



Abbotswood Day Nursery Ltd, Cupernham Lane, Romsey, SO51 7LF
Tel: Main office: 01794 523686 Email: office@abbotswooddaynursery.co.uk
www.abbotswooddaynursery.co.uk

Safeguarding Policy

Abbotswood Day Nursery will always put the health, safety, security, and wellbeing of the child first. We understand that we have a duty to take action if we have reason to believe a child is being harmed in any way and that we are not bound by our confidentiality policy if we believe a child is at risk.

We have named persons within the nursery who take lead responsibility for safeguarding and co-ordinate child protection and welfare issues, known as the Designated Safeguarding Leads (DSL) who is the Operations and Training Manager. The nursery supervisor and training supervisor must be trained and take the lead in the operations and training managers absence. The Office manager and Preschool Manager are also trained to take the DSL role on in the absence of other members of the management team. It is the responsibility of all colleagues to know who the DSL is, what they are responsible for, and the names of any deputies. The DSL is responsible for ensuring that they follow Abbotswood Day Nursery policy and must ensure that that are aware of and follow their relevant local authority guidance and procedures.

We support the children within our care, protect them from maltreatment and have robust procedures in place to prevent the impairment of children's health and development. Safeguarding is a much wider subject than the elements covered within this single safeguarding policy:

1. safeguard children;
2. ensure the suitability of adults who have contact with children;
3. promote good health;
4. manage behaviour;
5. and maintain records, policies and procedures.

Therefore, this document should be used in conjunction with ALL other nursery policies and procedures.

Abbotswood Day Nursery will work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect and to be safe from any abuse in whatever form. To this end we will:

- Provide a culture of continuous reflection, learning and improvement to safeguard and promote the welfare of children.
- Create an environment to encourage children to develop a positive self-image
- Protect and help children to keep themselves safe from bullying, homophobic behaviour, racism, sexism and other forms of discrimination. Any discriminatory behaviour will be challenged, and guidance will be given to children about how to treat others with respect.



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- Ensure Colleagues understand the risks posed by others who use technology, including the internet to bully, groom, radicalise or abuse children, and teach the children how to stay safe. Managers will implement the required policies with regard to the safe use of mobile phones, ICT and cameras within the setting.
- Encourage children to develop a sense of independence and autonomy in a way that is appropriate to their age and stage of development
- Provide a safe and secure environment for all children
- Always listen to children and work collaboratively with them in taking their views seriously and supporting their needs.

We would seek to inform and involve the parents/carer if we had concerns unless we believed the child would be put at further risk by doing so.

Anyone who has cause for concern that a child may be suffering or is likely to suffer significant harm must refer the matter to their local safeguarding children (LSCB) board, adhering to government child protection guidelines and procedures.

Child protection is an extremely sensitive and complex area. However, during the course of their work, staff may be concerned about a child's welfare. All agencies that work with children have a duty and responsibility to report and assist in child protection investigations.

Abbotswood Day Nursery has a clear commitment to protecting children and promoting welfare. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of The Operations and Training Manager / Director.

The legal framework and definition of safeguarding

- Children Act 1989 and 2004
- Childcare Act 2006
- Safeguarding Vulnerable Groups Act 2006
- Children and Social Work Act 2017
- The Statutory Framework for the Early Years Foundation Stage (EYFS) 2024
- Working together to safeguard children 2023
- Keeping children safe in education September 2023
- Data Protection Act 2018
- What to do if you are worried a child is being abused 2015
- Counter-Terrorism and Security Act 2015.

Contact telephone numbers

Local Authority Safeguarding Children Partner 01329 225379

Local authority Designated Officer (LADO) Shauna McMinn 01962 876364

Children's services 03005551373

Hampshire Professional Line 01329 225379



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NSPCC 0808 800 5000

Ofsted 0300 123 1231

Emergency police 999

Non-emergency police 101

Government helpline for extremism concerns 020 7340 7264

Safeguarding and promoting the welfare of children, in relation to this policy is defined as:

- Protecting children from maltreatment
- Preventing the 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
- (Definition taken from the HM Government document 'Working together to safeguard children 2018').

What is a Multi-agency safeguarding partner?

The Children and Social Work act 2017 defines three 'safeguarding partners' - the local authority, any Clinical Commissioning Groups operating in the area and the Chief Officer of Police - to make safeguarding arrangements that respond to the needs of children in their area. The safeguarding partners are responsible for publishing a document that sets out the local criteria for action in a way that is transparent, accessible and easily understood. This should include: the process for the early help assessment and the type and level of early help services to be provided; the criteria, including level of need, for when a case should be referred to local authority children's social care for assessment and for statutory services under section 17, 20, 31 and 47 of the Children Act 1989; and clear procedures and processes for cases relating to the exploitation of children, children managed within the youth secure estate and disabled children. The local authority, with their partners, is responsible for publishing local protocols for assessment. Protocols should set out clear arrangements for how cases will be managed once a referral is made to children's social care.

