

Willow Tree pre school

Manor Fram

January 2023

Safeguarding Policy

This policy will cover the following aspects of Safeguarding;

- The aim of the pre school
- Recruitment and staff training
- Safe staff practice
- Staff ratios
- Descriptions of types of abuse
- Possible signs and indicators of abuse
- The pre school responsibilities
- Dealing with a disclosure from a child
- Dealing with an allegation against a member of staff
- Children who harm others
- Whistleblowing
- Photography and images
- The Prevent Duty
- Mental health
- FGM (Female Genital Mutilation)
- Confidentiality
- Duties of the Designated Safeguarding Officer (DSL)
- Code of conduct

The safety and well being of each child in our care is paramount to us here at Willow tree pre school.

The designated safeguarding lead (DSL) is:

Manager: Asher Sievey

The deputy designated safeguarding lead is:

Deputy Manager: Jemma Lamb

*** Either the DSL or the deputy DSL will always be contactable even if they are off site.**

Safeguarding Policy

As a company solely caring for children, we recognise the importance of protecting children from any kind of abuse. We realise and actively implement statutory guidelines from the Early Years Foundation Stage (EYFS), and the Children Act 2004. Our policy has been created in line with the “Working together to safeguard children” (2018) and “What to do if you are worried a child is being abused” (2015) and “keeping children safe in education” (2022) and the legislation outlined in these documents.

We believe that the children and young adults’ safety and well -being is of paramount importance and train all of our staff accordingly, refreshing their training every two years.

Our Safeguarding Policy refers to all children within our care.

We have a key worker system in place, so children can build a good relationship, helping them to feel comfortable that they can talk to any staff if they are upset or concerned about anything. We are confident that our training procedures regarding safeguarding will reflect on the positive relationships our staff have with children and young people.

The aim of the Pre school

Our aim is to provide an environment where children are safe from all forms of abuse. The welfare, safety and protection of the children in our care is paramount.

The pre school are committed to building a culture of safety in which children are protected from abuse and harm in all areas of its care provision.

The Managers and staff of the pre school fully recognise the contribution they make to safeguarding children. We recognise that all staff, have a full and active part to play in protecting our children from harm.

We will:

1. **Exclude all known offenders** - it will be made clear to all applicants for positions in the pre school that positions are exempt from the provisions of the Rehabilitations of Offenders Act 1974. References will be required by all applicants that are appointed.
2. **Gain recognised references for all workers** - it is our policy that all adults who have access to children in our pre school will have supplied suitable references prior to commencing work. An enhanced DBS check will be applied for and annual suitability declaration checks carried out.
3. **Ensure that all new staff receive safeguarding training and that all staff refresh their training every two years** - the pre school are committed to encouraging and providing training to all staff. The pre school will seek out appropriate child protection training for all staff or offer in-service training where appropriate.

4. **Respond appropriately to concerns regarding safeguarding issues** - where notable changes are witnessed to a child's behaviour, management will be informed and parents will be asked if there are any significant changes within the home that may explain the behaviour. Written records will be kept and stored confidentially regarding the child. Continuous concerns or **suspicions that a child suffered harm or abuse** will be reported to **Children's Social Care. We will always discuss concerns and our intention to contact children's social care with a parent unless to do so would endanger the child.**
5. **Keep relevant records on each child** - written records will be kept regarding all children; these include full name, date of birth, address, time and date of incident/concern, parents' comments, if relevant, and signature of person writing the report. All records will be stored confidentially in the office. Records will be based on factual information and observations. All communication made by the child, staff and parent will be recorded accurately.
6. **Liase with relevant professional agencies** - relevant agencies will be contacted where concerns for the child's wellbeing are raised e.g. visiting Educational Support Team, Health Visitors, Speech and Language Therapists, child's GP, etc. **We will always seek to gain parental permission before contacting an outside agency.**
7. **Inform parents of all action taken** - parents will be informed when action is taken by the pre school with regards to child protection concerns **unless to do so would increase the risk to the child.**
8. **Support families** - it is the pre school's aim to provide and offer support to families who are experiencing difficulties or stress in the home. Our aim is to **offer or signpost** families to **early help** and prevent concerns/issues occurring.
9. **Prevent abuse by means of good practice** - our prime aim is to provide a quality service to our **families and children**. Staff will not be left alone with children for long periods of time. Children will be encouraged to develop independence, to make their own decisions, to identify and express their feelings positively **and to tell staff if they are unhappy about anything. Through group activities and by building and maintaining positive relationships between the staff and children, the staff are able to promote a culture where the children feel able to speak openly allowing the staff to listen to and hear the voice of the child.**

The layout of the playrooms promotes constant supervision of all the children by staff.

