

Little Hayes and Speedwell Nursery School Federation(Including Early birds 2 year old provision based at St Anne’s Children Centre)

POLICY FOR SAFEGUARDING CHILDREN AND CHILD PROTECTION

Including temporary measures in response to COVID 19

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Designated Officer for Child Protection-Lindsey Fuller (Head)
Deputy Designated Officer-Liz Allen (Deputy Head)
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Nominated Governor for Child Protection-Maggie Whittle*

Page 20 - quick reference flowchart “What to do if you are worried a child/young person is being abused or neglected” and key telephone numbers

RATIONALE

Promoting the welfare, safety and protection of the children we come into contact with is our very first priority. This principle is paramount in law (Children Act 1989) and in our statutory guidance, which states that “children learn best when they are healthy, safe and secure, when their individual needs are met, and when they have positive relationships with the adults caring for them” (EYFS 2017). Management, staff, governors, students and volunteers must all understand their role in safeguarding children and the child protection procedures to follow if they have any concerns for a child’s wellbeing. Appropriate training and support is provided but it is the responsibility of each individual to ensure they are confident in using this policy and to seek support if they are unsure of what to do.

KEY LINKED POLICIES

Safeguarding children is at the heart of everything we do and as such it relates to every policy, but in particular: *Positive Behaviour; Looked After Children; Inclusion; Attendance; Family Support Referrals; Home Visiting; Health & Safety; Guidance on FGM; Policy on Photography, Video, Mobile Phone and E-Safety; BCC’s ‘Whistle Blowing’ policy; BSCB’s Escalation Policy; Supervision & Mentoring Policy; BSCB’s ‘guidance on the transfer of a child protection file to another setting’; ‘BSCB Multi-Agency Guidance for Injuries in NON-MOBILE Babies’.*

AIMS

- To ensure everyone in the nursery school & children’s centre, including parents/carers, understands our commitment to safeguarding children and our child protection procedures.
- To provide a clear model of management when concerns are raised for a child’s welfare, or about the conduct of an adult/member of staff.
- To ensure safe and effective recruitment procedures.
- To create an environment in which every child is valued as a member of the nursery & children’s centre community, is listened to and encouraged to articulate their wishes and feelings.
- To enable open and effective communication between all those involved through clear recording and information sharing procedures.

BROAD GUIDELINES: Little Hayes and Speedwell Nursery School Federation & Children’s Centre safeguards children by:-

- Always taking concerns about a child’s welfare seriously.
- Integrating key concepts of safeguarding across the curriculum and children’s centre activities.
- Helping children develop the skills and attitudes to make positive choices and decisions, thus making them less vulnerable.
- Increasing children’s resilience to adversity by promoting their security, confidence and independence.
- Having a named overall Lead Designated Officer across all sites, named deputy designated officers on all sites and a Governor for safeguarding & child protection and a clear reporting and management accountability structure for actual or suspected CP issues.
- Ensuring everyone in the school & children’s centre is a suitable person to work with children and is trained in child protection awareness and up to date procedures.
- Working in partnership with parents/carers to develop a relationship of mutual trust and ensuring they are aware of our Safeguarding & CP Policy through availability of the safeguarding policy and procedures on the Nursery School websites and posters displayed in the setting of

named designated officers and details about how to refer concerns to First Response

- Offering a range of support services to families which are tailored to their individual needs.
- Applying the same professional standards regardless of an individual's culture, physical & mental ability, gender, language, racial origin, religious belief, and/or sexual orientation.

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1. What does Safeguarding and Child Protection mean?

Safeguarding covers the wide range of ways in which we help prevent 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 and enabling those children at risk to have optimum life chances. We aim to proactively safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced. **Child protection** is an essential part of safeguarding and promoting children's welfare and is the process of protecting specific children who are suffering or at risk of suffering significant harm from abuse or neglect (Working Together to keep Children Safe July 2018).

2. What are child abuse and neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse a child by inflicting harm, or neglect a child by failing to prevent harm.

The 1989 Children Act identifies four categories of abuse where individuals or groups of children or adults may suffer:

Physical abuse

This is deliberately physically hurting a child or failure to prevent physical injury. It may take a variety of different forms including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child. This includes **Female Genital Mutilation** (female 'cutting' or 'circumcision'), which is performed by some cultures and is illegal in the UK - regardless of the country in which it is performed. (See FGM – Multi Agency guidance July 2011 BSCB)

Sexual abuse

Sexual abuse is any sexual activity with a child. You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong. Sexual abuse can have a long-term impact on mental health. 17. Sexual abuse 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 clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Neglect

Neglect is a pattern of failing to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter. It is likely to result in the serious impairment of a child's health or development. 20. Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action.³ However, while you

may be concerned about a child, neglect is not always straightforward to identify. 21. Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development.^{2 14}. Although the effects of emotional abuse might take a long time to be recognisable, practitioners will be in a position to observe it, for example, in the way that a parent interacts with their child. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. 15. Emotional abuse may involve serious bullying – including online bullying through social networks, online games or mobile phones – by a child's peers

If it is agreed at a Child Protection Conference meeting that a child needs to be the subject of a Child Protection Plan in order to keep them safe, one of these categories will be chosen that best represents the harm the child is suffering (or likely to suffer). In reality, there is often overlap between categories. For example, all forms of abuse involve some emotional ill-treatment.

