

Potter's House Preschool

Safeguarding and Child Protection Policy

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Introduction

The Safeguarding Lead will take all reasonable steps to keep children safe and well and ensure the suitability of adults who have contact with them. The Safeguarding Lead is responsible for the care of children and their families and will listen and keep private any issues or concerns that parents may wish to discuss. However, they have to inform the appropriate agencies if concerned about the care or welfare of a child in their care.

The setting will maintain a safe and secure environment, promote good health, manage behaviour, maintain records and adhere to the settings policies and procedures. The settings child protection procedures apply to all persons at the premises. The Safeguarding Lead and all staff have a legal duty to report any concerns regarding a child's health and /or development, concerns regarding child abuse or neglect or any suspicious incidents as well as accidents to the Safeguarding Children Board.

All staff will be alert to any issues for concern in the child's life at home, whilst attending the setting or elsewhere. All action will be taken in line with the following local and national legislation/guidance:

• The Safeguarding Children Board Procedures and the current ISA Registration Process.

• The Statutory Framework for the Early Years Foundation Stage – Safeguarding and Welfare Requirements 2014

- The Children Act 1989, 2004 and 2006
- "Working Together to Safeguard Children" 2015
- "What to Do If You're Worried a Child is Being Abused" 2015
- Local Safeguarding Children Board guidance.

The Safeguarding Lead will attend regular and relevant training to enable them to fulfil this role and all staff working at the setting will receive child protection training which will enable them to identify and respond appropriately to signs of possible abuse and neglect at the earliest opportunity. Everyone has the right to make a referral to Children's Services if they are worried about a child. The Safeguarding Lead advises parents of this and about safeguarding responsibilities at the setting in the welcome pack given to them during their child's settling in period.

The staff working at the setting and all adults visiting the premises regularly will hold an up to date Disclosure and Barring Service certificate and be signed up to the update service.

The staff working at the setting will hold a current paediatric first aid certificate which will be renewed every three years.

The DSL (Designated Safeguarding Lead) is responsible for:

- Ensuring that a child's absence is recorded
- Ensure that parents understand their responsibility to inform us when a child will be absent and to state the reason why.

• Responding without delay when a person informs them of a concern / allegation or if they themselves have a concern

• Listening carefully, using non-judgemental questions when discussing what has happened with the informing person and/or when investigating the concern. Information gathered should only be sufficient to confirm the need for referral to child services.

• Recording immediately and verbatim what has been disclosed

• Deciding whether to respond to the issue raised as a minor concern, (incident) or serious allegation

• Making an informed decision to undertake observations to identify possible changes in a child's behaviour and recording any signs and symptoms that are cause for concern. In the event that we have reason to believe that a child is at risk of significant harm or abuse referral to local child services or police should be made without delay.

• Seeking appropriate advice from the relevant local childcare services. In this instance the Multi Agency Safeguarding Hub, (known as, the MASH team), will be contacted in the event that the DSL requires advice about, the next steps or appropriateness of approaching the child's parents about the concern

• In the event that a child discloses physical or sexual abuse, where the alleged abuser is either a family member or someone resident within the household, the Safeguarding team will be consulted before informing parents.

• If the child is already subject to a Child Protection Plan the allocated Social Worker will be contacted, they will advise when, and by whom, the parents will be informed

• Follow up the initial telephone referral by emailing MASH a completed a MultiAgency Referral Form. Blank forms may be downloaded from website of the Local Safeguarding Children's Board, (LSCB).

• In the event of an emergency, telephone 999 and contact the police. The DSL and any staff working at the setting will follow the advice and guidance given by the police to ensure the safety and well-being of all persons at the premises.



Support

Hearing a disclosure can be very disturbing or upsetting for everyone involved and you may need to check you have given the right information and support to an individual. You may also need to arrange a debrief with any of your assistant(s) who may be involved.

It's important that you consider what support mechanisms you have in place to help and support you. For example, do you have contact numbers for:

- Children's Social Care Services
- · Early Years Teams
- Local Authority Designated Officer (LADO)
- · Ofsted
- · Local Childminding Associations
- · PACEY (Professional Association for Childcare and Early Years)
- · NSPCC
- Samaritans
- · Counselling Services

Parents:

What is a LADO?

The LADO gives advice and guidance to employers and others who are concerned about an adult who works with children including volunteers and agency staff.

Allegations need to be referred to the team within 24 hours of the allegation being made. no investigation should take place until the LADO has been contacted. An allegation may relate to a person who works with children who has:

- Behaved in a way that has harmed a child, or may have harmed a child
- Possibly committed a criminal offence against or related to a child
- Behaved towards a child or children in a way that indicates they may pose a risk of harm to children

Your Local Authority Designated Officer (LADO) is there to support you and us in the event of any safeguarding issue.

LADO contact Lindsey Tunbridge-Adams 03302223339 Lindsey.Tunbridge-Adams@westsussex.gov.uk

A hard copy of the settings policies are available at the premises at all times and are available to view on the settings website.