Local Authority Designated Officer (LADO)

Children can be subjected to abuse by those who work with them in any nursery. All allegations of abuse or maltreatment of children by a professional, colleague, student, or volunteer must therefore be taken seriously and treated in accordance with consistent procedures. Local Authorities have responsibility for ensuring there are effective procedures in place for dealing with allegations against people who work with children, and providing advice and guidance to nurseries, liaising with the police and other agencies and monitoring the progress of cases to ensure that they are dealt with as quickly as possible consistent with a thorough and fair process. The local authority designates an officer to support nurseries when they receive allegations against a colleague. This is the Local Authority Designated Officer (LADO). The LADO can also be a point of contact between the nursery and Ofsted to ensure any investigations

where a notification to Ofsted has been made have been dealt with appropriately. See Safeguarding Allegation Made Against a Colleague policy

Making a referral You can make a referral via telephone (followed up in writing), directly to the Local Authority Children's Social Care. They are usually known as the Assessment Team or Duty Social Worker Team. When making a referral it is important to include as much information as possible as it will help the social worker to make a decision.

Try to include:

1. examples that demonstrate your concerns as well as the risks and protective factors around the child.
2. key information about the child and family.

Staffing and volunteering

Our policy is to provide a secure and safe environment for all children. We only allow an adult who is employed by the nursery to care for children and who has an enhanced clearance from the Disclosure and Barring Service (DBS) to work with children. We will obtain enhanced criminal records checks (DBS) for all volunteers and do not allow any volunteers to be unsupervised with children. All colleagues receive a full induction and are trained to understand this safeguarding policy and the procedures. Abbotswood Day Nursery ensures that all colleagues have up to date knowledge of safeguarding issues and are familiar with child protection responsibilities and the procedures to be followed if anyone has any concerns about a child's safety or welfare. This will include the procedures for spotting signs and behaviours of abuse and abusers/potential abusers, recording and reporting concerns and creating a safe and secure environment for the children in the nursery. During induction staff will be made aware of where to find contact details for the LADO (local authority designated officer), the local authority children's services team, Local Authority Safeguarding Children Partner and Ofsted to enable them to report any safeguarding concerns, independently, if they feel it necessary to do so. All colleagues must complete prevent duty training. Colleagues will be expected to complete safeguarding training during their 12-week induction process. All colleagues receive regular support and supervision. We have named persons within the nursery who take lead responsibility for safeguarding and co-ordinate child protection and welfare issues, known as the Designated Safeguarding Leads (DSL). The nursery supervisor must be trained and take the lead in the Operation and Training manager's absence. Another senior practitioner must also be trained and take the lead in the Operations and training managers and Nursery Supervisors absence, there is always at least one designated person on duty during all opening hours of the setting. These designated persons will receive comprehensive training at least every two years and update their knowledge on an ongoing basis, but at least once a year.

The nursery DSL liaise's with the Local Authority Safeguarding Children Partner and the local authority children's social care team, undertakes specific training, including a child protection training course, and receives regular updates to developments within this field. They in turn support the ongoing development and knowledge update of all staff on the team. Although, under the EYFS, we are only required to have one designated Lead Co-ordinator for

safeguarding, for best practice and to ensure cover at all times, we have two/three designated leads in place. This enables safeguarding to stay high on our priorities at all times. There will always be at least one designated Co-ordinator on duty at all times our provision is open. This will ensure that prompt action can be taken if concerns are raised.

It is the responsibility of the Operations and Training Manager to select a designated safeguarding lead and ensure that all staff completes child protection training and have access to “what to do if you’re worried a child is being abused” guidance.

All staff members complete a short safeguarding course as part of their induction. We also cover relevant safeguarding topics at our training days which happen twice a year. Safeguarding questions are asked on a weekly basis to different members of the team as part of our weekly checks. Every staff is asked if they have any safeguarding concerns at their termly reviews.

Identification of child abuse is difficult and will normally be a combination of both social and medical assessment. No list of signs or symptoms can be exhaustive. The following are for guidance only. It must be remembered that alternative medical or social explanations may exist for the problems listed here. However, **if anyone has a concern about a child, they must report it to the designated safeguarding lead or Operations and Training Manager (or Duty Manager) so a referral can be made. A referral can also be made by anybody by calling Children’s Services Professional Line (Section 47) on 01329 225379**

SIGNS AND SYMPTOMS

Significant harm can be the result of

1. Neglect
2. Physical abuse
3. Sexual abuse
4. Emotional abuse
5. Domestic abuse
6. Child Sexual Exploitation
7. Female Genital Mutilation
8. County Lines
9. Breast Ironing
10. Faith Based abuse

1. Neglect

Neglect results from failure to meet basic needs of the child. This may include failure to provide food, warmth, clothing or consistent caring.