3. Recognising Abuse

Looking out for, and recognising, abuse is one of the first steps in protecting children and young people. We have a responsibility to be alert to signs that all may not be well with a child and to take the appropriate action. Signs a child may give that all is not well for them could include:

- Significant changes in personality e.g. becoming aggressive, withdrawn, or insecure.
- Seeming to be keeping a secret.
- Deterioration in a child's general wellbeing
- Unreasonable fear of certain people or places, or not wanting to go home.
- Acting out in an inappropriate way perhaps with adults, other children, toys or objects.
- Unexplained bruises, injuries or burns – or explanations which do not seem consistent with the injury.
- Sexually explicit language or actions which do not seem age appropriate.

Statistically, children with behavioural difficulties and disabilities are more vulnerable to abuse. It should not be assumed automatically that any of the above relates to a child's impairment.

We also need to be vigilant for any inappropriate behaviour displayed by other adults working with the children or parents/carers looking after children and follow the procedures for reporting these concerns (See Section 11). Some examples of concerning behaviour:

- Inappropriate sexual comments
- Excessive one-to-one attention (particularly if out of sight of other adults) beyond the requirements of their usual role and responsibilities
- Inappropriate sharing of images
- Adults with mental health challenges – consistently late in collecting a child, repeated pattern of unexplained absences from school
- Communication signs- inappropriate verbal communication (adults)
- Signs of personal physical neglect (adult)

4. What to do if you suspect a child is suffering abuse or neglect, or is at risk of suffering, abuse or neglect:

The Bristol safeguarding Children's Board gives full guidance that all agencies in Bristol must follow. Our policy is based on these procedures but please refer to BSCB for detailed guidance on e.g. forced marriages, female genital mutilation, sexual abuse etc.

- **Talk to the Designated Officer for Child Protection (Lindsey Fuller)** or one of the deputy designated child protection officers **as soon as possible** in the working day so that any necessary liaison and planning can take place. The deputy designated officers are Liz Allen, Speedwell). (Tanya Tooby , Little Hayes). (Lucy Hudd (Designated Lead- East Bristol Children Centre Hub) Anna Maynard- Deputy designated lead – East Bristol Children Centre Hub) . If none of these are available, speak to the next most senior staff member in charge. Should none of the above be available, any concerns must be discussed with First Response. **ACTION MUST NOT BE DELAYED BECAUSE OF STAFF ABSENCE** (see p11 flowchart, "What to do if you are worried a child is being abused or neglected)
- **Consider the wider picture.** Not all concerns about children relate to abuse, there may well be other explanations (e.g. a change in family make-up, death of family member or pet). It is important to keep an open mind and consider what you know about the child and their circumstances that could be impacting on them. Some things you need to consider:
 - Was any explanation given by the parent and child consistent and plausible?
 - Have there been concerns over a long period of time?
 - Is there a pattern to a child's behaviour changes or injuries?
 - Is the injury unlikely to have been caused accidentally? (see p19-21)
 - Have there been recent changes or pressures on the family?
 - Does anyone else have concerns?
 - Is there a need to share information to get the 'bigger picture'?

