

Child Protection and Safeguarding Policy

Policy statement:

At Little Laura's nursery we promote children's rights, to be strong, resilient and listened to by creating an environment in our setting that encourages children to develop a positive self image, including all aspects of their identity and heritage developing a strong sense of autonomy and independence. We know that children learn best when they are healthy, safe and secure, where their individual needs are met and when they have positive relationships with the adults caring for them.

We work with staff and parents/carers to build their understanding of, and commitment to, the principles of safeguarding all our children to ensure the children get the best possible start in life.

We are committed to responding promptly and appropriately to all incidents or concerns of abuse that may occur and work with statutory agencies in accordance with current procedures.

Our commitments:

Recruitment and staffing

- We ensure all staff read, understand and adhere to our safeguarding policies and procedures.
- We provide adequate and appropriate staffing resources to meet the needs of the children.
- We have a Designated Safeguarding officer (DSO) who has the lead responsibility for liaison with local statutory children's services agencies and with the Local Safeguarding Children's Board (LSCB).
- Our DSO provides training, support, advice and guidance to staff and students during inductions, one to ones and staff meetings, and on any specific safeguarding issue as required.
- The DSO attends child protection training at least every two years, that enables them to identify, understand and respond appropriately to signs of possible abuse and neglect and knowledge and skills are refreshed at least annually.
- We ensure that robust recruitment procedures for new staff are always in place and fully implemented to ensure the suitability of adults that have contact with the children (see suitable people policy).
- We develop a team environment where cliques are discouraged and no one person inappropriately assumes a position of power and authority.

- We have effective staff supervision and opportunities to whistle blow.
- We maintain appropriate boundaries between staff and parents and within the staff group.

<u>Visitors</u>

- We ensure that volunteers and visitors to the setting are always supervised.
- Visitors and volunteers are asked to sign in and not use their mobile phones or any recording devices whilst on site.
- We take security steps to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.
- We have a mobile phone and internet usage policy that visitors must adhere to.
- We maintain secure records for all staff and children in the setting.

Assigned Officers and Relevant Legislation

Designated Safeguarding Officer (DSO): Louise Ashwell-Symes, Manager

Deputy Designated Safeguarding Officer (DDSO): Laura Attfield, Owner

Deputy Designated Safeguarding Officer (DDSO): Sadie Thompson, Deputy Manager

These officers have undergone specialist training which is updated on a regular basis. They are responsible for liaising with the Multi-agency Safeguarding Hub (MASH), Social Services, The Local Safeguarding Children's Board (LSCB) and Ofsted in any child protection matter.

Recognising and responding to suspicions of abuse (child):

Child abuse manifests itself in a variety of different ways, some overt and others much less so. All staff are required to have child protection training and will remain vigilant to signs and evidence of physical, sexual and emotional abuse including female genital mutilation (FGM), honour based violence (HBV), arranged and forced marriages, child sexual exploitation (CSE), neglect, risk of radicalisation and disguised compliance.

- We are committed to responding promptly and appropriately to all incidents or concerns of abuse that may occur and to work with statutory agencies in accordance with the procedures that are set down
- We acknowledge that abuse of children can take different forms-physical, emotional and sexual as well as neglect.
- When children are suffering from physical, sexual or emotional abuse, or may be experiencing neglect, this may be demonstrated through the things that they say, (direct or indirect disclosure) or through changes in their appearance, their behaviour or their play.
- We take into account factors affecting parental capacity, such as social exclusion, domestic violence, parent's drug or alcohol abuse, mental or physical illness or parent's learning disability.

- We are aware of other factors that affect children's vulnerability such as abuse of disabled children, fabricated or induced illness, child abuse linked to beliefs in spirit possession, sexual exploitation of children such as through internet abuse and Female Genital Mutilation that may affect or may have affected children and young people using our provision.
- We take account of the need to protect young people aged 16-19 as defined by the Children Act 1989. This may include students or school children on work placement, young employees or young parents. Where abuse is suspected we follow the procedure for reporting any other child protection concerns. The views of the young person will always be taken into account, but the setting may override the young person's refusal to consent to share information if it feels that it is necessary to prevent a crime from being committed or intervene where one may have been or to prevent harm to a child or adult. Sharing confidential information without consent is done only where not sharing it could be worse than the outcome of having shared it.
- We record all existing injuries that a child has received at home and keep a log of these; we understand that unexplained bruising or marks may be signs of possible abuse or neglect.
- We discuss as a team any significant changes to a child's behaviour
- We pay regard to the government's statutory guidance 'Working Together to Safeguard Children 2018' and to the 'Prevent duty guidance for England and Wales 2015'

Types of Child Abuse (Including triggers and warning signs)

Physical Abuse

This involves hitting, shaking, throwing, burning, suffocating or any other physical harm. Deliberately causing a child's ill health also constitutes physical abuse.

