

TLC Neighbourhood Nursery and Playgroup
Safeguarding and Promoting Children's Welfare
Policies and Procedures

January 2018

Safeguarding and Promoting Children's Welfare Policy

In relation to children, safeguarding and promoting their welfare is defined in 'Working together to safeguard children' as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- acting to enable all children to have the best outcomes

TLC aims to create a culture of vigilance where children's welfare is promoted and where timely and appropriate safeguarding action is taken for children. The setting has a moral and legal obligation to ensure that children are given the highest possible standard of care. All staff members will be required to have read, understood and adhere to this policy as part of their induction, parents are also encouraged to read the policy. The setting has a duty to report any suspicions around abuse. The welfare and safety of children attending the setting is paramount always, Section 3 of the EYFS statutory framework, welfare requirements 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. The settings Designated Safeguarding Officer is [Sarah Simm](#) and the assistant is [Leanne Brighton](#).

If concerned about a child, staff will always consider 'What will happen to a child's health and development without services becoming involved?' The Children Act 1989 states that a child shall be considered in need if:

- s/he is unlikely to achieve or maintain, or have the opportunity of achieving or maintaining, a reasonable standard of health and development without the provision of services by a local authority under this part of the Act
- his/her health or development is likely to be significantly impaired or further impaired, without the provision of such services
- s/he is disabled.

Section 47 of the Act places a duty on local authorities to make enquiries, or cause enquiries to be made, where it has reasonable cause to suspect that a child is suffering, or is likely to suffer significant harm. The abuse of a child can have a serious impact on all aspects of the child's health, development and well-being which can last throughout adulthood. The immediate and long-term impact can include depression and self - destructive behaviours. Therefore, the setting must be alerted to any causes for concern in a child's life at home or elsewhere.

TLC aims is to create an environment, which encourages children to develop a positive self-image, regardless of race, language, religion, and culture or home background. We aim to work in partnership with parents to build their understanding of and commitment to the welfare of all our children. We will take any necessary steps to safeguard and promote the welfare and health of all children.

The setting makes the following information available for parents:

- The type of activities provided for the children
- The daily routines of the provision
- The staffing of the provision
- Food and drinks available for the children
- The settings policies and procedures, including the complaints procedure
- Details for contacting Ofsted

The setting ensures we have the following information relating to children:

- Emergency contact numbers
- Special dietary requirements
- Special health requirements
- Legal contact and parental responsibility details for each child
- Medical attention consent

The setting ensures the safety of children at all times by:

- Preventing intruders
- Ensuring children are only released into the care of a designated person
- Ensuring children do not leave the premises
- Ensuring children are kept safe whilst on outings
- Obtaining necessary consents from parents
- Have regard to the SEND code of practice

Promoting health and well being

Medicines:

Staff follow strict procedures to ensure only suitable medicines are administered with parental consent. Medications are checked for suitability and purpose before given. Children's individual medication is evaluated regularly to look for patterns which may indicate potential misuse. Sick children are cared for compassionately and procedures followed to restrict the spread of infection.

Food and drink:

The setting follows strict procedures for ensuring children's dietary requirements are adhered to. Fresh drinking water and healthy snacks are available, and all meals served are healthy, balanced and nutritious. All staff have food hygiene training.

Accidents and injuries:

The setting follows strict policies on dealing with reporting and recording all accidents. All staff receive first aid training to ensure the wellbeing of children, parents will be informed of what first aid treatment has been given. If any serious accidents occur Ofsted will be notified within 14 days. Parents complete an accident at home form for any injury that has occurred outside of the setting.

Resources/Physical Environment:

Equipment is risk assessed to ensure safety, the physical layout is organized to ensure safe and easy accessibility and to cater for all individual needs. The spacious layout enables children to manoeuvre freely and safely. We offer a safe and stimulating outdoor area where children can play freely and safely. Risks are regularly reviewed and responded to, enabling children to take age/ developmentally-appropriate and reasonable risks. Practitioners use personal protective equipment and follow the correct procedures for storing dangerous or hazardous materials.

Behaviour Management:

Staff will not use corporal punishment or degrading treatment. Physical intervention will only be used as a last resort when all other behaviour management strategies have been tried and failed and the child's behaviour is causing a risk to themselves or others. All incidents are reviewed, recorded and monitored and shared with the child's parents. Positive behaviour is promoted consistently, the use of de-escalation techniques and alternative specific strategies for individual children are used to manage behaviour. Staff give clear boundaries about what is safe and acceptable and promote children's understanding of how to keep themselves safe.

Key Person:

All children will be assigned a key person to help support individual children's needs, they will encourage children to form strong attachments through the key person system, key persons are there to listen to what children say and have their concerns taken seriously.

Staff: Child ratios:

Children are always adequately supervised, and staff are deployed effectively to maintain ratios.

Photography and videos:

Cameras will be used for professional purposes only both within the setting and whilst on outings. Any videos or photographs taken will be done so with informed written consent from parents and be used solely for the purposes stated. Images will be stored securely and not shared without the parents' permission. No mobile phones are to be used in the setting. During outings staff will take only the settings mobile phones with them which have no camera and internet access. There are no circumstances that will justify adults possessing indecent images of children; if these are found the police and the local authority designated safeguarding officer will be informed immediately.