Recruitment and staff training

Safeguarding Policy

The utmost priority is given to the recruitment of the right people to join our staff team.

We follow rigorous interview and induction procedures to ensure the suitability of new staff and seek a minimum of two references before a member of staff is appointed.

An enhanced DBS is applied for at the earliest opportunity and no member of staff is permitted to be alone with the children until their references and DBS are returned.

The induction process starts on the new employee's first day; a comprehensive checklist covering the roles and responsibilities of the new employee, an overview of the pre school policies are supported by copies of every policy being given to them with clear expectations of when these need to be read by and the policy checklist signed to confirm they have read, understood and agree to work alongside them.

Safeguarding training is offered to every member of staff and updated every two years **for all staff**. The designated safeguarding officers **will also attend the two yearly training for Safeguarding Leads run by the local authority**. In-house training may be offered where appropriate.

At the pre school, there is an appointed designated person (**DSL**) who coordinates and takes the lead in any safeguarding issues which may arise. In their absence, there is also an appointed deputy designated safeguarding officer (**DDSL**) who would assume responsibility. **The DSL will be available to staff and the DDSL at all times either in person or by phone if they are off the premises.**

DSL Designated Safeguarding Lead : ASHER SIEVEY 07816900276
DDSL Deputy Designated Safeguarding Lead : JEMMA LAMB 07837353967

In the **unlikely** event of the DSL or DDSL both being unavailable at any of the pre school, the staff know to go the most senior person on the premises if they have any cause for concern about the welfare of the children. At this point the staff member who is third in charge is LOUISE THOMPSON.

All staff must be clear that if, at any time, they believe that their concerns about a child are being ignored or not taken seriously by the DSL or their deputies, the member of staff has a right and a duty to make a referral to Children's Social Care.

All candidates, will be subject to a probationary period and will not be confirmed unless the pre school are confident that the applicant can be safely entrusted with children. All applicants will be required to go through the DBS process in order to establish their suitability.

Staff will have **regular supervisions** throughout the year. This is where the Managers can have confidential open discussions with the staff, gather feedback on the staff's working environment and to discuss any concerns or queries staff may have. Discussions in meetings will be recorded in writing. Any concerns regarding safeguarding can be discussed at this supervision.

Safe Staff Practice

Safe working practice ensures that children are safe and that all staff:

- are responsible for their own actions and behaviour and should avoid any conduct which would lead any reasonable person to question their motivation and intentions;
- work in an open and transparent way;
- work with other colleagues where possible in situations that could be open to question;
- discuss and/or take advice from management over any incident which may give rise for concern;
- record any incidents or decisions made;
- apply the same professional standards regardless of diversity issues;
- be aware of information-sharing and confidentiality policies; and,
- are aware that breaches of the law and other professional guidelines could result in criminal or disciplinary action being taken against them.

Helping children to keep themselves safe

Children are taught to understand safety and manage risk through embedding the prime areas of personal, social, and emotional development and communication and language in all aspects of our care. Our approach is designed to help children to think about safety and, with the support of staff, work out how to keep themselves safe. Discussions about safety are empowering and enabling for all children and promote sensible behaviour rather than fear or anxiety. Children are taught how to conduct themselves and how to behave in a responsible manner, as well as develop a language to share concerns.

Through curriculum opportunities, children are helped to talk about their feelings to deal with assertively with pressures and know whom they can turn to for advice and help.

Staff Ratios

We adhere to the statutory guidelines as a minimum when applying staff ratios throughout the day. Where there is an overlap of ages which alter the recommended ratios, we strive to meet the higher ratio.

Staff to child ratios

1:4 for over 2s

1:8 for over 3

Descriptions of types of abuse

Child abuse is to cause harm to a child or fail to take action to prevent harm.

