

SAFEGUARDING CHILDREN and CHILD PROTECTION POLICY & PROCEDURES

September 2024

Policy Statement

I abide by the duty of care to safeguard and promote the welfare of children and am committed to safeguarding practice that reflects statutory responsibilities, government guidance and complies with best practice requirements.

- I recognise the welfare of children is paramount in all the work we do and in all the decisions I take
- All children, regardless of age, disability, gender reassignment, race, religion or belief, sex or sexual orientation has an equal right to protection from all types of harm or abuse
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues
- Working in partnership with children, young people, their parents carers and other agencies is essential in promoting children's welfare

Definitions

The Children Act 1989 definition of a child is: anyone who has not yet reached their 18th birthday, even if they are living independently, are a member of the armed forces or is in hospital

Safeguarding children is defined in Working Together to Safeguard Children 2023 as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children
- taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework

The Designated Safeguarding Lead Practitioner (DSL)

The role of the DSL is to work closely with other professionals and agencies to safeguard children. They are responsible for liaison with local statutory children's services, and with the Local Safeguarding Children Board (LSCB)

Designated Safeguarding Lead (DSL): Julie Moore

Where there is a safeguarding issue, Julie Moore (working as Nurtured Steps Professional Childcare) will work in accordance with the principles outlined in the **Staffordshire Safeguarding Children Board** (SSCB) multi-agency policies and procedures.

The DSL must complete regular safeguarding training that enables them to identify, understand and respond appropriately to signs of possible abuse and neglect.

Most recent training completed:

Level 1 Safeguarding refresher - 11th September 2021

Level 2 Safeguarding - 11th September 2021

Level 1 & 2 Safeguarding refresher – 7th September 2024

Categories of child abuse

Working Together to Safeguard Children 2018 defines the main categories of child abuse, which is also used for the purposes of drawing up child protection plans for children at risk of harm. The categories are as follows:

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 abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers); or
- Ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

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

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

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

It is important to be aware of more specific types of abuse that fall within these categories, they are:

- Bullying and cyberbullying
- Child sexual exploitation
- Child criminal exploitation
- Child trafficking
- Domestic abuse
- Female genital mutilation
- Breast ironing or flattening
- Grooming
- Non-recent abuse
- Online abuse

I regularly update knowledge and training related to these and other current issues.

Signs and Symptoms of Abuse

There is no clear dividing line between one type of abuse and another. The following section is divided into four areas to help categorise what may be seen or heard. Children/young people may show symptoms from one or all of the categories. This should not be used as a checklist. Workers and volunteers should be aware of anything unusual displayed by the child.

PHYSICAL SIGNS OF ABUSE	<ul style="list-style-type: none"> • Bruise marks consistent with either straps or slaps • Undue fear of adults - Fear of going home to parents or carers • Aggression towards others • Unexplained injuries or burns – particularly if they are recurrent and especially in non mobile babies • Any injuries not consistent with the explanation given for them • Injuries that occur to the body in places which are not normally exposed to falls, rough games, etc • Reluctance to change for, or participate in games or swimming • Bruises, bites, burns, fractures etc which do not have an accidental/ satisfactory explanation • Cuts/scratches/substance abuse • Hitting (with the hand or implement) smacking, punching, kicking, slapping, twisting/pulling ear, hair or fingers, holding/squeezing with a tight grip, biting, and burning • Fabricated illness
NEGLECT	<ul style="list-style-type: none"> • Exposure to danger/lack of supervision • Neglect - under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care etc. • Injuries that have not received medical attention • Inadequate/inappropriate clothing • Constant hunger • Poor standards of hygiene • Untreated illnesses • Persistent lack of attention, warmth or praise
EMOTIONAL SIGNS OF ABUSE	<ul style="list-style-type: none"> • Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging. Also depression/ aggression, extreme anxiety • Nervousness, frozen watchfulness • Obsessions or phobias • Sudden under-achievement or lack of concentration • Inappropriate relationships with peers and/or adults • Attention-seeking behaviour
	<ul style="list-style-type: none"> • Persistent tiredness • Running away/stealing/lying • Humiliating, taunting or threatening a child whether in front of others or alone. • Persistent lack of attention, warmth or praise. • Shouting/yelling at a child • Radicalization – use of inappropriate language, possession of violent extremist literature, behavioural changes, the expression of extremist views, advocating violent actions and means, association with known extremists, seeking to recruit others.

