



**Safeguarding Policy and Procedure**

**Safeguarding is everyone's responsibility. Safeguarding information is shared both internally and with outside professionals as appropriate.**

# Purpose and Context

All the children we work with must always feel safe. This Nursery fully recognises its responsibilities for protecting and safeguarding the welfare of all children.

 We will work closely with families and co-operate fully with other agencies to take all reasonable steps to minimise the risks of harm to a child’s well-being. We recognise that not all risks can be eliminated, so we must operate in an atmosphere of safe uncertainty. This means that children must feel secure and safe in the face of reasonable risks but should never be knowingly or unknowingly put in a position of significant harm or abuse.

Where we have concerns about the welfare of children we will take appropriate action to address those concerns by working to agreed procedures in our partner agencies.

* In relation to children safeguarding and promoting their welfare is defined 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;
* Taking action to enable all children to have the best outcomes.

# Scope

This policy applies to all staff (this includes employees and bank staff and volunteers). This is also extended to independent contractors who are undertaking direct work with children on behalf of the nursery.

# References

The Nursery wishes to uphold and implement the following guiding principles/legislation:

* Children Act 1989 / 2004
* Children and Families Act 2014
* Working Together 2013
* Female Genital Mutilation Act 2003
* United Nations Convention of the Rights of the Child
* Local Authority Safeguarding Children Board procedures
* Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges (DfE)
* ‘What to do if you are worried a child is being abused’
* Information Sharing:advice for practitioners 2018
* The Prevent duty Departmental Advice

## Other documents

This policy is to be used alongside and in conjunction with:

* Complaints Policy
* Staff Code of Conduct
* Health and Safety Policies
* Diversity, Equal Opportunities policy
* Confidentiality, Data Protection, and Information Sharing Policy
* Recruitment and Selection Policy
* Disclosure and Barring Service Policy
* Whistle Blowing Policy
* Social Media Policy
* Staff Annual Declaration of Suitability of Staff
* Safeguarding Reporting Procedures

Safeguarding arrangements at the Nursery are underpinned by these key principles: Safeguarding is everyone's responsibility: all Staff should play their full part in keeping children (Includes vulnerable adults when in their setting) safe; We will aim to protect children using national, local and Nursery child protection procedures; We aim to work in partnership and have an important role in multi-agency safeguarding arrangements as set out by Working Together 2018; That all Staff have a clear understanding regarding abuse and neglect in all forms; including how to identify, respond and report. This also includes knowledge in the process for allegations against professionals. Staff, should feel confident that they can report all matters of Safeguarding in the Nursery setting where the information will be dealt with swiftly and securely, following the correct procedures with the safety and wellbeing of the children in mind at all times. That we operate a child-centred approach: a clear understanding of the needs, wishes, views and voices of children

Children with Emerging Needs and who may require Early Help

* All Staff working within the Nursery should be alert to the potential need for Early Help for children, following the procedures identified for initiating Early Help using the local and current Safeguarding Partnership Threshold Document.

**DEFINITIONS**

## Abuse

Abuse is defined in the Department of Health “No Secrets Guidance” as the violation of an individual's human and civil rights by any other person or persons. Child abuse refers to any child or young person under the age of 18 years, who is not married, who, through the actions or inactions of parents or other carers has suffered or is likely to suffer some form of maltreatment or significant harm.

## Significant Harm

The concept of ‘Significant harm’ (Children Act 1989) is the threshold that justifies compulsory intervention in family life in the best interests of children and young people:

* ‘Harm’ means ill treatment or the impairment of health or development (including impairment suffered from seeing or hearing the ill treatment of another).
* Whether the harm suffered by a child is ‘significant’ is determined by comparison of the child’s health and development with that which could be expected of a similar child.

There are no absolute criteria in judging what constitutes significant harm – it may be the result of a single, traumatic event, or more often, of a culmination of significant events, both acute and long standing.

## Physical abuse

This may involve hitting, shaking, throwing, pushing, kicking, poisoning, burning/scalding, drowning, and suffocating. This list is not exhaustive.

## Emotional/Psychological Abuse

This is the persistent emotional maltreatment of a child to cause severe and persistent effects on their emotional development. Some examples include:

* Conveying to a child they are worthless, inadequate or unloved.
* Imposing age or developmentally inappropriate expectations.
* Bullying that causes a child to feel frightened.