Intimate and personal care:

Children have a right to safety, privacy and dignity during times of intimate care. Depending on their abilities, age and maturity children will be encouraged to act as independently as possible.

Complaints:

Should a parent want to make a complaint, they should firstly speak to their child's key person. Should the parent feel that the issue has still not been resolved the parent should then consult with the nursery manager. In extreme cases OFSTED can be contacted should the parent not feel satisfied.

Looked after children:

The designated person for looked after children is the safeguarding officer. Every child is allocated a key person, this is no different for a looked after child. The safeguarding officer ensures they have the information, support and training necessary to meet the looked after child's needs. The designated person and the key person liaise with agencies, professionals and practitioners involved with the child

and his or her family and ensures appropriate information is gained and shared. The nursery recognises the role of the local authority social care department as the child's 'corporate parent' and the key agency in determining what takes place with the child. Nothing changes, especially with regard to the birth parents or foster carer's role in relation to the nursery without prior discussion and agreement with the child's social worker. Concerns about the child will be shared immediately with the child's social worker. Transition to another setting will be handled sensitively and the designated person and or the child's key person will liaise with the school, passing on relevant information and documentation with the agreement of the child's social worker.

Safeguarding does not just include protecting children from deliberate abuse. It includes bullying, harassment, and witnessing abuse. The witnessing of abuse can have a damaging affect and will have a significant impact on the health and emotional well-being of the child. Abuse can take place in any family, institution or setting. Abuse can often be difficult to recognise as children may behave differently or seem unhappy for many reasons, as they move through the stages of childhood or their family circumstances change. However, it is important to know the indicators of abuse and to be alert to the need to consult further. Safeguarding action may be needed to protect children from all types of abuse including:

- bullying, including prejudice-based bullying
- racist, disability and homophobic or transphobic abuse
- gender-based violence/violence against women and girls
- radicalisation and/or extremist behaviour
- child sexual exploitation and trafficking
- substance misuse
- issues that may be specific to the local area or population, for example parents being involved in gang activity and youth violence
- domestic violence
- female genital mutilation
- forced marriage
- fabricated or induced illness
- poor parenting, particularly in relation to babies and children
- other issues not listed here but that pose a risk to children

Children must be protected from deliberate harm, neglect and failure to act, along with broader aspects of care and education, including:

- children's health and safety and well-being, including their mental health
- meeting the needs of children who have special educational needs and/or disabilities
- the use of reasonable force
- meeting the needs of children with medical conditions
- providing first aid
- educational visits

- intimate care and emotional well-being
- online safety and associated issues
- arrangements to ensure children's security
- challenging discrimination and support is given to children about how to respect others
- abuse from peers and siblings
- going missing from education or have poor attendance

Definitions of abuse and neglect

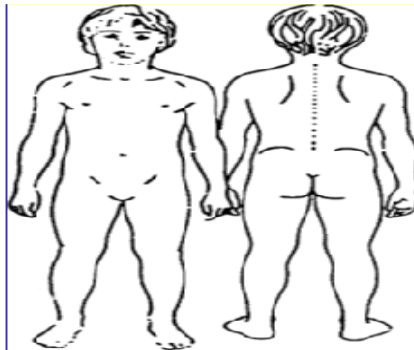
All staff must be able to identify signs of possible abuse and neglect at the earliest opportunity and respond to these quickly and appropriately. Child abuse occurs throughout society and affects children of all ages. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child.

Common Sites for Non-accidental injury

- Eyes
- Ears
- Cheeks
- Mouth
- Shoulder
- Chest
- Upper Arms
- Inner arms
- Stomach
- Genitals
- Front thighs
- Buttocks
- Back of thighs



Common Sites for Accidental injury

- Forehead
- Crown
- Fractures
- Elbows
- Knuckles
- Knees
- Shins

Possible indicators may include: untreated and/ or unexplained injuries/ burns, particularly if recurrent, flinching at sudden movements, fear of medical help, fear of returning home, running away, refusal to discuss injuries, withdrawal from physical contact, improbable excuses given to explain injuries, fear of parents being contacted, arms and legs kept covered - even in hot weather

Physical harm may also be caused when a parent feigns the symptoms of, or deliberately causes, illness in a child. This is known as **fabricated or induced illness**.

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone. It may involve:

- conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person
- imposing age or developmentally inappropriate expectations on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction
- seeing or hearing the ill-treatment of another e.g. where there is domestic violence and abuse
- serious bullying, causing children frequently to feel frightened or in danger;
- exploiting and corrupting children.

Possible indicators may include: over reaction to mistakes, developmental delay, sudden speech disorders, neurotic behaviour (rocking, thumb sucking) extremes of passivity or aggression, self-mutilation, or inappropriate responses to stressful situations.

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 (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

Sexual abuse includes non-contact activities, such as: involving children in looking at or producing pornographic materials, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Sexual abuse also includes abuse of children through sexual exploitation. Penetrative sex where one of the partners is under the age of 16 is illegal, although prosecution of similar age, consenting partners is not usual. However, where a child is under the age of 13 it is classified as rape.