INDICATORS OF POSSIBLE SEXUAL ABUSE	<ul style="list-style-type: none"> • Language and drawing inappropriate for age. • Child with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour • Regularly engages in age inappropriate sexual play • Sexual knowledge inappropriate for their age • Wariness on being approached • Soreness in the genital area or unexplained rashes or marks in the genital areas • Pain on urination • Difficulty in walking or sitting • Stained or bloody underclothes • Recurrent tummy pains or headaches • Bruises on inner thigh or buttock. • Any allegations made by a child concerning sexual abuse • Sexual activity through words, play or drawing • Child who is sexually provocative or seductive with adults • Inappropriate bed-sharing arrangements at home • Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations • Eating disorders - anorexia, bulimia • Unaccounted sources of money • Telling you about being asked to 'keep a secret' or dropping hints or clues about abuse.
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Staffordshire Safeguarding Children Partnership (SSCP) threshold of need (SSCB pre 18/9/24)

Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. An Early Help Assessment will be discussed with parents/carers and initiated when welfare concerns are raised in relation to the child and their family. This should also be done when the support of more than one additional agency is needed to meet the child/family's needs.

The Threshold Framework 'Accessing the Right Help at the Right Time' is the overarching document for the whole of the children's workforce. This multi-agency threshold framework is a guidance tool that all agencies, professionals and volunteers can use to consider how best to meet the needs of individual children and young people. The Threshold Framework is available on the Staffordshire Safeguarding Children Partnership website <http://staffsscp.org.uk> (staffsscb.org.uk pre 18/9/24)

Acting on concerns / Procedures for reporting concerns about a child

I maintain confidentiality of the families I work with at all times. However, information will be shared with the Local Authority if a child is deemed to be at risk of significant harm or contact the police if they are in immediate danger, or a crime has been committed.

If I am concerned about a child's welfare and wish to discuss my concerns, I may contact the NSPCC or other relevant local support services for advice including the local First Response team. Confidentially will be assured only when there is no risk of harm to a child.

Whilst I would in general discuss any concerns with the child, their parents / carers and where possible seek their agreement to making referrals to Staffordshire Children's Advice and Support (SCAS), this should only be done where such discussion and agreement-seeking will not place the child or others at increased risk of suffering significant harm.

If I notice:

- significant changes in a child's behaviour
- unexpected bruising or marks or signs of possible abuse
- any comments made which give me cause for concern
- deterioration in general wellbeing which causes concern
- signs of neglect or abuse outside the setting
- inappropriate behaviour displayed by any other child/young person encountering the child

I will keep a factual record of the concern and will ask the parents/carers for an explanation and signature on the same day, providing it would not put the child at risk.

Unless I believe it may place the child at risk, I will advise the parent/carers that I intend to make a referral and implement the procedure below, taken from SSCP- guidance:

1. *If a child has a serious injury (for example involving pain and bleeding) or is in immediate danger (for example parent/ carer has arrived to collect a child and is unfit to care for them, or a child left alone at home) dial 999 and request assistance from the ambulance service and/or police. If you know or suspect the child has come to harm through the actions of another make sure that the professional you hand the child over to understands this and take their name and record it. It will generally be appropriate to inform the child's parent/ carers what has happened once the child is safe with an appropriate professional.*
2. *If it seems that a child has been abused in any way including sexual abuse (but is not in immediate danger) report this immediately to the service for the area where they live. The numbers are:*

Staffordshire Children's Advice and Support (SCAS)

0300 111 8007

Mon to Thurs 8.30am - 5.00pm, Fri 8.30am – 4.30pm

or

Emergency Duty Service (out of hours)

0345 6042886

or email: eds.team.manager@staffordshire.gov.uk

non-emergency – call Staffordshire Police on 101

3. *If the concern is long term rather than immediate, for example a child who is often dirty, smelly or who has disruptive behaviour, you should decide whether it meets the threshold for making a referral to SCAS or to initiate an Early Help Assessment.*

A written record must be kept about any safeguarding concerns. This must include details of the person involved, the nature of the concern and the actions taken, decision made and why they were made.

