

Safeguarding children/child protection policy

EYFS: 3.4-3.18

Here at the Next Generation Nursery and Schoolies Club we work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect, be helped to thrive and to be safe from any abuse in whatever form.

We support the children within our care, protect them from maltreatment and have robust procedures in place to prevent the impairment of children's health and development. Safeguarding is a much wider subject than the elements covered within this single policy, therefore this document should be used in conjunction with the nursery's other policies and procedures.

Legal framework and definition of safeguarding

Safeguarding Vulnerable Groups Act 2006

The Statutory Framework for the Early Years Foundation Stage (EYFS) 2014

Working together to safeguard children, 2015

Childcare Act 2006

Children Act 2004

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

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

(Definition taken from the HM Government document 'Working together to safeguard children 2013').

Policy intention

To safeguard children and promote their welfare we will:

- Create an environment to encourage children to develop a positive self-image
- Provide positive role models
- Encourage children to develop a sense of independence and autonomy in a way that is appropriate to their age and stage of development
- Provide a safe and secure environment for all children
- Always listen to children
- Provide an environment where practitioners are confident to identify where children and families may need intervention and seek the help they need
- Share information with other agencies as appropriate.

The nursery is aware that abuse does occur in our society and we are vigilant in identifying signs of abuse and reporting concerns. Our practitioners have a duty to protect and promote the welfare of children. Due to the many hours of care we are providing, staff may often be the first people to identify that there may be a problem. They may well be the first people in whom children confide information that may suggest abuse or to spot changes in a child's behaviour which may indicate abuse.

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

The nursery aims to:

- Keep the child at the centre of all we do
- Ensure staff are trained to understand the safeguarding policy and procedures, are alert to identify possible signs of abuse, understand what is meant by child protection and are aware of the different ways in which children can be harmed, including by other children through bullying or discriminatory behaviour
- Ensure that all staff feel confident and supported to act in the best interest of the child share information and seek the help that the child may need
- Ensure that all staff are familiar and updated regularly with child protection training and procedures and kept informed of changes to local/national procedures
- Make any referrals in a timely way, sharing relevant information as necessary in line with procedures set out by Wigan's Local Safeguarding Children Board
- Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest
- Ensure that children are never placed at risk while in the charge of nursery staff
- Take any appropriate action relating to allegations of serious harm or abuse against any person working with children, or living or working on the nursery premises including reporting such allegations to Ofsted and other relevant authorities
- Ensure parents are fully aware of child protection policies and procedures when they register with the nursery and are kept informed of all updates when they occur
- Regularly review and update this policy with staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by Wigan's Local Safeguarding Children Board.

We will support children by offering reassurance, comfort and sensitive interactions. We will devise activities according to individual circumstances to enable children to develop confidence and self-esteem within their peer group.

Contact telephone numbers

Local authority children's social care team 01942 828300

Local authority Designated Officer (LADO) Diane Kitcher 01942 486034 or 828300

Ofsted Telephone: 0300 123 1231

Local Safeguarding Children Board (LSCB) 01942 486025

Types of abuse and particular procedures followed

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by harming them, or by failing to act to prevent harm. Children may be abused within a family, institution, or community setting by those known to them or a stranger. This could be an adult or adults, another child or children.

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

Indicators of child abuse

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

Recording suspicions of abuse and disclosures

Staff should make an objective record of any observation or disclosure, supported by the nursery manager or Designated Safeguarding Co-ordinator¹ (DSCO). This record should include:

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

These records should be signed by the person reporting this and the *manager/*DSCO/*supervisor, dated and kept in a separate confidential file.

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

¹ Referred to in the EYFS as a lead practitioner

It may be thought necessary that through discussion with all concerned the matter needs to be raised with the local authority children's social care team and Ofsted, and/or an Early Help Scheme (formally CAF) needs to be initiated. Staff involved may be asked to supply details of any information/concerns they have with regard to a child. The nursery expects all members of staff to co-operate with the local authority children's social care, police, and Ofsted in any way necessary to ensure the safety of the children.

Staff must not make any comments either publicly or in private about a parent's or staff's supposed or actual behaviour.