## Sexual Abuse / Child Sexual Exploitation (CSE)

CSE is a type of sexual abuse in which children are sexually exploited for money, power or status. Some examples include:

* Children or young people may be tricked into believing they’re in a loving, consensual relationship. They might be invited to parties and given drugs and alcohol. They may also be groomed online.
* Forcing a child to take part in sexual activities whether or not they are aware of what is happening. This may involve physical contact including penetrative and non-penetrative acts.
* Involving children looking at or taking part in the production of pornographic materials.
* Involving children in the production or watching of sexual activity or to behave in sexually inappropriate ways.

## Neglect

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

## Grooming

Grooming is the deliberate actions taken by an adult to form a trusting relationship with a child, with the intent of later having sexual contact (either with themselves or other people). This involves psychological manipulation in the form of positive reinforcement, activities that are typically legal but later lead to sexual contact. This is done to gain the child's trust as well as the trust of those responsible for the child's well-being.

Additionally, our own staff may be befriended to assist in the grooming of a child. This consists of being befriended by others through the internet, e.g. Facebook, Twitter, Snapchat etc, using messaging services, or at parties, through friends or social groups.

## Female Genital Mutilation (FGM)

FGM is illegal in the UK. FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls’ and women’s bodies. The practice causes severe pain and has several immediate and long-term health consequences, including difficulties in childbirth. The age at which girls undergo FGM varies enormously according to the community they belong to. However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at a higher risk.

## Cyber Bullying/Abuse

Cyber Bullying or Abuse is the use of Information and Communications Technology, particularly mobile phones and the internet, deliberately to upset someone else. ‘Upsetting’ someone can take a variety of forms. It can involve threatening, distressing or humiliating a target, and, as such, encompasses a wide range of behaviours.

## Honour Based Violence

Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community. It is often linked to family members or acquaintances who mistakenly believe someone has brought shame to their family. For example, honour based violence might be committed against people who:

* Become involved with a boyfriend or girlfriend from a different culture or religion.
* Want to get out of an arranged marriage.
* Want to get out of a forced marriage.
* Wear clothes or take part in activities that might not be considered traditional within a particular culture.

Women and girls are the most common victims of honour based violence; however, it can also affect men and boys. Crimes of ‘honour’ do not always include violence. Crimes committed in the name of ‘honour’ might include:

* Domestic abuse
* Threats of violence
* Sexual or psychological abuse
* Forced marriage
* Being held against your will or taken somewhere you don’t want to go.
* Assault

**Fabricated Illness**

 This is also a type of physical abuse. This is where a child is presented with an illness that is fabricated by the adult carer. The carer may seek out unnecessary medical treatment or investigation. The signs may include a carer exaggerating a real illness or symptoms, complete fabrication of symptoms or inducing physical illness, for example through poisoning, starvation, and inappropriate diet. This may also be presented through false allegations of abuse or encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.

 **Children Who Run Away or Who Are Missing from Home**

 There are no exact figures for the number of children who go missing or run away, but estimates suggest that the figure is in the region of 100,000 per year. Children may run away from a problem, such as abuse or neglect at home or somewhere they want to be. They may have been coerced to run away by someone else. Whatever the reason, it is thought that 25% of children and young people that go missing are at risk of serious harm. There are concerns about the links between children running away and the risks of sexual exploitation. Missing children may also be vulnerable to other forms of exploitation, to violent crime, gang exploitation or to drug and alcohol abuse.

 Although looked after children are particularly vulnerable when they go missing, the majority of children who go missing are not looked after and go missing from their family home. They can face the same risks as a child missing from local authority care.

 **Domestic Violence**

 The Home Office defines domestic violence as “any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 years old 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
* Emotional

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

Children who live in households where domestic violence is taking place are seen to be highly vulnerable. There are other forms of abuse that put children at risk.

**Radicalisation**

Some young people and adults at risk of harm may be vulnerable to radicalisation for the purpose of violent extremism. Concerns regarding radicalisation will be referred to Channel which is a multi-agency panel who offers guidance and support with the aim of preventing activity which could be deemed as criminal.