Possible indicators may include: fear of a particular person, distress when removing clothing, regression to younger behaviour, confusion, sadness, inappropriate sexual play. drawings, language or knowledge, soreness of throat, genital or anal area, bedwetting, or nightmares, vivid details of sexual activity, compulsive masturbation,

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development.

Neglect may occur during pregnancy as a result of maternal substance misuse, maternal mental ill health or learning difficulties or a cluster of such issues.

Once a child is born, neglect may involve a parent 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 care-givers)
- ensure access to appropriate medical care or treatment.

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

Possible indicators may include: constant hunger, poor personal hygiene, poor state of clothing, low self-esteem, no social relationships, untreated medical problems, lateness or non-attendance, or stealing.

Domestic violence

Children can be affected by seeing, hearing and living with domestic violence and abuse as well as being caught up in any incidents directly, whether to protect someone or as a target. It should also be noted that the age group of 16 and 17 year olds have been found in recent studies to be increasingly affected by domestic violence in their peer relationships.

The definition of Domestic violence and abuse is: *"Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality.*

This can encompass, but is not limited to, the following types of abuse:

- *psychological*
- *physical*
- *sexual*
- *financial*
- *emotional*

Controlling behaviour: *acts that make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.*

Coercive behaviour: *an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.*

Possible indicators include withdrawn, suddenly behaves differently, anxious, clingy, aggressive, wets the bed, soils clothes, changes in eating habits, obsessive behaviour, nightmares, self-harm, suicidal thoughts

Other Safeguarding Issues

The following are safeguarding issues and will be referred immediately to the most relevant agency. Some members of the community may hold beliefs that may be common within particular cultures, but which are against the law of England. TLC does not condone practices that are illegal, and which are harmful to children.

Forced Marriage - forcing someone to marry without their consent.

Female Genital Mutilation - is against the law, yet for some communities it is considered a religious act and cultural requirement. It is illegal for someone to arrange for a child to go abroad with the intention of having her circumcised. If any of the above areas of concern are brought to our attention we will report the concerns immediately.

Ritualistic Abuse - some faiths believe that spirits and demons can possess people (including children). However, any physical or psychological violence to get rid of the 'possessing spirit' is abusive and will result in the criminal conviction of those using this form of abuse even if the intention is to help the child.

Honour Based Violence - is a 'crime or incident, which has or may have been committed to protect or defend the honour of the family and/or community'. It is important to be alert to signs of distress and indications such as self-harm, absence from setting, infections resulting from female genital mutilation, isolation from peers, being monitored by family, not participating in setting activities, unreasonable restrictions at home. Where it is suspected that a child is at risk from honour based violence we will report the concern.

Child trafficking - involves moving children across or within national or international borders for the purposes of exploitation. Exploitation includes children being used for sex work, domestic work, restaurant/ sweatshop, drug dealing, shoplifting and benefit fraud. Where we are made aware of a child who is suspected of or being trafficked/exploited we will report our concerns.

Private fostering - is an arrangement made between the parent and the private foster carer, who then becomes responsible for caring for the child in such a way as to safeguard and promote his/her welfare. This relates to a child under the age of 16 (18 if a disabled child) who is cared for and provided with accommodation by someone other than a parent, a person who is not a parent but has parental responsibility, a close relative, or a Local Authority for more than 28 days and where the care is intended to continue. It is a statutory duty to inform the Local Authority where we are made aware of a child who may be subject to private fostering arrangements.

British Values and the Prevent Duty

The Statutory Framework for the Early Year Foundation Stage (2014) links with the expectation that early years' practitioners will promote fundamental British values and comply with the Prevent Duty to meet the following:

- Provide staff with sufficient training to be able to recognise this vulnerability (radicalisation) and be aware of what action to take in response
- Understand when to make referrals and where to get additional advice and support.
- Keep children safe and promote their welfare
- Be alert to any safeguarding and child protection issues in the child's life at home or elsewhere
- Act to protect children from harm and be alert to harmful behaviour by others in the child's life.
- Focus on children's personal, social and emotional development

- ensure children learn right from wrong, mix and share with other children and value other's views, know about similarities and differences between themselves and others, and challenge negative attitudes and stereotypes (in an age appropriate way)

Referrals

Early Help

Providing 'early help' is more effective in promoting the welfare of children than reacting when problems become more serious. This help may be needed at any point in a child's life, from early to teenage years. All professionals, particularly those in universal services, should be alert to signs that a child may require early help. This may include a child who:

- is disabled and has specific additional needs
- has special educational needs
- is a young carer
- is showing signs of engaging in anti-social or criminal behaviour
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems and domestic violence
- has returned home to their family from care
- is showing early signs of abuse and/or neglect.

The Early Help Assessment Tool (EHAT)

EHAT is a tool used for gathering holistic information and a standard approach in assessment for the identification of Early Help needs. The EHAT helps practitioners across all children's services to gather and understand information about the needs and strengths of children and the family and respond to these quickly. This is based on discussions with children and their family and other practitioners as appropriate. The EHAT is not intended to replace or delay any concerns around child protection. If you believe a child is at risk, please report it. However, an EHAT is a useful tool when reporting concerns, as it will show what is already known about the children/family, what actions have been taken, who is involved, and why the level of concern needs to be reported as a risk.

