

# The Cottage Nursery Safeguarding and Child Protection Policy

## **Introduction**

~ This policy has been developed in accordance with the principles established by the Children Act 1989; and in line with the following

~ 'Working Together to Safeguard Children 2015'

~ 'Framework for the Assessment of Children in Need and their Families

~ 'What to do if you are worried a child is being Abused' 2015

~ Safeguarding Children and Safer Recruitment in Education 2006

~ Oxfordshire Safeguarding Board

We recognise that all staff and Trustees have a full and active part to play in the protecting our children from harm, and that the child's welfare is our paramount concern.

Our Nursery should provide a safe, caring, positive and stimulating environment that promotes the social, physical and moral development of the individual child free from discrimination or bullying where children can learn and develop happily.

This policy applies to all staff, directors and volunteers working in our setting.

### **The aims of this policy are:**

- To support the child's development in ways that will foster security, confidence and resilience.
- To provide an environment in which children and young people feel safe, secure, valued and respected, feel confident and know how to approach adults if they are in difficulties.
- To raise awareness to all staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse.
- To provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, the Nursery, contribute to assessments of need and support plans for those children.
- To acknowledge the need for effective and appropriate communication between all members of staff in relation to safeguarding children.
- To develop a structured procedure within the Nursery which will be followed by all members of staff in cases of suspected abuse.

- To develop affected working relationships with all other agencies, involved in safeguarding.
- To ensure that all adults within our Nursery who have access to children have been checked as to their suitability. This includes other community users of our facilities, following correct staff recruitment and selection procedures.

## Procedures

- Our procedure for safeguarding children will be in line with Oxfordshire Local Authority (the LA) and Oxfordshire Safeguarding Children Board Child Procedures, and "Working Together to Safeguard Children 2010" We will ensure that:
  - The Governing Body understands and fulfils its safeguarding responsibilities.
  - We have 2 designated members of the senior Management team who have undertaken appropriate training for the role, as recommended by the LA, within the past 2 years. Our designated staff will update their training with LA approved training every 2 years
  - Our designated members of staff are **Trudi Krzywiec & Clare Olden**.
  - All adults (including supply, volunteers and students on placement) new to the Nursery will be made aware of the Nursery's policy and procedure for Child Protection and the names of the designated Safeguarding people. This will all be explained as part of their induction
  - All members of staff are provided with the opportunity at least every 3 years to receive training in order to develop their understanding of the signs and indicators of abuse, how to respond to a child who discloses abuse and the procedure to be followed in appropriately sharing a concern of possible abuse.
  - All parent/carers are made aware of the Nursery's responsibilities in regards to child protection procedures through publication of the nursery's policy, website and registration form.
  - Our procedures are reviewed and updated annually.
  - The names of the designated persons will be clearly shown in the Nursery, with a statement explaining the Nursery's role in referring and monitoring cases of suspected child abuse.

## Responsibilities

- The staff in the Nursery will follow Oxfordshire Safeguarding Children Board Procedure in all cases of abuse, or suspected abuse (these can be found at [www.OSCB.org.uk](http://www.OSCB.org.uk)).

## **We will therefore:**

- Understand that our responsibility to safeguard children requires that we all appropriately share any concerns that we may have about children.
- Ensure we have a designated person who is responsible for referring a child if there is a concern about a child's welfare, possible abuse or neglect to Social Care. A written referral using the common referral form will be posted/emailed to social care as soon as possible within the Nursery day.
- Ensure that detailed and accurate written records of concern about a child are kept even if there is no need to make an immediate referral.
- Ensure that all such records are kept confidentially and securely and are Separate from children's records, with a front sheet listing dates and brief entry to provide a chronology.
- Ensure that an indication of further record-keeping is marked on the child's record, acting as a focal point for staff concerns and liaising with other agencies and professionals.
- Ensure that the designated staff members, or another appropriate member of staff, attends case conferences, family support meetings, core groups, or other multi-agency planning meetings, contribute to the framework for assessments process, and provide a report which has been shared with the parents.
- Ensure that any absence of two days, without satisfactory explanation, of a child currently subject to a child protection plan is referred to the child's social worker or the local assessment team.
- Establish and maintain links with relevant agencies and co-operate as required with enquiries of a child protection nature.
- Ensure that all nursery staff are aware of the nursery's CP policy and procedure. And understand their responsibilities in being alert to, and acting appropriately in cases of abuse, or suspected abuse, and know how to recognise and refer any concerns.
- Provide an annual report detailing any changes to the policy and procedure, training undertaken by the designated person, and by all staff, number and type of incidents/cases, and number of children referred to Children's Social Care and subject to Child Protection Plans.
- Keep themselves up to date with knowledge to enable them to fulfil their role, including attending relevant training, at least every two years, provided by the Oxfordshire Children Board.
- Ensure that all staff, volunteers and Trustees understand that there is a procedure to be followed in dealing with child protection allegations made against staff. This procedure must be followed on all occasions. All staff must be made aware of this process and how it differs from other concerns about children.
- Ensure that we have staff on all interview panels who are Safer Recruitment Trained.