- **Ask the child about any injuries or changes of behaviour in an age appropriate way (tell me, explain, describe)** (e.g. “that’s a nasty bruise – how did that happen?”). NEVER ask leading questions (e.g. “did mummy do that to you?”). Any concerns you have, and anything said by a child, parent or carer that has caused you concern, should be reported to a designated lead or deputy as above verbally immediately and recorded on CPOMS as soon as possible, verbatim, and with a note made of what action you took/who you spoke to and what is going to happen next.
- **Concerns about a child should usually be discussed with parent(s)/carer(s), except in exceptional circumstances e.g. where sexual abuse is suspected or if it is believed that doing so may increase the immediate risk to the child or other person.** The Designated Officer will decide with you how this happens. Usually this involves checking out with the parent/carers their explanation for the observed injury or behaviour. Remember, if abuse is taking place it may not be the parents but other family members or friends who are causing it. Parents are often the last to know. When making a referral to First Response they will ask if the parent/carers has been informed and if not, what your reasons are for not informing them first.
- **The Designated Officer will discuss with other members of the Senior Leadership Team whether a referral to First Response is appropriate.** If so, they will contact the First Response Team as early in the working day as possible. Concerns can be discussed with First Response and advice sought before making an official child protection referral. Child protection referrals made over the telephone must be followed up in writing within 24 hours at the latest
- **Non-mobile babies.** Due to the significant risk of abusive injury in a non-mobile baby if an injury in a non-mobile baby is noticed, all settings should:
 - Seek and record an explanation from the parent/carers, (professionals must not suggest how the injury might have occurred)
 - If the injury seems minor, the professional must contact the on-call consultant duty paediatrician via the BRI switchboard **Tel 0117-9230000**, to arrange an examination that same day.
 - Any other injury, such as bleeding to the nose or mouth, should be seen without delay at the Children’s Hospital Emergency Department.
 - The parent should be informed that a person with parental responsibility will be required to attend the medical examination that day (see guidance document on parental refusal). The professional should help the parent make arrangements for the baby to attend the examination.
 - The professional must call First Response so that checks can be made on the carers. (Bear in mind that Social Care will consider all those living within a family home and any partners who participate in the child’s care, as relevant to any assessment that may need to be carried out).
- **Making a referral to First Response does not end our responsibility to safeguard and protect the child.** If no information is given about the action taken by the First Response Team, then the Designated Officer should call back to ensure the referral has been acted on. Disagreement between agencies about action to be taken can be addressed using the Bristol Safeguarding Children’s Board (BSCB) Escalation Policy.

- As a result of reporting concerns you may find the parent/carer, or the person or child who disclosed the information to you, is upset or angry. **You can expect full support from the Senior Leadership Team with this.** It is acknowledged that child protection is distressing and that staff may need extra support.
- If, after discussion with the Designated Officer, there are no longer concerns of a child protection nature at this point then **the support needs of the child and family should be considered**, either internally, by referral to another service, or via the Early Help Team. These options should be considered with the family, the Lead for Family Services, and any other relevant staff or agencies.

THE SAFETY OF THE CHILD ALWAYS OVERRIDES CONFIDENTIALITY.
When in doubt, share your concerns.

5. What to do if a child discloses abuse to you:

If a child discloses abuse, the following guidelines should be used in order to respond appropriately. Disclosures by children must always be taken seriously and discussed with the Designated Officer.

Children making disclosures of abuse will need:-

- Reassurance that they have done the right thing.
- To be taken seriously.
- To find staff accessible.
- To know that staff will do their utmost to help.
- To be told that what they have said will need to be reported.

During a disclosure staff must:-

- Stay calm
- Not ask leading questions or ask a child to repeat their disclosure to someone else.
- Not promise to 'keep it a secret'.
- Not jump to conclusions.
- Not forget to record **FACTUALLY** what was said, (verbatim, as soon as possible, and in ink not pencil), and not change or copy out any original documents.
- Confidential records will be kept on CPOMS.

6. Disclosure of historical abuse

If a child discloses abuse which occurred earlier in their childhood, or if an adult discloses abuse from their childhood, this information needs to be treated in exactly the same way as a disclosure or suspicion of current child abuse. The reason for this is that the abuser

may still represent a risk to children now.

7. Domestic Violence and Abuse (DVA)

Living in a home where domestic violence and abuse occurs has a profound and negative effect on children (whether or not they witness the abuse) and is a child protection issue. In Bristol, the definition of domestic violence and abuse is the misuse of physical, emotional, sexual, psychological and/or financial control by one person over another who is or has been in a relationship. This includes family members. DVA may be actual or threatened and includes forced marriage, so-called 'honour based' violence and Female Genital Mutilation, coercive control and stalking and harassment behaviour.

The organisation 'safelives .org.uk' offers advice to professionals who may come into contact with victims and perpetrators of domestic violence. The Nursery Schools work in partnership with Children Centre services to support victims of domestic violence liaising with other partners and work closely and refer cases to 'Next Link' (Tel 0117 9250680).

Clare's Law came into effect (March 2014). The Domestic Violence Disclosure Scheme lets people find out from police if their partner has a history of domestic violence and was brought in across England and Wales as a measure to protect someone from being a victim of attack.

A MARAC is a meeting where information is shared on the highest risk domestic abuse cases between representatives of local police, health, child protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs) and other specialists from the statutory and voluntary sectors. After sharing all relevant information they have about a victim, the representatives discuss options for increasing the safety of the victim and turn these into a co-ordinated action plan. The primary focus of the MARAC is to safeguard the adult victim. The MARAC will also make links with other fora to safeguard children and manage the behaviour of the perpetrator.

