

CHILD PROTECTION POLICY



Safeguarding and Child Protection Policy

The purpose of this document is to assist all staff to safeguard and protect children who are at risk of abuse or neglect and promote their well-being. This policy and procedures should be read in conjunction with:

- Working Together to Safeguard Children **2023**
- Keeping children safe in education **2023**

The safeguarding of children is everyone's business and settings have a responsibility under Section 175 of the Education Act 2002 to ensure that their functions are carried out with a view to safeguarding and promoting the welfare of children. This includes:

- Preventing the impairment of children's health or development.
- Protecting children from maltreatment.
- Ensuring children grow up in circumstances consistent with the provision of safe and effective care.

The Children Act 1989 defines a child as being up to the age of 18 years. This policy and the following procedures apply to all paid staff, volunteers and Directors working with in Abberley House Nursery.

Significant Harm

There are no absolute criteria on which to rely when judging what constitutes significant harm. Consideration of the severity of ill-treatment may include the degree and the extent of physical harm, the duration and frequency of abuse and neglect, the extent of premeditation, and the presence or degree of threat, coercion, sadism, and bizarre or unusual elements. Each of these elements has been associated with more severe effects on the child, and/or relatively greater difficulty in helping the child overcome the adverse impact of the maltreatment. Sometimes, a single traumatic event may constitute significant harm (e.g., a violent assault, suffocation, or poisoning). More often, significant harm is a compilation of significant events, both acute and longstanding, which interrupt, change or damage the child's physical and psychological development. Some children live in family and social circumstances where their health and development are neglected. For them, it is the corrosiveness of long-term emotional, physical, or sexual abuse that causes impairment to the extent of constituting significant harm. In each case, it is necessary to consider any maltreatment alongside the family's strengths and supports.

The following procedures outline the action to be taken if it is suspected that a child may be being abused, harmed, or neglected. **There are five categories of abuse: – Physical Abuse – Emotional Abuse – Sexual Abuse – Neglect and Domestic.**

It is acknowledged that a child can be abused, harmed, or neglected by family, in an institution or community setting by someone known to them, or less commonly, by a stranger, this includes someone in a position of trust such as a teacher or other professional.

Safeguarding and the promotion of a child's welfare covers all aspects of the child's life, and the nursery is committed to ensuring that all its actions in respect for a child are compatible with this aim. If there are concerns about a child's welfare that do not meet the thresholds of child abuse the nursery will consider whether the Early Help approach should be considered. Remember

CHILD PROTECTION POLICY



early identification of concerns and the use of Early Help to develop a multi-agency plan for the child can reduce the risk of subsequent abuse.

Context

The content of this policy is applicable to all paid staff, volunteers, and Directors. The Directors and staff of Abberley House Nursery fully recognise the contribution it makes to safeguarding children. We recognise that all staff, including volunteers, have a full and active part to play in protecting our children from harm.

All staff and Directors believe that our setting should provide a caring, positive safe and stimulating environment which promotes the social, physical and emotional development of the individual child.

The aims of this policy are:

- To support the child's development in ways that will foster security, confidence, and independence.
- To raise the awareness of both teaching and non-teaching staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse.
- Adopting child protection guidelines through procedures and a code of conduct for staff and volunteers.
- To provide a systematic means of monitoring children known or thought to be at risk of harm.
- To support children who have suffered abuse in accordance with their agreed Child Protection Plan.
- To emphasize the need for good levels of communication between all members of staff.
- Carefully follow the procedures for recruitment and selection of staff and volunteers, ensuring that all adults within our setting who have access to children have been checked as to their suitability.
- To set out a structured procedure within the setting in cases of suspected abuse.
- Sharing information about child protection and good practice with children, parents and careers, staff, and volunteers.
- To develop and promote effective working relationships with other agencies, such as Family Front Door, **Social services, foster families and any other adult or professional that may be working with the child and family.**
- Sharing information about concerns with agencies who need to know and involving parents and children appropriately.
- To ensure all staff are aware of the setting and are all aware of the code of conduct.
- Providing effective management for staff and volunteers through support, supervision, and training.