MASH

The Multi Agency Safeguarding Hub (MASH) is the single point of contact for all early help and safeguarding concerns regarding children and young people in Wolverhampton. It brings together expert professionals, from a range of services that have contact with children, young people and families, making the best possible use of their combined knowledge and information to meet children's needs and keep them safe from harm.

MASH:

- Is a 'front door' to manage early help and safeguarding referrals
- Provides a secure and confidential environment for professionals to share information.

- Enables early identification of potential safeguarding concerns and facilitates access to timely and effective interventions.
- Prioritises referrals using Red, Amber & Green (RAG) rating.
- Makes sure that cases that don't meet the Threshold for Children's Social Care are picked up by other agencies as Early Help or other appropriate support.
- Where necessary, activates 'immediate response' social work services to provide protection for a child or young person(s).

Making a referral to the Multi Agency Safeguarding Hub

- They can be contacted on 01902 555392, Monday to Thursday 8.30am to 5.00pm, or Friday 8.30am to 4.30pm.
- All referrals must be confirmed within 1 hour by completing the on-line multi agency referral form.
- If a child is in immediate danger of serious harm or has been left alone dial 999 and let the operator know it is a child protection issue.
- If you require support for a family, help with behaviour, parenting, education or health choose option 2. An early help assessment should have been initiated.
- The emergency contact number is 01902 552999
- All referrals must be followed up by submitting a MARF within 1 hour maximum.

Don't forget, if you aren't sure whether to call the MASH - just do it: always do something rather than nothing! The experienced staff in the MASH will be more than happy to talk through your concerns and help decide on the best way forward.

Responding to Disclosures, Suspicions and Allegations

Practitioners receiving information concerning a disclosure should:

- Always react calmly so as not to frighten the child.
- Tell the young child they are not to blame and that it was right to tell.
- Take what the child says seriously.
- Do not ask leading questions
- Do not attempt to investigate allegations yourself
- Keep questions to a minimum to ensure a clear and accurate understanding of what has been said.
- It is likely that the child will be unsure of what will happen. Be open and honest when explaining to them.
- Do not make promises to keep the information a secret. The child must be told that the information will be passed on. Important to reassure the child but not to promise confidentiality.
- Complete a Child Concern Form (Appendix A), using the same vocabulary as the young person.
- Consider information and guidance given in the thresholds of need and support document as to what level of support is needed (see windscreen model - appendix C)

- Concerns should be shared with parents unless it is felt that this would place the child at an increased risk of harm. For example, where there are signs of physical abuse and the child has disclosed.
- The records should be completed as soon as possible, it should be signed and dated. Information should be in a clear and comprehensible format.
- Contact and consult the Safeguarding Officer stating that you wish to discuss a possible child abuse incident. This way you can begin to protect the child by referring concerns to the appropriate agencies and so that you can get some support for yourself in what could be a difficult situation.
- The safeguarding officer will either monitor the situation and ask you to continue to record any further concerns, discuss the concern with parent, and/or follow the procedure for referring to the MASH team, child's social worker or LADO if appropriate.
- Complete the MARF form (appendix B, preferably online version)

Responding to Concerns

Actions to Take:

- Complete a Child Concern Form (Appendix A).
- Do not interrogate a child or parent. Firstly, speak to the Manager or Safeguarding Officer who will ensure that the matter is dealt with in an appropriate manner and will contact outside agencies if necessary.
- A record of conversations with parents relating to explanations for injuries received outside the setting should be documented.
- The safeguarding officer will either monitor the situation, discuss with parents, refer to MASH or if appropriate the child's social worker or LADO if appropriate.
- The MASH team will need to be given details of the family and the child from our records, the basis of the concern and any appropriate dates recorded.
- All suspicions and findings will be treated in the strictest confidence, not disclosed or discussed with any other party than those needed.
- Differences of opinion should be discussed and recorded.
- Consideration will be given to the information we give and acted upon sensitively by the appropriate agencies to protect any children involved.
- Further enquiries may be necessary to collate information which may involve speaking to the setting again and contacting the child or family.
- Telephone referrals will need to be confirmed on a MARF within 1 hour.

Should the concern relate to any visible marks or injuries the child may have to have a medical assessment, **only doctors may physically examine the child.** This will normally be a paediatrician. **All other staff should only note any visible marks or injuries on a body map and then date and sign the record.**

Actions to be avoided:

Staff members receiving the disclosure should not:

- Panic
- Dismiss the concern
- Probe for more information than is offered
- Speculate or make assumptions
- Make negative comments about the alleged abuser
- Approach the alleged abuser
- Make promises or agree to keep secrets

Sharing Concerns with Parents:

We encourage parents to share regular information with the staff regarding their child and their needs for us to help provide the best possible opportunities and care for the individual child. TLC is committed to working in partnership with parents where there are concerns about their child. In most situations any initial concerns about a child will be shared with parents, as there may be a reasonable explanation to clarify the concerns. Parents must be informed of concerns and actions to be taken in relation to their child, and the setting has an obligation to help and support families through these processes. Circumstances may arise, where sharing concerns with parents may put a young person at greater risk. In these situations, or where concerns still exist, any suspicion, allegation or incident of abuse will be reported to the Safeguarding Officer as soon as possible and recorded appropriately.