At the heart of a MARAC is the working assumption that no single agency or individual can see the complete picture of the life of a victim, but all may have insights that are crucial to their safety. The victim does not attend the meeting but is represented by an IDVA (Independent Domestic Abuse Advisor) who speaks on their behalf. Referral forms and guidance on how to complete these are available on the BSCB website. The nursery schools contribute to MARAC conferences when a victim is known to them by writing a report concerning any children living in the household where DV is occurring.

When an individual discloses that they have been/are a victim of domestic abuse this must be reported to the designated lead or deputy leads who will then consult with other agencies and partners such as the Family Support lead on action to be taken

next. It is also the responsibility of staff to be aware of and act on behavioural/oral and other signs of DVA when communicating with parent's, carer's and colleagues.

8. 'Honour based' violence including - Female Genital Mutilation (FGM), and Forced marriage

'Honour based' violence encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or community. Abuse of this sort involves a wider network of family or community pressure and can include multiple perpetrators. All forms of HBV are abuse regardless of the motivation and should be handled and escalated as such.

FGM comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs, whether for cultural or other non-therapeutic reasons (World Health Organisation 1997). In some cultures FGM is widely practiced and may be performed on girls at any age from babyhood through to adulthood, though most commonly aged 8-14 years. (Although there are increasing numbers of younger girls and toddlers being affected). The period before and during the summer holidays has traditionally been identified as a high risk time for children to undergo FGM as the child needs a recovery period of several weeks afterwards. Bristol has one of the highest number of recorded cases in the country. Recent NHS data revealed that 335 new cases were recorded between April 2016 to March 2017.

FGM is ILLEGAL whether it is performed in the UK or abroad and is a child protection issue which we should be vigilant for and follow the CP procedures were we suspect it may be planned or have already taken place.

See the specific BSCB Guidance on Female Genital Mutilation (2017-2020) for more information of how we can protect girls from this illegal practice.

9. Safeguarding Children and Young people against Radicalisation and Violent Extremism.

Radicalisation is defined as the process by which people come to support terrorism and extremism and, in some cases, to then participate in terrorist groups.

"Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas" (HM Government Prevent Strategy 2015).

Keeping children safe from these risks is a safeguarding matter and should be approached in the same way as safeguarding children from other risks. Children should be protected from messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.

Children and young people can be drawn into violence or they can be exposed to the messages of extremist groups by many means. These can include through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet via Social media or other websites. This can put a young person at risk of being drawn into criminal activity and has the potential to lead to the child or young person suffering significant harm'.

Any practitioner identifying concerns about the child or young person should report them to the designated safeguarding lead in their organisation, who will discuss these concerns with the police. Normal referral routes should also be followed.

Further guidance should be sought from the BSCB procedures manual and DfE Prevent Duty (July 2015).

10. Peer on peer abuse

Children and young people can abuse their peers. This can take many forms and can include bullying, cyber bullying, sexual violence and sexual harassment and physical abuse, sexting and initiation/hazing type violence and rituals.

11. Upskirting

This typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or to cause the victim humiliation, distress or alarm. It is now a criminal offence.

12. Child criminal exploitation – county lines

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity. Drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns.

13. Reporting Private Fostering arrangements

Staff must report to the Designated Officer if they become aware that a child is living for more than 28 days with someone other than a parent, relative or person with Parental Responsibility. This may constitute a Private Fostering arrangement which the local authority would need to be made aware of under law.

14. Photography, Video, Mobile Phone and E-Safety

Taking and recording images of children is an important part of our work. However, images and recordings of children can be misused, manipulated or misconstrued in a way which causes distress and/or constitutes a concern for the welfare of a child or concerns about the behaviour of an adult in relation to a child, in which case the CP procedures need to be followed.

Photos / recorded images should only be downloaded to the designated area of the

setting's hard drive. Images must not be loaded onto any personal computer/laptop.

Staff personal mobile phones or other personal equipment must never be used to take images of children at work.

Personal mobile phones should only be used for business or emergency purposes and must not distract practitioners from the care of the children. Staff are held responsible for the content and security of their own phones e.g. access to web pages. If this is deemed to be a safeguarding issue, this will be dealt with in line with our child protection and disciplinary procedures.

Please ensure you are familiar with the settings policies and procedures concerning Photography, Video, Mobile Phone and E-Safety for detailed information.

15. Safer Recruitment and pre-employment checks

Please see the statutory guidance 'keeping children safe in education' Sept 2019 and 'Disqualification under the Childcare Act 2006'.

Adults who abuse children can be attracted to organisations which provide services for children and rigorous checks must be in place to prevent this. For most appointments, an enhanced DBS check with barred list information will be appropriate. DBS information for all staff will be kept on a Single Central Record. An offer of appointment to a successful candidate is conditional upon satisfactory completion of pre-employment checks.