Triggers and warning signs:

- · Physical symptoms such as unusual bruising, scratches, burns, hand or bite marks etc.
- \cdot Vomiting, drowsiness or seizures from poisoning or substance abuse
- · Frequent unexplained physical injury
- · Child becoming increasingly aggressive or causing physical harm to themselves, other people and/or animals
- \cdot Acting withdrawn, unresponsive, anxious about being touched

Sexual Abuse

This involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including

penetrative or non-penetrative acts, female genital mutilation (FGM) and honour based violence. Showing children pornographic materials, sexual activities, or encouraging children to behave in sexually inappropriate ways also constitutes sexual abuse.

Triggers and warning signs:

- · Children displaying abnormal and inappropriate sexual knowledge or actions
- · Physical symptoms including bruising, cuts, tears, rashes, swelling, discharge or bleeding around genital and/or anal area
- · Persistent or recurring pain when urinating or passing bowel movements
- · Frequent gynaecological problems such as urinary tract and other infections

Emotional Abuse

Varying degrees of emotional abuse is present in virtually all child protection incidents, but can also constitute abuse in its own right. Emotional abuse involves persistent or severe emotional ill treatment or torture, or likely to cause severe adverse effects on the emotional stability of a child. Such behaviour may involve conveying to a child that they are worthless, unloved or inadequate, or making them feel unnecessarily frightened or vulnerable.

Triggers and warning signs:

- Unusual changes in behaviour such as acting withdrawn, unresponsive, increasingly upset, confused or aggressive towards other people and/or animals
- · Lacking in confidence and displaying feelings of worthlessness
- · Not appearing to have a very close relationship with their parent/guardian
- · Being overly affectionate towards other adults or people they haven't known very long

Neglect

Neglect is the persistent failure to meet the child's basic physical, emotional or psychological needs, such as likely to have a severe impact on their health development or emotional stability. Neglect may involve failing to provide adequate food, shelter or clothing for a child, or failing to adequately protect them from physical harm or ill health. Neglect can also manifest its self in a failure to meet the basic emotional needs of the child.

Triggers and warning signs:

- · Poor appearance or hygiene, inadequate clothing or meals provided
- Health and development problems including recurring accidental injuries, illnesses and infections, dental problems, missed medical appointments such as vaccinations, poor language, communication and social skills, failure to thrive
- \cdot Unsuitable home environments, being left alone for long periods of time
- Poor attendance
- · Low self-esteem/confidence

Arranged and Forced Marriage, Honour Based Violence (HBV), Female Genital Mutilation (FGM) and Breast Ironing (BI)

In many countries and cultures, marriages may be arranged where both bride and groom voluntarily and willingly marry after being introduced by their families or close family friends and, sometimes, by marriage bureaux. However, it is important to note that processes and structures used for arranged marriages can also be used to bring about a forced marriage. A forced marriage is a marriage in which one or both spouses do not (or, in the case of some adults with learning or physical disabilities, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure. Children exposed to duress in their home environment are at significant risk of experiencing domestic abuse. Forced marriage is now an offence, even if legal in the country where they will be married. If a child is to be forced into marriage this is also child abuse.

The term 'Honour Based Violence' (HBV) is the internationally recognised term describing cultural justifications for violence and abuse. It justifies the use of certain types of violence and abuse against women, men and children. HBV is normally associated with cultures and communities from Asia, the Middle East and Africa as well as Gypsies and Travellers but in

reality, HBV cuts across all cultures, nationalities, faith groups and communities and transcends national and international boundaries. HBV is a domestic abuse issue, a child abuse concern and a crime in the UK.

Female Genital Mutilation (FGM) is an act of violence against women and girls and an extreme form of domestic and child abuse. The term FGM refers to the removal of part or all of the female genitalia for cultural or other non-therapeutic reasons. This is extremely painful and has serious consequences for physical and mental health and can result in death.

Breast ironing (BI) also known as "breast flattening" is the process whereby young pubescent 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 and therefore be kept in education. Professionals working with children and young people must be able to identify the signs and symptoms of girls who are at risk of or have undergone BI. Similarly to FGM, BI is classified as physical abuse, although there is no specific law within the UK around BI.

Triggers and warning signs:

- · Poor attendance
- · Low motivation, isolation, acting withdrawn
- · History of parents or siblings forced to marry
- · History of excessive or unreasonable family restrictions

- · Reports of domestic violence/abuse or breaches of the peace at the family home
- · Frequent gynaecological problems
- · Physical symptoms of FGM, BI

Radicalisation and the Prevent Duty

Radicalisation is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups. Children can be drawn into violence or they can be exposed to the messages of extremist groups through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet. This can put children at risk of being drawn into criminal activity and has the potential to cause Significant Harm.