CHILD PROTECTION POLICY



Equality

Some children's circumstances mean they are more vulnerable to abuse and/or less able to easily access services. These children often require a high degree of awareness and co-operation between professionals in different agencies, both in recognising and identifying their needs and in acting to meet those needs.

Procedures

Abberley House Nursery procedures for safeguarding children will be in line with Worcestershire Local Authority Safeguarding Children's Board procedures. We will ensure that:

- We have a Designated Safeguarding Lead who has responsibility for Child Protection and who undertakes regular training for this role.

The Designated Safeguarding Lead will undertake training regularly and ALL staff will receive training at least every year.

We have a designated Lead for Child Protection/Safeguarding. This person is **Nicola Chopping**. If there are concerns about a child, the Designated Safeguarding Lead will seek advice from Family Front Door or Lado and complete referrals to Relevant agencies. If a child is at immediate risk of harm or danger the police will be contacted alongside **Family Front Door**.

The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of the children and gives local authorities a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer significant harm.

- All members of staff will develop their understanding of the signs and indicators of abuse and their responsibility for referring any concerns.
- All new members of staff will be given a copy of our child protection procedures as part of their induction into Abberley House Nursery
- All members of staff will be given free online safeguarding and child protection training via NoodleNow or Worcestershire Safeguarding Early Years Team.
- All members of staff will know how to respond to a child who discloses abuse. It is vital that our actions do not abuse the child further or prejudice further enquiries, for example: stay calm, listen to the child, if you are shocked by what is being said try not to show it. Do not promise confidentiality, you can, however, promise privacy, reassure the child they have done the right thing, explain who you will have to tell and why.

If a child is making a disclosure the pace should be dictated by the child, do not ask leading questions for example, 'what did they do next?' It is our role to listen not to investigate.

- Use open questions such as 'is there anything else you wish to tell me'.
- Accept what they are telling you, do not make judgements.
- Reassure the child that they have done the right thing in telling you. Do acknowledge how hard it was for them to tell you.

CHILD PROTECTION POLICY



- Do not criticize the perpetrator, this may be someone they love.
- Tell them what you will do next and with whom the information will be shared.
- Pass this information on immediately to your Designated Safeguarding Lead.
- All staff may raise concerns directly with Family Front Door.

After a child has disclosed abuse, the designated person should carefully consider whether it is safe for a child to return home to potentially abusive situation. On these rare occasions it may be necessary to take immediate action to contact Family FRONT DOOR to discuss putting safety measures into effect.

Staff must report all information immediately, on the same working day, to the Designated Safeguarding Lead.

The conduct of staff when in a 1:1 situation with a child is managed in a way that would not lead any reasonable person to question their motives or intentions. All staff must ensure that their behaviour and their actions do not place children or themselves at risk of harm or of allegations of harm to children. All staff must be aware of the settings '**Whistleblowing Policy**' and how to access it.

All parents/carers are made aware of the possibilities of staff members' actions regarding child protection procedures.

All parents, as part of the child induction process, will be made aware of the Child Protection Policy.

Types of abuse and neglect

Abuse is 'a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children'.

Physical abuse: a form of abuse which 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.

Emotional abuse: the persistent emotional maltreatment of a child such as causing severe and adverse effects on the child's emotional development. It may involve conveying to a child 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 a 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 cyberbullying), 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, although it may occur alone.

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 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

CHILD PROTECTION POLICY



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.

Neglect: 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 because 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 caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Domestic abuse: Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people in a relationship. It can seriously harm children and young people and witnessing domestic abuse is child abuse. It is important to remember domestic abuse:

- can happen inside and outside the home.
- can happen over the phone, on the internet and on social networking sites.
- can happen in any relationship and can continue even after the relationship has ended.
- both men and women can be abused or abusers.