 **Bullying**

 While bullying between children is not a separate category of abuse and neglect, it is a significant issue that can cause considerable anxiety and distress. At its most serious level, bullying can have a disastrous effect on a child’s wellbeing and in very rare cases has been a feature in the suicide of some young people. Children under the age of five may not be bullied by peers in an obvious way, but they may feel excluded or dominated by other children. Nursery Practitioners will be vigilant and alert to ensure no child is singled out by other children in a negative way. All children will be encouraged to treat their peers with kindness and supported to help them understand any differences that may lead to fear or confusion. Bullying someone because of their age, race, gender, sexual orientation disability and/or transgender will not be tolerated as the College operates a zero-tolerance approach. Bullying can take many forms and includes:

|  |  |
| --- | --- |
| Emotional | Being excluded, tormented (for example, hiding things, threatening gestures. |
| Physical | Pushing, kicking, punching or any use of aggression and intimidation. |
| Racial | Racial taunts, use of racial symbols, graffiti, gestures. |
| Sexual | Unwanted physical contact, sexually abusive comments and graffiti. |
| Verbal | Name calling, spreading rumours, teasing. |
| Cyber | All areas on internet, such as email and internet, chat room misuse, mobile threats by text message and calls. Misuse of associated technology ie camera and video facilities, sexting. |

 **Multiple Needs**

* Research shows that the environment in which a child lives is crucial to his or her health, safety and well-being.
* The term ‘Toxic Trio’ now known as the trio of vulnerabilities has been used to describe the issues of domestic abuse, mental ill-health and substance misuse which have been identified as common features of families where harm to children has occurred. They are viewed as indicators of increased risk of harm to children and young people.
* Work in this area has shown that there is a large overlap between these parental risk factors and cases of child death, serious injury and generally poorer outcomes for children across all ages (Brandon et al, 2008)

Experiencing serious, multiple disadvantage cuts across many domains of family life. Families with multiple and complex needs are likely to have difficulties meeting the needs of their children and parenting effectively. Children can be at a heightened risk of abuse and neglect (Cleaver et al 2007) and at higher risk of adverse outcomes.

Given the predominance of families experiencing multiple and complex difficulties who become involved with child protection and the arrange of social and economic issues that interact with presenting problems such as metal health concerns, family violence and substance abuse the challenge for child protection is how to provide a holistic and contextual response to the needs of the whole family.

 **Culture, Faith and Beliefs**

 The number of known cases of child abuse linked to accusations of ‘possession’ or ‘witchcraft’ is small, but children involved can suffer damage to their physical and mental health, their capacity to learn, their ability to form relationships and to their self-esteem. It is likely that a proportion of this type of abuse remains unreported.

 Such abuse generally occurs when a carer views a child as being ‘different,’ attributes this difference to the child being ‘possessed’ or involved in ‘witchcraft’ and attempts to exorcise him or her.

 A child could be viewed as ‘different’ for a variety of reasons such as disobedience, independence, bed-wetting, nightmares, illness, or disability. There is often a weak bond of attachment between the carer and the child.

 There are various social reasons that make a child more vulnerable to an accusation of ‘possession’ or ‘witchcraft.’ These include family stress and/or a change in the family structure.

 The attempt to ‘exorcise’ may involve severe beating, burning, starvation, cutting or stabbing and isolation and usually occurs in the household where the child lives.

 Any siblings or other children in the household may be well cared for with all their needs met by the parents and carers. The other children may have been drawn in by the adults to view the child as ‘different’ and may have been encouraged to participate in the adult activities.

 Concerns reported in the cases known from research have involved children aged 2-14, both boys and girls and have generally been reported through schools or non-governmental organisations. The referrals usually take place at a point when the situation has escalated and become visible outside the family. This means that the child may have been subjected to serious harm for a period of time already.

 The initial concerns referred have been about:

* Issues of neglect such as not being fed properly or being ‘fasted’, not being clothed, washed properly etc. but left to fend for themselves especially compared to the other children in the household.
* Often the carer is not the natural parent and the family structure can be complex.
* Children often appear distressed or withdrawn.
* The child is seen as the scapegoat for a change in family circumstances for the worse.
* In a group of children, it may be the child who is relatively powerless vis-a-vis the parents /carers, may be a child with no essential role in the family.
* The child is seen as someone who violates the family norms by being physically different perhaps because of illness, disability or, in some case, a suspicion by the father of adultery by the mother.

