

Brightsparks Day Nursery Safeguarding/ Child Protection Policy

Safeguarding Officer: Zoe Reed

Deputy safeguarding Officer - Sophie De Maertelaere

We have a designated senior person for Safeguarding who has received appropriate training and support for this role. This designated person is responsible for liaising with the local statutory children's services agencies, and with the LSCB. They must provide support, advice and guidance to any other staff on an ongoing basis and on any specific safeguarding issues as required. The officer and deputy will update their training every 2 years with their knowledge and skills refreshed annually. A member of staff who has received the appropriate training will be on site at all times. All staff will receive minimum of Level 1 training as part of their induction.

The role of the Safeguarding Officer is to:

- refer suspected abuse or neglect of children and young people to MASH. Urgent concerns must be reported immediately even if the designated safeguarding and child protection person is not available;
- report allegations made against members of staff to the local authority designated officer (LADO) through MASH. This is known as the duty to refer;
- develop and update child protection and other safeguarding policies ensuring staff are made aware of their responsibilities and families are familiar with how to raise a concern;
- ensure that confidential records are kept of any concerns about a child or young person and of any conversation or referrals to statutory agencies;
- provide support, supervision and advice for any staff member, volunteer or student with a safeguarding or child protection concern; provide safeguarding and child protection induction for new staff, students and volunteers;
- have an understanding of the Local Safeguarding Children's Board procedures;
- ensure their own safeguarding training is up-to-date and follow the recommended training requirements;
- ensure all safeguarding and child protection training is cascaded to the whole staff team, including new staff, bank or agency staff or volunteers;
- ensure staff have appropriate child protection and safeguarding training and maintain training records; and
- co-operate with any request for information from the local authority such as child protection training returns and self-evaluative forms for safeguarding and child protection compliance with section 11 of the Children Act 2004.
- Ensure staff have an awareness and understanding of the staff behavior policy.

Role of Multi-Agency Safeguarding Hub (MASH)

The MASH is based at:

1st Floor, The Woolwich Centre, 35 Wellington Street, London SE18 6HQ

Consultation line (for professionals only): 020 8921 2267

Telephone number for referrals: 020 8921 3172

Referrals or other communications via secure e-mail:

mash-referrals@royalgreenwich.gov.uk or faxed to 020 8921 3180.

The MASH is operational during office hours:

Monday - Thursday: 9.00am-5.30pm

Friday: 9.00am-4.30pm

Referrals outside office hours are handled by the Out of Hours Social Worker who can be contacted on 020 8854 8888.

MASH acts as a central information hub that coordinates information from a range of sources, as well as signposting to universal provision.

You may call MASH for initial advice and guidance. Referral forms are available online. It is important to contact MASH before making an online referral so they can respond to the child's needs quickly if you are concerned that a child is at immediate risk.

The outcome of contacting MASH will depend on the circumstances but could include:

- being given advice about local services;
- logging concerns about a child;
- signposting to services; or
- supporting the CAF process.

When seeking advice or reporting information, be sure that you clearly understand and keep a record of any actions you are told to take, along with related timescales and actions taken. There is an incident form to support you in recording any incidents, who you spoke to and actions taken. The chronology form enables you to have an overview of the incident. Please ask management for support when completing an incident report form.

When to Report Concerns to MASH

The Safeguarding/ Child Protection Officer would liaise with the Manager and/or Proprietor and they must decide whether external reporting (to the MASH) is appropriate. They will discuss fully the situation with the staff member who raised the concerns, and any other staff who may have relevant information. Consideration must be given to the immediate safety needs of the child.

To facilitate a decision the officer/manager/proprietor may discuss the concerns with the MASH. If deemed necessary the Safeguarding/ Child Protection officer will complete a CAF (Common Assessment Framework) if one is not already being written by another agency.

Immediate referral to the MASH should occur when:

- The child has disclosed abuse.
- The child has suspicious injury for which there is no satisfactory explanation.
- The child is deemed to be at immediate risk.
- The child is anxious or afraid about returning home.
- The child is known to have abused another child.
- Medical treatment is necessary.
- There are strong grounds for believing that a staff member or volunteer has abused the child.

Immediate referral to the MASH is not necessary or appropriate when:

- A child's behaviour is not symptomatic of abuse.
- A child says things which indicate something is amiss, but this does not conclusively indicate abuse.
- A child has a minor injury for which there is a reasonable explanation.
- A staff member or volunteer is behaving unprofessionally, but this may not be abusive of children.

When a referral is made to the MASH, the decision must be taken as to whether to notify the parents. The guiding principle is that parents should be informed unless doing so places the child at further risk.

Confidential records kept on a child are shared with the child's parents depending on the situation. Parents should put their request in writing to the Nursery Manager/ Safeguarding/ Child Protection Officer if they want to see the Safeguarding/ Child Protection records kept on file for their Child. A decision will be made within 7 days as to whether it is in the interest of the Child to share this information. It may be necessary to refer to outside agencies to make an informed decision.