Signs and symptoms may include

- Inappropriate or inadequate clothing

- Poor hygiene
- Developmental delay, poor speech and play skills
- A child whose parents persistently fail to seek or follow medical advice
- Some cases of failure to thrive have a basis of neglect
- A child whose parents persistently fail to ensure the child's safety

2. Physical abuse

Most injuries to children are accidental and can be explained.

Factors associated with injuries, which may arouse suspicion that they are not accidental, may include

- Where the explanation is not consistent with the injury or with the stage of development of the child
- Where there are changes of explanation or no explanation
- Where there is a history of frequently repeated injury
- Where there has been considerable delay in seeking medical advice
- Where there are bruises of different ages on the child at any one time, other than on the common sites of accidental injury in a child of that age (e.g. on shins and forehead)
- Where there is facial bruising, other than over the bony prominences, particularly around the mouth, eyes or ears
- Where there are unexplained burns, bite marks, severe bruising or any combination of these
- Where there are bruises on the buttocks or thighs
- Any bruising in a baby not yet mobile, reluctance to move limbs or tenderness on handling

3. Sexual abuse

While there are many signs associated with sexual abuse, many of these are also associated with other problems. It is rare for sexual abuse to be recognised by one symptom rather it is a matter of developing a full picture of the child. A child who is or has been sexually abused does not always display behavioural disturbance.

Factors that may arouse suspicion of sexual abuse may include

- Over sexualised behaviour
- Sexual awareness and knowledge in advance of developmental age
- Withdrawn behaviour
- Drawings or play activity which are explicitly sexual
- Compulsive masturbation
- Wetting and soiling (once toilet trained)

- Recurrent urinary tract infections
- Sexually transmitted disease
- Genital or anal inflammation or irritation
- Genital or anal bleeding or lacerations
- Change in behaviour
- Anxiety during nappy or toileting times

4. Emotional abuse

There is an element of emotional abuse in all forms of abuse, but some children may be very well physically cared for whilst being emotionally abused. An emotionally abused child may be subjected to constant criticism and scape gloating. There may on the one hand be continuous withholding of approval and affection, accompanied by severe discipline, or on the other hand a total lack of appropriate control. Alternatively, a child may be exploited to fulfil the parents emotional needs.

The child may

- Have an impaired ability for enjoyment and play
- Lack curiosity and natural exploratory behaviour
- Be delayed in language development and play skills
- Have low self-esteem and feelings of worthlessness
- Show eating disturbances or growth failure

5. Domestic Abuse

Domestic abuse is an umbrella term, covering a wide spectrum of behaviour but the core element is a process through which power is exercised by an adult perpetrator in an attempt to control or dominate a partner, ex-partner or other family members. Domestic abuse can also be perpetrated by a child or young person e.g. a child abusing their parents

Such situations involve a range of behaviour and tactics but most commonly can include threatening behaviour and violence, physical, sexual, emotional, psychological and financial abuse. Domestic Abuse is now classed as a crime (*Domestic Violence Crime and Victims Act 2004*). Moreover many of the behaviours would be classed as criminal acts in themselves.

Alongside domestic abuse we sometimes see issues of mental illness, substance misuse (including alcohol), homelessness and housing need. However, none of these should result in minimising the seriousness of the behaviour or be regarded as an excuse for the abuse of another person.

Significant harm to the child as a result of domestic abuse may arise from

- The adverse psychological effect of witnessing or being aware of domestic abuse
- Threats of, or actual, violence between adults

- Physical injury, either by accident in the midst of a violent incident or by design from a violent adult, including harm to the unborn baby (assaults on pregnant women often involve punches / kicks directed at the abdomen)
- The impact on the victim's ability to look after her/his child/ren as a result of physical assaults and/or psychological abuse, through no fault of their own
- Being drawn into the violence or pressurised into concealing the assaults

Possible indicators of domestic abuse

The following list is not exhaustive but singly or more likely in combination may be signs of domestic violence

- Evidence of single or repeated injuries with unlikely explanations
- Frequent use of prescribed tranquillisers or pain medication
- Injuries to the breast, chest and abdomen especially during pregnancy
- Evidence of sexual or frequent gynaecological problems
- Frequent visits to GP with vague complaints or symptoms
- Stress or anxiety disorders isolation from friends, family or colleagues;
- Depression, panic attacks or other symptoms;
- Alcohol and/or drug abuse;
- Attempts at suicide and self-harm;
- Appearing frightened, ashamed or evasive;
- A partner who is extremely jealous or possessive;
- Minimisation of violence accepting blame for 'deserving' the abuse

When a victim is not being seen alone, staff should also be alert to the following combination of signals