Physical abuse

Action needs to be taken if staff have reason to believe that there has been a physical injury to a child, including deliberate poisoning, where there is definite knowledge, or reasonable suspicion that the injury was inflicted or knowingly not prevented. These symptoms may include bruising or injuries in an area that is not usual for a child, e.g. fleshy parts of the arms and legs, back, wrists, ankles and face.

Many children will have cuts and grazes from normal childhood injuries. These should also be logged and discussed with the nursery manager or room leader.

Children and babies may be abused physically through shaking or throwing. Other injuries may include burns or scalds. These are not usual childhood injuries and should always be logged and discussed with the nursery manager so that procedures can be followed.

Any non-mobile baby that is presented to the nursery with any bruising or injuries will immediately be reported to the specialist assessment team following nurseries procedure.

Signs of physical abuse:

Bruises and welts. These may appear on the face, back, bottom, genitals and arms. Bruises or welts in unusual configurations may pattern the instrument used to inflict them, for example: hand or fingerprints or the linear marks of a cane.

Clusters bruises and bruises of various colours may indicate repeated abuse, although it is difficult to date a bruise according to its colour. Bruising on babies and young children is of significant concern.

Fractures. Any fracture in a child under the age of two years is a serious concern. Fractures are not often detected without xray, although the child may have a swollen joint and appear to be in pain or irritable.

Burns and Scalds. These may show the shapes of the item used to inflict them. For example, iron, grill, cigarette burns. Other types of burns include boiling water, oil or flame burns.

Abdominal injuries. Torn liver or spleen or ruptured intestines may be present without any outward signs of bruising on the abdominal wall. The signs are pain, vomiting, restlessness and fever.

Head or brain injuries. There may be no outward signs that these injuries are present. They are usually observed by health professionals and include subdural haematoma and other brain injuries which may lead to permanent brain damage; eye damage caused by shaking; and absence of hair, which may indicate that hair has been pulled out.

Lacerations and abrasions to the head, face and mouth. The shape may indicate the implement used, for example, fingernail scratches leave parallel linear marks.

Human bite marks.

Multiple injuries. These may be both old and new.

A history of repeated injuries.

Any injury to a very young baby taking into consideration non-mobile babies

Female genital mutilation

This type of physical abuse is practised as a cultural ritual by certain ethnic groups and there is now more awareness of its prevalence in some communities in England including its effect on the child and any other siblings involved. For those nurseries caring for older children in their out of school facility this may be an area of abuse you could come across. Symptoms may include bleeding, painful areas, and acute urinary retention, urinary infection, wound infection, septicaemia, and incontinence, vaginal and pelvic infections with depression and post-traumatic stress disorder as physiological concerns. If you have concerns about a child in this area, you should contact children's social care team in the same way as other types of physical abuse.

Some signs/indicators of this would be:

Difficulties urinating or incontinence

Frequent or chronic vaginal, pelvic or urinary infections

Menstrual problems

Fabricated illness

This is also a type of physical abuse. This is where a child is presented with an illness that is fabricated by the adult carer. The carer may seek out unnecessary medical treatment or investigation. The signs may include a carer exaggerating a real illness or symptoms, complete fabrication of symptoms or inducing physical illness, e.g. through poisoning, starvation, inappropriate diet. This may also be presented through false allegations of abuse or encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.

Procedure:

- All signs of marks/injuries to a child, when they come into nursery or occur during time at the nursery, will be recorded as soon as noticed by a staff member

- The incident will be discussed with the parent at the earliest opportunity, where felt appropriate
- Such discussions will be recorded and the parent will have access to such records
- If there appear to be any queries regarding the injury, the local authority children's social care team will be notified in line with procedures set out by the Local Safeguarding Children Board (LSCB).

Sexual abuse

Action needs to be taken under this heading if the staff member has witnessed occasion(s) where a child indicated sexual activity through words, play, drawing, had an excessive pre-occupation with sexual matters, or had an inappropriate knowledge of adult sexual behaviour or language. This may include acting out sexual activity on dolls/toys or in the role play area with their peers, drawing pictures that are inappropriate for a child, talking about sexual activities or using sexual language or words. The child may become worried when their clothes are removed, e.g. for nappy changes.