Possible Signs & Symptoms of Abuse

The following signs may or may not be indicators that abuse has taken place, but the possibility should be considered. This is not an exclusive list and many of the signs and symptoms could fall into more than one category. Guidance on recognising signs & symptoms of can be found in Working Together to Safeguard Children 2023. Also, students with learning difficulties often exhibit some of these signs (e.g. reluctance to get undressed for P.E., constant tiredness) which are not necessarily signs of abuse but symptoms of their condition. However, it must also be remembered that disabled children are 3 times more likely to experience abuse or neglect than non-disabled peers.

Physical Abuse – Unexplained injuries, bites, bruises or burns, particularly if they are recurrent – Improbable excuses given to explain injuries – Refusal to discuss the causes of injuries – Untreated injuries – Disclosure of punishment which appears excessive – Withdrawal from physical contact/aggressive behaviour – Arms and legs kept covered in hot weather (excluding for reasons of cultural dress – Fear of returning home – Fear of medical help – Self-destructive tendency – Running away

Emotional Abuse – Physical, mental, emotional or developmental lag – Domestic violence – Disclosure of punishment which appears excessive – Over-reaction to making mistakes or fear of punishment – Continual self-deprecation – Sudden speech disorders – Fear of new situations – Inappropriate responses to painful situations – Neurotic behaviours – Self-harm – Fear of parents being contacted – Extremes of passivity or aggression – Drug or solvent abuse – Running away – Compulsive stealing, scavenging

Sexual Abuse – Sudden changes in behaviour – Displays of affection which are inappropriate – Alleged promiscuity or sexualized behaviour – Fear of undressing – Regression to younger behaviour – Inappropriate internet use and possible 'grooming' concerns – Genital itching or other genital/anal pain/injury – Distrust of familiar adult – Unexplained gifts of money, mobile phones etc. – Depression and withdrawal – Apparent secrecy about social activities or the

CHILD PROTECTION POLICY



identity of “special friends” – Wetting or soiling, day, and night – Sleep disturbances or nightmares – Chronic illness, especially throat infections and sexually transmitted disease.

Neglect – Constant hunger – Poor personal hygiene – Constant tiredness – Poor state of clothing – Frequent lateness or non-attendance at setting – Untreated medical problems or unmet special needs – Low self-esteem – Neurotic behaviour – Poor social relationships – Deterioration in setting performance – Running away – Compulsive stealing or scavenging.

Child sexual exploitation (CSE) - involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly ‘consensual’ relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation, or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

Female Genital Mutilation (FGM) - professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is 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 FGM. Professionals should note 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.

What to do if you suspect that abuse may have occurred

- You must report the concerns immediately, on the same working day, to the designated Safeguarding Lead.
- Clearly document **EXACTLY** what has been said, noticed or witnessed.

The role of the designated person is to:

- Obtain information from staff, volunteers, children, or parents and carers who have child protection concerns and to record this information.
- Assess the information quickly and carefully and ask for further information as appropriate.

The designated Lead should make a referral to the Family Front Door or the police without delay. If it is agreed during the consultation or if there is an immediate risk to the child. The referral should be made to the MASH / Family Front Door team in which the child lives, e.g., if a child lives in another borough, the referral needs to be made to the MASH team in that borough.

A telephone referral should be made and confirmed in writing using a MASH/ Family Front Door referral form within 48 hours. The MASH / Family Front Door team should acknowledge the referral within one working day and should be contacted if no acknowledgement has been received within 3 working days. Any referrals that are emailed to the MASH / Family Front Door team should be followed up by a telephone call to confirm receipt. Following referral, the MASH/

CHILD PROTECTION POLICY



Family Front Door team should, within one working day, consider the next course of action, record their decision in writing and notify the designated person. Suspicions will not be discussed with anyone other than those nominated above. It is the right of any individual to make direct referrals to child protection agencies. If for any reason you believe that the designated persons have not responded appropriately to your concerns, it is then your responsibility to consider contacting the child protection agencies directly.