All records must be signed and dated. All records must be securely and confidentially stored in line with General Data Protection Regulations (GDPR)

In all instances, the information I may need to record and retain on file will be:

- the child's full name, date of birth and address
- the date and time of the record
- factual details of the concern, as presented by the child or witness
- details of any previous concerns
- details of any explanations/comments from the parents/carers

- any action taken as a result
- Follow-up records, such as a list of other agencies and professionals involved, with dates and times of contact.

Document retention

All information relating to the safeguarding and welfare requirements of the EYFS will be retained until the child reaches 21 years and 3 months of age for insurance purposes.

Allegation procedures

If a child tells me that they or another child is being abused, I will:

- acknowledge their allegation and reassure them that it will be taken seriously
- encourage the child to talk, without prompting or asking them leading questions. The child will not be interrupted when they are recalling significant events or made to repeat their account. I may use questioning techniques which involve using non-leading, open-ended questions that start with Tell, Explain or Describe known as the TED questioning techniques.
- explain what actions must be taken, in a way that is appropriate to the age and understanding of the child
- record what has been disclosed using exact words where possible
- make a note of the date, time, place and people who were present at the discussion

I would then report the concerns immediately to the local First Response team who have the experience and responsibility to assess the situation.

I will follow the procedures outlined above.

If an allegation of serious harm or abuse by any person living, working, or looking after children at the premises or elsewhere is made, it will be reported to Ofsted and include the action taken in respect of the allegations. These notifications must be made as soon as is reasonably practicable, but at least within 14 days of the allegations being made. Local SSCB procedures will also be followed including reporting it directly to the Local Area Designated Officer (LADO) within 1 working day of the allegation being made. My insurance company will be contacted, together with any local support that is available.

It is not my responsibility to attempt to investigate any situations myself.

Whistleblowing Statement

If I have any concerns about a child's safety in any setting or situation I will contact the relevant authorities - Ofsted, First Response Team, the Local Authority, Police etc. without delay. I will keep relevant written records detailing my concerns and the procedures followed.

Prevent duty

I have a duty to have due regard to prevent people from being drawn into terrorism under section 26 of the Counter-Terrorism and Security Act 2015. This duty is known as the **Prevent Duty**. If I have concerns that a child or young person is at risk of radicalisation, extremism or being drawn into terrorism, I can seek advice from the Department for Education's dedicated helpline on 020 7340 7264 or email counter.extremism@education.gov.uk.

- **Police Prevent team call 01785 232054 website [Prevent | Staffordshire Police](#)**
- **Staffordshire Police call 101**
- **If it's an emergency please call 999**
- **National Police Prevent advice line call 0800 011 3764**

Suitable people

Everyone in my house over the age of 16 has a CRB or DBS check. DBS checks which are linked to the update service are renewed annually.

Visitors to the setting will be asked to attend outside of working hours, where possible.

Where visitors are at the setting while children are present I will keep a log of their names and the times of their visit. Visitors will not be left unsupervised with the children at any point. They will be given an explanation of and expected to follow all relevant policies and procedures during their visit.

Pre-Existing Injuries

Please ensure you inform me of any marks or injuries, including head injuries, that your child has sustained while at home. I will record this information for your child's file and ask for you to sign this. This record is an important part of Safeguarding procedure.

Bruising in non-mobile babies

Bruising is the commonest presenting feature of physical abuse in children. Reviews of the research conclude that bruising is strongly related to mobility and that bruising in a baby who is not yet crawling, and therefore has no independent mobility, is very unusual. It is found in **less than 1% of infants who are not independently mobile**. The younger the baby, the greater the risk that bruising is non-accidental and the greater the potential risk to the baby.

If a non-mobile baby presents with bruising I will follow procedures on 'bruising in non-mobile babies' by SSCP, found at [Bruising in Non-Mobile Babies and Children - Staffordshire Safeguarding Children Partnership \(staffsscp.org.uk\)](http://staffsscp.org.uk)

This may involve 1 - referring you to a medical professional
 2 - making a referral to the SSCB First Response team

Collection / Failure to collect procedures

I will only release your child from my care to adults who have permission to collect them.

When children start attending you will be asked to provide me with a list of people authorised to collect. It would be helpful, if they are not known to me, to include a description or a photograph for me to keep on file.