The physical symptoms may include genital trauma, discharge, and bruises between the legs or signs of a sexually transmitted disease (STD). Emotional symptoms could include a distinct change in a child's behaviour. They may be withdrawn or overly extroverted and outgoing. They may withdraw away from a particular adult and become distressed if they reach out for them, but they may also be particularly clingy to a potential abuser so all symptoms and signs should be looked at together and assessed as a whole.

Some physical warning signs would be:

Pain, discoloration, bleeding or discharges in genitals, anus or mouth.

Persistent or recurring pain during urination and bowel movements.

Wetting and soiling accidents unrelated to toilet training.

If a child starts to talk openly to an adult about abuse they may be experiencing; the procedure stated later in this document under 'recording abuse suspicions' will be followed.

Procedure:

- The adult should reassure the child and listen without interrupting if the child wishes to talk
- The observed instances will be detailed in a confidential report
- The observed instances will be reported to the nursery manager/safeguarding lead.
- The matter will be referred to the local authority children's social care team
- A sensitive and confidential discussion will be held with the parents/carers of any other children party to inappropriate play.

Child sexual exploitation

Taken from 'Safeguarding young people and children from sexual exploitation' the paragraphs below outline what is meant by and who is at risk of CSE.

3.3 Any child or young person may be at risk of sexual exploitation, regardless of their family background or other circumstances. This includes boys and young men as well as girls and young women. However, some groups are particularly vulnerable. These include children and young people

who have a history of running away or of going missing from home, those with special needs, those in and leaving residential and foster care, migrant children, unaccompanied asylum seeking children, children who have disengaged from education and children who are abusing drugs and alcohol, and those involved in gangs. 3.4 Sexual exploitation can take many forms from the seemingly 'consensual' relationship where sex is exchanged for attention, affection, accommodation or gifts, to serious organised crime and child trafficking. What marks out exploitation is an imbalance of power within the relationship. The perpetrator always holds some kind of power over the victim, increasing the dependence of the victim as the exploitative relationship develops. This chapter sets out some of the more common indicators found in cases of sexual exploitation.

Actions should be taken under this heading should a practitioner have reason to believe there to be CSE occurring to a child within our setting and have a further duty of care for having a concern around a member of a child's family. As not all CSE is physical and can be done online it is difficult to realise that it is occurring however some signs below could be an indicator particularly with our Schoolies children but also with the younger ones. (Practitioners can also refer to the sexual abuse section of this policy for possible physical and emotional indicators of CSE).

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

Procedure to follow

Should a practitioner believe that a CSE is occurring they should refer to the following procedure:

- The adult should reassure the child and listen without interrupting if the child wishes to talk
- The observed instances will be detailed in a confidential report
- The observed instances will be reported to the nursery manager/safeguarding lead.
- The matter will be referred to the local authority children's social care team and the police will also be contacted.

Emotional abuse

Action should be taken under this heading if the staff member has reason to believe that there is a severe, adverse effect on the behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection.

This may include extremes of discipline where a child is shouted at or put down on a consistent basis, lack of emotional attachment by a parent, or it may include parents or carers placing inappropriate age or developmental expectations upon them. Emotional abuse may also be imposed through the child witnessing domestic abuse and alcohol and drug misuse by adults caring for them.

The child is likely to show extremes of emotion with this type of abuse. This may include shying away from an adult who is abusing them, becoming withdrawn, aggressive or clingy in order to receive their

love and attention. This type of abuse is harder to identify as the child is not likely to show any physical signs.

Below are some indicators and possible signs of emotional abuse:

Being fearful of parent

Saying they hate the parent

Talking badly about themselves ("I'm stupid")

Seeming emotionally immature when compared to peers

Exhibiting sudden changes in speech, such as stuttering

Experiencing sudden change in behavior, such as doing poorly in school

Signs in a parent or caregiver include:

Showing little or no regard for the child

Talking badly about the child

Not touching or holding the child affectionately

Not tending to the child's medical needs

Procedure:

- The concern should be discussed with the *nursery manager/*room supervisor/*registered person
- The concern will be discussed with the parent
- Such discussions will be recorded and the parent will have access to such records
- An Early Help form may need to be completed and Early help initiated
- If there appear to be any queries regarding the circumstances, the matter will be referred to the local authority children's social care team.