When appointing new staff, we will:

- Verify a candidate's identity, preferably from current photographic ID and proof of address;
- Obtain a certificate for an enhanced DBS check with a barred list information where the person will be engaging in regulated activity;
- Obtain a separate barred list check if an individual will start work in regulated activity before the DBS certificate is available;
- Check that a candidate to be employed as a teacher is not subject to a prohibition order issued by the Secretary of State, using the Employer Access Online service;
- Verify the candidate's mental and physical fitness to carry out their work responsibilities. Verify the person's right to work in the UK.
- If the person has lived or worked outside the UK, make any further checks the school or college consider appropriate.
- Verify professional qualifications, as appropriate.

All current staff will be made aware of the legislation that they may be disqualified 'by association' under regulation 9 of the 2009 Regulations where they live in the same household as a disqualified person or in a household in which a disqualified person is employed. The setting will gather sufficient and accurate information about whether any member of staff may be disqualified by association via an annual declaration and regular conversations during each supervision to check if circumstances have changed.

Should a disclosure be made, this should be reported to the Head Teacher immediately. The employee should apply for a waiver from Ofsted within 14 days, which if unsuccessful,

may result in the termination of their employment. See flow diagram (pg.18) for information.

A minimum of one staff member or governor trained in Safer Recruitment is on each interview panel.

In the large majority of cases new staff will have cleared DBS status before they start work. On the rare occasion where a DBS has not been cleared before the new member starts work, they will be supervised at all times and not left alone with children

16. Allegations against, or concerns about inappropriate behaviour of staff or any other adults:

(Keeping children safe in education Sept 2019)

Recognising inappropriate behaviour in staff, volunteers and other adults.

There is no guaranteed way to identify a person who will harm children. However, there are possible warning signs. These may include:

- Paying an excessive amount of attention to a child or groups of children, providing presents, money or having favourites
- Seeking out vulnerable children, e.g.: disabled children
- Trying to spend time alone with a particular child or group of children on a regular basis
- Making inappropriate sexual comments
- Sharing inappropriate images
- Being vague about where they have worked or when they have been employed
- Encouraging secretiveness

There may be other sources of concern; this is not a conclusive list. If you are concerned about another staff member or volunteer's behaviour you need to pass your concerns on as a child protection matter.

What to do:

If it appears that a staff member, student, volunteer or Governor has: -

- behaved in a way that has harmed a child, or may have harmed a child, or,
- possibly committed a criminal offence against or related to a child, or,
- behaved in an inappropriate way towards a child which may indicate that he or she is unsuitable to work with children, then: -

These procedures must be followed even if the incident did not happen on the nursery & children's centre premises:

- Make a signed and dated written record of your concerns, observations or the information you have received and pass it on to the Head Teacher immediately
- The Head Teacher will take steps to ensure that during the remainder of the working day that particular member of staff is not left in sole charge of the children or any child.
- The Head Teacher should **immediately** contact the LADO (Local Authority Designated Officer)

- The Head Teacher should then follow their advice on how to proceed.
- All agencies concerned will be given all assistance in pursuing any investigation and advice/agreement obtained on what information can be shared and with who, to prevent leaks, gossip and speculation.
- Depending on the nature of the allegation the disciplinary procedure may be implemented, including suspension of duties, redeployment or supervision of the individual involved while they carry out their duties.
- Appropriate support will be offered to the staff member involved and a named representative allocated to keep them informed of progress.
- Allegations that are found to have been malicious should be removed from personnel records and any proven to be unsubstantiated, unfounded or malicious should not be referred to in employer references.
- Consideration will be given to possible disciplinary or police action in respect of unfounded or malicious accusations.
- The setting is required to inform OFSTED of any allegations of abuse against a member of staff, student or volunteer, or any abuse that is alleged to have taken place on the premises or during a visit or outing within 14 days.

17. Allegations against the Head Teacher

If the allegation is against the Head Teacher then an alternative member of the Senior Leadership Team must liaise with the Chair of Governors (Rob Davies), who takes over the role of the Head by contacting the LADO, as above.

Ofsted must be informed of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere). Registered providers must also notify Ofsted of the action taken in respect of the allegations. These notifications must be made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made. A registered provider who, without reasonable excuse, fails to comply with this requirement, commits an offence (EYFS 2017).

18. 'Whistle Blowing' policy

We should all feel able to voice our concerns, made in good faith, without fear of negative repercussions for ourselves. If we believe that raising concerns using the usual procedures described above will result in victimisation or other negative reprisal, then the 'Whistle Blowing' procedures exist to protect us. The Bristol City Council 'Whistle Blowing' policy is attached to this policy as an addendum.

19. Recording, Confidentiality and Information Sharing:

In addition to these broad guidelines, practitioners engaged in offering one to one family support should follow the specific recording procedures detailed in the Family Support Referrals Procedures.