- Ensure that all staff/volunteers are selected and recruited only after having gone through appropriate checks.
- Ensure that there is always a Designated Lead Person on the Nursery premises at all times.

## **Supporting Children**

- We recognise that a child who is abused, who witnesses violence or who lives in a violent environment may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.
- We recognise that the nursery may provide the only stability in the lives of children who have been abused or who are at risk of harm.
- We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

## **Our Nursery will support all children by:**

- Encourage the development of self-esteem and resilience in every aspect of nursery life including through the EYFS.
- Promoting a caring, safe and positive environment within the nursery.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notifying Social Care as soon as there is any significant concern.
- Ensuring that a named member of staff is designated for Looked After Children and that an up to date list of children who are subject to a Care Order or are accommodated by the Local Authority is reviewed and updated.
- Notifying Social Care when a child attending the Nursery is privately fostered.
- Providing continuing support to a child (about whom there have been concerns) who leaves the Nursery by ensuring that such concerns and medical records are forwarded under confidential cover to the Designated Person at the child's new nursery/school immediately. The original copy of significant documents will be retained at our nursery, and photocopies forwarded on.

## **Confidentiality**

- We recognise that all matters relating to child protection are confidential.
- The designated person will disclose personal information about a child to other members of staff on a need to know bases.

- However, all staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being or that of others.
- We will always undertake to share our intention to refer a child to Social Care with their parents/carers unless to do so could put the child at greater risk of harm, or impend a criminal investigation. If in doubt, we will consult with Social Care.
- We will take no names consultations with our Local Assessment Teams to discuss concerns we may have, but we understand that if they then ask for a name we will disclose those details and it will become a referral.

## **Supporting Staff**

- We recognise that staff working in the nursery who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.
- We will support such staff by providing an opportunity to talk through their anxieties with the Designated Person and to seek further support. This could be provided by another trusted colleague, Occupational Health, and/or a representation of a professional, as appropriate.
- In consultation with all staff, we have adopted a code of conduct for staff at our nursery. This forms part of the staff induction and is in the staff handbook. We understand that staff should have access to advice on the boundaries of appropriate behaviour.
- We recognise that our Designated Person(s) should have access to support and appropriate workshops, courses or meetings as organised by the LA.

## **Allegations against staff**

- All nursery staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults.
- Adults that have not been registered as 'fit' person will not take children unaccompanied to the toilet nor will they be left alone with children.
- All staff should be aware of the nursery's behaviour/discipline policy. This can be found in the policy file in the reception.
- We understand that a child may make an allegation against a member of staff. If such an allegation is made, the member of staff receiving the allegation will immediately inform one of the Managers (Trudi Krzywienc or Clare Olden) or most senior member of staff if the manager is not there.

- The manager on all such occasions will discuss the content of the allegation with the LADO (Local Authority Designated Officer) **before taking any action**. In our county contact should be made with Alison Beasley, Safeguarding Coordinator (01865 323457)
- If the allegation made to a member of staff concerns the manager, the person receiving the allegation will immediately inform the Trustees who will consult with LADO, without notifying the manager first.
- The nursery will follow the LA procedure for managing allegations against staff, a copy of which can be found in the Policy File in reception.
- Suspension of the member of staff against whom an allegation has been made needs careful consideration, and we will consult with above named professionals in making this decision.
- Ofsted needs to be informed in writing within 14 days of the allegation being made.

## **Whistle blowing**

We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.

All staff should be aware of their duty to raise concerns about the attitude or actions of colleagues. (See our policy) and appropriate advice will be sought from the LADO or the nursery's designated person(s).