- The victim waits for her/his partner to speak first
- The victim glances at her/his partner each time s/he speaks, checking her/his reaction
- The victim smooths over any conflict
- The partner speaks for most of the time
- The partner sends clear signals to the victim, by eye / body movement, facial expression or verbally, to warn them
- The partner has a range of complaints about the victim, which s/he does not defend

Practitioners must inform Children's Social Care if

- There has been one serious or several lesser incidents of domestic abuse regardless of whether or not the child is present at the time e.g. injury to parent
- There has been more than 1 minor domestic abuse incident within the last 12 months
- An alleged victim of domestic abuse is a child her/himself
- A parent is fleeing domestic abuse, leaving a child/ren with the allegedly violent partner at the home

- A parent and child/ren are fleeing domestic abuse (the victim may return to the home and/or the alleged perpetrator may seek them out)
- The alleged victim is pregnant
- There is a baby in the household
- There is a history of aggressive violence or 'stalking' by the perpetrator (this may include convictions)
- Previous history of concerns or actual harm to children
- There are / have been allegations of sexual assault
- The child/ren have witnessed or been distressed through hearing incident/s of domestic abuse
- There are attempts at strangulation, threats to kill or threats of suicide

6. Child Sexual Exploitation

The nationally agreed definition of CSE

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where the young person (or third person/s) receive 'something' (eg, food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another 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 images on the internet/mobile phones without immediate payment or gain.

Violence, coercion and intimidation are common. Involvement in exploitative relationships is characterised by the child's or young person's limited availability of choice as a result of their social, economic or emotional vulnerability.

A common feature of CSE is that the child or young person does not recognise the coercive nature of the relationship and does not see themselves as a victim of exploitation.

Types of Exploitation

- **Inappropriate relationships** - Usually involving one offender who has inappropriate power or control over a young person (physical, emotional or financial). One indicator may be a significant age gap. The young person may believe they are in a loving relationship.
- **'Boyfriend' model of exploitation and peer exploitation** The offender befriends and grooms a young person into a 'relationship' and then coerces or forces them to have sex with friends or associates. Barnardo's has seen a reported rise in peer exploitation where young people are forced or coerced into sexual activity by peers and associates. Sometimes this can be associated with gang activity but not always.

- **Organised/networked sexual exploitation or trafficking** Young people (often connected) are passed through networks, possibly over geographical distances, between towns and cities where they may be forced/coerced into sexual activity with multiple men. Often this occurs at 'parties' and young people who are involved may recruit others into the network. Some of this activity is described as serious organised crime and can involve the organised 'buying and selling' of young people by offenders. Organised exploitation varies from spontaneous networking between groups of offenders to more serious organised crime where young people are effectively 'sold'.

Sexual Exploitation is a crime, the Sexual Offences Act 2003 introduced a number of new offences to deal with those who abuse and exploit children. The offences protect children up to the age of 18 and can attract tough penalties.

Warning signs can include the following

Health

- Evidence of drug, alcohol and/or substance use – abusers may use drugs and alcohol to help control children and young people
- Unexplained physical injuries or suffering from physical injuries (e.g., bruising suggestive of either physical or sexual assault)
- Children or young people who are self-harming and demonstrating suicidal thoughts and tendencies
- Recurring sexually transmitted infections
- Pregnancy or seeking an abortion
- Children or young people displaying inappropriate sexualised behaviours, such as being over-familiar with strangers or sending sexualised images via the internet or mobile phones
- Changes in physical appearance (e.g., losing weight, being malnourished).

Education

- Being absent and truanting from school or showing signs of disengagement, eg, lack of interest and frequent poor behaviour
- Considerable change in performance.

Emotional and behavioural development

- Changes in temperament/depression – mood swings or changes in emotional wellbeing secretive behaviour
- Peers and friends – association with other young people involved in exploitation and with older boyfriends/girlfriends
- Getting involved in petty crime such as shoplifting or stealing.

Identity

- Appearing with unexplained gifts or new possessions
- Change in appearance, e.g., different clothes.

Family and social relationships

- Children or young people who become estranged from their family
- Sudden hostility towards family members
- Becoming physically aggressive towards family and friends
- Going missing for periods of time or regularly returning home late
- Involvement in exploitative relationships or association with risky adults
- Young people being found in towns or districts where they have no known connection
- Young people who have more than one boyfriend or who share their boyfriend
- Children or young people seen entering or leaving vehicles driven by unknown adults
- Becoming detached from age-related activities and social groups
- Sexually active
- Phone calls and/or text messages from unknown adults
- Children or young people who appear to be recruiting others into exploitive situations.

8. Female Genital Mutilation

The World Health Organisation (WHO) states that female genital mutilation (FGM) 'includes procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons' (WHO 2013). FGM is also known as female circumcision, but this is incorrect as circumcision means 'to cut' and 'around' (Latin), and it is quite dissimilar to the male procedure. It can also be known as female genital cutting. It can cause long-term mental and physical suffering; menstrual and sexual problems; difficulty in giving birth; infertility and even death. The average age for FGM to be carried out is about 14 years old. However it can vary from soon after birth, up until adulthood. It can also be classed as honour based violence.