- **All information relating to concerns about a child's safety and welfare MUST be recorded at the time.** This includes any observations, comments made by a child or adult, significant events or meetings that relate to concerns for a child. When making a recording of concern about a child you must:
 - Share it with the Designated Person straight away
 - Record on CPOMS
 - Include the child's full name (and name of anyone else present), your full name, the date, and the time of the event.
 - Use the actual words of the child or adult as far as possible.
 - Be factual and make it clear if something is your opinion.
- Records are held on the CPOMS system. Records are regularly monitored for clarity and response required by the Designated Person, in line with the Monitoring & Evaluation Framework.
- We will co-operate with relevant external agencies in any enquiries regarding safeguarding matters, including representation at child protection conferences, core groups and multi-agency planning meetings. The Designated Person must be informed of all forthcoming child protection meetings and requests for reports immediately.
- The right of the child and their family to have their confidential circumstances respected must be upheld by everyone. Information about individual personal circumstances is shared with staff on a "need to know" basis, in order to ensure the welfare of the child can be safeguarded. Termly safeguarding meetings are held jointly with the CC family support lead to share relevant information about safeguarding concerns. The Family support lead and deputy family support lead have full access to the CPOMS system for recording and monitoring information about families and children who are open in the family support referral system and who also attend Speedwell and Little Hayes Nursery School schools.
- .All recordings are subject to the Freedom of Information Act (2000) and the Data Protection Act (2018). This means that adults have a right to request to see records that have been made about them or their child. Any requests for access to records should be made to the Designated Person. If there is any doubt as to the rights of any party to access information, legal advice will be sought prior to releasing any information.

20. Transfer of child protection files when a child changes nursery / school

We have adopted the Bristol Safeguarding Children Board's guidance 'guidance on the transfer of a child protection file to another educational setting' (September 2017).

- If there have been child protection concerns about a child and they move to another nursery or school, the Designated Person will copy their child protection file for the new setting by the end of the child's first week in the new setting . This is transferred separately from the main pupil file. Where a family is open to 1:1 family support it is the role of the allocated practitioner to take responsibility for ensuring an effective transfer

takes place.

- Wherever possible a discussion will be had with the appropriate member of staff in the new setting prior to the child transferring.
- Parents/carers will be made aware of the nature of the information being passed on.
- The information will be automatically transferred through the SIMS data system to schools. If a transfer is to another early years setting the records are sent by registered Post or by hand and signed for by the new settings designated safeguarding lead to protect the confidential nature of the records.
- Past original copies of notes (before CPOMS July 2018) will be archived and stored in accordance with the Data Protection Act 2018.

21. The role of the Designated Officer for Child Protection

The person with overall responsibility for Child Protection across all Speedwell, Little Hayes and St Anne's sites is Lindsey Fuller.

The Designated Officer for Child Protection is Lindsey Fuller.

Deputy Designated Officers.

**Liz Allen- Speedwell,
Tanya Tooby – Little Hayes.**

Lucy Hudd- Designated safeguarding Lead for Children Centre Services and Earlybirds 2 year old provision at St Anne's. Anna Maynard – Deputy designated officer.

The Designated Officer or in her absence a deputy designated officer will:

- Have access to appropriate training in order to undertake this role at least every 2 years
- Ensure all staff are informed of her/his identity and of this Policy
- Have responsibility for deciding when to make a referral to First Response in consultation with other senior staff
- Take prompt action where an allegation is made against a member of staff.
- Maintain the child protection record system
- Collate all appropriate information on individual children, including a confidential record of all pupils who are the subject of a Child Protection Plan
- Make sure that the child's child protection file is passed on when a child transfers to another nursery or school
- Collate the appropriate information for reports to be presented at CP conference
- Manage and monitor the nursery & children's centre's part in the CP care plan recommended at the CP conference
- Ensure CP training is updated for the whole staff team
- Ensure supervision for the staff team including a mandatory safeguarding element
- Contribute to the development of policies across the nursery & children's centre which promote the safety and wellbeing of children

- Regularly update and review the setting's CP training plan
- Be the contact person in the setting for other agencies, such as Adults, Children and Education directorate, Bristol City Council , Health and police.

22. The role of the nominated Governor for Child Protection:

The nominated Governor for CP is Maggie Whittle

- Ensure the Governing Body is fulfilling its responsibilities in relation to child protection.
- Work in partnership with the school to ensure that the right procedures are in place to keep all children safe whilst at school and beyond, and that those most at risk are protected.
- Meet regularly (at least 4 times per year) with the Designated Officer for child protection to check on child protection and safeguarding practice.
- Provide a written report on their role (frequency of reporting and to whom it is presented is decided by the Full Governing Body)
- The Child Protection Governor does **not** have a role in individual cases.

23. Health and Safety:

Procedures exist and are followed for:

- The registration of children and for their collection;
- The admission of adults to the building & general security of the premises;
- Rigorous checks on adults working with children in the setting.
- Regular risk assessments of premises, activities and resources.