Main categories of abuse

- Physical Abuse
- Emotional Abuse
- Sexual Abuse
- Neglect

What is abuse and neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, threatening to inflict harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger, for example, via the internet. They may be abused by an adult or adults, or another child or children.

Physical abuse

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

Emotional abuse

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

Sexual abuse

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

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or,
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Possible Signs or Indicators of Abuse

Staff must hold in mind that there is no such thing as an exhaustive or fool proof list of possible indicators that a child is suffering harm or abuse.

Abuse or neglect

Factors described below are frequently found in cases of child abuse or neglect, their presence is not proof that abuse has taken place but must be regarded as indicators of the possibility of significant harm.

In an abusive relationship, a child may:

- Appear frightened of the parent
- Act in a way that is inappropriate to their age and development.
- Persistently avoid routine child health services or treatment when child is ill.
- Have unrealistic expectations of the child
- Frequently complain about the child (high criticism/low warmth environment)
- Be absent or leave child with inappropriate care givers

Physical abuse

The following signs are often recognised as indicators or concern:

- An explanation that is inconsistent with the injury

- Several different explanations for an injury
- Unexplained delay in seeking medical help
- Parents uninterested or undisturbed by an accident or injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a cry for help)
- Frequent use of different doctors and A&E
- Reluctance to give information or mention previous injuries
- Bruising
- Repeated multiple bruising on the head or on sites unlikely to be injured accidentally.
- Variation in colour to indicate injuries caused at different times
- Outline of an object used (e.g., belt, hand prints or hair brush)
- Bruising or tears around or behind earlobes indicating injury by pulling or twisting
- Grasp marks on young children
- Bruising on arms buttocks and thighs may be indications of sexual abuse
- Bite marks leaving a clear impression of teeth, they are oval or crescent shaped approx. 3cm in diameter

Burns or scalds

- This can be difficult to distinguish between accidents and non - accidental.
- Circular burns from cigarettes (but may be a friction burn if along the bony part of spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of a uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid.
- A child getting into hot water of own accord and struggling to get out
- Old scars indicating previous wounds which did not have medical treatment

Scars

- A large number of scars of different sizes or ages or on different parts of the body

Emotional Abuse

Emotional abuse may be difficult to recognise as the signs are behavioural rather than physical.

The following indicators **may** be signs of emotional abuse:

- Development delay
- Abnormal attachment between child and parent (anxious, indiscriminate or no attachment)
- Aggressive behaviour towards others
- Appeasing behaviour towards others
- Frozen watchfulness in pre-school children
- Low self -esteem and lack of confidence
- Withdrawn or seen as a loner, difficulty in relating to others.

Sexual abuse

If a child makes disclosure of sexual abuse it is very important that they are taken seriously

- Allegations can be often indirect as the child tests the professional's response. There can be no physical indications and are likely to be emotional/behavioural indicators only.
- Behavioural indicators
- Inappropriate sexual conduct
- Sexual explicit behaviour play or conversation inappropriate to child's age
- Contact or non-contact sexual harmful behaviour
- Continual and inappropriate masturbation
- Physical indicators
- Pain or itching on genital area
- Injuries to the genital area, or anal area, bruising to the buttocks
- Sex offenders have no common profile and it is important for professionals to avoid attaching any significance to stereotypes around their background or behaviour. Media attaches much importance to "stranger danger" but research indicates that 80 per cent of sexual offending occurs in the context of a known person

Neglect

Neglect in an isolated case may not lead to agencies becoming involved. As professionals we need to compile a chronology and discuss concerns with other agencies which may be involved with the family.

- When working with families in areas where there is poverty and deprivation, we may be become desensitised to some of the indicators.
- These include: failure to provide essential physical needs (food, clothes, warmth, hygiene and medical or dental care)
- Failure to provide essential emotional care, including feeling loved and valued, to live in a safe secure home environment)
- A child may be listless, apathetic and unresponsive with no apparent medical cause
- Failure of child to grow within normal expected patterns.
- Child thrives away from home environment
- Frequent absences from Pre-school
- Child has inappropriate carers (too young or complete strangers)
- Child left with adults who are intoxicated or violent
- Disabled children can be particularly vulnerable to neglect due to the increased level of care they may require.