Child abuse linked to faith or belief may occur where a child is treated as a scapegoat for perceived failure.

 **Private Fostering**

 Private fostering is when a child under the age of 16 (under 18 if disabled) is cared for by someone who is not their parent or a close relative. This is a private arrangement made between a parent and a carer, for 28 days or more. Close relatives are defined as step-parents, grandparents, brothers, sisters, uncles or aunts (whether of full blood, half blood or marriage/affinity).

 Although Local Authorities are charged with several duties, including the implementation of measures designed to strengthen private fostering notification arrangements, raising awareness of private fostering across partner agencies, ensuring that relevant training practices are developed, reviewing the findings of the annual private fostering report submitted by the local authority and responding to the findings of OFSTED inspections, all partner agencies of the LSCB, parents and private foster parents have a responsibility and duty to:

* Ensure that privately fostered children are protected.
* Raise awareness of private fostering and the need to notify the Local Authority of arrangements.
* Ensure that private fostering arrangements are satisfactory and compliant with legislation.
* Ensure that the private foster parents are suitable and that appropriate advice is being given.
* Consider post 16 support for those who are no longer subject to private fostering due to their age.

In a private fostering placement, the responsibility for safeguarding and promoting the welfare of the child stays with the parent. Local Authorities of LSCBs do not approve or register private foster parents. Placement cannot be prevented unless the person is disqualified, or a prohibition order is imposed. The Local Authority cannot remove the child except under an Emergency Protection Order.

**Refugees and Trauma**

 Events that refugees have experienced related to war or persecution can all be called “traumatic events.” It is important to note that children are very resilient and can often cope with difficult experiences and events in healthy and productive ways. Such children may not display any symptoms and may not need service providers to intervene. However, for some children, exposure to traumatic events has a profound and lasting effect on their daily functioning.

 The impact of exposure to traumatic events on children may be different depending on the child’s age and stage of development. There are some signs of distress as a result of exposure to traumatic events that are specific to a child’s developmental stage. For example:

**Pre-school children may experience**:

* Bed wetting
* Thumb sucking
* Acting younger than their age
* Trouble separating from their parents.
* Temper tantrums
* Aggressive behaviour like hitting, kicking, throwing things or biting.
* Not playing with other kids their age
* Repetitive playing out of events related to trauma exposure.

## Recognition of Abuse

The factors described below are frequently found in cases of child abuse or neglect. This is no proof that abuse has occurred but:

* It must be regarded as indicators of the possibility of significant harm.
* It indicates the need for careful assessment and discussions with line managers.
* It may require a referral to the LADO, local authority children’s service or social care.

In abusive circumstances you may witness or experience the following: The child may:

* Appear frightened of a parent/carer.
* Act in a way that is “out of character” or inappropriate after taking account of their disability.

The parent/carer may:

* Avoid routine checks or treatments.
* Have unrealistic expectations of the child.
* Frequently complain to or about the child and fail to give attention and praise.
* Leave the child with inappropriate carers
* May be abusing substances

## Recognition of Grooming Children

Signs to look for if children are being groomed:

Adults forming inappropriate or intimate relationships with children. Examples of this may include:

* Inappropriate handling of children
* Constantly hugging
* Excessive 1:1 time spent
* Meeting outside the work environment
* Taking photos of a child/young person
* Using social media / email / messaging to contact the child/young person
* Discussing intimate and personal information

Signs to look for that staff are being used to groom children themselves or on behalf of another person:

* Taking pictures of children with mobile phone or other devices without permission.
* Contacting children/young people via social media / email / messaging.
* Introducing strangers to the service without previous clearance.
* Passing information about children and service to others without permission.
* Making friends with the family.
* Witnessing any of the behaviours outlined above.

## Recognition of FGM

There are a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practice it, the nationality or residence status of the victim is irrelevant.

Be conscious of the fact that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. For further information, refer to the government document **‘**Female genital mutilation: guidelines to protect children and women’. https://[www.gov.uk/government/publications/female-genital-mutilation-guidelines](http://www.gov.uk/government/publications/female-genital-mutilation-guidelines)

Potential indicators include:

* The position of the family and the level of integration within UK society – it is believed that communities less integrated into British society are more likely to carry out FGM.
* Any girl who has a sister who has already undergone FGM must be considered to be at risk of FGM, as must other female children in the extended family.
* A professional may hear reference to FGM in conversation, for example a girl may tell other children about it
* A girl may confide that she is to have a ‘special procedure’ or to attend a special occasion to ‘become a woman.’
* A girl may request help from a staff member or another adult if she is aware or suspects that she is at immediate risk.
* Parents state that they or a relative will take the child out of the country for a prolonged period.
* A girl may talk about a long holiday to her country of origin or another country where the practice is prevalent.