Main Forms of FGM

The World Health Organisation has classified four main types of FGM

- **Clitoridectomy** which is the partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, rarely, the prepuce (the fold of skin surrounding the clitoris) as well.
- **Excision** which is the partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are "the lips" that surround the vagina).
- **Infibulation** which is the narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, and sometimes outer, labia, with or without removal of the clitoris.
- **Other types** which are all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area' (WHO, 2013).

Signs and Indicators

Some indications that a child / young women has already been subjected to FGM may include

- A girl / young woman may spend time out of the classroom or from other activities, with bladder or menstrual problems.
- A long unexplained absence from school or holiday abroad could be an indication that a girl / young woman has recently undergone an FGM procedure, when there are noticeable behavioural changes on her return (NB. This may also be due to a forced marriage – please refer to BSCB Forced Marriage protocol)
- A girl / young woman who is suffering emotional / psychological effects of undergoing FGM, for example withdrawal or depression
- Midwives and obstetricians may become aware that FGM has taken place when treating a pregnant woman / young woman.
- A girl / young woman requiring to be excused from physical exercise lessons without the support of her GP
- A girl / young woman may ask for help, either directly or indirectly
- Midwives and obstetricians may become aware that FGM has taken place when treating a pregnant woman / young woman.

Breast Ironing

Breast ironing also known as "breast flattening" is the process where young girls' breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear or delay the development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage. Although this is unlikely to happen to children in the nursery due to their age, we will ensure any signs of this in young adults or older children are followed up using the usual safeguarding referral process.

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, e.g. through poisoning, starvation, 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.

Monitoring children's attendance

As part of our requirements under the statutory framework and guidance documents we are required to monitor children's attendance patterns to ensure they are consistent and give no cause for concern.



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Parents should please inform the nursery prior to their children taking holidays or days off, and all sickness should be called into the nursery on the day so the nursery management are able to account for a child's absence. The nursery will monitor patterns of absence and reasons given. This should not stop parents taking precious time with their children but enables children's attendance to be logged so we know the child is safe.

Looked after children

As part of our safeguarding practice we will ensure our colleagues are aware of how to keep looked after children safe. In order to do this we ask that we are informed of:

- The legal status of the child (e.g. whether the child is being looked after under voluntary arrangements with consent of parents or on an interim or full care order)
- Contact arrangements for the biological parents (or those with parental responsibility)
- The child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her
- The details of the child's social worker and any other support agencies involved
- Any child protection plan or care plan in place for the child in question.

e-safety

Abbotswood Day Nursery are aware of the growth of internet use and the advantages this can bring. However it is also aware of the dangers and strives to support children, colleagues and families in using the internet safely. We do this by:

- Ensuring we only use nursery devices that have appropriate antivirus and anti-spyware software that is updated regularly
- Ensuring content blockers and filters are on our computers, laptops and any mobile devices
- Using only nursery devices to record/photograph in the setting
- Never emailing personal or financial information (with the exception of invoices)
- Reporting emails with inappropriate content
- Ensure management monitor all internet activities in the setting, by checking history on all devices.
- Ensuring children are supervised using internet devices
- Integrating e-safety into nursery daily practice by discussing computer usage 'rules' deciding together what is safe and what is not safe to do online
- Talking to children about 'stranger danger' and deciding who is a stranger and who is not, comparing people in real life situations to online.
- All colleagues are expected to complete a free online e-safety briefing which can be found on noodle now.
- Colleagues only use the work IT equipment for matters relating to the children and their education and care. No personal use will be tolerated.

- Children's screen time is monitored to ensure they remain safe online and have access to material that promotes their development. We will ensure that their screen time is within an acceptable level and is integrated within their programme of learning.

Action to be taken when making a referral

Any member of staff who is concerned for a child's welfare or where a child discloses or attempts to disclose should take the following action

- Listen to the child. If the child is distressed then comfort and reassurance should be given.
- Don't make false promises like "everything will be fine" but make sure they know you are taking them seriously
- Seek immediate medical attention if injuries are severe
- Record any conversations that the child has made with adults or children. These should be accurate and objective.
- Do not interrogate the child; simply repeat the child's words to confirm that they have been heard correctly.
- Discuss the situation with the designated safeguarding lead, Manager or Duty Manager
- Inform and involve the parents/main carers UNLESS there is evidence to suggest the child will be at serious risk if they are informed

Following this discussion, the designated safeguarding lead, Manager (or Duty Manager) has a duty to refer the matter to Social care. No report of child abuse requires a manager to make a decision regarding its validity. There is no discretion.

