Lechlade Little Learners Pre-school Safeguarding and child protection policy



Safeguarding and Child Protection policy

Lechlade Little Learners fully recognises the legal responsibility it has under section 40 of The Children's Act 2006 to comply with the welfare requirements of the Early Years Foundation Stage. We work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect, be helped to thrive and to be safe from any abuse in whatever form.

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

Lechlade Little Learners Safeguarding and child protection policies and procedures comply with the Gloucestershire Safeguarding Children's Board (GSCB) which may differ from area to area. The preschool will refer to the GSCB procedures and implement additional procedures where necessary.

Safeguarding is a much wider subject than the elements covered within this single policy, therefore this document should be used in conjunction with the preschool's other policies and procedures including:

- Children's rights and entitlement policy
- Equality policy
- E-safety policy
- Health and safety policy

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- Intimate care policy
- Looked after child policy
- · Recording and reporting of accidents and incidents
- Staff code of conducts
- Supporting children with SEND
- Whistleblowing policy

Legal framework and definition of safeguarding

- Children Act 1989 and 2004
- Childcare Act 2006 (amended 2018)
- Safeguarding Vulnerable Groups Act 2006
- Children and Social Work Act 2017
- The Statutory Framework for the Early Years Foundation Stage (EYFS) 2021
- Working Together to Safeguard Children 2018
- Keeping Children Safe in Education 2020
- Data Protection Act 2018
- What to do if you're worried a child is being abused 2015
- Counter-Terrorism and Security Act 2015.
- Inspecting Safeguarding in Early years, Education and Skills settings 2019
- Prevent Duty 2015

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.

(HM Government document 'Working together to safeguard children 2018).

Policy intention

To safeguard children and promote their welfare we will:

- Provide a safe and secure environment for all children
- Create an environment to encourage children to develop a positive self-image
- Encourage children to develop a sense of independence and autonomy in a way that is appropriate to their age and stage of development

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- Promote tolerance and acceptance of different beliefs, cultures and communities
- Help children to understand how they can influence and participate in decision making and how to promote British values through play, discussion and role modelling
- Always listen to children
- Provide positive role models and develop a safe culture where staff are confident to raise concerns about professional conduct
- Ensure all staff are able to identify the signs and indicators of abuse, including the softer signs of abuse, and know what action to take
- 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.

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

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

Lechlade Little Learners aims to:

- Ensure all staff understand that safeguarding is their responsibility.
- Keep the child at the centre of all we do, providing sensitive interactions that develops and builds children's well-being, confidence and resilience. We will support children to develop an awareness of how to keep themselves safe, healthy and develop positive relationships.
- Ensure staff are trained right from induction to understand the safeguarding and child protection policy and procedures, are alert to identify possible signs of abuse (including the signs known as softer signs of abuse), understand what is meant by child protection and

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are aware of the different ways in which children can be harmed, including by other children (peer on peer) through bullying or discriminatory behaviour.

- Be aware of the increased vulnerability of children with Special Educational Needs and Disabilities (SEND), isolated families and vulnerabilities in families; including the impact of toxic trio on children and Adverse Childhood Experiences (ACE's).
- Ensure that all staff feel confident and supported to act in the best interest of the child;
 maintaining professional curiosity around welfare of children and share information, and
 seek the help that the child may need at the earliest opportunity.
- Ensure all staff have an up-to-date knowledge of safeguarding issues and receive updates
 at least once a year to ensure they remain alert to potential indicators and signs of abuse
 and understand their professional duty to ensure safeguarding and child protection
 concerns are reported to the local authority children's social care team or the NSPCC.
- Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the GLOUCESTERSHIRE EARLY YEARS LOCAL AUTHORITY. (See appendix A for child protection flow chart)
- 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.
- Keep the setting safe online, we refer to 'Safeguarding children and protecting professionals
 in early years settings: online safety considerations and use appropriate filters, checks and
 safeguards, monitoring access at all times and maintaining safeguards around the use
 of technology by staff, parents and visitors in the setting.
- Ensure that children are never placed at risk while in the care of nursery staff. We ensure
 that robust risk assessments are completed and that they are regularly reviewed and
 updated, in line with our health and safety policy.
- Ensure all staff understand the principles of early help (as defined in Working Together to Safeguard Children, 2018) and are able to identify those children and families who may be in need of early help and enable them to access it.
- Ensure all staff understand Gloucestershire Safeguarding Children's Board thresholds of significant harm and understand how to access services for families, including for those families who are below the threshold for significant harm.
- Identify changes in staff behaviour and act on these as per the Staff Behaviour Policy.
- Take any appropriate action relating to allegations of serious harm or abuse against any
 person working with children or living or working on the nursery premises including

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reporting such allegations to Ofsted and other relevant authorities including the local authority.