## Recognition of Cyber Bullying/Abuse

In many cases, children do not consider particular acts or behaviour to be cyberbullying. For example, saying hurtful things or passing on images are not seen as bullying [by some children], because they happen in cyberspace as opposed to face-to-face.

This is often compounded by the inpersonal nature of online communications. Although emotions can be used to clarify intentions, people do not have the benefit of seeing subtle cues and body language that occur with regular human interactions. This can create an intention gap: the victim can interpret what is perceived as a joke by the perpetrator differently. Thus, the definition of cyberbullying must be considered and focus on the intensity and harm caused.

The following categories are considered cyberbullying. Some of these behaviours or activities are illegal. A person involved could be investigated by the police and prosecuted:

* Sending threatening or discomforting text messages to a mobile phone or via sms
* Making silent, hoax or abusive calls to mobile phones
* Making and sharing embarrassing images or videos via mobile phone or website
* Broadcasting unsuitable audio/visual footage that is threatening or manipulative
* Leaving hurtful messages on social networking sites or sending the same message to that person’s peer group
* ‘Outing’ people by publishing or disseminating confidential information online
* Stealing an online identity in order to cause trouble in that person’s name
* Deliberately excluding people from online games or groups
* Setting up hate sites or hate groups against an individual
* Sending menacing or upsetting responses in chat rooms, online games, or messenger ‘real time’ conversations
* Voting for someone in an insulting online poll
* Sending someone ‘sexts’ that try to pressure them into sexual acts

## Recognition of Forced Marriage and Honour Based Violence, the “Once Chance” Rule

All Practitioners who become aware that a child may be at risk of forced marriage need to bear in mind that they have only one chance to speak to the potential victim. This means that all Practitioners working within statutory agencies need to be aware of their responsibilities when they come across forced marriage cases. If support is not offered immediately, that one chance might be wasted. Children are likely to be fearful of the consequences of talking to anyone and may also be very anxious as to who they can trust.

Therefore:

* **Do not** involve members of the family or attempt mediation as this could be dangerous.
* **Do not** use friends, relatives or community members as interpreters.
* **Do not** overlook possible breaches of confidentiality from within your own organisation
* **Do not** share information with the family, community, members of the public or the media without the express consent of the child.

However:

* **DO** find an opportunity to talk to the child that doesn’t draw attention to the reasons why you wish to talk to them
* **DO** provide confidential, secure space to talk to the child, which is not in public view
* **DO** ensure you have a safety plan and means of contact for the child that provides a safety net e.g. a code that ensures that you are speaking to the child and not a family member if you need to contact them by phone.
* **DO** use an accredited interpreter if you need one.

**Recruitment and Selection**

HCE ltd’s Recruitment Policy, sets out safer recruitment practices and this policy should be referred to.  The necessary safter recruitment steps are:

**Advert**

Adverts will have a statement that appointments are subject to “enhanced DBS checks with barred checks”

**Job Descriptions**

Will make it clear that all staff have responsibility for Safeguarding and for the promotion of equality and diversity.

**Applications**

A signed self-disclosure regarding criminal convictions, warnings, reprimands and a declaration that there is nothing the person is aware of that would make them unsuitable to work with children or vulnerable people. Causes for concern, should seriously be considered before making a job offer and would only be subject to a risk assessment.

**Shortlisting**

Will be conducted by two or more managers.

**Interviews**

The panel will agree questions to be asked and a Safeguarding question must always be asked.  This can be the standard safeguarding question provided by HR or a question relevant to the post.

Candidates will be asked to bring with them proof of ID, original qualifications certificates and documents ready for DBS checks (if being asked to stay for the outcome otherwise soon after the interview).