The nursery will continue to welcome the child and family whilst investigations are being made in relation to abuse outside the nursery environment. Investigations will be carried out with sensitivity. Staff in the nursery take care not to influence the outcome either through the way they speak to the children or ask questions of the children.

The Role of LADO (Local Authority Designated Officer) - 020 8921 3930

The Local Authority Designated Officer (LADO) works within children's services to help safeguard children in accordance with the statutory guidance, Working Together to Safeguard Children 2018. The LADO should be informed, through MASH, of all cases where it is alleged that a person who works with children has:

- behaved in a way that has harmed, or may have harmed a child
- possibly committed a criminal offence against children, or related to a child
- behaved towards a child or children in a way that indicates they are unsuitable to work with children, for example if their conduct falls within any of the categories of abuse.

Once an allegation has been made, the LADO's role is to capture and co-ordinate the sharing of all the information relating to the case with the officers and agencies that need to be informed.

The LADO will be involved from the initial phase, providing advice and guidance to the setting or employer, and monitoring the progress of the case through to its conclusion. LADO meetings are held where allegations are such that they may require a multiagency response and involve both children's services and the police alongside the employer. If an allegation does not require police or children's social care involvement the LADO will support the organisation to investigate, following their own internal procedures and can advise regarding disciplinary, training and policy matters.

Brightsparks Day Nursery fully recognises its responsibilities for Safeguarding/ Child Protection and ensures that:

- We will follow the procedures set out by the Local Safeguarding Children Board and follow the Guidelines in the DCFS Working Together to Safeguarding Children document July 2018 (located at the back of the Safeguarding folder).
- The welfare of the child is paramount.
- All children, whatever their age, culture, disability, gender, language, racial origin, religious beliefs and/or sexual identity, have the right to protection from abuse.
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately.
- All staff (paid/unpaid) working in the nursery have a responsibility to report any concerns to the appropriate person.
- 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 be left alone with children.
- We do not allow volunteers to be alone with children or any other adult who may be present in the nursery regardless of whether or not they have a DBS clearance.
- All staff will attend child protection training and receive initial basic child protection training during their induction period. 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.
- Ensure we practice safe recruitment in checking the suitability of staff and volunteers to work with children.
- Raising awareness of child safeguarding/ child protection issues and equipping staff and children with the skills needed to keep them safe.
- Implementing procedures for identifying and reporting cases, or suspected cases of child abuse.
- Establishing a safe environment in which children can learn and develop and feel secure with their carers, and are encouraged to talk, and are listened to.
- We have procedures for recording the details of visitors to the nursery.
- We take security steps to ensure that we have control over who comes into the nursery so that no un-authorised person has unsupervised access to the children.
- Allow all staff/volunteers to make informed and confident responses to specific Safeguarding/ Child Protection issues.
- Provide staff with adequate information to make correct decisions and deal with concerns.
- Every member of staff (including temporary and cover staff and volunteers) knows the name of the designated senior person responsible for safeguarding/ Child Protection and their role.

- All staff and volunteers understand their responsibility for referring any concerns to the designated senior person for safeguarding/ Child Protection.
- All parents have an understanding of the responsibly placed on the nursery and staff for safeguarding/ Child Protection by setting out its obligations in the prospectus.
- Notify Social Services if there is an unexplained absence of more than two days of a child who is on the safeguarding/ Child Protection register.
- If the officer has any safeguarding concerns about a child and they are absent from Nursery for more than 2 days without an explanation the Manager will give the family a 'courtesy' call to check on the absence.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding safeguarding/ Child Protection matters including attendance at case conferences.
- Keep written records of concern about children.
- All records are kept securely, separate from the child's main file, and in a locked location.
- Follow procedures where an allegation is made against a member of staff or volunteer.
- Safe recruitment practices are always followed by getting appropriate checks in full.
- Ensuring that, where a child on the safeguarding/ Child Protection register leaves, that their information is transferred to the new setting/school immediately and that the child's social worker is informed.

Concerns may be raised by the child themselves, employees or volunteers of the nursery, parents/carers or outside agencies.

We acknowledge that abuse of children can take different forms: Sexual, Emotional, Physical and Neglect, Child Exploitation, Female Genital Mutilation and Domestic Violence and Abuse.

When children are suffering from Physical, Sexual or Emotional abuse this may be demonstrated through changes in their behaviour or in their play. Where such changes in behaviour occur or where children's play gives cause for concern the nursery will investigate following the safeguarding steps of action shown with this policy.

Where a child shows signs and symptoms of 'failure to thrive' or 'neglect' we make observations and appropriate referrals.

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 activities such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women and other children can also commit sexual abuse.