Data Protection and Safeguarding

Remember always that the Data Protection Act 1998 does not prevent the sharing of personal data where there is a valid lawful duty to do so. The duty to investigate under Section 47 of the Children Act 1989 is one such duty, (along with the provisions of Section 42 of the Care Act 2014 for adults) and others may also apply.

This means that while it is good practice to tell individuals concerned (parents/guardians and/or children judged to have capacity to understand the implications of what is occurring) what you are doing and where relevant, to gain their consent to share this information with relevant agencies, you do not need consent to share where you are of the opinion that child or others are at risk and require support. In all cases, document your reasons clearly on this form to justify why you are taking this action, in case of future challenge.

Allegations against TLC Employees Procedure

Child abuse can and does occur outside the family setting. It is crucial that all staff members are aware of this possibility and that all allegations are taken seriously, and appropriate action taken. Concerns should be raised in respect of all cases in which it is alleged that a person who works with children has (whether the allegations relate to harm or abuse committed on the premises or elsewhere):

- Behaved in a way that has harmed, or may have harmed, a child
- Possibly committed a criminal offence against, or related to, a child; or
- Behaved towards a child or children in a way that indicates s/he is unsuitable to work with children.

The following will occur if such an allegation is made:

Concern reported to the local authority designated officer (LADO) then if needed:

- A police investigation of the possible criminal offence
- Enquiries and assessment by children's social care about whether a child is in need of protection or in need of services
- Consideration by the TLC Organization of disciplinary action in respect of the individual.
- The staff member will be suspended for the duration of the investigation
- Should the outcome result in the allegation being unfounded the employee will be reinstated
- Should the outcome result in a charge being made, the employee will be formally dismissed

In all cases the following procedures must be followed:

- Notify the designated Safeguarding Officer or the settings Manager, who will then notify the local children's services/LADO without any delay and if necessary inform Ofsted if there are any allegations of serious harm or abuse by any person, as soon as possible (maximum of 14 days)
- Confidentiality will be maintained during the investigation as far as practical
- The manager will comply with any requests into the allegation, and written documents will be made available as appropriate

If an allegation is made against you

If you are the person who is the subject of an allegation, the situation will be explained to you with advice from the LADO in due course and you will be asked to stop working for the setting if further investigations need to take place. This will result in suspension whilst an investigation is carried out, ensuring all parties involved are protected. Following the investigation, the appropriateness of you returning to work will be assessed and will be dependent on the outcome of the investigation and all other available information (including information from the Police and Children's Services). The setting will assess on a case-by-case basis the support that can be offered to an individual who has an allegation made against them.

Suspension should not be automatic; however, it will be considered in any case where:

- there is cause to suspect a child has suffered, or is likely to suffer significant harm
- the allegation warrants investigation by the police
- the allegation is so serious that it might be grounds for dismissal.

The LADO will give their views on suspension and inform the employer.

Person receiving or identifying an allegation or concern

The person to whom an allegation or concern is first reported should treat the matter seriously and should:

- make a written record of the information, including the time, date and place of incident/s, persons present and what was said
- sign and date the written record

- immediately discuss the issue with the designated senior manager in their organisation. Where the designated senior manager is absent, or is the subject of the allegation, they should approach the deputy or other appropriate senior manager.

It is essential that this person to whom an allegation or concern is first reported does **NOT** investigate or ask leading questions, make assumptions or offer alternative explanations, or promise confidentiality.

The designated senior manager

When informed of a concern or allegation the designated senior manager in the employing organisation should:

- obtain written details of the concern/allegation, signed and dated by the person receiving the allegation (not the child/adult making the allegation);
- approve and date the written details
- record any information about times, dates and location of incident/s and names of any potential witnesses;
- record discussions about the child and/or member of staff, any decisions made, and the reasons for those decisions.

They should **NOT** investigate the matter or interview the member of staff, child concerned or potential witnesses. They must inform the LADO **within one working day**. Referrals should not be delayed gathering information and a failure to report an allegation or concern in accordance with procedures is a potential disciplinary matter.

If an allegation requires immediate attention, but is received outside normal office hours, the designated senior manager will consult the local authority children's social care emergency duty team or local police and inform the LADO as soon as possible.

The LADO and the designated senior manager will consider what action should be taken and whether further details are needed in order to establish whether the allegation is false or unfounded.

Where required, the LADO will convene a multi-agency evaluation meeting/discussion to consider, oversee and review any investigatory processes in relation to allegations.

Contacting the police:

The police must be consulted about any case in which a criminal offence may have been committed.

Informing the parent(s) and child:

The LADO will advise the employer whether informing the parents of the child involved will impede the disciplinary or investigatory processes.

Informing the accused person:

The employer will seek advice from the LADO, the police and/or local authority children's social care about how much information should be disclosed to the accused person.

The accused member of staff should:

- be treated fairly and honestly and helped to understand the concerns expressed and processes involved
- be kept informed of the progress and outcome of any investigation and the implications for any disciplinary or related process
- if suspended, be kept up to date about events in the workplace.