Responsibilities

The Designated Safeguarding Lead or those deputising for them, is responsible for:

- Adhering to the Worcestershire Council and Abberley House Nursery procedures regarding referring a child if there are concerns about possible abuse.
- Keeping full written chronological records of in setting concerns about a child even if there is no need to make an immediate referral.
- Ensuring that all such records are kept confidentially and securely and are separate from pupil records.
- Ensuring that an indication of further record-keeping is marked on the pupil records.
- Checking the attendance of children subject to a Child Protection Plan on a daily basis.
- Ensuring that where any child currently who is subject to a Child Protection Plan, their information is transferred to the new setting immediately and that the child's social worker is informed. A copy of the child's information will be retained by Abberley House Nursery

Supporting Children

We recognise that a child who is abused or witness's violence and/or abuse may find it difficult to develop and maintain a sense of self-worth. We recognise that a child in these circumstances may feel helpless and humiliated. We recognise that a child may feel self-blame. We recognise that the setting may provide the only stable, secure, and predictable element 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.

Abberley House Nursery will support all children through:

- The curriculum.
- Encouraging self-esteem and self-assertiveness whilst not condoning aggression or bullying.
- Promoting a caring, safe, and positive environment within the setting, giving children a sense of being valued.
- Ensuring children know there are adults in the setting whom they can approach if they are worried.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notifying Social Care / Family Front Door as soon as there is a significant concern.

CHILD PROTECTION POLICY



- Providing continuing support to a child about whom there have been concerns who leaves the setting by ensuring that appropriate information is forwarded under confidential cover to the child's new setting or school.

Confidentiality and Information Sharing

- We recognise that all matters relating to Child Protection are confidential.
- Department for Education (DfE), information sharing protocols 2023 will always be adhered to.
- The Designated Safeguarding Lead, or staff generally will disclose any information about a child to other members of staff on a need-to-know basis only.
- All staff must be aware that they have a professional responsibility to share information with the DSL and other agencies to safeguard children.
- All staff must be aware that they cannot promise a child to keep secrets.

Supporting Staff

We recognise that staff working in Abberley House 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 discuss the situation with the Designated Safeguarding Lead and to seek further support as appropriate.

Safer Recruitment

At Abberley House Nursery we will ensure we practice Safe Recruitment by undertaking enhanced DBS checks of staff and volunteers who work with children, and ensure they sign up to the update service, this allows management to see any changes to a DBS at any time. Recruitment adverts will highlight the priority that the setting commitment to safeguarding. The setting will follow the guidance set out in Keeping Children Safe in Education 2023.

Allegations against staff

- We understand that a child or 3rd party may make an allegation against a member of staff.
- We understand that an allegation is wider than just those where it is considered that there is reasonable cause to believe that a child has suffered or is at risk of suffering significant harm. Some allegations may indicate that a staff member is unsuitable to work with children.

We will be guided by Working Together 2023 which defines an allegation as:

- Behaved in a way that has harmed a child or may have harmed a child.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child or children in a way that indicates that they are unsuitable to work with children.

CHILD PROTECTION POLICY



If such an allegation is made, the member of staff receiving the allegation, or having the concern, will immediately inform the Manager/ DSL, this must be done immediately. The Manager/ DSL on all such occasions will discuss, on the same working day, the content of the allegation with Local Authority Designated Officer (LADO) **01905 846221**

If the allegation made to a member of staff concerns the Manager/ DSL, the member of staff will immediately inform the Owner (Letang Wolstenholme) who will consult with the Local Authority Designated Officer (LADO), this must be done on the same working day. If the Owner is not available, the member of staff must make direct contact with the LADO **01905 846221**

The setting will not internally investigate until instructed by the LADO. The setting will follow the LA procedures for managing allegations against staff.

Whistleblowing

We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so. All staff must be aware of their duty to raise concerns, where they exist, about the attitude or actions of colleagues. Further information is available in our separate policy on whistleblowing.