Radicalisation & Prevent duty

Another way in which a child could be emotionally abused is by being radicalised, meaning that children could potentially be drawn into terrorism, including extremist ideas that are part of terrorist ideology. Staff and practitioners have a duty of care set out in the form of 'The Prevent Duty' by the department for education. We as a setting will build pupils resilience to radicalisation by promoting fundamental British values within practise. When provided, practitioners will attend training in this area to enable a higher level of knowledge. Practitioners will promote these values by assisting the progression of personal, social and emotional development and understanding the world as set out in the Early Years Foundation stage. Should practitioners feel that a child is subject to radicalisation and extremism then this should be reported to the safeguarding lead so that nursery

procedures can be followed and advice can be sought from the local authority. To help identify such children, staff will attend the prevent duty training as it is available.

Neglect

Action should be taken under this heading if the staff member has reason to believe that there has been persistent or severe neglect of a child (for example, by exposure to any kind of danger, including cold, starvation or failure to seek medical treatment when required on behalf of the child), which results in serious impairment of the child's health or development, including failure to thrive.

Signs may include a child persistently arriving at nursery unwashed or unkempt, wearing clothes that are too small (especially shoes that may restrict the child's growth or hurt them), arriving at nursery in the same nappy they went home in or a child having an illness that is not being addressed by the parent. A child may also be persistently hungry if a parent is withholding food or not providing enough for a child's needs.

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

Some indicators of this could be:

Malnutrition, begging, stealing or hoarding food
Poor hygiene, matted hair, dirty skin or body odour
Unattended physical or medical problems
Comments from a child that no one is home to provide care
Being constantly tired
Frequent lateness or absence from school
Inappropriate clothing, especially inadequate clothing in winter
Frequent illness, infections or sores
Being left unsupervised for long periods

Procedure:

- The concern will be discussed with the parent
- Such discussions will be recorded and the parent will have access to such records
- An Early Help form may need to be completed and Early help program initiated
- If there appear to be any queries regarding the circumstances the local authority children's social care team will be notified.

The Thresholds of need and Early Help

The Wigan Thresholds of need indicator has been designed in support of 'Working together to safeguard children' and states that *"It is designed to help identify when a threshold - or trigger - has been reached, indicating when a child, young person or family might need support and then to*

identify where best to get this support from". Each level of the Threshold of need is explained below. This allows us to identify at what level the support is needed dependent upon the child's need to best safeguard and protect that child and family, as well as the actions needing to be taken.

Level 1 - All children accessing mainstream services with low-level need that can be met by a single agency early help assessment and plan.

Level 2 - Children with emerging needs or low level CSE concerns that can be met with the support of a multi-agency Early Help assessment and plan.

Level 3 - Children with multiple or complex needs including medium risk of CSE have to be met by targeted services or by a multi-agency early help assessment or by other specialist assessments e.g. CSE Measurement Tool / Education Health Care Plan.

Level 4 - Are those children and young people who present with acute needs / risk. Including high level CSE concerns / risk. They will require specialist Social Worker or multi-agency statutory response.

A record of this will be kept to show which children are identified at which level and the support they are receiving.

Should we identify a child that we have low level concerns about or who we identify to have emerging needs we will consider the need for an EHA (early help assessment) so that we can intervene at an early stage providing the family with support to enable the best possible care for the child. We can initiate this and gain support from the start well team in order to build a team around the child who can provide support to the family on an ongoing basis. It may be that we feel a referral to the start well team (formally gateway) is necessary to best meet the needs of a child. Should matters persist and the family do not respond to the support given this can be stepped up to social care.

Safeguarding children who have special needs and/or disability

Here at the Next Generation nursery we recognise that there are additional barriers that exist when safeguarding and protecting children who have special needs and/or disabilities. Staff will ensure that they keep this in mind and are particularly vigilant when working with children with limited abilities for any signs of abuse. Below are some reasons why children with SEND may be at risk of abuse.

- Many disabled children are at an increased likelihood of being socially isolated with fewer outside contacts than non-disabled children
- Their dependency on parents and carers for practical assistance in daily living, including intimate personal care, increases their risk of exposure to abusive behaviour
- They have an impaired capacity to resist or avoid abuse
- They may have speech, language and communication needs which may make it difficult to tell others what is happening
- They often do not have access to someone they can trust to disclose that they have been abused
- They are especially vulnerable to bullying and intimidation
- Looked after disabled children are not only vulnerable to the same factors that exist for all children living away from home, but are particularly susceptible to possible abuse because of their additional dependency on residential and hospital staff for day to day physical care needs.