Informing Ofsted:

Ofsted will be informed of any allegation or concern made against a member of staff in any day care establishment for children under 8 or against a registered child minder. They will also be invited to take part in any evaluation meeting/discussion.

Local Authority Designated Officer: Paul Cooper

Tel: 01902 550661 **Email:** cooper@wolverhampton.gcsx.gov.uk

Whistleblowing

Staff must understand whistleblowing, this provides protection for any member of staff who raises a concern about policy, procedure or practice (of individuals or the organisation or service as a whole) which impacts on the safety and / or wellbeing of anyone using the service. The protection is from being treated unfairly or losing their job. The 'whistleblower' must first have used the everyday channels within the organisation to raise their concerns. If their concerns have not been addressed through the normal safeguarding channels, they can then seek protection for raising their concerns in good faith (i.e. not maliciously to get at another member of staff) under the organisation's 'whistleblowing' policy.

Monitoring and reviewing the policy

It is the role of the Sarah Simm the settings Designated Safeguarding Officer to monitor the setting's safeguarding policy, to ensure that it is effective and implemented. The policy will be reviewed every 12 months.

Suitable Persons Policy and Procedure

All staff working with children will be subject to a disclosure and barring service (DBS) check. A minimum of two written references will be taken up and will be confirmed by telephone. Practitioners are required to have a DBS check every three years and provide proof of identification. Staff are expected to disclose any convictions, cautions, court orders, reprimands, and warnings which may affect their suitability to work with children (either before or during their employment). If a member of staff is disqualified (under section 75 of the Childcare Act 2006) they cannot be employed by TLC. Staff members must report any disqualifications of those who they reside with to the manager immediately. Details of the disqualification will be sent to Ofsted within 14 days. Practitioners must not be under the influence of any alcohol or any other substance which may affect their suitability to care for children. Practitioners must inform their Manager of any medication they are taking. Practitioners must have sufficient understanding and use of English language to ensure the wellbeing of children in their care.

Staff are carefully selected and vetted, there are clear and effective arrangements for staff deployment and training. Staff receive effective supervision and support. Whilst recruiting staff (whether paid or unpaid), the following will occur:

- The application process includes the organisations commitment to safeguarding in the Job Description and any other documentation;
- Thorough checks are made of an applicant's identity, work history and references including any gaps in time;
- Proof of qualifications are obtained;
- Checks with the Disclosure and Barring Service are undertaken;
- A probationary period of a minimum of three months and supervision will take place;
- References should be obtained and verified.

The setting will only allow an individual to start work before the DBS certificate is available, if it can ensure appropriate supervision of that individual always and that all other checks have been completed. All volunteers and visitors will be supervised at all times. If supply staff are used then written confirmation needs to be received that the business supplying the member of staff has carried out the relevant checks and obtained the appropriate certificates, whether any enhanced DBS check certificate has been provided and the date that confirmation was received.

Interviews and Induction:

All employees will be required to undergo an interview and will receive a formal induction upon commencement of employment. Inductions will include confirming job requirements and clarifying their roles and responsibilities, along with reading all policies, including evacuation procedures, safeguarding, equality and health and safety issues. Any safeguarding training deemed necessary will be booked for all new staff to ensure the safety of children within the setting. Staff who carry out the recruitment

process have undergone 'Safer Recruitment' training. Staff have supervisions to provide support and continuous improvements and encourage confidential discussions of sensitive issues.

Positions of Trust:

Staff are aware that they are in a position for trust within their job role and therefore should always maintain appropriate professional boundaries and avoid behaviour which may be misinterpreted by others. This includes practices such as no babysitting for children of the setting out of hours, no mobile phone use within the setting and cameras are only to be used for setting purposes with the consent of parents.

Staff Training:

All members of staff are required to undergo appropriate training in line with the children's workforce development council common core skills. Regular information is given to staff regarding safeguarding, through training, staff meetings, memos and emails. Ongoing training ensures practitioners can fulfill their responsibilities to safeguard and promote children's welfare along with being competent to complete a nationally specified common assessment for a child. The training is to be updated every three years. This training enables staff members to:

- Recognize their responsibilities and report any concerns about suspected poor practice or possible abuse.
- Respond appropriately to concerns expressed by a young person.
- Work safely, effectively with young people.

Roles and Responsibilities of All Practitioners:

- Abide by the Safeguarding Children Policy and Procedures to ensure a duty of care for children, safeguarding their well-being and protecting them from abuse
- Respect and promote the rights, wishes and feelings of all children
- Be aware of procedures to follow should they have any concerns regarding a child
- Attend relevant training courses and ensure your knowledge is up to date on safeguarding issues
- Liaise with the parents
- Prevent children from being abused and neglected
- Identify children who are at risk of being harmed, or who are already being harmed
- Provide services for children and their families where abuse has taken place or where action is required to prevent harm.
- Where there are concerns about a child's welfare, act appropriately, in accordance with legislation, regulation and government guidance.
- Recognise indicators that a child's welfare or development may be being impaired or that they are at risk of suffering harm.
- Be alert to messages children are giving them about their safety and welfare and know how to respond and communicate with them to establish their wishes and feelings.
- Respond appropriately to significant changes in children's behaviour, deterioration in children's well-

being, unexplained bruising, marks or signs of possible abuse, signs of neglect or comments which children make which give cause for concern

- Provide information about a child or family regardless of who made the referral
- Provide specific services to a child as part of an agreed plan and take part in reviewing the child's progress.