During the interview the panel are to establish from candidates to:

* Explain any gaps in employment

* Explain satisfactorily any anomalies or discrepancies in the information available to the panel

* Declare any information that is likely to appear on the DBS disclosure

* Demonstrate their ability to safeguard and protect the welfare of children and young people and their ability and willingness to promote fundamental British values

**The Panel**

Candidates will be interviewed by two or more managers/staff.

The recruitment panel must have at least one person who has undergone Safer Recruitment training.

(managers will be asked to re-fresh their training every three years)

**References**

Referees will be asked specific questions about the following:

* The candidate’s suitability to work with children and young people
* Any substantiated allegations
* Any disciplinary warnings, including time-expired warnings, relating to the

Safeguarding of children, young people and vulnerable adults

* The candidate’s suitability for the post, including the candidates ability and willingness to promote fundamental British values.

Reference requests will include the following:

* Applicants current post and salary
* Attendance record
* Disciplinary record

All appointments are subject to satisfactory references, vetting procedures and DBS clearance.

**Employment Checks**

An offer of appointment will be conditional and all successful candidates will be required to:

* Provide proof of identity

* Provide proof of eligibility to live and work in the UK

* Complete an enhanced DBS application and receive satisfactory clearance

* Provide proof of professional status (if relevant)

* Provide actual certificates of qualifications

* Complete a confidential health questionnaire

The application form must be crossed checked with all pieces of ID and qualification certifications received.  On receipt of the references the dates must be cross checked with the application form and queries regarding the dates or roles are raised with referee and or candidate until HR are satisfied that the information is true and accurate.  Withdrawal of employment offer will be made if an applicant has provide false information.

# What the Nursery will do for its Employees

## Support staff

We will make sure:

* A statement about the Nursery’s commitment to safeguarding is included in job descriptions.
* All appropriate checks are carried out on all staff and volunteers prior to commencing work within the Nursery.
* All our staff and volunteers are carefully selected, inducted, supervised and trained following the Nursery’s recruitment and selection policies.
* All risks encountered by children and young people are carefully assessed so that necessary steps are taken to minimise and manage those risks.
* We provide ongoing supervision for staff to discuss concerns they may have about the welfare of any child they are working with.
* We take seriously all reports of concern made by staff and volunteers and will follow this up appropriately using this policy and procedure.

All staff, volunteers and trustees must fully understand their responsibilities in responding to signs of abuse.

To make sure this is put into practice all staff, volunteers and trustees must follow the Nursery’s Safeguarding Children Procedures.

# General Safeguarding Procedure

## Sharing information

 Halesowen college Nursery has the responsibility to share information with the local authority’s (LA’s) children’s social care officers/ Local Authority Designated Officer (LADO) when we have reasonable cause to suspect that a child may be suffering or may be at risk of significant harm.

While, in general, we should firstly discuss any concerns with the family and inform them of our discussion to make a referral to children’s social care, the times when we should not do this would be when sharing information would:

* Place a child at increased risk of significant harm.
* Prejudice the prevention or detection of serious crime.
* Lead to unjustified delay in making enquires about allegations of significant harm.
* Put an employee/worker at immediate risk

## Nominated Child Protection Advisers

## **Designated safegaurding Lead for Nursery- Eve Bradley**

## **Deputy Designated Leads for Nursery- Sarah Cree and Natalie Davies.**

Staff should always consult with their line manager first or our nominated safeguarding lead should the line manager be unavailable. For monitoring purposes all Safeguarding instances should be copied to the Director.

The role of the line manager and nominated safeguarding lead is to:

* Be fully conversant with the Nursery and any local safeguarding policy and procedures relating to the project and work being undertaken.
* Undergo training as needed to update and refresh knowledge of any changes in legislation and practice in safeguarding children.
* Be responsible for taking the decision to refer an allegation or concerns of the welfare of a child to the LA’s children’s social care.
* Identify training needs.
* Make sure that any records made of any safeguarding incident allegation are kept in line with policies and procedures.
* Promote good practice.
* Make sure that safeguarding children is part of the risk assessment of each project.
* Report any shortfall in policy and practice to senior managers.