Should a staff member believe that a child has been subject to abuse they must notify the safeguarding lead so that she can follow nurseries procedure in dealing with this, referring to 'what to do if you think a child is being abused.' Advice can also be sought from Wigan LSCB and/or the specialist assessment team.

Peer on peer abuse

There is no clear boundary between incidents that should be regarded as abusive and incidents that can be dealt with as bullying, sexual experimentation etc. This is a matter of professional judgement.

If one child or young person causes harm to another, this should not necessarily be dealt with as abuse: bullying, fighting and harassment between children are not generally seen as child protection issues. However, it may be appropriate to regard a young person's behaviour as abusive if there is a large and clear difference in power...including age, size, ability and development; or the perpetrator has repeatedly tried to harm other children; or there are concerns around the intention of the alleged perpetrator. If the evidence suggests that there was an intention to cause severe harm to the victim, this should be regarded as abusive whether or not severe harm was actually caused.

Children naturally engage in forms of sexual exploration with children of a similar age, size, social status, or power. It can be cause for concern if a child is engaging in sexual play with a much younger or more vulnerable child or is using tricks or bribery to persuade the child. The link below shows some examples for different age ranges that we take to be acceptable and appropriate behaviour and then examples of when it would be unacceptable and seen as abusive.

<http://www.cultureofsafety.com/wp-content/uploads/2015/02/Childhood-Development-Sexual-Behavior.png>

Staff at the Next Generation will work together in providing an environment whereby children feel comfortable and safe, promoting good, positive and appropriate peer relationships. At times, during the beginning and the end of each day children come together within the setting, which can sometimes include children from babies up to the age of 11 being together in the same room. As this occurs, ratios will be maintained at all times and staff will be extra vigilant around these issues. Should any member of staff at the Next Generation feel that they have cause for concern around this issue they should immediately share this with the safeguarding lead, who will take the matters further following nursery procedures, gaining support from the specialist assessment team.

Staffing and volunteering

Our policy is to provide a secure and safe environment for all children. We only allow an adult who is employed by the nursery to care for children and who has an enhanced clearance from the Disclosure and Barring Service (DBS) to be left alone with children. We do not allow volunteers to be alone with children or any other adult who may be present in the nursery regardless of whether or not they have a DBS clearance.

All staff will attend child protection training and receive initial basic child protection training during their induction period. This will include the procedures for spotting signs and behaviours of abuse and

abusers/potential abusers, recording and reporting concerns and creating a safe and secure environment for the children in the nursery. During induction staff will be given contact details for the LADO (local authority designated officer), the local authority children's services team, the Local Safeguarding Children Board (LSCB) and Ofsted to enable them to report any safeguarding concerns, independently, if they feel it necessary to do so. At our regular staff meetings, our safeguarding lead has a set slot in the agenda whereby she will give any updates on current practise, guidelines, requirements and procedures and will also update the team on child protection issues/cases within the nursery.

We have a named person within the nursery who takes lead responsibility for safeguarding and co-ordinates child protection and welfare issues, known as the Designated Safeguarding Co-ordinator (DSCO). The nursery DSCO liaises with the Local Safeguarding Children Board (LSCB) and the local authority children's social care team, undertakes specific training, including a child protection training course, and receives regular updates to developments within this field. She will attend safeguarding training every two years and will also attend refreshers in-between.

The Designated Safeguarding Co-ordinator (DSCO) at the nursery is: Zoe Morgan.

Our deputy Safeguarding Co-Ordinator/Officer is Kerri Jackson. A designated member of staff for safeguarding/child protection will be available at all times that the setting is open, for staff to discuss any concerns.