Effects - Children who have been sexually abused may show a variety of signs and symptoms, including

- aggressive behaviour, sleep problems, bed-wetting or soiling
- problems with school work or missing school
- risk taking behaviour during adolescence
- becoming sexually active at a young age
- promiscuity.

Signs - In addition to the effects that sexual abuse may have on a child, you may also notice other warning signs, such as a child who:

- suddenly starts to behave differently
- thinks badly or does not look after him or herself
- displays sexually inappropriate behaviour, including use of sexual language and sexual information which you would not expect them to know
- has physical symptoms that suggest sexual abuse - these can include anal or vaginal soreness or an unusual discharge, and pregnancy
- avoids being alone with a particular family member
- fears an adult or is reluctant to socialise with them
- tries to tell you about abuse indirectly, through hints or clues
- describes behaviour by an adult that suggests they are being 'groomed' for future abuse.

You should also be alert to any adults who pay an unusual amount of attention to your child, for example:

- giving your child gifts, toys or favours
- offering to take your child on trips, outings and holidays
- seeking opportunities to be alone with your child.

Child sexual exploitation (CSE)

Sexual exploitation is a form of sexual abuse in which a child is manipulated, or forced, into taking part in a sexual act. This could be part of a seemingly consensual relationship or in return for attention, affection, money, drugs, alcohol or somewhere to stay.

Signs which may suggest sexual abuse:

- Pain, bruising or bleeding in the genital area
- Vaginal discharge or infection
- Stomach pains
- Changes in behaviour
- Fear of being left with a specific person or group of people
- Sexual knowledge beyond their developmental level
- Sexual drawings or language
- Eating problems

- Self-harm
- Acting in a sexually explicit way towards adults

Female genital mutilation (FGM)

FGM 'includes all procedures which involve partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons whether for cultural or other non-therapeutic reasons' (WHO, UNICEF, UNFPA, 1997).

FGM constitutes child abuse and causes physical, psychological and sexual harm which can be severely disabling. In the case of suspected FGM providers must not contact parents before seeking advice from SPA or mediate between the children and their parents.

Signs which may suggest FGM

- A child may talk about a special procedure or ceremony that is going to take place
- Prolonged absence from the setting
- Change in behaviour on return
- Damage to the genital area and/or adjacent tissues
- Pain or difficulty in sitting
- Bleeding or infection
- Urine retention
- Fracture or dislocation as a result of restraint
- Psychological damage, including depression, anxiety, and sexual dysfunction

There is a mandatory duty requiring regulated health and social care professionals and teachers and anyone working with under 18s to report known cases of FGM in under-18s. More information regarding FGM can be found on the London Safeguarding Children Board website.

Breast ironing/flattening

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.

Breast Ironing/Flattening is a form of physical abuse and can cause serious health issues such as:

- Abscesses
- Cysts
- Itching
- Tissue damage
- Infection
- Discharge of milk
- Dissymmetry of the breasts
- Severe fever.

Any concerns about a child or family, will be reported to the children's social care team in the same

way as other types of physical abuse.

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.

Procedure:

- All signs of marks/injuries to a child, when they come into nursery or occur during time at the nursery, will be recorded as soon as noticed by a staff member
- The incident will be discussed with the parent at the earliest opportunity, where felt appropriate
 - Such discussions will be recorded and the parent will have access to such records

If a case of fabricated illness is suspected, the procedures of contacting MASH will be followed.

Domestic violence and abuse

The cross-government definition of domestic violence and abuse is 'any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- psychological
- physical
- sexual
- financial
- emotional

Signs which may suggest children are exposed to domestic abuse:

- Aggressive behaviour
- Displaying anti-social behaviour
- Acting out their experiences
- Suffering from depression or anxiety
- Not achieving potential - due to difficulties at home or disruption of moving to and from refuges.

Indicators of abuse

It is vital that staff are aware of the range of physical and behavioral indicators of abuse and report any concerns to the safeguarding and child protection designated person. It is the responsibility of the childcare setting to report concerns, but that it is not their responsibility to investigate or decide whether a child has been abused.

Indicators could take a number of forms, and individual indicators will rarely, in isolation, provide conclusive evidence of abuse. They will be viewed as part of the picture, and each small piece of information will help the safeguarding and child protection designated person decide how to proceed. The setting does not need absolute proof that the child is at risk to act.

Children who may be particularly vulnerable to abuse

All children should receive equal protection, so providers should be particularly aware of children in the following circumstances who may be particularly vulnerable.

- Looked after
- Disabled or have special educational needs
- Living in a known domestic abuse situation
- Affected by known parental substance misuse
- Asylum seekers
- Living in temporary accommodation or living transient lifestyles
- Living in chaotic, neglectful and unsupportive home situations
- Vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion or
- sexuality
- Do not have English as a first language
- Having a parent with enduring or untreated mental health problems.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child that causes severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed, including interactions that are beyond a child's capability, as well as overprotection and limitation of exploration and learning, or preventing normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children 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.