24. Staff supervision and training:

All staff, students, volunteers and governors receive training in safeguarding and child protection awareness, and recognition of child abuse, as part of their induction period. A log of safeguarding inductions is kept by the Business Manager.

Child Protection training is mandatory for everyone who is in regular contact with children across all school and Children Centre sites . Individual training needs are identified as part of the setting's Performance Management procedures. As a minimum, all staff receive Bristol Safeguarding Children Board (BSCB) approved training every 3 years (every 2 years for the Designated Officer & Nominated Governor) and a log of attendance at safeguarding training is kept by the Designated Person. A child protection 'refresher' is given to staff at the start of each academic year.

Students, volunteers, governors and other visitors are supervised by staff while in contact with the children and are not permitted to be alone with the children.

It is a requirement of the EYFS (2017) that appropriate arrangements are in place for the supervision of staff who have contact with children and families. Effective supervision provides support, coaching and training for the practitioner and promotes the interests of

children. Supervision should foster a culture of mutual support, teamwork and continuous improvement which encourages the confidential discussion of sensitive issues. Supervision should provide opportunities for staff to:

- discuss any issues – particularly concerning children’s development or well-being
- identify solutions to address issues as they arise
- receive coaching to improve their personal effectiveness.

Our procedures for Supervision, Coaching and Mentoring are detailed in a separate policy.

25. Staff taking medication/other substances

Practitioners must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If practitioners are taking medication which may affect their ability to care for children, those practitioners should seek medical advice. Providers must ensure that those practitioners only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member’s ability to look after children properly. Staff medication on the premises must be securely stored, and out of reach of children, at all times. **Practitioners are responsible for informing their manager if they are taking medication that may affect their work with children.**

26. External agencies / professionals delivering services from our premises:

As a minimum requirement:

- Written assurance from the external employing body must be given that they carry out DBS checks with their staff. Where the person is self-employed they must provide their own DBS check or a new one may need to be carried out by Bristol City Council.
- Proof must be seen that the individual is covered by public liability insurance of at least £5 million.
- A child protection induction and a copy of this policy must be given to the individual delivering the services.
- The individual must undertake to inform us of any child protection concerns or incidents taking place on our premises, in line with this policy.
- A risk assessment for the service they are providing is in place.
- They are given a Visitor’s Badge to wear while on the premises.

27. Implementation and Monitoring of this policy:

This policy will be reviewed annually, to ensure it is being implemented.

A Designated Officer for Child Protection is nominated by the Head Teacher

A child protection audit is carried out with the Nominated CP Governor annually, with a half year review.

Annual reviews will be carried out in light of any serious case reviews that have been

published in the year to evaluate current safeguarding practice and identify any learning that can be taken and applied to the setting in light of findings made.

All staff, volunteers, students & governors are given a copy of the policy in their induction packs, and as it is updated. A 'refresher' session is held at the start of each academic year.

Staff have child protection training every 3 years (as a minimum) and Safeguarding leads every 2 years.

Parents/Carers are informed of this policy through a Safeguarding Statement in the nursery school & children's centre Handbook for Parents and the policy made available on the website.

28. Prevent Duty

This duty places a requirement on schools and other bodies to "have due regard to the need to prevent people from being drawn into terrorism". Any concerns about an individual pupil, family member or staff member relating to radicalism or extremism must be reported in the first instance to the safeguarding lead. Concerns should be shared with First Response 0117 9036444 or the Prevent Team channelsw@avon and somerset.pnn.police.uk Tel 0117 9455536. Our nursery schools work to prevent children from being drawn into terrorism through our Personal Social and Emotional Curriculum which support children to learn right from wrong, learn about and value similarities and differences between themselves and others and to challenge negative attitudes and stereotypes

What to do if you are worried a child/young person is being abused or neglected

Member of staff has concerns about a child's/young person's welfare

Where a child/young person discloses abuse or neglect, they (and the alleged abuser) SHOULD NOT be questioned further, but listened to in a non-judgmental way, carefully, respectfully and a *record made of what has been said ASAP*

Consider seeking information from parents/carers.
Discuss concerns with designated teacher for child protection/head teacher/senior manager.
You may also wish to discuss informally with First Response (listed below)

Still has concern - refer to First Response

**Contact
First Response Team
(multi agency team)
0117 903 6444**

No further child protection action

Is this child in need of other support?
- consider with family and relevant agencies

Telephone referrals should be followed up in writing to the First Response Team within 48 hours

- First Response:-**
1. Acknowledge receipt of referral
 2. Decide on next course of action (within one working day)
 3. Feedback to referrer outcome of referral by 3.00 that day or the following morning

This document is intended for use as a guide. Please refer to Bristol safeguarding board procedures – www.bristolsafeguarding

Essential Contacts

FIRST RESPONSE **0117 903 6444**

<https://www2.bristol.gov.uk/form/child-or-young-person-request-support-or-report-concern>

First port of call for professionals and public with any concerns for a child's welfare.