In order for childcare providers to fulfil the Prevent duty, it is essential that staff are able to identify children who may be vulnerable to radicalisation, and know what to do when they are identified. Childcare providers can also build children's resilience to radicalisation by promoting fundamental British Values and enabling them to challenge extremist views. Please see Little Laura's Policies and Procedures for an overview of how we apply and encourage British Values in the setting.

Triggers and warning signs:

- · Poor attendance
- · Visiting countries where extreme violence, terrorism and radicalisation is present
- · Family tensions
- · Disassociating from existing friendship groups and becoming involved with a new and different group of friends
- \cdot Demonstrating (awareness of) or violent or extreme behaviour and language
- Significant shift in the behaviour or outward appearance of children and their families that suggests a new social/political or religious influence

Child Sexual Exploitation (CSE)

Child sexual exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child under the age of 18 into sexual activity (a) in exchange for something with victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact, it can also occur through the use of technology without the child's immediate recognition; for example being persuaded to pose for or post indecent images on the internet/mobile phones without immediate payment or gain.

In all cases those exploiting the child have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Triggers and warning signs:

- · Poor attendance
- · Inappropriate sexual/violent knowledge, language or behaviour
- \cdot Unusually withdrawn, over emotional or lack of emotion
- · Feelings of worthlessness
- · Change of relationship noticed with family/friends
- \cdot Suddenly having a lot of new items or a second mobile phone
- · Self harming or substance abuse

Disguised Compliance

Disguised compliance occurs when parents want to draw the professional's attention away from allegations of harm. It involves parents giving the appearance of co-operating with child welfare agencies to avoid raising suspicions, allay professional concerns and ultimately to diffuse professional intervention. Parents will often want to pre-arrange home visits in order to present the home as clean and tidy with no evidence of any other adults living there. Parents may focus on engaging well with one set of professionals, for example in education, to deflect attention from their lack of engagement with other services. Or they may try and avoid contact with professionals by promising to change their behaviours and/or take up services offered to them but then fail to attend these services with no contact. Parents may also criticise other professionals to divert attention away from their own behaviours.

As practitioners, we should not simply accept presenting behaviour, excuses or parental assertions and reassurances that they have changed or will change their behaviour. We should establish the facts and gather evidence about what is actually occurring or has been achieved, in order to not lose objective sight of what is happening. By building chronologies

evidence of past parenting experience will be recorded, including possible former instances of disguised compliance and will assist in analysing parent history.

Recording can become focussed on the adult's participation and parenting capacity. Instead the focus should be on recording the children's perspective and situation. This will help to retain the focus on the child and can also help to ensure that important information does

not become lost when shared between multiple agencies. Focus on outcomes rather than process, so that attention cannot be deflected by good intent or an appearance of participation. Identify and establish clear, understandable and measurable outcomes and take action when outcomes are not achieved within agreed time scales.

Safe Caring

Every effort will be made to avoid instances when members of staff, students or parents are left alone with a child other than their own, for their own protection and that of children and young people. There will be a minimum of 2 adults within each area where children are present, if practitioners feel that supervision has become inadequate due to arising circumstances, such as children needing one to one assistance, they will increase the levels of supervision by reducing the area size and eliminating free-flow access for certain periods of time.

Staff always encourage children to be as independent as possible in their personal hygiene and dress. Nappy changes and other intimates care routines will take place in the bathroom area which is in sight and sound of other staff members. Staff will be mindful of how and where they touch children, given their age and emotional understanding. Unnecessary or potentially inappropriate physical contact will be avoided at all times. All allegations made by a child against a member of staff will be fully and accurately recorded on an incident record form, including any further action taken.

Dealing with Allegations

Little Laura's is committed to ensuring that it meets its responsibilities in respect to child protection by treating any allegation seriously and sensitively. On discovering an allegation of abuse, the DSO or DDSO will immediately refer the case to the Multi-agency Safeguarding Hub (MASH). In addition the following principles will govern any suspected or reported case of abuse:

- Where actual or suspected abuse comes to the attention of staff, they will immediately report this to the DSO and the DDSO. This includes any allegation about a staff member.
- Staff members are encouraged and supported to trust their professional judgement and if they suspect abuse has, or is taking place, to report this.

Full written factual records of all reported incidents will be produced and kept confidential, dated and signed. This will include:

- 1. Full details of the alleged incident.
- 2. Details of all parties involved.

- 3. Any evidence or explanations offered by interested parties.
- 4. Relevant dates, times and locations and any supporting information or evidence from members of staff.