Roles and Responsibilities of the Designated Safeguarding Officer:

The settings designated Safeguarding Officers are [Sarah Simm](#) (Nursery Manager) and Leanne Brighton (Safeguarding Assistant) who are located within the setting. In the event of the officers being unavailable the senior practitioners are available for staff or parents to share any concerns. The safeguarding officers will: -

- Organise training and supervise practitioners to adopt best practice to safeguard and protect all children
- Support, advice and provide guidance to other staff on an ongoing basis and on specific safeguarding issues.
- Attend any relevant safeguarding training
- Ensure all practitioners feel confident in reporting any child concerns
- Liaise with outside organizations and agencies who are involved, such as the MASH team.
- Be involved in initial and core assessments
- Provide parents with information, including information on Parent Partnership Services
- Monitor the settings Safeguarding Policy
- Liaise with local statutory services as appropriate.
- Completing Safeguarding for Managers training every 5 years

Code of Conduct

The setting has a moral and legal obligation to ensure that children are given the highest possible standard of care. All staff members will be required to have read, understood and adhere to this code of conduct as part of their induction, parents are also encouraged to read the policy. Failure to follow this policy will result in immediate disciplinary action.

Employees and volunteers will: -	Employees and volunteers will not: -
Employment	
Have an appropriate DBS check, which is updated every three years	Use prejudice, oppressive behaviour or language
Have 2 appropriate references and proof of ID	Have or use mobile phones within the settings rooms
Work in an open and transparent way	Have or use personal mobile phones or hand-held devices with cameras and/ or the internet when on outings
Wear clothing that respects and is appropriate to childcare work	Show favouritism towards any child or family, including through the provision of gifts or inappropriate attention
Be responsible for their own actions and behaviour	Have contact with children outside the organisation (for example, no babysitting) *
Avoid any conduct which would lead any reasonable person to question their motivation and intentions	Remove documents from the setting containing confidential details unless signed out for specific meetings, outings, etc.
Apply the same professional standards regardless of culture, disability, gender, language, racial origin, religious beliefs and /or sexual identity.	Use their position or level of trust to influence children or their families
Use children's photos for displays, assessments, etc within the setting only	
Operate always within the policies and procedures of the setting	
Adhere to the behaviour management policy	
Abide by the settings whistle blowing policy	
Attend first aid, food hygiene, & safeguarding training and keep these up to date	

Children's welfare	
Follow systems in place to safeguard and meet the needs of every child	Initiate unnecessary physical contact with children
Complete concern and safeguarding records in an appropriate and timely way and ensure they are stored securely	Do things of a personal nature that children can do themselves
Listen to children and take their concerns seriously	
Exercise their professional judgement in keeping children safe	
Respect the privacy of children and their families and disclose information on a need to know basis	
Comply with the specific guidelines on physical contact	
Abide by the confidentiality and information sharing information policy	
Health and safety	
Maintain a safe/ secure environment for children and young people that protects them from harm	
Regularly review risks and act upon these, whilst enabling them to take age appropriate and reasonable risks	
Encourage children, where possible, to undertake self-care tasks independently	
Work within health and safety regulations	
Report concerns relating to children's behaviour, safeguarding or special educational needs	
Follow the settings medication policy	
Follow the settings first aid policy	
Ensure they do not put themselves in a situation that deems themselves vulnerable	
Professional behaviour	
Ensure incident, accident, medication & concern forms are filled out accurately and promptly	Touch a child in a way which may be considered indecent
Respect all children, families and staff members	Use force as a form of punishment

Resolve all conflicts fairly and promptly and report and act on any breach of standards through established procedures	Give or threaten corporal punishment
Ensure their behaviour maintains appropriate and professional boundaries	Expose children to unsuitable language or images
Report any concerns, if they feel a child may have an unhealthy relationship (infatuation) with a member of staff	Give children/parents presents or token gifts
Respect children's privacy always and especially when in a state of undress, changing clothes, bathing or undertaking any form of personal care.	Receive presents on a regular basis from a parent or as a bribe to give preferential treatment to their child.
Be aware of cultural or religious views about touching and always be sensitive to issues of gender	Take images 'in secret', or take images in situations that may be construed as being secretive
Take care when encouraging children to use self-expression, not to overstep personal and professional boundaries	Enter or encourage inappropriate discussions
Ensure that other children's behaviours do not impact on a child (e.g. bullying and violence)	Be in the setting alone with a child or children
Challenge and discriminatory behaviour and teach children how to respect others	Discriminate based on age, gender, race, culture, vulnerability or sexuality
Keep the setting updated with your personal details, including any changes in name, address	Develop special relationships with specific children for their own needs
Inform management of any offences, cautions, convictions from yourself or those who reside with you.	Take any substances that may affect their work, without informing management of its side affects
	Be under the influence of alcohol/ drugs during their hours of work
	Smoke on the premises

*there will be an exception when a child attends the setting who is a family member of a practitioner, or a friend before the family starts the nursery.