The pre schools responsibilities in dealing with safeguarding concerns about children

- Ensuring the child's welfare, safety and protection is paramount.
- We will act in the best interests of the child at all times.

- The Designated Safeguarding Officer will immediately contact Children's first response in the event of a disclosure either from the child, another member of staff, parent or user of the pre school.
- We will treat all parties involved with respect and not pass judgement or make assumptions and we will offer support to those involved.
- We will respect confidentiality.
- To work co-operatively with all outside agencies.
- To notify Ofsted in cases of a member of staff being involved in a safeguarding issue **or where an allegation is made against a member of staff, student or volunteer.**
- To work in accordance with the Statutory Framework for the EYFS relating to safeguarding children.
- To maintain written records of all concerns even if there is no need to make an immediate referral. This could include the completion of a "body map" showing exact size, colour and place of injury and must include the date and name of person recording injury. All records will be locked away with only those persons with authority having access to them.

Dealing with an allegation made against a parent or carer from a child

This is referred to as a "disclosure"

- The child will be comforted and reassured that the person they are telling believes them.
- No promises are made to the child to keep their disclosures a secret, but they are gently told who else must be told and that they will tell them what will happen next.
- The child may be asked some gentle open-ended questions in order to ascertain more information **but these questions will be kept to "tell me" or "explain" in order to be clear that the child is making a disclosure. This is known as TED - Tell, Explain, Describe. This is the best method to use when a child makes a disclosure.**
- **Staff will not ask leading questions or "interview" the child. This will be considered as contaminating the evidence from the child and it will no longer be valid for any future use in court.**
- **An accurate record** will be written as soon as possible after the disclosure with the exact language the child used. Any questions asked will be noted with the responses given by the child.
- Any witnesses to the conversation will be named.
- The date, time and place of the disclosure will be noted.
- The Designated Safeguarding Officer will be informed immediately. It is then their responsibility to pass the information shared on to **Children's first response.**
- Wherever possible, we would want to discuss our concerns with the parent/guardian, however, there may be times when our concerns are such that we are obliged to follow the procedures laid down by the Local Safeguarding Board **when we contact Children's first response first.**

Local Authority Children's first response has a legal duty to undertake child protection enquiries if they have reason to believe that a child is suffering or is likely to suffer

significant harm (Children Act 1989 - section 47). They also have a duty to strengthen and support families where children are deemed to be “in need”. The pre school takes seriously its duty to work in partnership with Children’s first response to safeguard children.

All staff members should be aware of the possible indications of abuse or neglect and of the procedure for dealing with suspected cases.

Should any person involved with the disclosure for any reason be unhappy with the way that the DSL has handled any issue of child protection, please contact children’s first response straight away.

Should you wish to view our Public Liability Insurance certificate, it is displayed in the reception area.

Procedure to follow in event of child protection concerns

DSL - Designated Safeguarding Lead
DDSL – Deputy Designated Safeguarding Lead
LADO - Local Authority Designated Officer

If you have a cause for concern that a child may be being harmed or abused then please do the following:

1. Report immediately with your findings or suspicions to the DSL
2. The DSL will then report to the Children’s first response team. **In an instance where the allegation is against a member of the staff team, the DSL will report to the LADO within 1 working day / 24 hours and also notify Ofsted.**
3. Do not discuss this sensitive matter with anyone else apart from the DSL or DDSL.
4. The LADO will establish whether there is any evidence that establishes the allegation is false
or unfounded or if a criminal offence has taken place.
5. The LADO will then report their findings with the local police child protection team.
6. The police safeguarding team will then do their own report by taking statements from relevant people with the help of the DSL.

Subsequent Action

Following such a referral, enquires will be undertaken by Social Services and possibly the Police. Staff may be required to provide statements and attend an Initial Child Protection Conference. When a child leaves the pre school their child protection file is copied for the new establishment and sent to the new setting as soon as possible separately from the main pupil file.

Allegations regarding person(s) working in or on behalf of the pre school (including volunteers)

Where an allegation is made by a professional, parent or child against any person working in or on behalf of our pre school that he or she has:

- a. behaved in a way that has harmed a child or may have harmed a child;
- b. possibly committed a criminal offence against or related to a child; **or**,
- c. behaved towards a child or children in a way that indicates s/he is unsuitable to work with children.