## **Use of Mobile Phones and cameras**

Staff and children will not carry or use personal mobile phones and cameras within the settings working hours. Visitors will not use mobile phones or their own cameras when on the premises. For further guidance please see the separate mobile phone and camera policy.

## **Use of the Internet**

Our ICT policy, in a separate policy reflects the consideration we give to keeping children safe when they are using the internet.

Appropriate filters and monitoring systems are in place to protect children from harmful online material.

## **Physical Intervention/Positive Handling**

Our policy on physical intervention/positive handling by staff is set out in a separate document. It complies with the department of education guidelines. Such events should be recorded and signed by a witness. Staff who are likely to need to use physical intervention should be appropriately trained.

We understand that physical intervention of a nature, which causes injury or distress to a child, maybe considered under child protection or disciplinary procedures.

## **Anti-Bullying**

Our policy on the prevention and management of bullying is set out in a separate policy and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures.

Bullying is a safeguarding matter that if left unresolved can become a child protection matter. Our setting will take seriously any bullying concerns and both investigate and take action to protect children where appropriate.

## **Peer on peer Abuse**

Children can be vulnerable to abuse by their peers. Such abuse should be taken as seriously as abuse by adults and should be subject to the same child protection procedures.

## **Prevention**

We recognise that the nursery plays a significant part in the prevention of harm to our children by providing children with effective lines of communication with trusted adults and an ethos of protection. Due to the day to day contact with children, staff in the nursery are ideally placed to observe the outward signs of abuse. The Nursery community will therefore:

Establish and maintain an ethos, which is understood by all staff, which enables children to feel secure and encourages them to talk knowing they will be listened to.

Provide opportunities which equip children with the skills they need to stay safe from harm and to whom they should turn to for help.

## **Health and Safety**

Our Health and Safety policy reflects the consideration we give to the protection of our children both physically within the nursery environment and when away from the nursery when undertaking trips and visits.

All staff have a responsibility for action in cases of suspected abuse. This document outlines the procedure which should be followed if any member of staff suspects a child is being abused, or if a disclosure is made.

**Immediate action is required where there is suspicion of abuse, written records must be made at each stage of the process.**

All staff are asked to be alert to possible physical or emotional problems being experienced by all children.

**If a child asks to speak to you about a problem do not promise confidentiality but explain that it may be necessary to consult a senior colleague.**

## Categories of Abuse

The table below outlines the four main categories of abuse as defined by the Department of Health 'Working Together to Safeguard Children' document 2010. Staff should be aware that the possible indicators are not definitive and that some children may present these behaviours for reasons other than abuse.

<b>Type of Abuse</b>	<b>Possible Indicators</b>
<b>Neglect</b> The persistent failure to meet a child's basic physical and 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 food, clothing and shelter; protect a child from physical and emotional harm or danger; ensure adequate supervision; ensure access to appropriate medical care or treatment.	Obvious signs of lack of care include: Problems with personal hygiene; Constant hunger; Inadequate clothing; Emaciation; Lateness or non-attendance at nursery/school; Poor relationship with peers; Untreated medical problems; Compulsive stealing and scavenging; Rocking, hair twisting, thumb sucking; Running away; Low self-esteem.

<p><b>Physical Abuse</b> May involve hitting, shacking, 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.</p>	<p>Physical signs that do not tally with the given account of occurrence conflicting or unrealistic explanations of cause. Repeated injuries. Delay in reporting or seeking medical advice.</p>
<p><b>Sexual Abuse</b> Forcing or enticing a child 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, penetration or non-penetrative acts and also includes involving children in watching pornographic material or watching sexual acts.</p>	<p>Sudden change in behaviour. Displays of affection which are sexual and age inappropriate. Tendency to cling or need constant reassurance. Tendency to cry easily. Regression to younger behaviour- e.g. thumb sucking, acting like a baby. Unexplained gifts or money. Depression and withdrawal. Wetting/soiling day or night. Fear of undressing for PE.</p>
<p><b>Emotional Abuse</b> The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effect 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.</p>	<p>Rejection Isolation Child being blamed for actions of adult Child being used as carer for younger siblings Affection and basic emotional care giving/warmth persistently absent or withheld.</p>

### **Child sexual exploitation (CSE)**

The sexual exploitation of children and young people under the age of 18 involves exploitative situations, context and relationships where young people, (or a third person or persons) receive something, (e.g. food, accommodation, drugs, alcohol, cigarettes, affections, gifts, money) as a result of them performing and/or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example, being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength, and/or economic or other resources. Violence, coercion and intimidation are common, involvement relationships being characterised in the main by the child's or young person's

limited availability of choice, resulting from their social/economic and/or emotional vulnerability. (DCFS 2009)