RECORDING SUSPICIONS OF ABUSE AND DISCLOSURES

An objective record with the support of the Designated Safeguarding Lead (Nursery Manager) of any observation or disclosure and include:

- Child's name
- Child's address
- Age of the child and date of birth
- Date and time of the observation or the disclosure
- Specific details about the concern
- Exact words spoken by the child
- Exact position and type of injuries or marks seen (describe the colour size and shape of any marks)
- Exact observation of an incident including any other witnesses
- Name of the person to whom the concern was reported, with date and time; and the names of any other person present at the time.
- Any discussion held with the parent(s) (where deemed appropriate).

The designated safeguarding lead, Operations and Training manager must immediately inform the Director of their actions.



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Once a referral is made, the external agencies will advise on what happens next and if further action is required.

It is important to keep detailed records of what has taken place as you will need to make them available. You may also be requested to attend a case meeting, inquiry or court hearing.

The company will ensure that all involved parties are informed and supported as appropriate, under the guidance of social service and/or police.

In an emergency situation the police must also be informed 999 or 0845 045 4545

The nursery will follow the procedures set out in the Department of Health document 31815 "What to Do If You're Worried A Child Is Being Abused", copies of which are held in the nursery. All staff must familiarise themselves with the contents of this booklet.

Contact details for Multi Agency Safeguarding Hub (MASH)

phone **0300 555 1384** during office hours 8.30am to 5pm Monday to Thursday, 8.30am to 4.30pm on Friday

phone **0300 555 1373** at all other times to contact the Out of Hours service

On online Inter Agency Referral form for Hampshire Children's Services and Isle of Wight Children's Services can be found at:

<https://www.hants.gov.uk/socialcareandhealth/childrenandfamilies/safeguardingchildren/childprotection/mash>

Local authority Designated Officer (LADO) Shauna McMinn 01962 876364

NSPCC Whistleblowing advice line 0800 0280285

In an emergency situation the police must also be informed 999 or 0845 045 4545

Help and Support

All families can face challenges that make parenting difficult. Often families are able to overcome challenges themselves or with the help of relatives, friends and services, such as schools, youth services, health visiting and mental health services. However, sometimes families will have more significant needs that require more intensive help and support. There are three sections of support children and families can access or be referred to dependant on the concerns raised these are: Early help, Safeguarding and promoting the welfare of children, and Child protection.

Early help is support for children of all ages that improves a family's resilience and outcomes or reduces the chance of a problem getting worse. It is not an individual service, but a system of support delivered by local authorities and their partners working together and taking collective responsibility to provide the right provision in their area. Early help strengthens the role of education and childcare settings in supporting children and keeping them safe, including information on a child's right to education and risk factors for practitioners to consider when identifying children and families who may benefit from early help.

Safeguarding and promoting the welfare of children. Where there is reasonable cause to suspect a child is suffering or likely to suffer significant harm, local authorities must make enquiries and decide if any action must be taken under section 47 of the Children Act 1989. To fulfil this duty, practitioners undertake assessments of the needs of individual children, giving due regard to a child's age and understanding when determining what, if any, services to provide.

Please see appendix Hampshire threshold document outlining criteria for action.

Child protection. Alongside the offer of help and support, there must be strong and effective multi-agency child protection arrangements¹¹⁸. Children who need protecting may include those who experience harm in their own family and those who are harmed or exploited by others, including their peers, in their community and/or online. Suffering or being likely to suffer significant harm is the threshold for child protection. Child protection is the set of multi-agency activities and processes that follow a concern that a child is suffering or likely to suffer significant harm. As practitioners and DSL's we have a responsibility to be vigilant to signs a child may be suffering or likely to suffer and take decisive action if we have a concern over a child.

Prevent Duty

The Prevent duty is the duty in the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism. In order for us to fulfil the Prevent duty, it is essential that staff are able to identify children who may be vulnerable to radicalisation and know what to do when they are identified. Protecting children from the risk of radicalisation is part of our wider safeguarding duties, and is similar in nature to protecting children from other harms (e.g. neglect, sexual exploitation), whether these come from within their family or are the product of outside influences. We can also build children's resilience to radicalisation by promoting fundamental British values and enabling them to challenge extremist views - vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. General safeguarding principles apply to keeping children safe from the risk of radicalisation as set out in the relevant statutory guidance, 'Working together to safeguard children'.

As with managing other safeguarding risks, we need to be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. Children at risk of radicalisation may display different signs or seek to hide their views. We need to use our professional judgement in identifying children who might be at risk of radicalisation and act proportionately. Even very young children may be vulnerable to radicalisation by others, whether in the family or outside, and display concerning behaviour. The Prevent duty does not require us to carry out unnecessary intrusion into family life but as with any other safeguarding risk, we must act when we observe behaviour of concern.



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We need to understand when it is appropriate to make a referral to the Channel programme. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism.