This policy will be reviewed on an annual basis and updated where appropriate, however if a weakness is identified in the setting's procedures the policy will be reviewed and revised immediately. It is open to inspection by Ofsted and any recommendations they make will be undertaken by the Designated Safeguarding Lead.

Absence Policy:

All parents and carers should report absences to us as soon as possible before the child is due to attend. You can do this by texting me on 07375379148/ 07981843238

If a child has not turned up and we have not been informed of an absence, we will contact the parents/carers as soon as possible, usually within 15 minutes of registration. If we do not get any reply within 1 hour we will contact the other emergency contacts. If we are not able to establish the whereabouts of the child within 4 hours we will contact the local police station to find out the whereabouts of the child.

Definitions of Child Abuse

Abuse and Neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children maybe abused or neglected in a family or in an institutional or community setting by those known to them or more rarely by others (e.g. via the internet). They may be abused by an adult or adults or by another child or children. For the purpose of this policy the child abuse definitions from the, *'Working Together to Safeguard Children – Department of Education (2014)* have been used.

Physical abuse: Physical abuse is actual or physical injury to a child or when a person fabricates, or induces, the symptoms of an illness in a child. Physical abuse can involve, hitting or using excessive force, shaking, throwing, poisoning, burning, drowning, slapping or suffocating. A higher risk of suffering from this type of abuse is found in babies and disabled children.

Sexual abuse: Sexual abuse is when a child is forced or enticed to take part in any form of sexual activity. It does not necessarily involve violence and the child may or may not be aware of what is happening to them.

Sexual abuse can occur at the hands of adult men, women and other children and includes:

• Non-contact abuse; (grooming); a child either personally or through the internet with the intention of sexually abusing them

- All forms of penetrative and non-penetrative sex.
- Sexually exploiting a child in return for gifts; money or affection.

• Making, looking at and distributing indecent images of a child. Neglect: Neglect is when there is persistent failure to meet a child's basic physical and/or psychological needs resulting in serious impairment to their health and development. Neglect may involve a failure to:

- Provide a child with adequate nutrition, appropriate clothing and a clean, safe place to live
- Protect a child from physical or emotional harm or danger
- Ensure a child is adequately supervised
- Ensure a child has access to appropriate medical care or treatment.
- Be responsive to or unable to support /provide the basic emotional needs of the child

Female Genital Mutilation – All settings must be training on this. Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and a criminal offence. Regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under 18s to the police (<u>Home Office, 2016</u>).

If you are worried about anyone with regards to this, please call the helpline on 0800 028 3550.

Reporting Requirements for FGM:

Regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under 18s to the police (<u>Home Office, 2016</u>).

If you think a child is in immediate danger please can the police on 999 straight away.

Sexual Exploitation: Child sexual exploitation is a form of child sexual abuse. Sexual abuse may involve physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet).

The definition of child sexual exploitation is as follows: Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Neglect: Neglect can occur when a parent is no longer capable, (physically or mentally), of caring for their child or when substance misuse occurs in pregnancy.

Emotional abuse: Emotional abuse is described as either active or passive. Active emotional abuse involves a parent / primary carer/ other person deliberately trying to scare, humiliate or verbally abuse a child. Passive emotional abuse is when a parent / primary carer /other person fail's to provide a child with the love and care they need in order to be healthy and happy.

Emotional abuse that occurs persistently and over time severely impacts a child's emotional development. A person may;

- Be unable / unavailable to give a child appropriate love and care
- Fail to offer praise and encouragement
- Fail to interact with a child in an age appropriate way
- Be over protective, limiting their opportunities to explore, learn and make friends

- Expect a child to meet the person's own emotional needs
- Fail to give a child the opportunity to express their views
- Isolate, silence or corrupt a child
- Have a general negative attitude toward a child

• Bully a child (including cyber-bullying) Although emotional abuse can occur singularly it can also be used at some level in all types of abuse.

Category of Abuse	Common Signs/Symptoms Physical	
Physical	 Children with frequent injuries 	
	• Children with bruises, cuts, scalds or bite marks that cannot be explained	
	• Injuries (that are not accidental) to soft tissue areas that would not usually occur from accidentally falling over, such as – bruising to the backs of knees, eye sockets, wrists, upper buttocks and combinations of new and older bruises	
	• Broken bones or fractures that cannot be explained e.g. spiral fractures of the lower legs and upper arms. These types of injuries may indicate abuse as they suggest that the limb has been twisted with force as opposed to the type of fracture expected from accidentally falling over	
	• Behaviour which is unusual, such as frozen awareness, seen as	
	fixed staring, arching of the back and hand splaying in small babies	
Sexual	 Frequent or unusual instances of bed wetting or soiling of clothes Frequent kidney and urinary infections 	
	 Sexually transmitted infections 	
	• Thrush, soreness in the genital and anal areas – these may be noticed when changing nappies or assisting a child with going to the toilet	
	 Fear of physical contact with a particular person 	
	 Being over friendly with strangers 	
	 The inappropriate use of sexual language or unexpected knowledge for the age of the child 	
	• Changes in moods and personality that are not usual for the child	
	• Regression in common areas, e.g. toilet training, sleeping, eating and speech. These may be a sign of sexual abuse but these can	
	also happen during normal child development	
	 Asking others to engage in sexual games or play 	