Signs that may suggest emotional abuse:

- neurotic behaviour, for example hair twisting, rocking
- being unable to play
- fear of making mistakes
- sudden speech disorders
- self-harm
- fear of parent being approached regarding their behaviour
- developmental delay

Physical Abuse

If an adult deliberately hurts a child - causing them physical harm, such as cuts, bruises, broken bones or other injuries - it is physical abuse. It can include hitting, shaking, throwing, poisoning, burning, and slapping.

Effects - The harm caused by physical abuse can range from minor injuries to major trauma. These can include:

- bruising
- burns or scalds
- bite marks
- fractures
- scarring
- poisoning
- drowning or suffocating
- head injuries caused by a blow or by shaking
- fabricated or induced illness.

The experience of being harmed may, also, cause mental health and behavioural problems in a child, such as:

- depression and anxiety
- aggression and violence
- problems with relationships and socialising
- trying to hide injuries under clothing
- running away from home
- being distant and withdrawn.

Physical abuse during childhood can affect a person later in life as an adult, for example, it can cause conditions such as post traumatic stress disorder

Signs - All children have accidents, like bumps and falls, which cause injury. However, you may have reasons for thinking that an injury has been inflicted on purpose if:

- an injury strikes you as odd
- a child is injured repeatedly
- a parent delays seeking treatment
- a parent or child gives unconvincing or inconsistent explanations about an injury.

What injuries are normal for children?

- Bruising on the shins, knees, elbows, and backs of the hands.
- Bruising on children who are crawling or walking (especially older children).
- Bruising on the forehead (for toddlers).
- Scalds from hot liquid spills on the upper body.

What could be abuse?

- Bruising on the cheeks, ears, back, buttocks, palms, arms, tummy, hips, backs of legs, and feet.
- Bruising on babies who are not yet crawling or walking.
- A history of bruising.
- Multiple bruises in clusters, usually on the upper arms or outer thighs.
- Bruises which look like they have been caused by fingers, a hand, or an object.
- Burns of the backs of the hands, feet, legs, genitals, or buttocks.
- Burns which have a clear shape, like a circular cigarette burn.
- Large oval shaped bite marks.

As well as the visible signs of injury, physically abused children may also display signs of that abuse in their behaviour.

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)
- ensure access to appropriate medical care or treatment
- respond to a child's basic emotional needs.

Signs that may suggest neglect:

- constant hunger
- constantly dirty or smelly
- loss of weight or being constantly underweight
- inappropriate clothing for the conditions
- medical assistance not sought when necessary
- mentioning being left alone or unsupervised.

Definitions above adapted from Working Together to Safeguard Children 2018

Where such changes in behaviour occur or where children's play gives cause for concern, the nursery will make observations and appropriate referrals, following the safeguarding steps of action detailed in this policy.

Special Educational Needs and Disabilities (SEND)

We fully understand that abuse can happen to anyone, but deaf and disabled children are over three times likely to be abused or neglected due to various factors some being fewer outside contacts, communication difficulties or impaired capacity to resist or avoid abuse.

Procedure:

Staff working with SEND will be alert to the signs and symptoms of abuse and take into account the added risk factors.

- We ensure all children are assigned with a Key person to ensure the continuity and that relationships are strong.
- We will liaise with our Local SEND.
- Signpost families to other services that will support and help them as appropriate.
- Ensure that health care plans are applied for and in place and reviewed where appropriate.
- If a health plan is in place we will make sure that it is being followed appropriately
- A referral will be made straight away if there are any concerns, in accordance with the LSCB procedures.

Bruising in babies

- Bruising in babies who are not independently mobile is very uncommon. 'Bruising in a baby who is not yet crawling, and therefore has no independent mobility, is very unusual. Those who don't cruise, rarely bruise according to the National Institute for Health and Care Excellence. Due to the significant risk of abusive injury in a non-mobile baby ALL NON-MOBILE BABIES WITH AN INJURY should be referred to the SPA team, even if there is a plausible explanation (For serious injuries/ bleeding refer direct to Emergency Department via 999).
When new babies and children join our setting, when completing their settling in information, we ask parents to record and ask about any birthmarks, Mongolian blue spots, birth trauma marks or skin conditions the baby may have. noting the shape, size and location. If any doubt exists about the nature of a skin mark, the baby's parents/ carers should be requested to seek a medical opinion from their GP. When recording the existence of a benign skin mark we will record this on a 'Bodymap' diagram.

County Lines

The National Crime Agency (NCA) describe county lines as a term used to describe gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of 'deal line.' Customers will live in a different area to where the dealers and networks are based, so drug runners are needed to transport the drugs and collect payment.

Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including schools, further and higher educational institutions, pupil referral units, special educational needs schools, children's homes and care homes.