- Ensure parents are fully aware of our safeguarding and child protection policies and procedures when they register with the nursery and are kept informed of all updates when they occur.
- Regularly review and update this policy with staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by GLOUCESTERSHIRE EARLY YEARS LOCAL AUTHORITY

Named personnel

Lechlade Little Learners has a Designated Safeguarding lead (DSL) within the setting who is responsible for any safeguarding issues. The nursery also has a Deputy Designated Safeguarding Lead (DDSL). These officers have attended a DSL course which they renew every 2 years. One or both officers will be available for contact during setting hours.

- O Designated safeguarding person: Hazel Adamson
- O Deputy designated safeguarding person:

The role of the DSL is to:

- Provide support, advice and guidance to all staff members on all matters relating to
 Safeguarding on an ongoing basis and any specific safeguarding issues as required.
- Keep up-to-date with Gloucestershire Safeguarding Children Board Procedures.
- Ensure that there is no delay in the passing on of information.
- Co-ordinate the management of any suspected cases of abuse and/or allegations.
- Monitor the progress of any child/young person about whom concerns have been expressed.
- Ensure that all staff members are aware of the possible signs and symptoms of abuse.
- Ensure that staff members are aware of the correct procedures to follow in suspected cases of abuse.
- Support staff members throughout any suspected cases of abuse.
- Liaise with local statutory children's services agencies i.e. First Response, the Police and Ofsted as appropriate.
- Ensure the Safeguarding Policy is updated and reviewed annually.
- Support the recruitment of staff and volunteers.

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- Ensure all new staff and volunteers have a proper induction to the Safeguarding Policies and Procedures.
- The designated officer will support the designated person to undertake their role adequately and offer advice, guidance, supervision and support.
- The designated persons will inform the designated officer at the first opportunity of every significant safeguarding concern, however this should not delay any referrals being made to children's social care, or where appropriate, the LADO (Local Authority Designated Officer), Ofsted or RIDDOR.

Staffing and volunteering

Our policy is to provide a secure and safe environment for all children. We follow safer recruitment practices including obtaining references and all staff employed to work with children will have enhanced criminal record checks from the Disclosure and Barring Service (DBS) before being able to carry out intimate care routines or have unsupervised contact with children.

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

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

Ongoing suitability of staff is monitored through:

- Regular supervisions (in person or through observations).
- Declaration of staff suitability.
- Regular review of DBS using the online update service.

Visitors

We welcome visitors to Lechlade little learners. Some will be prospective parents and children wishing to have a look round and others may be from outside agencies eg. Health visitor, speech

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therapist, inspectors. We also have other professionals, parents, committee members and students who come to help on rota or carry out maintenance/practical tasks. Security and safety of the children and staff is paramount.

When a visitor arrives at the setting the following will take place:

- They will be welcomed and asked the purpose of their visit if they have not booked an
 appointment and the purpose is not known. Where appropriate the visitor may be asked for
 identification.
- They are signed into the visitor book where their name, date, time, company and reason for visit are recorded.
- Visitors are told that they are not to go into the children's washroom/toilet area (unless accompanying their own child).
- Visitors will be asked to not use mobile phones on site unless prior agreement is made and any recording equipment is disabled.
- Visitors will be escorted around the building by a staff member.
- Visitors will be given instructions on how to evacuate the building in an emergency.
- When the visit is over they will be signed.
- It is the responsibility of all visitors to adhere by our health and safety guidelines as set out in our Health and Safety General policy when on the premises.

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 inflicting harm, 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 more rarely, 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 signs or symptoms or any of them to a marked degree.

Indicators of child abuse

- Failure to thrive and meet developmental milestones
- Fearful or withdrawn tendencies
- Unexplained injuries to a child or conflicting reports from parents or staff

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- Repeated injuries
- Unaddressed illnesses or injuries
- Significant changes to behaviour patterns.