We will apply the same principles as in the rest of this document and we will always follow the procedures outlined in **‘Working together to safeguard children 2018 (updated 1 July 2022)’** and **Part 4 of ‘Keeping children safe in education’ September 2022** for managing allegations against people who work with children. This includes allegations against staff in their personal lives.

Whilst we acknowledge such allegations, (as all others), may be false, malicious or misplaced, we also acknowledge they may be founded. It is, therefore, essential that all allegations are investigated properly, in line with agreed procedures and all outcomes recorded.

Initial Action by person receiving or identifying an allegation or concern

- a. Treat the matter seriously and keep an open mind
- b. Make a written record of the information using the settings incident form, including the time, date and place of incident/s, persons present and what was said and sign and date this
- c. Immediately report the matter to the DSL or DDSL in their absence or where the DSL is the subject of the allegation

Initial Action by the Designated Safeguarding Lead

The DSL is the Owner/Manager. If the DSL is the subject of the allegation, then the DDSL will take the following action:

- Obtain written details of the concern or allegation but do not investigate or interview child, adult or witnesses
- Contact the Referral and Assessment Team or LADO (Local Authority Designated Officer) within 1 working day
- Discuss with the LADO next steps using the Safeguarding Children Procedures Flow Charts Allegations/Concerns Against Staff

Subsequent Action by the Designated Senior Manager/owner

- Action to be informed by any professional strategy meeting held.

- Contribute to the child protection process by attending professional strategy meetings.
- Conduct a disciplinary investigation, if an allegation strategy meeting indicates the need for this
- Maintain contact with the LADO.
- Ensure clear and comprehensive records regarding the allegation, and action taken and outcome are retained on the staff member's personnel file.
- The decision to suspend a member of staff is the responsibility of the manager, taking into account of any advice given by the LADO. The protection of children and the staff member must be the paramount consideration and suspension must be without prejudice and without delay in line with disciplinary procedures.
- Refer to the Independent Safeguarding Authority, if this outcome is agreed with the LADO.

Children who harm others

Our setting/establishment recognises that the harm caused to children by the harmful and bullying behaviour of other children can be significant.

Children who harm others will pose a risk to other children in the setting/establishment, home and community and risk management strategies will need to be put in place.

Where this harm involves sexual abuse, serious physical or serious emotional abuse, the safeguarding procedures set out in this policy will be applied.

This setting/establishment recognises that children who harm others are likely to have considerable needs themselves and may have experienced or be experiencing significant harm to themselves.

Referrals

Where a child has caused significant harm to another child, through sexual abuse or serious physical or emotional abuse, the setting/establishment will make separate referrals to children's first response of the victim(s) and perpetrator(s).

Our setting will be mindful of the sections in the Safeguarding Children Procedures concerning "Harming Others" and "Sexually Active Children" and work closely with social care, the police and other agencies following the investigation of a referral.

Harmful Sexual Behaviour in EY Settings

If a setting has concerns about a child or young person exhibiting sexualised or harmful sexual behaviour they should consider a referral to children's first response and should compile a chronology of relevant incidents to support pattern mapping. This will then inform the plan both for the child that has harmed and the child that has been harmed.

Throughout the process it is desirable that parents are engaged and informed.

Whistle Blowing

Don't think what if I'm wrong - think what if I'm right

There is a separate policy relating specifically to **whistleblowing** and what this means along with what actions all staff MUST know and do in the event of a concern.

All staff must be aware of their duty to raise concerns, where they exist, about the attitude or actions of colleagues.

Self reporting

There may be occasions where a member of staff has a personal difficulty, perhaps a physical or mental health problem, which they know to be impinging on their professional competence. Staff have a responsibility to discuss such a situation with the manager so professional and personal support can be offered to the member of staff concerned. Whilst such reporting will remain confidential in most instances, this cannot be guaranteed where personal difficulties raise concerns about the welfare or safety of children.

Photography and Images

The vast majority of people who take or view photographs or videos of children do so for entirely innocent, understandable and acceptable reasons. Sadly, some people abuse children through taking or using images, so we must ensure that we have some safeguards in place.