Signs and indicators to be aware of include:

- Changes in the way young people you might know dress
- Unexplained, sometimes unaffordable new things (e.g. clothes, jewellery, cars etc.)
- Missing from home or schools and/or significant decline in performance
- New friends or relationships with those who don't share any mutual friendships with the victim or anyone else
- May be carrying a weapon
- Receiving more texts or calls than usual
- Sudden influx of cash, clothes or mobile phones
- Unexplained injuries
- Significant changes in emotional well-being
- Young people seen in different cars/taxis driven by unknown adults
- Young people seeming unfamiliar with your community or where they are
- Truancy, exclusion, disengagement from school
- An increase in anti-social behaviour in the community
- Unexplained injuries
- Gang association or isolation from peers or social networks.

Cuckooing

Cuckooing is a form of county lines crime in which drug dealers take over the home of a vulnerable person in order to criminally exploit them as a base for drug dealing, often in multi-occupancy or social housing properties. Signs that this is happening in a family property may be an increase in people entering or leaving the property, an increase in cars or bikes outside the home; windows covered or curtains closed for long periods, family not being seen for extended periods; signs of drug use or an increase in anti-social behaviour at the home. If we recognise any of these signs, we will report our concerns as per our reporting process.

If staff have any concerns regarding county lines/cuckooing they will follow our safeguarding reporting procedures.

Contextual safeguarding-

As young people grow and develop they may be vulnerable to abuse or exploitation from outside their family. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online.

As part of our safeguarding procedures we will work in partnership with parents/carers and other agencies to work together to safeguard children and provide the support around contextual safeguarding concerns.

Child abuse linked to faith or belief (CALFB)

Child abuse linked to faith or belief (CALFB) can happen in families when there is a concept of belief in:

- Witchcraft and spirit possession, demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs)
- The evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context)
- Ritual or multi murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies
- Use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation.

This is not an exhaustive list and there will be other examples where children have been harmed when adults think that their actions have brought bad fortune.

Looked after children

As part of our safeguarding practice we will ensure our staff 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.

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 no cause for concern. Arrival and departure times are recorded and any reasons for child's absences are logged. Key Persons and management are required to monitor to ensure there is no potential link to safeguarding. 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. If the nursery has not been advised we would aim to contact the parent/carer on day 1 of nonattendance. 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.

What to do if you have concerns about a child

You may become concerned or worried about a child's care, behaviour or an injury to a child, but the child may not have said anything to suggest that they have been abused. Every case is individual and decisions to investigate or follow up a concern should be made by MASH or a social worker not by the setting manager or designated safeguarding and child protection person. MASH can be contacted for initial advice and guidance. Refer to the safeguarding processes flowchart.

Steps Of Action:

- in an emergency take action to obtain urgent medical attention for the child, if required, for example, call 999;
- stop other activity, responding to a suspicion of abuse takes immediate priority;
- report any concerns you have to the designated safeguarding and child protection person or deputy immediately, or most senior person if not available. You may contact MASH directly;
- refer to the safeguarding processes flowchart;
- if there is any reason to believe that a child is subject to physical, emotional, sexual abuse or neglect, report these concerns to the MASH team or out of hours Emergency Duty Team; record who you spoke to, any advice given and actions taken; referral forms are available online;
- ask the parent or carer about what has been observed, so long as it does not put the child at increased risk. (see Seeking consent, p11);
- if you decide not to discuss your concerns with the child's parents you should record this and the reason why you made that judgement;
- record exactly what has been heard or seen, what has been said, and was done;
- use a body map to record injuries but do not take photographs;
- keep the notes taken at the time, without amendments, omissions or addition, even though subsequent reports may be written (date and sign each page);
- providers should operate on a need-to-know basis only. We abide by the confidentiality policy and do not discuss the issue with colleagues, friends or family.

What to do if a child discloses abuse

It often takes a great deal of courage for a child to talk to anyone about their abuse. Children learn to be very good at covering up abuse and give plausible explanations for what happened. Children may have to betray a person who is close to them, who they may love, or who has power over them. A child who discloses may risk a great deal by hoping that you will believe what they say.

We will:

- ensure the immediate safety of the child
- stop other activity and focus on what the child is saying, responding to a suspicion of abuse takes immediate priority

- seek any necessary medical treatment without delay
- stay calm and do not express shock or disbelief
- listen carefully to what is being said, allow the child to continue at their own pace. Ensure questions are absolutely minimal and completely open, for example "How did that happen?"
- repeat back to the child (as accurately as possible) what you heard, to check your understanding of what the child has told you
- tell the child they are not to blame, it's not their fault and they have done the right thing in telling you
- not promise to keep secrets - find an appropriate early opportunity to explain it will be necessary to tell someone else in order to help them and keep them safe
- ask the child if they have told anyone else
- tell the child what you will do next and with whom the information will be shared
- inform the designated safeguarding and child protection person and/or your senior manager as soon as possible
- ask the parent or carer about what has been disclosed, so long as it does not put the child at increased risk (see Seeking consent)
- as soon as possible, record in writing what was said, using the child's own words. Note the date, time and names mentioned, to whom the information was given and ensure that all records are signed and dated
- note anything the parent or carer tells you
- the designated person will follow the setting's child protection procedures and contact MASH.

