
- Disclosure and Barring Service: [www.gov.uk/disclosure-barring-service-check](http://www.gov.uk/disclosure-barring-service-check)
- Revised Prevent Duty Guidance for England and Wales (HMG, 2015)
- Inspecting Safeguarding in Early Years, Education and Skills Settings, (Ofsted, 2016)



**Review**

This policy will be reviewed on an annual basis and updated where appropriate, however amendments will be made as and when necessary, throughout the year. Staff will be made aware of all amendments.

This policy was adopted at a meeting of

Wroughton Preschool

Held on

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Date to be reviewed

---

Yearly at AGM

Signed on behalf of the management  
committee

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Name of signatory

---

Role of signatory (e.g. chair/owner)

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Chairperson

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## **Appendix 1 – Definitions of Abuse “Working Together” 2018**

### **Physical Abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

### **Emotional Abuse**

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

### **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 (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

### **Child sexual exploitation**

CSE 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 using technology.

### **Neglect**

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

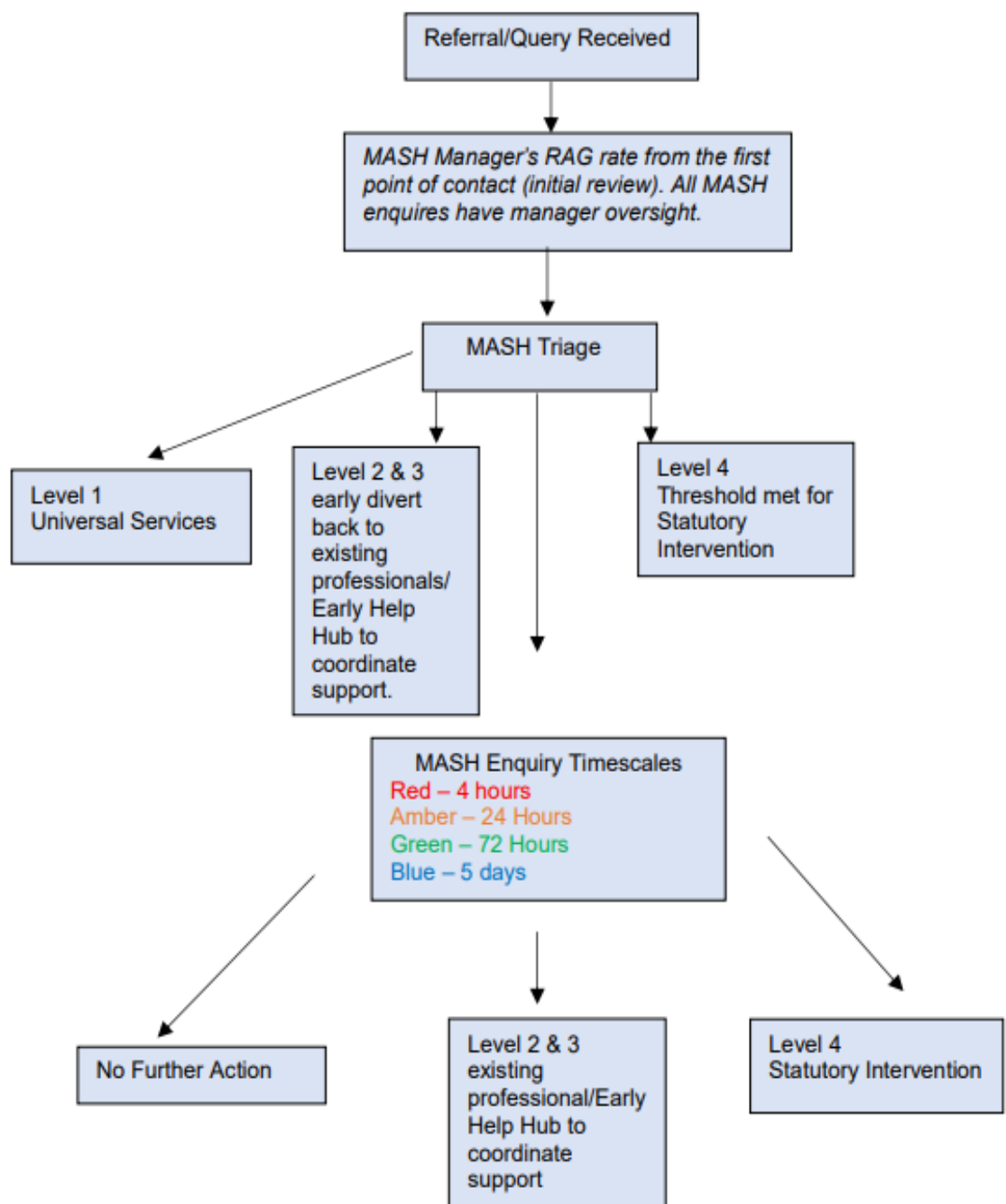
- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger.
- Ensure adequate supervision (including the use of inadequate caregivers);
- Ensure access to appropriate medical care or treatment.
- Respond to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

- Appendix 2 - The right help at the right time



- Appendix 3

## MASH Process Map



## Sharing / recording concerns

An individual with concerns about a child, records these and shares these with [the Designated Safeguarding Lead \(DSL\) Zena Warburton or the deputy DSL Charlotte Dimbylow](#), as soon as possible.



## Consideration

The DSL will consider the information, in the context of any other concerns / disclosures, and decide on next steps. Where possible this should be done in consultation with others in the safeguarding team. Parents / carers should be



### Referral to children's social care

The DSL will make a telephone referral in the first instance to Family Contact Point on 466903

This must be followed up within 24 hours with a written referral, using form RF1.

The RF1 form must be signed and dated by the referrer.

**If a child discloses physical or sexual abuse, where the alleged abuser is either a family member or someone resident within the household, the setting must consult the Duty Social Worker before informing parent/s.**



### No referral to children's social care

Actions will be agreed to monitor the child and support the child / family where needed.



## Children's social care consideration

Children's social care decides within 1 working day what action will be taken, including if an assessment is needed and will **feedback to the referrer**. This decision will be made using the **Swindon Threshold document**.



### Assessment

Children's social care completes the assessment within 45 working days of the referral; it could be a section 17 or section 47 assessment. All schools and colleges should allow local authorities access to facilitate arrangements.

### No Assessment

If the information supplied in the referral does not meet the threshold, an EHRP should be started and/or onward referral to other specialist or universal services; **children's social care will feedback to the referrer**.

**If the child's situation does not appear to be improving the referrer should press for re-consideration.**

Appendix 4