To protect children we will:

- Seek parental consent
- Use only the child's first name with an image
- Ensure children are appropriately dressed
- Have a policy regarding staff use of mobile phones, photography and social networking within the workplace
- Have a policy regarding the use of any electronic systems, in our case this is tapestry for the childrens online learning journeys and social media sites for the parents to access.

The Prevent Duty

We are fully aware and committed to the on-going protection and safety of our children, staff and wider community in accordance with DfE guidance "*Working together to Safeguard Children*" (2018, updated 1 July 2022) and "*Keeping Children Safe in Education*" (September 2022). An integral part of that work relates to the government's PREVENT strategy and the duties it places on education settings.

Safeguarding Policy

We are committed to providing a secure environment, where children feel safe and are kept safe. All adults in our setting recognise that safeguarding is everyone's responsibility irrespective of the role they undertake or whether their role has direct contact or responsibility for children or not. Staff will be alert to issues including:

- Disclosures by children of their exposure to the extremist actions, views or materials of others outside of the setting, such as in their homes or community groups
- Graffiti symbols, writing or artwork promoting extremist messages or images
- Children demonstrating knowledge, making reference to or using inappropriate words, phrases or language which may indicate they have been exposed to or have accessed extremist material online, including through social networking sites.
- Parental reports of changes in behaviour, friendship or actions and requests for assistance
- Use of extremist or 'hate' terms to exclude others or incite violence
- Intolerance of difference, whether secular or religious or, in line with our equalities policy, views based on, but not exclusive to, gender, disability, homophobia, race, colour or culture

By continually developing our leadership and accountability practices, staff training opportunities referral systems and management of those referrals, we strive to demonstrate a pro-active and diligent approach to this aspect of our responsibilities as educators and safeguarders.

Aligned with a consistent delivery of a broad and balanced curriculum which promotes British Values through the EYFS, we strive to protect our children - and the wider community - against the threats of extremism, through the promotion of both fundamental values and cohesion amongst our communities.

We also recognise that further information and support is available from children's first response and the Local Authority.

Mental Health

All staff should be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem, however our staff are well placed to observe children day-to-day and identify children who may show signs of a mental health problem. This concern is also a safeguarding concern and action should be taken.

Female Genital Mutilation (FGM)

FGM is illegal in the UK and a form of child abuse with long-lasting harmful consequences. 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.

FGM refers to procedures of any alteration involving partial or total removal of the external female genital organs. The procedure may lead to short term and long-lasting harmful consequences such as death, trauma, infections, flashbacks, infertility, kidney problems, sexual dysfunctions, incontinence, post-traumatic stress disorder etc. It is known to be practised in the North African countries, the Middle-East, Indonesia, Malaysia, India and Pakistan. However, with migration worldwide it is also practised in the UK, the USA, Canada, Australia etc.

One of the prominent reasons for the practice is to suppress women's sexual desire. There is a social pressure on women to undergo the procedure otherwise they may be segregated by their peers or labelled "unclean". Furthermore, FGM is often a requirement for getting married in practicing communities. FGM is not a religious practice.

Indicators

There are a range of potential indicators that a girl may be at risk of FGM.

FGM often takes place in the summer holidays, as the recovery period after FGM can be 6 to 9 weeks. Professionals should be mindful of high-risk times when children go on long holidays and/or are getting a visit by female elder from their country of origin. Additionally, girls are considered at risk where their mother or sisters have undergone FGM, and girls are talking about a 'special' event or procedure to 'become a woman.'

The post FGM symptoms include, but are not limited to, difficulty in walking, sitting or standing, spending longer than normal in the bathroom or toilet, unusual behaviour after a lengthy absence and asking for help but not be explicit about the problem due to embarrassment or fear. **Professionals should raise an alert to child rens first response if they have any FGM concerns.**

Actions

The United Nations addresses FGM as violation of human rights. In the UK, FGM is a criminal offence and a harmful form of child abuse. It is illegal to practice in the UK and/or anyone involved in taking girl outside of the UK to have FGM carried out will be punished under the FGM Act 2003 and Serious Crime Act 2015. The local authority follows a comprehensive approach comprising prevention, punishment, enforcement, support and protection measures to safeguard young girls from FGM.