Seeking consent

In most cases we would seek to discuss any concerns with the child's parents or carers and where possible, seek their agreement to make a referral to MASH, there are cases where we must not discuss concerns with them before making a referral.

Concerns must not be discussed with parents or carers before referral in the following circumstances:

- where discussion would put a child at risk of significant harm
- where discussion would impede a police investigation or social work enquiry
- where sexual abuse is suspected
- where female genital mutilation (FGM) is suspected to have been carried out or planned;
- where organised or multiple abuse is suspected
- where factitious illness or induced illness is suspected
- where to contact parents/carers would place you or others at risk
- where it is not possible to contact parents or carers without causing undue delay in making the referral, advice should be sought from MASH.

A decision by any professional not to seek parental permission before making a referral to MASH must be recorded, and the reasons give.

Managing allegations and concerns against staff and volunteers

Any concerns that arise which call into question a person's suitability to work with children should be managed according to the following procedures. An allegation of child abuse made against a member of staff (within the work environment or outside of work) or other adult in contact with children in the setting may come from a parent, another member of staff or from a child's disclosure. The allegation or concern may relate to a person who has:

- behaved in a way that has harmed or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates they may pose a risk of harm to children, or that indicates he/she is unsuitable to work with children.

We will:

- Treat the matter seriously;
- Remove the adult from the situation (if applicable)
- Seek any necessary medical treatment for the child without delay;
- The LADO will be informed immediately for advice and guidance. Ofsted will be informed. MASH will be advised if necessary.
- If as an individual you feel this will not be taken seriously or are worried about the allegation getting back to the person in question then it is your duty to inform the LADO yourself directly
- Do not attempt to investigate the matter by interviewing any potential child witnesses or the accused person but simply record the facts and information presented to them; A full investigation will be carried out by the appropriate professionals (LADO, Ofsted, LSCB) to determine how this will be handled
- The nursery will follow all instructions from the LADO, Ofsted, LSCB and ask all staff members to do the same and co-operate where required
- Support will be provided to all those involved in an allegation throughout the external investigation in line with LADO support and advice. If no contact can be made with the LADO, then we will follow steps set out in our nurseries procedures where we have the right to relieve a staff member of all duties away for the children.
- The nursery also reserves the right to suspend any member of staff pending or during an investigation.
- 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 reinstated
- 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 21 years and 3 months if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary reinvestigation
- The nursery retains the right to dismiss any member of staff in connection with founded allegations following an inquiry
- Counselling will be available for any member of the nursery who is affected by an allegation, their colleagues in the nursery and the parents.

If an adult tenders their resignation this must not prevent an allegation being followed up, a formal conclusion reached and action taken.

Parents or carers of a child involved should be informed of the allegation as soon as possible, providing provision of information and advice at that stage does not impede the enquiry, disciplinary or investigative processes. However, parents or carers may need to be told immediately, for example, if a child requires medical treatment.

Record keeping

- It is essential that clear and concise records are kept.
- Record the incident and include all relevant details on our Safeguarding Incident Report Form.
- Start a chronology at the earliest opportunity to ensure all contacts are recorded and logged.
- A chronology must list specific and significant incidents, events and actions taken in relation to the child and, where appropriate, their family, with a brief explanation or cross-referenced to where the records can be found.
- All records must be dated and signed to ensure they can be attributed to the person completing them.
- Records must be written as soon as reasonably possible following any incident taking place.
- The incident, event, or observation should be described clearly and concisely, physical marks or injuries should be recorded on a body map where appropriate.
- Records should contain any comments made by the child, adult in their own words.
- Records must make a clear distinction between what is factual information and what are personal comments or thoughts.

- Record any advice given and actions taken.
- In the case of an allegation against a member of staff, a summary should be kept on the member of staff's file and the staff member should be provided with a copy.
- For related criminal or civil proceedings, records may be subject to disclosure.
- Records must be kept for an appropriate length of time.

All records and notes should be kept securely at all times. If records are kept electronically these must also be kept securely and password protected. Access should be restricted to appropriate members of staff.

Useful Numbers

Police: 999 in an emergency or 101 for everything else

MASH - 0208 921 3172

Out of hours duty social worker: 0208 854 8888

LADO - 0208 921 3930

Ofsted: 0300 123 1231

Designated Safeguarding Lead

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), there is always at least one designated person on duty during the opening hours of the setting. The 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's liaise with 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 of the staff team with regular safeguarding updates.