## Listening to Children

Children we work with will have a variety of ways to tell us that they are feeling sad or hurt. They may use several ways to communicate with us. This may be verbal, actions, signing, behaviours, and so on, so we need to be alert and attentive to each child’s method and ability to communicate these feelings to us. If a child does confide that they have been maltreated in some way, we should take the following action:

* Comfort and reassure them that you are taking them seriously.
* Do not make any promises that you will keep this a secret – you have a duty to report this as detailed in this procedure.
* Seek only additional information from the child at this point that will help you clarify that the child has been hurt and the steps that may need to be taken to make sure the child will remain safe.
* Allow the child to communicate freely about the incident if they so choose.
* Make factual notes as soon as possible of anything that has been communicated, diagrams of any bruising or marks and other information that you think is important.
* Do not attempt to investigate the matter yourself or ask leading questions.

## First Steps

All staff must inform their line manager of their concerns for the welfare of a child or young person.

## Line Manager Responsibilities

As soon as you hear of an allegation/concern you must take the following actions:

* Question the person reporting the allegation so that you understand fully the details of the allegation.
* Take immediate action to make sure the child/young person is safe and remains safe.
* Inform the nominated child protection adviser immediately of the concerns. Be prepared to discuss:
	+ Details of the allegations
	+ Person/persons involved.
	+ Current risks

## The nominated Safeguarding Lead

Once the nominated safeguarding lead has received this information, they can make one of the following decisions:

* The information provided indicates that there is no cause for concern, so no further action is needed.
* There is a cause for concern as it is likely the child has suffered harm and the allegation is made against a parent or family carer.
* There is a cause for concern as it is likely the child has suffered harm and the allegation is made against a member of staff.
* There is a cause for concern as it is likely the child has suffered harm but it is unclear who the allegation is made against.

On making this decision, the nominated child protection adviser must take the following action.

## Allegations Against Parent/Family Carer

1. It would be helpful to have the following information:
	* Full names, date of birth and gender of child
	* Family address
	* Identity of those with parental responsibility
	* Names, dates of birth and gender of all household members
	* Ethnicity, first language and religion of children and parents
	* Any need for interpreter, signer or other communication aid
	* Any special needs
	* Any significant events, incidents or changes in the child’s life
	* Cause for concern to include details of allegation, the source, timings, and location.
	* Child’s current location, emotional and physical condition
	* Our relationship with the child
	* Our knowledge of the child and parent
	* Information regarding parental knowledge of the referral
2. Contact the children’s social care or Duty team:
	* Provide information detailed above.
	* Follow any instructions given by this representative.
	* Make notes of all discussions detailing:
		+ Name of person
		+ Date of discussion
		+ Time of discussion
		+ Summary of key points
		+ Action points

In these circumstances you need to give consideration about returning the child to the care of that person. If you believe there continues to be a risk to the safety and welfare of the child, then you must inform the children’s social care team of your concerns. Halesowen college Nursery does not have the legal right to stop a parent taking back responsibility of any child/young person in our temporary care as this is a decision for statutory agencies e.g. social workers, police, or the courts.

## Allegations against Member of Nursery Staff / Volunteers

Halesowen College Enterprises will designate a senior manager to deal with allegations against staff and volunteers.

In the event of an allegation being made that meets the following criteria the manager should complete a LADO referral form and without delay send it to their LADO. The manager should then telephone the LADO immediately to discuss the next course of action.

Allegations about staff/volunteers may include, but are not limited to the following:

* + 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.

Please follow the process flow in appendix A.

## Grooming

In addition to any of the above action's managers should take these actions if they are concerned that any staff member is being used to groom children:

* + Discuss immediately concerns with nominated safeguarding lead as outlined above.
	+ Suspend member of staff without prejudice. Refer to Halesowen College Enterprises HR guidance for more details.
	+ Inform LADO.
	+ Inform regulatory body if appropriate, e.g. OFSTED.
	+ Undertake investigation as agreed with local authority safeguarding officer.
	+ Attend any meetings arranged by LADO.

## Outcomes in Relation to Staff

If there is no evidence to support the allegations, take the following actions:

* + Report outcome to regulatory body as outlined above.
	+ Staff member return to work.
	+ Any notes made on investigation removed from employees’ personnel file.

If there is specific evidence to support the allegation of grooming, take the following actions:

* + Follow HR procedures to determine the severity of the act and appropriate sanction. In some instances, this may require a change of duties and re-training, in other circumstances the staff member contract may be terminated immediately on grounds of gross misconduct.
	+ Report outcome to regulatory body.
	+ Report outcome to Independent Safeguarding Authority.
	+ Follow any advice or actions made by LADO.