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

- Emotional states:
 - o Fearful
 - o Withdrawn
 - o Low self-esteem
- Behaviour
 - o Aggressive
 - o Oppositional habitual body rocking
- Interpersonal behaviours
 - o Indiscriminate contact or affection seeking
 - o Over-friendliness to strangers including healthcare professionals
 - o Excessive clinginess, persistently resorting to gaining attention
 - o Demonstrating excessively 'good' behaviour to prevent parental or carer disapproval
 - Failing to seek or accept appropriate comfort or affection from an appropriate person when significantly distressed
 - o Coercive controlling behaviour towards parents or carers
 - o Lack of ability to understand and recognise emotions
 - Very young children showing excessive comforting behaviours when witnessing parental or carer distress.

Peer-on-peer abuse

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

Physical abuse

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

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

Fabricated illness

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

Female genital mutilation (FGM)

FGM can also be known as Female Genital Cutting. FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death (definition taken from the Multi-Agency Statutory Guidance on Female Genital Mutilation). The procedure may be carried out shortly after birth and during childhood as well as adolescence, just before marriage or during a woman's first pregnancy and varies widely according to the community.

FGM is child abuse and is illegal in the UK. It can be extremely dangerous and can cause:

- Severe pain
- Shock
- Bleeding
- Infection such at tetanus, HIV and hepatitis B and C
- Organ damage

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- Blood loss and infections
- Death in some cases

Any concerns about a child or family, will be reported to the children's social care team in the same way as other types of physical abuse. We have a mandatory duty to report to police any case where an act of female genital mutilation appears to have been carried out on a girl under the age of 18.

Breast ironing/flattening

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

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

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

Sexual abuse

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

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abuse. Adult males do not solely perpetrate sexual abuse; women can also commit acts of sexual abuse, as can other children.

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

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

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

Physical Signs:

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

Child sexual exploitation (CSE)

Keeping Children Safe in Education (2020) describes CSE as: where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even

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if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology. CSE can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person's immediate knowledge (e.g. through others copying videos or images they have created and posted on social media).

Signs and indicators may include:

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

Child Criminal Exploitation (CCE)

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

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

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

If staff have any concerns regarding CSE or CCE, they will be reported in the usual way.

Emotional abuse

Working Together to Safeguard Children (2018) defines emotional abuse as 'the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development'. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill -treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Signs and indicators may include:

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

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Appear unconfident or lack self-assurance.

Action will be taken if the staff member has reason to believe that there is a severe, adverse effect on the behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection. Children may also experience emotional abuse through witnessing domestic abuse and alcohol and drug misuse by adults caring for them.

Neglect

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

- 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.

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

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

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

County Lines

The National Crime Agency (NCA) describe county lines as a term used to describe gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of 'deal line.' Customers will live in a different

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area to where the dealers and networks are based, so drug runners are needed to transport the drugs and collect payment.

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

Signs and indicators to be aware of include:

- Changes in the way young people you might know dress
- Unexplained, sometimes unaffordable new things (e.g. clothes, jewellery, cars etc.)
- Missing from home or schools and/or significant decline in performance
- New friends or relationships with those who don't share any mutual friendships with the victim or anyone else
- May be carrying a weapon
- Receiving more texts or calls than usual
- Sudden influx of cash, clothes or mobile phones
- Unexplained injuries
- Significant changes in emotional well-being
- Young people seen in different cars/taxis driven by unknown adults
- Young people seeming unfamiliar with your community or where they are
- Truancy, exclusion, disengagement from school
- An increase in anti-social behaviour in the community
- Unexplained injuries
- Gang association or isolation from peers or social networks

Cuckooing

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

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Contextual safeguarding

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

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

Domestic Abuse / Honour Based Abuse / Forced Marriages

We look at these areas as a child protection concern. Please refer to the separate policy for further details on this

Extremism – the Prevent Duty

Under the Counter-Terrorism and Security Act 2015 we have a duty to safeguard at risk or vulnerable children under the Counter-Terrorism and Security Act 2015 to have "due regard to the need to prevent people from being drawn into terrorism and refer any concerns of extremism to the police (In Prevent priority areas the local authority will have a Prevent lead who can also provide support).