The Designated Safeguarding Leads (DSL) at the nursery are: **Zoe Reed, Sophie De Maertelaere, Channele Corbin, Molly Donovan, Jemma Armstrong, Lisa Carter.**

The role of the Designated Safeguarding Lead:

Ensure that the settings safeguarding policy and procedures are reviewed and developed in line with current guidance; and develop staff understanding of the settings safeguarding policies

- Take the lead on responding to information from the staff team relating to child protection concerns
- Provide advice, support and guidance on an on-going basis to staff, students and volunteers.
- To identify children who may need early help or who are at risk of abuse

- To help staff to ensure the right support is provided to families
- To liaise with the local authority and other agencies with regard to child protection concerns
- Ensure the setting is meeting the requirements of the EYFS statutory requirements
- To ensure policies are in line with the local safeguarding procedures and details
- Disseminate updates to legislation to ensure all staff are kept up to date with safeguarding practices
- To manage and monitor accidents, incidents and existing injuries; ensuring accurate and appropriate records are kept
- Attend case conferences and external safeguarding meetings, as requested, by external agencies.

Online Safety Policy

Our nursery is 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, staff and families in using the internet safely.

Keeping Children Safe in Education states "The breadth of issues classified within online safety is considerable,

but can be categorised into three areas of risk:

- content: being exposed to illegal, inappropriate or harmful material;
- contact: being subjected to harmful online interaction with other users; and
- conduct: personal online behaviour that increases the likelihood of, or causes, harm."

The Designated Safeguarding Lead is ultimately responsible for online safety concerns.

All concerns need to be raised as soon as possible to Zoe Reed

Within the nursery we aim to keep children (and staff) safe online by:

- Ensuring we have appropriate antivirus and anti-spyware software on all devices and update them regularly
- Ensuring content blockers and filters are on all our devices, e.g. computers, laptops and any mobile

devices

- Keeping passwords safe and secure, not sharing or writing these down. These will be changed at least every term to keep the devices secure
- Ensure management monitor all internet activities in the setting
- Locking away all nursery devices at the end of the day
- Ensuring no social media or messaging apps are installed on nursery devices
- Management reviewing all apps or games downloaded to tablets to ensure all are age appropriate for children and safeguard the children and staff
- Using approved devices to record/photograph in the setting
- Never emailing personal or financial information
- Reporting emails with inappropriate content to the internet watch foundation (IWF www.iwf.org.uk)
- Ensuring children are supervised when using internet devices
- Using tracking software to monitor suitability of internet usage (for older children)
- Not permitting staff or visitors access to the nursery Wi-Fi
- Integrating online 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 'friends'

- When using Skype and FaceTime (where applicable) discussing with the children what they would do if

someone they did not know tried to contact them

- We abide by an acceptable use policy; ensuring staff only use the work IT equipment for matters

relating to the children and their education and care. No personal use will be tolerated

- Under no circumstances should any member of staff, either at work or in any other place, make, deliberately download, possess, or distribute material they know to be illegal, for example child sexual abuse material
- 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

- The nursery is aware of the need to manage our digital reputation, including the appropriateness of

information and content that we post online, both professionally and personally. This is continually monitored by the setting's management.

All electronic communications between staff and parents should be professional and take place via the official nursery communication channels, e.g. the setting's email addresses and telephone numbers. This is to protect staff, children and parents.

If any concerns arise relating to online safety then we will follow our safeguarding policy and report all online safety concerns to the DSL.

The DSL will make sure that:

- All staff know how to report a problem and when to escalate a concern, including the process

for external referral if they feel it is needed

- All concerns are logged, assessed and actioned upon using the Nursery's Safeguarding procedure

- Parents are offered support to help them talk about online safety with their children using appropriate resources

- Parents are signposted to appropriate sources of support regarding online safety at home and are fully supported to understand how to report an online safety concern.

Mobile Phone & Camera Usage and Internet Safety (E-Safety)

Staff are not permitted to have mobile phones in the nursery rooms and should NEVER take photographs or videos of children at any time using their mobile phone or any other personal device. Any staff member found to have their phone on them whilst in the rooms with children will face immediate disciplinary action.

It is the policy of Brightsparks Day Nursery that staff do not keep mobile phones on their person during working hours. Staff must keep their mobile phone(s) in the lockable cabinet in the office, not in their bags, and are free to access them during their scheduled break. It is prohibited for staff to have mobile phones/smart watches or any device that take photos, in the children's rooms. This is for both the protection of staff and children alike. It is also not permitted for staff to take photographs of the children using their mobile phone. In line with the 'right to search' policy staff may be asked to show that they do not have a mobile phone on their person at the discretion of the manager. Staff must not collect anyone else's mobile phone from the cabinet. Staff should ensure that phones are turned off or on silent at all times whilst on premises.