### **Key facts about CSE**

- Sexual exploitation often starts around the age of 10 years old. Girls are usually targeted from the age of 10 and boys from the age of 8.
- It affects both girls and boys and can happen in all communities.
- Any person can be targeted but there are some particularly vulnerable groups: looked after children, children leaving care and children with disabilities.
- Victims of CSE may also be trafficked (locally, national and internationally)
- Over 70% of adults involved in prostitution were sexually exploited as children or teenagers.
- Sexual violence or abuse against children represents a major public health and social welfare problem within the UK society, affecting 16% of children under 16. That is approximately 2 million children.

### **Good practice – Individuals**

- Recognise the symptoms and distinguish them from other forms of abuse.
- Treat the child/young person as a victim of abuse.
- Understand their perspective/behaviour of the child/young person and patient with them.
- Help the child/ young person to recognise that they are being exploited.
- Collate as much information as possible.
- Share information with other agencies and seek/ refer to Social Care.

### **Good practice – Organisations**

- Ensure robust safeguarding policies and procedures are in place which covers CSE.
- Promote and engage in effective multi-agency working to prevent abuse.
- Work to help victims move out of exploitation.
- Cooperate to enable successful investigations and prosecutions of perpetrators.

## **Forced Marriages (FM)**

FM is now a specific offence under s121 of the Anti-social behaviour, Crime and Policing Act 2014 that came into force on July 2014.

A FM is a marriage conducted without the valid consent of one or both parties, and where duress is a factor. Forced marriage is when someone faces physical pressure to marry (e.g. threats, physical violence or sexual violence) or emotional and psychological pressure (e.g. if someone is made to feel like

they're bringing shame on their family) This is very different to an arranged marriage where both parties give consent.

FM is illegal in England and Wales. This includes:

- Taking someone overseas to force them to marry (whether or not the marriage takes place)
- Marrying someone who lacks the mental capacity to consent to the marriage (whether they're pressured to or not)

## **Female Genital Mutilation (FGM)**

FGM is child abuse and a form of violence against woman and girls, and therefore should be dealt with as part of existing child safeguarding/protection structures, policies and procedures.

FGM is illegal in the UK. In England, Wales and Northern Island, the practice is illegal under the Female Genital Mutilation Act 2003.

Other than in the excepted circumstances, it is an offence for any person (regardless of their nationality or residence status) to:

- Perform FGM in England, Wales or Northern Island (section 1 of the Act);
- Assist a girl to carry out FGM on herself in England, Wales or Northern Island (section 2 of the Act); and
- Assist (from England, Wales or Northern Island) a non-UK person to carry out FGM outside the UK on a UK national or permanent UK resident (section 3 of the Act)

## **Prevent**

The Counter Terrorism & Security Act 2015

The Act places a Prevent duty on settings to have "due regard to the need to prevent people from being drawn into terrorism"

Settings subject to the Prevent Duty will be expected to demonstrate activity in the following areas

Of suspected

- Assessing the risk of children being drawn into terrorism.
- Demonstrate that they are protecting children and young people from being drawn into terrorism by having robust safeguarding policies.
- Ensure that their safeguarding arrangements take into account the policies and procedures of the Local Safeguarding Children Board.
- Make sure that staff have training that gives them the knowledge and confidence to identify children at risk of being drawn into terrorism, and to challenge extremist ideas which can be used to legitimise terrorism.
- Expected to ensure children are safe from terrorism and extremist material when accessing the internet in the setting.

## **Modern Slavery and Human trafficking**

Modern slavery can take any forms including the trafficking of people, forced labour, servitude and slavery. Victims can include adults and children and come from all walks of life and backgrounds. A quarter of all victims are children. The modern slavery act 2015 places a duty on specified public authorities to report details of suspected cases of modern slavery to the National Crime Agency.

Indicators of modern slavery can include:

- Lack of access to legal documents (e.g passports)
- Appearance (malnourished, unkempt, etc.)
- Untreated or unexplained injuries
- Attitude (withdrawn, frightened, unable to speak for themselves)
- Indebtedness or in a situation of dependence
- Frequent changes of location or restrictions on movement.