Mandatory Reporting Duty

Any member of staff who sees evidence that a girl has undergone FGM (this might happen during toileting or changing) has a legal duty to report this to the police immediately. It is expected that this will be done with the knowledge and support of the DSL using the child protection procedures.

If a member of staff has any suspicions that a young girl may be about to undergo the procedure, they MUST alert their DSL immediately who will take appropriate action.

Our setting **also:**

- Displays a poster about FGM
- Displays relevant information (for example, details of the NSPCC's Helpline and appropriate black and minority ethnic women's groups)

Staff are aware of the term **Breast Ironing** : Breast ironing (sometimes called flattening) is the pounding and massaging of a young girl's breasts to prevent and stunt breast growth.

Staff are aware of the term **Witchcraft**:

Abuse linked to faith or belief is where concerns for a child's welfare have been identified, and could be caused by, a belief in witchcraft, spirit or demonic possession, ritual or satanic abuse features; or when practices linked to faith or belief are harmful to a child. Any abuse that takes place against those who are branded (or labelled) either as a witch or as having been possessed by an evil spirit is unacceptable. Significant harm (including murder) can occur because of concerted efforts to 'excise' or 'deliver' evil from a child (or vulnerable adult).

Staff are aware of the term **Cuckooing**:

Cuckooing is the term used to describe an individual or group that takes over the home an adult and/or their family, for the purpose of using it for illegal activity.

Staff promote **British Values** within our setting:

Democracy: supporting and encouraging self-awareness and self-confidence. Independence and Independent thinking (PSED)

Respect and Tolerance (Peace): People and communities (UW), managing feelings and behaviour (PSED), making relationships (PSED).

Individual liberty: self-confidence and self-awareness (PSED) People and communities (UW)

Rule of the Law: managing feelings and behaviour (PSED)

Cultural Capital is the essential knowledge that children need to prepare them for their future success. It is about giving children the best possible start to their early education, teaching them life skills.

It may include:

Safeguarding Policy

- finding books on a child's favourite topic
- creating role-play activities that further their interest in a particular idea
- taking trips to the park
- or organising visits from community figures such as the police

Staff understand that “**Upskirting**” is an informal term for a type of voyeurism when someone uses equipment like a camera or mobile phone to take photos or videos underneath a person's clothes, without their permission.

Only the work mobile phone and tablets should be used in the setting. Parents or visitors are not to use their devices in the setting.

Missing child

Confidentiality

This policy has been devised to meet the guidelines as set out in the statutory framework for the Early Years Foundation Stage and conforms to the guidance set by the local authority and the Local Safeguarding Board.

The pre school has the right to share any information regarding child protection with other childcare professionals. All information will be kept confidential.

Policy in Confidentiality

Our work will bring us into contact with confidential information. To ensure that all those using and working in the setting can do so with confidence, we will respect confidentiality in the following ways:

1. Parents/carers will have ready access to files and records of their own children - but not any other child.
2. Staff will not discuss individual children with people other than the parents/carers of that child.
3. Information given by parents/carers to our staff will be passed on to other staff members on a need to know basis.
4. If outside agencies are to be used i.e. speech therapist, portage workers, etc. then parents will be consulted first and all paperwork will be made available to the parents.
5. Personal issues will remain confidential to the people involved.

Safeguarding Policy

6. Any anxieties/evidence relating to a child's personal safety will be kept in a confidential file and will not be shared within the whole pre school except for the child's key worker and Manager.
7. The pre school will comply with all requirements of the Data Protection Act.

Where to contact in the event of a suspicion of abuse.

Department	Contact details
Local Authority Designated Safeguarding Officer	LADO Anita Hopkins 0161 912 5024
Children's first response	0161 912 5125 mon-tri 8.30am-4.30pm out of hours rapid response 0161 912 2020
Trafford strategic safeguarding partnership	0161 911 8687
NSPCC whistleblowing helpline	0800 028 0285 8am-8pm
Ofsted	0300 1231231

Duties of the Designated Safeguarding Leads

The Designated Safeguarding Lead must be a willing and capable candidate who takes his / her responsibility seriously and have the skills and knowledge to act on their findings.

They must liaise with the managers and deputy managers as well as being able to act under their own initiative.