Children can be exposed to different views and receive information from various sources. Some of these views may be considered radical or extreme. Radicalisation is the way a person comes to support or be involved in extremism and terrorism. It's a gradual process so young people who are affected may not realise what's happening.

Radicalisation is a form of harm. The process may involve:

- Being groomed online or in person
- Exploitation, including sexual exploitation
- Psychological manipulation
- Exposure to violent material and other inappropriate information
- The risk of physical harm or death through extremist acts

Online Safety

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We take the safety of our children very seriously and this includes their online safety. Please refer to the E-Safety policy for further details.

Child abuse linked to faith or belief (CALFB)

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

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

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

Reporting Procedures

All staff have a responsibility to report safeguarding/child protection concerns and suspicions of abuse. These concerns will be discussed with the designated safeguarding lead (DSL) as soon as possible.

- Staff will report their concerns to the DSL (in the absence of the DSL they will be reported the DDSL. If in doubt, practitioners should refer to Appendix B flowchart. A copy of the flowchart is on Famly.
- Any signs of marks/injuries to a child or information a child has given will be recorded and stored securely. All disclosures will be added to a child's notes with a body map if requires.
- For children who arrive at nursery with an existing injury, an accident at home form will be completed along with the parent's/carers explanation as to how the injury happened. Staff will have professional curiosity around any explanations given, any concerns around existing injuries will be reported.
- If appropriate, any concerns/or incidents will be discussed with the parent/carer and discussions will be recorded. Parents will have access to these records on request in line with GDPR and data protection guidelines.

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 If there are queries/concerns regarding the injury/information given, then the following procedures will take place:

The DSL or DDSL will:

- Tell the parents about the referral if possible and appropriate
- Contact the Local Authority children's social care team to report concerns and seek advice immediately, or as soon as it is practical to do so. If it is believed a child is in immediate danger, we will contact the police.
- Inform Ofsted (if appropriate use notification guidance to determine need)
- Record the information and action taken relating to the concern raised
- The designated safeguarding lead will follow up with the Local Authority children's social care team if they have not contacted the setting within the timeframe set out in 'Working Together to Safeguarding Children (2018)'. We will never assume that action has been taken.

Keeping children safe is our highest priority and if, for whatever reason, staff do not feel able to report concerns to the DSL or deputy DSL they should call the Local Authority children's social care team or the NSPCC and report their concerns anonymously.

These contact numbers are displayed in the office and in Famly documents.

Responding to a spontaneous disclosure from a child

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

- Give full attention to the child or young person
- Keep body language open and encouraging
- Be compassionate, be understanding and reassure them their feelings are important.
 Phrases such as 'you've shown such courage today'
- Take time and slow down: we will respect pauses and will not interrupt the child let them go at their own pace
- Recognise and respond to their body language
- Show understanding and reflect back
- Make it clear you are interested in what the child is telling you

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- Reflect back what they have said to check your understanding and use their language to show it's their experience
- Reassure the child that they have done the right thing in telling you. Make sure they know that abuse is never their fault
- Never talk to the alleged perpetrator about the child's disclosure. This could make things a
 lot worse for the child.

Any disclosure will be reported to the nursery manager or DSL and will be referred to the local authority children's social care team immediately, following our reporting procedures. 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 the supposed or actual behaviour of a parent or member of staff and all staff, students and volunteers read and sign the confidentiality policy as part of their induction; this is reviewed yearly.

Recording Suspicions of Abuse and Disclosures

Staff should make an objective record of any observation or disclosure using a Cause for Concern sheet, supported by the nursery manager or designated safeguarding lead (DSL). 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 concern was reported, with date and time;
 and the names of any other person present at the time
- Any discussion held with the parent(s) (where deemed appropriate).

These records should be signed by the person reporting this and the DSL, dated and kept in a separate confidential file or on the child's online profile (not visible to parents)

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

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openly and disclosure is not forced or words put into the child's mouth. As soon as possible after the disclosure details must be logged accurately. It is not the nursery's role to investigate, it is the role of statutory services to complete this.

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

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 local authority children's social care team/police does not allow this to happen. 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 local authority. All staff, students and volunteers are bound by confidentiality and any information will not be discussed out of work, or this will become a disciplinary matter.