## **Fabricated or induced illness**

'fabrication or induction of illness in a child' rather than using a particular term. If, as a result of a carer's behaviour, there is concern that the child is or is likely to suffer significant harm, this guidance should be followed. The key issue is not what term to use to describe this type of abuse, but the impact of fabricated or induced illness on the child's health and development, and consideration of how best to safeguard and promote the child's welfare. There are three main ways of the carer fabricating or inducing illness in a child. These are not mutually exclusive and include:

- fabrication of signs and symptoms. This may include fabrication of past medical history;
- fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents;
- induction of illness by a variety of means.

## **Domestic Abuse**

Domestic abuse is defined as:

"Any incident or pattern of incidence of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse: psychological; physical; sexual; financial or emotional"

## Dealing with Disclosures

### Receive

Always stop and listen straight away to someone who wants to tell you about incidents or suspicions of abuse. Listen quietly and actively, giving your undivided attention. Allow silence when needed. Do not show shock or disbelief but take what is said seriously.

### Reassure

Stay calm, no judgements, empathise. **Never make a promise that you can keep what a child has said a secret.** Giving reassurance that only those who need to know will be told. Reassure the young person that they were right to tell you. In accordance with the Data Protection Act, information can be disclosed to the appropriate authority if there is seen to be serious harm/risk to the child.

### React

React to the child only as far as is necessary for you to establish whether or not you need to refer this matter, but don't interrogate for full details.

Don't ask leading questions-keep the open questions e.g. is there anything else you want to say?

Do not criticize the perpetrator.

Explain what you will do next-inform designated member of staff, keep in contact.

### Record

If possible make brief notes about what they are actually telling you at the time. Keep these notes, however rough they are. If you are unable to make notes at the time write down what was said as soon as you can.

Try to record what was actually said by the child rather than your interpretation of what they are telling you.

Record the date, time, place and any noticeable nonverbal behaviour.

### Report

Report the incident to the designated person and do not tell any other adults or children what you have been told.

Once been escalated to the appropriate level all actions need to be followed up until you feel an appropriate outcome has been made.

If there are serious concerns and immediate advice is needed the registered /lead practitioner for safeguarding will contact the MASH (Multi Agency Safeguarding Hub).

Multi-Agency Safeguarding Hub: **0345 050 7666**

Emergency Duty Team (outside office hours): **0800 833 408**

Find out more about the Multi-Agency Safeguarding Hub (MASH).

The registered/lead practitioner will contact the MASH (Multi Agency Safeguarding Hub) immediately.

### **No name Consultations**

If you would like to make a no names consultation OSCB advise you contact the Locality and Community Support Service (LCSS) on:

- North Tel: 0345 2412703
- Central Tel: 0345 2412705
- South Tel: 0345 2412608

**Never attempt to carry out an investigation of suspected abuse by interviewing the young person or any others involved. This is a highly skilled role and any attempt by yourself could affect possible criminal proceedings.**

### **Record Keeping**

The Designated person and staff can play a vital role in helping children in need or at risk by effective monitoring and record keeping. Any incident or behavioural change in a child or young person that gives cause for concern should be recorded on an incident sheet, copies of which are securely kept on the Safeguarding Children's File. It is important that records are kept factual and reflect the words used by the child or young person. Records must be signed and dated with timings if appropriate.

Information to be recorded:

- Child's name and date of birth
- Child in normal context
- The incident with dates and times
- A verbatim record of what the child or young person has said
- If recording bruising/injuries indicate position, colour, size, shape and time on body map.
- Action taken.

Please also refer to your recording guidelines which is kept in each room and can be found at reception.

**What support is available to you?**

There will be regular staff training on Safeguarding.  
All staff should receive an induction which includes an explanation of the procedures to be followed when concerned about a child but also guidance on appropriate staff behaviour around children and whistleblowing.

Any staff affected by issues arising from concerns for children's welfare or safety can seek support from their Designated person for Child protection. The Designated person for child protection can put staff and parents in touch with outside agencies for professional support if they wish so. They will also share the Local Authority Safeguarding leaflet which has guidelines to follow.

### **Monitoring and Review**

All visitors in a professional capacity will have access contents. The policy will also be available to parents.

The policy will be reviewed annually.

All staff should have access to this policy and sign to the effect that they have read and understood its contents.

**This policy was reviewed on:**

**24<sup>th</sup> November 2017**

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**Signed:**

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**Manager**