Typically, the Designated Safeguarding Lead has responsibility:

- To ensure the settings safeguarding policy and procedures are followed.
- To ensure the staff know how to make contact with social services and police staff responsible for dealing with child protection concerns both during and after office hours.
- To report any concerns to social services or the police (N.B. urgent concerns should be reported immediately by those aware of them even if the designated person is not available)
- To act as a source of advice on all child protection matters and seek further advice and guidance from local statutory agencies as needed.
- To ensure that records are kept of any concern about a child or adult and any conversations or referrals to statutory agencies.
- To ensure that any such records is kept safely and securely and that any such matters are to be kept confidential

Safeguarding Policy

- To attend relevant safeguarding training and oversee the training needs and provision for all staff.
- To encourage good practice and supervision of procedures to protect the children.
- To provide practical support and assistance in managing the effects of allegations or suspicions of child abuse within the pre school.
- To ensure parents are made aware of the safeguarding policy and understand our role with regards to referrals.
- To ensure the safeguarding policy is updated and reviewed annually.

Signature of person responsible for Safeguarding within the company:-

DSL

Name

Signature

Deputy DSL

Name.....

Signature.....

Code of conduct for staff, students and volunteers with regards to safeguarding

1. The preschool has a duty of care to all those we work with and this policy is written to help support our desire to fulfil this duty of care.
2. Always remember that while you are caring for other people's children you are in a position of trust and your responsibilities to them and the pre school must be uppermost in your mind at all times.
3. Always remember you have to protect yourself from any circumstances where you could be accused or questioned about your conduct around safeguarding never put yourself in a compromising position.
4. When supervising activities off of the setting premises it is important to maintain a professional manner.
5. Never use any kind of physical punishment or chastisement such as smacking or hitting.
6. Do not smoke in front of the children or in the setting.
7. Do not use un-prescribed drugs or be under the influence of alcohol. If you have been prescribed medication by your doctor that you think may make you drowsy or it may affect your work please notify the management team.
8. Never behave in a way that frightens or intimidates a child in your care.

9. Do not use racist, sexist, discriminatory or offensive language.
10. You should not invite a child to your home or arrange to see them outside the pre school, unless you are a relative or friend of the family.
11. You should not engage in any sexual activity (this will include using sexualised language) with young workers (students) you meet through your working duties or start a personal relationship with them, this would be an abuse of trust.
12. Physical contact should be open and initiated by the child's needs only e.g. a hug if the child becomes upset or help with toileting. Always prompt children to carry out personal care themselves and if they cannot manage ask if they would like help.
13. Children should not be held or cuddled unnecessarily or carried around. Staff must not seek affection or cuddles for their own comfort needs. Staff must be aware of their colleagues behaviour around this at all times.
14. Staff should try to engage the child in an activity and distract them if they are upset.
15. Do not ask or force a child for kisses - if they would like to give you a hug or a kiss they will ask you. No child should be kissed on the lips by a member of staff, an affectionate peck on the cheek or head is much more appropriate.
16. Do listen to the children and take every opportunity to raise their self-esteem.
17. Do work as a team with your co-workers. Agree with them what behaviour you expect from the children and be consistent in enforcing it.
18. If you have to speak to a child about their behaviour, remember you are challenging "what they did" and not "who they are."
19. Make sure you have read our safeguarding policy and that you feel confident that you know how to recognise when a child may be suffering harm, how to handle any disclosure and how to report any concerns.
20. Do seek advice and support from your colleagues and your safeguarding officer with regards to child protection.
21. Do be clear with anyone disclosing and any matters that could concern the safety and well being of a child that you cannot guarantee to keep the information to yourself and that you may have to pass this information on to the correct person.

This policy will be reviewed within the Ofsted guidelines of every 12 months.

**Date: January 2023
January 2024**

Review Date:

Signed on behalf of Company: _____

Position: _____

STAFF: PLEASE SIGN AND DATE WHEN READ. PLEASE REPORT ANYTHING YOU DON'T AGREE WITH, OR ANYTHING YOU THINK NEEDS ADDING OR AMENDING FROM THIS POLICY IMMEDIATELY TO THE MANAGER.

ASHER SIEVEY

JEMMA LAMB

PAULA SIEVEY

EMMA TRICKETT

JANE CLARK

LOUISE THOMPSON