The nursery tablets must be locked away at the end of the day in the lockable cabinet in the office. We advise staff not to bring in their own personal cameras but if they do they must be locked away in the nursery office and must not be used to take photo's of the children at the nursery.

Visitors (excluding parents) should be asked to leave any phones fitted with a camera or any other photo taking devise, into the nursery office where it will be stored in the lockable cabinet for the duration of the visit, this is to protect the children in our care. Parents and look arounds are reminded via signs and posters not to use their mobile phones whilst in the setting.

We promote the safety and welfare of all staff and children and therefore ask parents and visitors not to post, publicly or privately, information about any child on social media sites such as Facebook and Twitter. We ask all parents and visitors to follow this policy to ensure that information about children, images and information do not fall into the wrong hands.

When out on out on outings, the senior member of staff will be equipped with a nursery mobile phone. This phone must only be used in case of an emergency and only when it is safe for the member of staff to do so.

We will take photographs of the children at the nursery if permission has been given, using the designated nursery cameras only. Photos taken off the children which are used for social networking sites and our website, have already had permission from carers/parents. The pictures will be printed off from the nursery printer and deleted regularly.

Internet use

The internet is an incredible resource for children to access, but it can also be a very dangerous place for them. They can be exposed to inappropriate material, harassment and bullying, viruses and hackers and be conned into giving away financial information. They can also be vulnerable to online grooming by pedophiles'. At the nursery the younger children are able to use the computer with age appropriate games and learning tools with adult supervision and we have introduced a range of

procedures to ensure their safety.

- There is a filter on all computers that block out most inappropriate material
- Children are not allowed to go into chat rooms and staff will talk to the children about what sites they are using.
- The history on the all the computers and staff tablets are checked on a weekly basis.
 - The photos taken on the tablets for staff observations are checked on a weekly basis.
- When using the tablets the children do not know the password and do not have access to the internet.

Staff are also aware of the need to limit the time children spend on computers and will develop strategies to ensure that they spend a balance of time engaged in ICT and other activities.

Whistleblowing Policy

Responsible Person: Zoe Reed & Helen Elliott

Whistleblowing is the term used when a member of staff at Brightsparks wishes to raise a concern about malpractice within the organisation. For example:

- Staff and volunteers should be able to share concerns they have about another staff member or volunteer in confidence. This includes managerial staff.
- All staff have a duty to report any concerns they may have about the nursery environment, for example that there are potential hazards putting the children and staff at risk.
- All staff have a duty to report poor practice within the nursery which is affecting the children's safety and well being.
- It is important that any concerns regarding the welfare of a child arising from the suspected abuse, harassment or bullying by a member of staff or volunteer should be reported immediately.

Whistleblowing is different from a complaint or a grievance. It only applies when you have no vested interest and you are acting as a witness to misconduct or malpractice that you have observed.

What To Do:

- Normally, you should first raise your concern internally, for example with your safeguarding/ Child Protection officer/manager. If you feel unable to do this (perhaps because your concern relates to them), you should raise your concern with the proprietor of the setting. This policy provides options for you to raise your concern outside the management line and/or to escalate a concern that has been raised through your immediate superior or nominated person.
- If you are worried at any stage about how to raise your concern, you should always seek independent advice at the earliest opportunity. This may be to check who may be best placed to deal with your concern or simply to talk the matter through in confidence first and discuss how to raise your concern. You can do this through your union or professional body or the independent whistleblowing charity Public Concern at Work (PCaW) on 0207 404 6609; or by email at helpline@pcaw.co.uk. For further information please see their website at www.pcaw.co.uk. If you decide to seek advice from a legal advisor, then anything you say to them is automatically protected.
- If you have raised your concern internally but feel it has not been properly addressed, or if you feel unable to raise your concern at any level within your organisation, you may feel that you need to raise your concern outside your place of work.
- If you have tried and been dissatisfied with the results after reporting your concern to your manager or responsible person you can call Ofsted's dedicated Whistleblowing Hotline (0300 123 3155). It is staffed from 8am to 6pm, Monday to Friday. You can also email the Ofsted whistleblowing team (whistleblowing@ofsted.gov.uk) or send your concerns by post to:

Ofsted
Piccadilly Gate
Store Street
Manchester
M1 2WD

- Ofsted will then decide how best to deal with your concerns. If they agree that your concerns count as whistleblowing, they will pass the matter on to the Ofsted whistleblowing team.
- Ofsted will try and give you as much feedback as they can, on how they are dealing with your concerns. However due to the legal duties they may owe to others, for example duties of confidentiality, they may owe to those at risk or to someone accused of malpractice. What they can tell you may be limited.
- If you have asked Ofsted not to reveal your identity, they will do their best to respect your wishes. However, if there are children involved who are in immediate danger of harm, they may not be able to do this

Reviewed September 2022