## Other Safeguarding issues

Safeguarding can cover several other events including children leaving the premises unsupervised, faith abuse or radicalisation.

All Nursery staff have a duty of care towards the children and young people receiving a service. Any situation or event that may be interpreted as having a safeguarding implication should be noted and discussed with line managers.

No member of the Nursery staff will be penalised for raising a genuine concern that may impact on the safety and well-being of the children that the nursery cares for.

# Duties and Responsibilities

Training on this policy and procedure may be given during induction as part of the induction checklist, delivered through educare, eLearning and updated through line manager briefings or guidance external trainers.

Failure to comply with this policy may lead to disciplinary action which could include summary dismissal.

This policy will be reviewed annually and, if necessary, adjusted to incorporate any changes to legislation and include any improvements that may have been identified.

**Internal use only**

|  |  |  |  |
| --- | --- | --- | --- |
| **This policy was reviewed in** | **Signed on behalf of the nursery** | **Date disseminated to staff** | **Date for review** |
| March 2021 | E.Bradley |  | March 2022 |

**APPENDIX A**

**Allegations Against a Staff Member Process Flow**

1. **Contact the LADO outlined in each locality’s Safeguarding/Protecting Children procedures and:**
	* Provide information detailed in above
	* Follow any instructions given by this representative.
	* Make notes of all discussion had, detailing:
		+ Name of person
		+ Date of discussion
		+ Time of discussion
		+ Summary of key points
		+ Action points
2. **Line manager may decide to suspend member of staff immediately on full pay without prejudice to complete an investigation. This decision must be communicated immediately to the Director.**

In some instances, the LADO may request that the member of staff in question is not informed of allegations made against them and are allowed to continue to work whilst the allegation is investigated. In these instances, a confidential record of this should be shared with the Director, and extra care should be exercised when allowing the member of staff to work with children.

1. **Contact OFSTED** to inform them of the investigation**.**
2. **If asked to do so by the LADO The line manager is to undertake an investigation to seek information from:**
* Child – from what has already been told, do not question again
* Member of staff
* Any staff who witnessed the event
* Any other sources of information that would be helpful
1. **Once the investigation is complete, discuss with nominated child protection adviser and LADO (if appropriate) who can make the following decisions:**
* No cause for concern and member of staff returned to work no further action taken.
* No cause for concern regarding welfare of children but a training and skills development need identified. Set out formal training programme as advised by HR department.
* Cause for concern and member of staff remains suspended and follow Halesowen College NurseryDisciplinary Procedures.

## APPENDIX B

## KEY CONTACT NUMBERS

|  |  |
| --- | --- |
| **LADO** | 01384 813061 |
| **Emergency Duty Officer (out of office hours)** | 0300 5558574 |
| **The Forced Marriage Unit** is a national service and can be **contacted between Monday – Friday (9am -5pm)** | 02070 080151 |
| **OFSTED** | 0300 123323 |
| **Early Help/CAF Service Team** | 01384 813753 |
| **Single Point of Access** | 0300 5550050 |

## APPENDIX C

## Making a Referral, Things to Consider

What has prompted your referral? Consider the key events, actions and disclosures that have lead you to take action. To help think through this you can ask yourself the following questions:

* + What have you seen or heard?
	+ Where did you get information from? Is it second hand or direct from the child?
	+ Was there an incident and if so, where did the incident take place? Be specific.
	+ Who was involved in the incident? Were any other siblings or children/young people present? Is so who are they?
	+ What happened in the lead up to the incident?
	+ If no incident has taken place, provide specific details on the information your concerns are based upon.
	+ Why have you decided to refer your concerns now?
	+ Does the child/young person still have contact with the person who caused them harm?

Was anyone else present? Think about who has seen what. Has the child made a disclosure or is this something that you have witnessed? Please provide the details of the people who did witness the event if it was not you.

When did this happen? When did this place and how do you know it has taken place?

Where is the child at the point of referral submission? What are the protective factors keeping the child safe?

What has the child said? The child’s voice should be at the heart of any referral and this question enables referrers to record what the child has said.

When did you last see the child/family?

Is there any indication of physical harm? If the child/ young person has any physical injuries, describe clearly any marks/ bruises, how severe and where the injury is. Where possible, describe how the injury happened.