Early Help - 01179415886

POLICE CHILD ABUSE INVESTIGATION TEAM (CAIT):
0117 945 4320

Schools Safeguarding Advisor: Henry Chan
01179224282/07464989157

SOCIAL CARE AREA OFFICES
(When a child has an allocated social worker)

East / Central Bristol (Welsman, St Pauls) 0117 903 6500
North Bristol (Ridingleaze, Lawrence Weston) 0117 903 1700 / 8764
South Bristol (Symes Avenue) 0117 903 2160/1
South Bristol (Broadwalk) 0117 903 8313 / 1340

SOUTH GLOS. SOCIAL SERVICES (FIRST POINT) 01454 86000 out of hours-01454 615165

PREVENT TEAM - channelsw@avonandsomerset.pnn.police.uk Tel 0117 9455536

ALLEGATIONS AGAINST MEMBERS OF STAFF:

LADO (Local Authority Designated Officer)

Nicola Laird

Tel: 0117 903 7795

Mob: 07795 091020

Ofsted 0300 123 1231

Ofsted 'Whistleblower Hotline' 0300 123 3155

(*please see the Bristol City Council whistleblower policy before contacting Ofsted)

NSPCC 0808 800 5000

ChildLine 0800 1111 (24 hours)

Next Link 0117 9250680

Safeguarding Response to COVID19 June 2020

Little Hayes and Speedwell Nursery School Federation.

Our current Safeguarding Policy (January 2020) and safeguarding practices which are based on the national and local statutory guidance - Keeping Children Safe in Education (2019), and Bristol City Council (2019) Policy, will continue to underpin all of the children's safeguarding practices. This is to ensure that our settings are safe places for children. This addendum to our Safeguarding Policy during the Covid Pandemic, reflects some necessary adjustments to this policy. These extra measures will remain in place until we are advised by the Government that they are no longer needed.

The Government has recently issued (200520) further Safeguarding Guidance to educational settings including maintained Nursery Schools. This further guidance reflects the necessary changes to current working and safeguarding practices in response to coronavirus; and the ongoing safeguarding care for children, as they begin to return to Nursery from June 2020. The new guidance mostly reflects our already robust safeguarding practices that are in place on all sites. The guidance also differentiates between children who may be 'vulnerable' due to underlying health conditions, and others who may be vulnerable because of socio economic and other circumstances. (Department for Education 150520).

The following changes have now been added:

1. All current children and their families will be contacted regarding resuming Nursery. Non responders will be actively followed up using a variety of methods including when possible, personal visits from staff members to the child's home.
2. All children who are considered vulnerable to safeguarding matters will be invited to return to nursery first. Staff will work with families to actively encourage them to re-start their child(ren) at nursery where appropriate.
3. All non responders within this group will be actively followed up at least weekly using a variety of methods, including home visits. Social Services will be contacted if appropriate.
4. Staff will observe and monitor the children as they return to ensure they settle back into the environment, and for any associated worrying signs.
5. Staff will have access to a trained DSL or deputy at all times.
6. CPOMS will continue to be utilised to monitor and record concerns.
7. Families and carers will continue to be contacted and involved when/if a safeguarding matter arises.

References:

Department for Education. (200620). Coronavirus (Covid – 19): safeguarding in schools, colleges and other providers. www.departmentforeducation.

Department for Education (150520). Supporting vulnerable children and young people during the coronavirus (Covid-19) outbreak.

www.departmentforeducation

Maggie Whittle, Safeguarding Governor, 1st June 2020.

Lindsay Fuller, Headteacher 1st June 2020.

Policy last updated October 2015.

Update ratified by Governors on 7th October 2015.

Reviewed July 2016.

Reviewed July 2017

Updated and reviewed Jan 2019

Updated Jan 2020

COvid19 additions 6/2020

Useful Resources:

Bristol Safeguarding Children's Board- www.bristolsafeguarding.org

The main function of Bristol Safeguarding Children Board (BSCB) is to co-ordinate and lead work on child protection within Bristol. This web page has links to policies and procedures.

GOV.uk

<https://www.gov.uk/government/collections/statutory-guidance-schools>

Links to all the statutory guidance for schools, including:

- Early years foundation stage framework (April 2017) (including the Safeguarding and Welfare requirements)
- Working together to safeguard children (July 2018)
- Designated teacher for looked-after children (18 November 2009)
- Keeping children safe in education (Sept 2019)
- Promoting the education of looked-after children (March 2015)
- Supervision of activity with children (Dec 2013)