Effective engagement with parents / the family is also important as they are in a key position to spot signs of radicalisation. It is important to assist and advise families who raise concerns and be able to point them to the right support mechanisms.

What to do if you have a concern

If any member of staff has a concern about a particular child, they should follow our normal safeguarding procedure, i.e. discuss the details with the designated safeguarding lead.

Special Educational Needs

It is important to recognise that children with additional needs face an increased risk of abuse and neglect. Attention can often be focused on providing advocacy for them rather than paying attention to their human rights. The systems set up to safeguard children must cover all children on equal terms.

Additional time and resources may need to be allocated when investigating an allegation of abuse. When undertaking an assessment staff must take into account the nature of the child's additional need.

The settings SENCO will work alongside the Child Protection Officer when dealing with concerns for a child with additional needs.

Safeguarding concerns will be reported in the same way as for all children.

Harmful Behaviour by Other Children – Peer On Peer Abuse

Children may be harmed by other children but in our opinion, the incidence of peer on peer abuse or bullying is extremely low in the early years age range. All staff need to be aware of how peer on peer abuse may manifest itself within the age range we are caring for but we also need to be very clear on what constitutes bullying as opposed to normal every day tussles and disputes.

Bullying is behaviour that hurts someone else – such as name calling, hitting, pushing or exclusion e.g. 'you can't play with us'. It is usually repeated over a prolonged period and involves singling out an individual for repeated attention. It can hurt a child both physically and emotionally.

Our Golden Rules stress our (adults and children) commitment to caring for and respecting ourselves and others. Coupled with our Positive Behaviour Management policy, staff deployment and key worker system, we believe that our children enjoy respectful and

supportive relationships with adults and children and that this is expressed in the language and behaviour of our children towards one another.

We are keen to minimise the risk of peer on peer abuse to ensure that allegations are investigated, logged and dealt with and to ensure that victims are supported.

If there are concerns that a child is bullying such as calling, hitting, pushing or exclusion, we will monitor and record patterns of behaviour, always working in partnership with the child's carers, sharing concerns and agreeing a joint strategy to protect and support victims and to help the child bullying moderate his/her behaviour patterns.

If there are concerns of a sexual nature the safeguarding officer will ask for the allegation in writing and the safeguarding officer conduct a full investigation. After speaking to all parties involved the safeguarding led will contact MASH for further advise. This could lead to completing an outer agency referral form.

Poor Parenting

When there are concerns that a child is experiencing poor parenting it is important to consider whether the behaviour is an isolated incident or whether it is a regular occurrence. Younger children are particularly vulnerable to poor parenting as they rely on their parents for their basic needs to be met.

When looking at parenting ability it is important to consider whether they are providing the following

- Basic care
- Ensuring safety
- Emotional warmth
- Stimulation
- Guidance and Boundaries
- Stability

If there are concerns that a parent is unable to meet the child's basic needs then the safeguarding procedure will be followed. Early help may be able to be accessed to support the parents and prevent future issues.

Cameras and Mobile Phones

Mobile phones must not be carried around the setting by staff. The only mobile allowed to be used around the building is the Nursery iphone, and this is for nursery purposes only (see mobile phone policy). Staff must store mobile phones or other mobile communications devices in the secure storage provided in the setting manager's office, prior to starting each work shift. Please ensure the phone is on silent. Phones will be made available again at lunch break and/or at end of shift. Please give the setting phone number for you to be contacted in case of emergency and we will ensure any message is given to you.

The reasons for this policy are

- To ensure we are safeguarding our children. This policy coupled with our culture of continuous vigilance guards against unauthorised or covert photographs of children being taken and ensures that any photographs or videos are restricted to those taken on company equipment with their use and distribution appropriately controlled via our secure systems.
- The requirements of the data protection act mean that we must take precautions to ensure no unauthorised photographs of children are taken. By restricting the use of all personal mobile phones on site, including those of carers delivering or collecting their children, this includes all mobile devices with camera / video functions and thus prevents their usage for this purpose.
- Staff may be distracted from their work and the care of children in their charge, which is our primary concern, by receiving or making calls or text messages, whilst they are on duty.
- Ring tones and phone conversations can be an annoying distraction for other members of staff in the immediate area.

All team members must be aware of their responsibility to challenge and report any unauthorised use of mobile phones within areas where children are being cared for. Our policy is to politely ask or remind parents that they do not use their phone within the setting. Any infringements must be immediately reported to the manager.

When accompanying children on Abbotswood outings from the setting you must leave any personal mobile device in the setting secure storage. An Abbotswood supplied mobile phone is provided for use in case of emergency. This is to ensure that unauthorised images of children are not possible from devices owned by staff at any time whilst the children are in our care. It also protects staff against allegations of taking unauthorised images.