Maintaining Records and Information Sharing

Confidentiality:

To achieve the best outcomes for children; to promote their welfare and safeguard them from harm, agencies need to work together. Children's needs and circumstances can be complex, and it is only by agencies coming together and working collaboratively that we can achieve a holistic assessment of the child within their family and community and ensure that they receive the services that they need. Effective interagency working is dependent upon effective information sharing whether a child needs some additional support (early intervention) or whether there are concerns that they are at risk of significant harm (safeguarding).

The Safeguarding Officer will be responsible for ensuring that the information is stored in a secure place where access will be limited to certain designated people. Data Protection legislation will be upheld and strictly adhered to. All concerns will be taken seriously and managed accordingly within the policies and procedures of TLC. The setting will adhere to guidance as set out in the Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (March 2015) which states that Information sharing is vital to safeguarding and promoting the welfare of children and young people. A key factor identified in many serious case reviews has been a failure by practitioners to record information, to share it, to understand its significance and then take appropriate action. It is important that all practitioners understand when, why and how to share information and can do so confidently and appropriately as part of their practice. Information should be accurate, up to date and necessary for which it is being shared. Reasons to share or not share should be recorded.

If you have concerns about an adults' behaviour towards a child, it is important that you share your concerns with the Safeguarding Officer. It is acknowledged that it may be difficult for an individual to report his / her concern about a colleague's practice and will support and protect anyone who (without malicious intent), reports an incident of poor practice or suspected abuse involving a TLC employee. Information will be handled and shared on a "need to know" basis only, the police will handle all investigations and provide advice on what information can be shared.

This includes the following people:

- Parents of the person who is alleged to have been abused.
- The person making the allegation
- Children's Services/Police
- The alleged abuser

Records and Information:

Confidential or personal information about a child or their family will be treated with respect and never be used casually in conversation or shared with any person other than on a need to know basis. If abuse is alleged or suspected information will need to be shared. Information that is passed to Children's

Services or the Police must be as helpful as possible. All alleged incidents of child abuse are to be reported to the Police or Children's Services without delay by the Designated Safeguarding Officer. A record will be kept of the name and position of the Officer to whom the concerns were passed, of advice given, and together with the date and time of the call and agreed actions including feedback to TLC Designated Safeguarding Officer. Records from referrals are retained and all agreed actions are taken promptly.

Central Record:

Employees, visitors and volunteer's records are held on the settings central record, this contains information relating to individual checks that have been carried out and the date on which each check was completed. The central record is completed and updated regularly to record staff's suitability.

- an identity check
- an enhanced DBS check/certificate
- further checks on people living or working outside the UK
- a check of professional qualifications
- certificates/ qualifications obtained
- a check to establish the person's right to work in the UK.

Useful Contacts

MASH 01902 555392, Monday to Thursday 8.30am to 5.00pm, or Friday 8.30am to 4.30pm.
or 01902 552999 at any other time

Local Authority Designated Officer: Paul Cooper

Tel: 01902 550661 Email: cooper@wolverhampton.gcsx.gov.uk

Wolverhampton Safeguarding Board

Priory Green Building

Whitburn Close

Pendeford

Wolverhampton

WV9 5NJ

Tel: 01902 550477

Email: wscb@wolverhampton.gov.uk

<https://www.wolverhamptonsafeguarding.org.uk/>

Ofsted:

0300 123 1231

Stop it now (child sexual abuse):

0800 1000900

Strengthening Families Hub

01902 556585

Keeping Children Safe

www.ceop.gov.uk

Bullying & child abuse

www.childline.org.uk

www.nspcc.org.uk

Internet Safety

www.childnet-int.org

www.kidsmart.org.uk

Forced Marriage

www.fco.gov.uk/forcedmarriage

The Female Genital Mutilation Helpline

fgmhelp@nspcc.org.uk 0800 028 3550

Links to useful documents

Multi-Agency Referral Form (MARF)

<https://www.wolverhamptonsafeguarding.org.uk/images/safeguarding-children/children-documents/MARF.doc>

WSCB Escalation Policy

<https://www.wolverhamptonsafeguarding.org.uk/safeguarding-children-and-young-people/i-work-with-children-young-people-families/escalation>

Threshold of need and support in Wolverhampton document

<https://www.wolverhamptonsafeguarding.org.uk/safeguarding-children-and-young-people/i-work-with-children-young-people-families/thresholds-of-support>

Information sharing guidance

<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

Child abuse and neglect guidance

<http://www.wolverhamptonsafeguarding.org.uk/images/safeguarding-children/child-abuse-and-neglect-pdf-1837637587141.pdf>

Guidance for safer working practice

<http://www.saferrecruitmentconsortium.org/GSWP%20Oct%202015.pdf>

Working Together to Safeguard Children (DfE 2015)

www.gov.uk/government/publications/working-together-to-safeguard-children--2

What to do if you're worried a child is being abused (DfE 2015)

www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2

Prevent Duty

www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty

www.gov.uk/government/publications/prevent-duty-guidance.

EYFS Framework

www.gov.uk/government/publications/early-years-foundation-stage-framework--2