- We provide adequate and appropriate staffing resources to meet the needs of all children
- Applicants for posts within the nursery are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974. Candidates are informed of the need to carry out checks before posts can be confirmed. Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information
- We give staff members/volunteers and students regular opportunities to declare changes that may affect their suitability to care for the children. This includes information about their health, medication or about changes in their home life such as whether anyone they live with in a household has committed an offence or been involved in an incident that means they are disqualified from working with children.
- This information is also stated within every member of staff's contract
- We request DBS checks on a (insert time period, e.g. annually) basis/or we use the DBS update service to re-check staff's criminal history and suitability to work with children
- We abide by the requirements of the EYFS and any Ofsted guidance in respect to obtaining references and suitability checks for staff, students and volunteers, to ensure that all staff, students and volunteers working in the setting are suitable to do so. To aid this, staff have supervisions 6 monthly at which ongoing suitability will be checked along with a health check to ensure they are still suitable for working with children.
- We ensure we receive at least two written references BEFORE a new member of staff commences employment with us
- All students will have enhanced DBS checks conducted on them before their placement starts
- Volunteers, including students, do not work unsupervised
- We abide by the requirements of the Safeguarding Vulnerable Groups Act (2006) and the Childcare Act 2006 in respect of any person who is disqualified from providing childcare, is

dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern

- We have procedures for recording the details of visitors to the nursery and take security steps to ensure that we have control over who comes into the nursery, so that no unauthorised person has unsupervised access to the children
- All visitors/contractors will be supervised whilst on the premises, especially when in the areas the children use
- All staff have access to and comply with the whistleblowing policy which will enable them to share any concerns that may arise about their colleagues in an appropriate manner
- All staff will receive regular supervision meetings where opportunities will be made available to discuss any issues relating to individual children, child protection training and any needs for further support
- The deployment of staff within the nursery allows for constant supervision and support. Where children need to spend time away from the rest of the group, the door will be left ajar or other safeguards will be put into action to ensure the safety of the child and the adult.

Informing parents

Parents are normally the first point of contact. If a suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of the LSCB/ local authority children's social care team/Police does not allow this. This will usually be the case where the parent or family member is the likely abuser, or where a child may be endangered by this disclosure. In these cases the investigating officers will inform parents.

Confidentiality

All suspicions, enquiries and external investigations are kept confidential and shared only with those who need to know. Any information is shared in line with guidance from the LSCB.

Support to families

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

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

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child, only if appropriate in line with guidance of the LSCB with the proviso that the care and safety of the child is paramount. We will do all in our power to support and work with the child's family.

Employees, students or volunteers of the nursery or any other person living or working on the nursery premises

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

The allegation should be reported to the senior manager on duty. If this person is the subject of the allegation then this should be reported to the *owner/*registered person/*DSCO/*deputy manager instead.

The Local Authority Designated Officer (LADO), Ofsted and the LSCB will then be informed immediately in order for this to be investigated by the appropriate bodies promptly:

- The LADO will be informed immediately for advice and guidance
- A full investigation will be carried out by the appropriate professionals (LADO, Ofsted, LSCB) to determine how this will be handled
- The nursery will follow all instructions from the LADO, Ofsted, LSCB and ask all staff members to do the same and co-operate where required
- Support will be provided to all those involved in an allegation throughout the external investigation in line with LADO support and advice
- The nursery reserves the right to suspend any member of staff during an investigation
- All enquiries/external investigations/interviews will be documented and kept in a locked file for access by the relevant authorities
- Unfounded allegations will result in all rights being re-instated
- Founded allegations will be passed on to the relevant organisations including the local authority children's social care team and where an offence is believed to have been committed, the police, and will result in the termination of employment. Ofsted will be notified immediately of this decision. The nursery will also notify the Disclosure and Barring Service (DBS) to ensure their records are updated
- All records will be kept until the person reaches normal retirement age or for 10 years if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary re-investigation
- The nursery retains the right to dismiss any member of staff in connection with founded allegations following an inquiry
- Counselling may be available for any member of the nursery who is affected by an allegation, their colleagues in the nursery and the parents.

Physical intervention

We acknowledge that staff must only ever use physical intervention as a last resort, when a child is endangering him/herself or others, and that at all times it must be the minimal force necessary to prevent injury to another person. Such events should be recorded and signed by a witness. We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures. We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.

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

This policy was adopted on	Signed on behalf of the nursery	Date for review
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<i>08/12/2014</i>	<i>Z.Morgan</i>	<i>08/12/2015</i>
<i>Policy reviewed 30/8/2016</i>		<i>30/8/2017</i>