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

Support to families

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

The preschool 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

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non-judgmental manner whilst any external investigations are carried out in the best interest of the child.

Record Keeping

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 and in line with guidance of the local authority 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.

The preschool keeps appropriate records to support the early identification of children and families that would benefit from support. Factual records are maintained in a chronological order with parental discussions. Records are reviewed regularly by the DSL to look holistically at identifying children's needs.

Allegations against adults working or volunteering with children

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.

This part of the policy refers to two sections covering the two levels of allegation/concern:

- 1. Allegations that may meet the harms threshold.
- Allegation/concerns that do not meet the harms threshold referred to for the purposes of this guidance as 'low level concerns', in line with Keeping Children Safe in Education (September 2021)

Section one: Allegations that may meet the harms threshold

This part of the guidance is about managing cases of allegations that might indicate a person would pose a risk of harm if they continue to work in their present position, or in any capacity with children in a school or college. The guidance should be followed where it is alleged that anyone working in the school or a college that provides education for children under 18 years of age, including bank staff, volunteers and contractors 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;

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behaved towards a child or children in a way that indicates he or she may pose a risk of

harm to children: or

• behaved or may have behaved in a way that indicates they may not be suitable to work with

children.

The allegation should be reported to the senior manager on duty. If this person is the subject of the

allegation then this should be reported to the Committee Chair instead.

Section Two: Concerns that do not meet the harm threshold

Concerns may arise in several ways and from a number of sources. For example: suspicion;

complaint; or disclosure made by a child, parent or other adult within or outside of the

organisation; or as a result of vetting checks undertaken.

Low level concerns

As part of our whole setting approach to safeguarding, schools, colleges and nurseries should

ensure that they promote an open and transparent culture in which all concerns about all adults

working in or on behalf of the school or college (including bank staff, volunteers and contractors)

are dealt with promptly and appropriately.

Creating a culture in which all concerns about adults (including allegations that do not meet the

harms threshold (Section one)) are shared responsibly and with the right person, recorded and

dealt with appropriately, is critical.

What is a low level concern?

The term 'low-level' concern does not mean that it is insignificant, it means that the behaviour

towards a child does not meet the threshold.

A low-level concern is any concern – no matter how small, and even if no more than causing a

sense of unease or a 'nagging doubt' - that an adult working in or on behalf of the school or

college may have acted in a way that:

is inconsistent with the staff code of conduct, including inappropriate conduct outside of

work; and

• does not meet the allegations threshold or is otherwise not considered serious

enough to consider a referral to the LADO.

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Examples of such behaviour could include, but are not limited to:

- being over friendly with children;
- having favourites;
- taking photographs of children on their mobile phone;
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door;
 or.
- Using inappropriate sexualised, intimidating or offensive language.

Such behaviour can exist on a wide spectrum, from the inadvertent or thoughtless, or behaviour that may look to be inappropriate, but might not be in specific circumstances, through to that which is ultimately intended to enable abuse.

It is crucial that any such concerns, including those which do not meet the harm threshold are shared responsibly and with the right person, and recorded and dealt with appropriately.

This policy was reviewed October 2024.

This policy is to be reviewed annually unless legislation requires before.

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Contact details

O Local Authority Children's Helpdesk

(Children & Families Front Door open 9am to 5pm Monday to Friday)

Tel: 01452 426565 Email: childrenshelpdesk@gloucestreshire.gov.uk

O Local Authority Emergency Duty Team

(Children & Families Services Emergency Duty Team out of Hours)

Tel: 01452 614194

O Local Authority Designated Officer (LADO)

Tel: 01452 426320

O Local Authority MULTI-AGENCY SAFEGUARDING HUB (MASH) for urgent concerns)

Tel: 01452 426565 - option 3

O Gloucestershire Early Help Coordinators (Cotswold)

Tel: 01452 328101

O Gloucestershire Community Social Work Team (Cotswold)

Tel: 01452 426263

- O NSPCC 0808 800 5000
- O Ofsted 0300 123 1231
- O Emergency police 999
- O Non-emergency police 101
- O Government helpline for extremism concerns 020 7340 7264
- O Child exploitation and Online protection command (CEOP)

https://www.ceop.police.uk/safety-centre/