In the event of an emergency, we can operate a password system where you can send someone not authorised to collect your child but who is able to give the password. Please discuss with me if you would like to use this system.

It is important that you arrive at the contracted time to collect your child. Even very young children learn our routine and know when their parents are due. They can become distressed if you are late. I know sometimes delays are unavoidable, especially if you are relying on public transport. If you are delayed, for whatever reason please contact me and let me know when you expect to arrive. I will normally be able to accommodate the additional care, however if I am unable, I will contact other adults from your emergency contact list and arrange for them to collect your child. I will reassure your child that you are on the way and if necessary organise additional activities and a meal. There will be an additional charge late collection. (see Fees Policy)

Failure to collect

If I have not heard from you and you are more than 30 minutes late I will try and make contact with you.

If I cannot reach you, I will also attempt to contact the emergency numbers provided. ***Please make sure your contact details and contacts for your emergency contacts are up to date by informing me of any changes to mobile numbers etc.***

If I am unable to make contact with you or your named emergency contacts within 1 hour of your expected time I will contact Staffordshire Children's Advice and Support team and follow their advice.

E-safety / Social Media

Children will not usually have access to any internet enabled devices. Where these are used children will be fully supervised and appropriate virus protection and filters will be used.

I talk regularly with children about how to stay safe online (this includes simple age appropriate discussions with young children). E.g. their use of YouTube and other similar platforms at home; safe use of social media and chat facilities; talking to adults about anything they see which they don't like/understand.

Pictures of and information about children attending the setting are never shared on social media. Where pictures containing other children have been shared with parents (with permission) parents are requested never to share these on social media.

Mobile Phones and Cameras

I always carry a mobile phone with me. Parent contact details will be stored on my phone and carried with me at all times in case of emergency.

I use the camera on my mobile phone to take photographs during the day of Early Years children. These photographs are stored on my phone, and are used as a record of activities and learning achievements. Permission to take and store photographs is sought from parents when children join the setting.

My phone is password protected to ensure that no-one has access to any of its contents.

Photographs may be:

- sent to parents via WhatsApp to inform them about their child's activities
- downloaded and printed to form part of each child's personal 'learning journey' file - printed and used in displays within the setting

Photographs will be passed on to parents and originals will be deleted when the child leaves the setting.

Visitors to the setting will be asked to leave mobile phones and cameras in their bags. They will be supervised at all times, and will be asked to leave the room if they need to answer any calls.

Older children attending the setting will be asked not to bring any mobile phones, cameras or devices which are internet enabled.

Early years children may, on occasion be allowed to use a camera as part of a learning activity. Any images taken will be deleted at the end of the day.

I am registered with the Information Commissioners Office (ICO) as a data handler. This registration is updated regularly via an annually renewable fee. Data breaches will be reported to the ICO immediately and the affected parent/s will be informed.

Lost / missing child procedures

Within the house the front door is fitted with a Rim Nightlatch lock, which always remains locked from outside. The latch is out of reach of children. Other external doors in the house lead to a fully enclosed rear garden.

When we go out children will be always be supervised. In the unlikely event that a child is lost or goes missing I will:

- Ensure all other children are safe and supervised while I look for the missing child
- raise the alarm to all around me that I have lost a child and enlist the help of everyone to look for them. If appropriate to the venue I will alert security staff.
- I will alert the police and provide a full description - I will then alert the parents of the situation

After the incident I will:

- Inform Ofsted of the incident as soon as practical
- Review risk assessments and procedures to minimise the risk of recurrence

To avoid situations like this happening I will:

- Avoid going to places that are overcrowded
- Put risk management strategies in place appropriate to each child. These may include, but are not limited to: holding their hand or ask them to hold the pushchair, using a backpack with reins, using high-vis vests in open spaces
- I regularly talk to the children about expected behaviours, and the dangers of wandering off and/or of talking to strangers.

Relevant Contact details

Staffordshire Childrens Advice and Support: 0300 111 8007

Emergency Duty Service (Local Authority Out of Hours) -Telephone: 0345 604 2886

email: eds.team.manager@staffordshire.gov.uk

Education Safeguarding Advice Service (non-emergency) - 01785 895836; esas@staffordshire.gov.uk

Police (non-emergency) – 0300 123 44 55

Ofsted – 0300 123 1231