Allegations of abuse against staff

All colleagues must remember that the welfare of the child is paramount. The nursery whistleblowing policy enables colleagues to raise concerns or allegations in confidence and for a sensitive enquiry to take place. See Whistle Blowing Policy.

All allegations of abuse or maltreatment of children by any professional, colleague, or volunteer must therefore be taken seriously and treated in accordance with consistent procedures.

Our prime responsibility is the welfare and well-being of each child in our care. As such we believe we have a duty to the children, parents and colleagues to act quickly and responsibly in any instance that may come to our attention. This includes sharing information with any relevant agencies such as local authority services for children's social care, health professionals

or the police. All colleagues will work with other agencies including as part of a multi-agency team, where needed, in the best interests of the child.

- Allegations or concerns that a colleague or volunteer may have abused a child should be reported immediately to the nursery's Designated Safeguarding Lead (the Nursery Operations and Training Manager or senior colleague acting as DSL if the allegation is against the manager or the manager is absent).
- The Designated Safeguarding Officer will need to apply common sense and professional judgement to consider if the child has suffered harm and whether the incident relates to child protection or is poor practice if it is not clear they will contact the Local Authority Designated Officer (LADO) who will give guidance and advice on the next steps.
- The LADO should be informed immediately of all allegations that come to the attention of the nursery's Designated Safeguarding Officer (the Nursery Operations and Training Manager or senior colleague acting as DSO) or that are made directly to the police.
- If you have concerns regarding issues to do with safeguarding and promoting the welfare of children and it is in circumstances where it may be appropriate for you to report your concerns to an outside body, Ofsted have a dedicated whistleblowing hotline 0300 123 3155, or you can write to them.

If an allegation of abuse is made against any member of staff or volunteer, he or she should

- Inform the designated safeguarding lead
- Record all the details as known to them. Keep a Signed and Dated copy.

If a staff member is the subject of an allegation of child abuse, that staff member will be asked to take leave from their duties on full pay until an investigation has been completed. In the case of a volunteer, he/she will be asked to withdraw from their work until an investigation has been completed.

It should be made clear that suspension does not imply guilt but rather protects all parties while an investigation is undertaken.

If a member of staff is found to have committed acts in relation to children and young people which are criminal or which contravene the principles and standards set out in this policy, Abbotswood Day Nursery will take disciplinary action and or any other action that may be appropriate to the circumstances.

Allegations against staff - Mandatory Actions

All reported or actual incidents or allegations of staff abuse must be reported immediately to the:-



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Local Authority Designated Officer (LADO) – Hampshire Local authority Designated Officer (LADO) Shauna McMinn 01962 876364 and report, to Ofsted 0300 123 1231

The nursery will follow all instructions from the LADO, Ofsted, Local Authority Safeguarding Children Partner, Police and ask all colleagues to do the same and co-operate where required

All enquiries/external investigations/interviews will be documented and kept in a locked file for access by the relevant authorities

Unfounded allegations will result in all rights being re-instated

Founded allegations will be passed on to the relevant organisations including the local authority children's social care team and where an offence is believed to have been committed, the police, and will result in the termination of employment. Ofsted will be notified immediately of this decision. The nursery will also notify the Disclosure and Barring Service (DBS) to ensure their records are updated

All records will be kept until the person reaches normal retirement age or for 10 years if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary re-investigation

The nursery retains the right to dismiss any colleague in connection with founded allegations following an inquiry

INFORMING PARENTS

If a suspicion of abuse is recorded, parents must be informed following the report to Local Authority Designated Officer (LADO) or as soon as reasonably practicable, no later than on the collection of the child.

The designated safeguarding officer must inform Ofsted and the local safeguarding children's service of any allegations of serious harm or abuse by any person living, working or looking after children on the premises or elsewhere. Ofsted must be informed if the police or children's services are involved with you or anyone who lives or who is employed on the premises.

RESIGNATIONS

The fact that a person tenders his or her resignation, or ceases to provide their services, must not prevent an allegation being followed up in accordance with these procedures. It is important that every effort is made to reach a conclusion in all cases of allegations impacting on the safety or welfare of children, including any in which the person concerned refuses to co-operate with the process.



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TIMESCALES

It is in everyone's interest to resolve cases as quickly as possible consistent with a fair and thorough investigation. Every effort should be made to manage cases to avoid any unnecessary delay.

Informing OFSTED

The Manager must inform OFSTED of any allegations of serious harm, or abuse by anyone looking after children at the premises. An OFSTED notification must be submitted, within 14 days.

This policy was reviewed on	Signed on behalf of the nursery	Date for review
<i>30/01/2024</i>	<i>Roxanne Gregory</i>	<i>30/01/2025</i>



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This policy was reviewed on	Signed on behalf of the nursery	Date for review
<i>02/02/2024</i>	<i>Roxanne Gregory</i>	<i>02/02/2025</i>