Physical Intervention

Our policy on physical intervention by staff is set out in a separate policy and acknowledges that staff must only ever use physical intervention as a last resort, and that all times it must be the minimal force necessary to prevent injury to another person. We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures. Staff need to be aware that if a child sustains an injury because of physical intervention Child Protection processes must be adhered to.

Bullying

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

Health & Safety

Our Health & Safety policy, set out in a separate document, reflects the consideration we give to the protection of our children both within the setting environment and when away from setting when undertaking setting trips and visits.

Prevention

We recognise that the setting plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults, supportive friends, and an ethos of protection.

The setting community will therefore:

- Establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to.
- Ensure that all children know there is an adult in the setting whom they can approach if they are worried or in difficulty.

CHILD PROTECTION POLICY



All other Relevant setting policies

- Behaviour management
- Health & Safety
- Additional needs
- Breast ironing
- Non mobile babies
- Peer on peer abuse
- The rights of the child
- Intimate care and toileting

All policies are reviewed annually and when necessary. These can all be in the office, staff room, baby room, toddler room and preschool rooms.

Management of Children subject to Child Protection Investigation or subject to a Child Protection Plan:

- Contribute to the child protection investigation and attend or contribute to the 'strategy' meetings.
- The Designated Person or deputy will attend the Initial Child Protection Conference to share any relevant information and provide a written report for the conference.
- If the child is placed on the Child Protection Plan, the Designated Person or deputy is responsible for ensuring that the setting participates appropriately in the Child Protection Plan and attends all Core Group Meetings and Child Protection Conferences.
- Information will be shared with staff on a need-to-know basis but key personnel working with child should have sufficient information to support them in their work with that child.
- If a child with a Child Protection Plan has an unexplained absence from setting, the Designated Person will inform the Social Worker.

Support and Training

We are committed to the provision of safeguarding training for all our team members, paid and volunteers. In addition to the basic safeguarding training, the Designated Persons undertake training in inter-agency working at yearly intervals to keep their knowledge and skill up to date.

All other staff undertake appropriate training to equip them to carry out their responsibilities for child protection effectively, which is kept up to date by refresher training at least once a year. This will be supported every year with training and updates provided by the Designated Lead through staff meetings and NoodleNow and LA safeguarding training.

Record Keeping

DfE guidance says that the Designated Person will keep detailed, accurate, secure written records of referrals and concerns. These should be kept separately from academic records, in a confidential file stored in a secure cabinet, accessible only by appropriate senior staff members.

CHILD PROTECTION POLICY



They are exempt from records available for examination by parents or children unless subject to a court order.

Worcestershire Council promotes high quality record keeping in respect of all concerns about children's welfare. The records should be completed in a timely manner and include all relevant information such as dates, times, others involved, witnesses etc. All records should be signed and dated. The child's confidential record should include a front sheet chronology of concerns to support the understanding of the impact of past concerns, patterns, and escalation of concerns.

If a child transfers to another setting or other educational establishment, the Designated Person should forward securely the child protection file to a named person at the receiving setting/establishment under separate cover from the academic records. The file should be marked 'confidential, to be opened by 'addressee only'.

The Designated Person should retain a copy of the child protection file, this can be digital or paper, which should be stored in a secure area accessible only by appropriate senior staff members. Child Protection records about a student who has ceased to become of compulsory setting age should be archived and catalogued. Records must be kept until a child reaches 25 years of age; child protection records must be kept for 35 years after the child leaves the setting. When making a referral, the referrer should keep a written record of:

- Discussions with child
- Discussions with parent/s
- Discussions with staff
- Information provided to the MASH.
- Advice given and decisions taken (clearly times, dated and signed)
- The referrer should confirm verbal and telephone referrals in writing within 48 hours, using the interagency referral form.

Abberley House Nursery will ensure that we keep up-to-date personal data records of all the children by regularly reminding parents to inform us of any change in family circumstances and requesting an annual update.