In circumstances where a child makes an allegation or a disclosure, the member of staff concerned will:

- Listen fully to what the chid has to say.
- Make no observable judgement.
- Ask open ended questions encouraging the child to speak in their own words.
- Care is taken to not influence the child's responses.
- Ensure the child is safe, comfortable and not left alone.
- Make no promises that cannot be kept, such as promising not to tell anybody what they are being told.
- The disclosure is written down in the exact spoken words of the child as far as possible.
- OFSTED would be notified of any allegations of serious harm or abuse by any person working or looking after the children at the nursery, as soon as possible but at the latest within 14 days of the allegation being made.

Procedures:

In the event that a member of staff has a concern about a child's welfare they should follow the steps as laid out in "What to do if you are worried a child is being abused."

They are as follows but more information can be sought from this document that is available in the office.





No further child protection action, DSO refers to MASH and follows up in although may need to act to writing within 24 hours ensure services provided Feedback to referrer on next course Social worker and manager of action acknowledge receipt of referral and decide on next course of action within one working day No further LA children's social care involvement at this stage, although other action may be necessary, e.g. onward referral Initial assessment required Concerns about child's immediate safety See flow chart 3 on emergency action in "What to do if you are concerned a child is being abused

What to do if you are worried about a child's welfare

If you have concerns about a child's welfare please speak straight away to the designated safeguarding officer(DSO)

Nursery Manager- Louise Ashwell-Symes

On 07984195911

If for any reason Louise is not on site please speak to

Nursery Owner- Laura Attfield

On 07817639466

Or the Deputy Manager- Sadie Thompson

If you have discussed your concerns with the DSO and do not feel these have been dealt with appropriately you can always discuss your concerns with the Multi-agency Safeguarding Hub (MASH) on; (01403) 229900.

If the concern is related to another member of staff you can contact Local Authority Designated Officer (LADO) on: 0330 222 3339

Informing parents;

- Parents are normally the first point of contact. We discuss concerns with parents to gain their view of events unless we feel this may greater endanger the child.
- We inform parents where we make a record of concerns in the safeguarding file, and we make a note of any discussions we have with them.
- If a suspicion warrants a referral to the MASH, parents are informed at the same time that the referral will be made, except where the guidance of the Local Safeguarding Children Board does not allow for this, for example if it is believed that a child would be placed at greater danger.

• Social services will inform the parents of the allegations in events where the nursery has been advised not to.

Responding to suspicions of abuse against a member of staff:

- We ensure that all parents know how to complain about the behaviour or actions of staff or volunteers within the setting, or anyone living or working on the premises occupied by members of the nursery staff, which may include an allegation of abuse.
- We follow the guidance of the MASH when responding to any complaint that a member of staff, or volunteer within the setting, or anyone living or working on the premises occupied by the setting, has abused a child.
- We respond to any disclosure by children or staff that abuse by a member of staff or volunteer within the setting, or anyone living or working on the premises occupied by the setting, may have taken, or is taking place, by first recording the details of any such alleged incident.
- We refer any such complaint immediately to the local authority's social care department to investigate. We also report any such alleged incident to Ofsted and what measures we have taken. We are aware that it is our legal obligation.
- We co-operate entirely with any investigation carried out by children's social care in conjunction with the police.
- Where the management and children's social care agree it is appropriate in the circumstances, the Nursery Owner will suspend the member of staff on full pay, or the volunteer, for the duration of the investigation. This is not an indication of admission that the alleged incident has taken place, but is to protect the staff as well as children and families throughout the process.

Disciplinary action

Where a member of staff or volunteer has been dismissed due to engaging in activities that caused concern for the safeguarding of children or vulnerable adults, we will notify the Local Authority Designated Officer (LADO) who has overall responsibility for the management of allegations of abuse by adults who work with or volunteer with children.

Legal framework:

Little Laura's Nursery child protection procedures comply with all relevant legislation:

Primary legislation

- Children Act (1989 s47)
- Protection of Children Act (1999)
- Data Protection Act (1998)
- The Children Act (Every Child Matters) (2006)
- Safeguarding Vulnerable Groups Act (2006)

Secondary legislation

- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Human Rights Act (1999)
- Race Relations (Amendment) Act (2000)
- Race Relations (Amendment) Act (1976) Regulations
- Equalities Act (2010)
- Data Protection Act (1998) Non Statutory Guidance

Further Guidance

- Working Together to Safeguard Children (revised July 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 & Continuum of need (2013)
- · Statutory guidance on making arrangements to safeguard and promote the welfare of
- children under section 11 of the Children Act 2004 (HMG 2007)
- Information Sharing: Practitioners' Guide (HMG 2015)