	a low colf actoom /look of confidence	
	Low self-esteem/lack of confidence	
	• Lying	
	Stealing	
Emotional	Reduced growth in height	
	 Sudden speech problems/disorders 	
	Lack of confidence	
	 Neurotic behaviours, e.g. self-harm, rocking, thumb sucking 	
	 Behavioural and emotional issues, such as anger problems, 	
	immaturity, passivity.	
Neglect	Immunisations not up to date	
0	• Significantly underweight although when observed eats well	
	• Untreated and frequent nappy rash	
	• Lots of accidental injuries – explanations given may indicate a	
	lack of supervision	
	Disassociation – frozen awareness	
	Frequently tired due to lack of routine	
	Lack of parental support and interest in behaviour of child	
	 Poor attendance and often late 	
	 Under weight and height by 2+ percentiles 	
	Emaciated	
	 Often appears to be hungry – possible signs of malnourishment e.g. hair falling out. 	
FGM	Have difficulty walking, standing or sitting	
	 Spend longer in the bathroom or toilet 	
	 Appear withdrawn, anxious or depressed Have unusual behaviour after an absence from school 	
	Be reluctant to undergo normal medical examinations Ash for hole but exchanges of about the machine	
	Ask for help but embarrassed about the problem A family emprised based based by the problem	
	• A family arranging a long break abroad	
	• Unexpected, repeated or prolonged absence from school	
	Academic work suffering	
Sexual Exploitation	• Acquisition of money, clothes, mobile phones etc without	
	plausible explanation;	
	• Gang-association and/or isolation from peers/social networks;	
	• Exclusion or unexplained absences from school, college or work;	
	• Leaving home/care without explanation and persistently going	
	missing or returning late;	
	• Excessive receipt of texts/phone calls;	
	 Returning home under the influence of drugs/alcohol; 	
	Inappropriate sexualised behaviour for age/sexually transmitted	
	infections;	
	• Evidence of/suspicions of physical or sexual assault;	
	• Relationships with controlling or significantly older individuals or	
	groups;	
	 Multiple callers (unknown adults or peers); 	

 Frequenting areas known for sex work; Concerning use of internet or other social media; Increasing secretiveness around behaviours; and Self-harm or significant changes in emotional well-being 	ing.
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<u>https://www.qov.uk/qovernment/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2</u>

Other forms of abuse that we are trained to spot are; Domestic abuse, private fostering, fabricated illness, gender-based violence, faith-based abuse, child trafficking, slavery, gang violence, forced marriage, ritual abuse, honour-based violence, hate crimes, breast ironing and sexting.

THE PREVENT DUTY From 1 July 2015 all childcare settings must comply with The Prevent of Duty to help protect children from extremism. We have responsibility to protect children under section 26 of the Counter-Terrorism and Security Act 2015.

The new common inspection framework makes reference to providers promoting children's welfare and preventing radicalisation and extremism. The government has defined extremism in the Prevent Strategy as: "vocal or active opposition to fundamental British Values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs."

Indicators that may suggest a child's vulnerability to violent extremism include:

- Expressed opinions supporting violence, terrorism or the values of extremist organisations
- Possession of extremist literature including that on weapons, explosives or military training, attempts to access extremist websites/ chatrooms,
- Behaviour or behavioural changes such as withdrawal from family life and peers, hostility towards family and peers, association with organisations that hold extremist views
- Personal history- claims or evidence of involvement in organisations voicing violent extremist ideology or attendance of military/ terrorist training

The purpose of the PREVENT Strategy is:

- To stop people becoming terrorists or supporting violent extremism in all its forms.
- To safeguard children and adults and provide early intervention to protect and divert people away from being drawn into extremism or terrorist activity.
- To provide people with appropriate advice and support.

The setting will:

• Understand own role and responsibilities on how to protect children from extremism by promoting inclusion and Fundamental British Values in the setting.

• Be alert to any reason for concern in the child's life at home or elsewhere that they are being exposed to extremism.

• Understand how to identify children at risk and when to take action after identifying a child at risk e.g. a change in children's behaviour or unexplained/ irregular attendance at the setting.

To undertake training that provides them with the knowledge to identify children at risk.

• Be responsible for observing and recording children's attendance in the setting with an Attendance book

• Be vigilant and inform the necessary agencies if they suspect a child/ children are being exposed to extremism. For advice or reporting of concerns- Customer First: 0800 800 4005,101

• Promote and embed inclusion and Fundamental British Values within the setting as a toolkit for anti-radicalisation.

• Implement the EYFS so that children are taught a broad and balanced curriculum to ensure they 'understand the world' and learn about 'similarities and differences between themselves and others, and among families, communities and traditions' (www.foundationyears.org.uk/2015/03/fundamental-british-values-in-the-earlyyears/



Whistle Blowing:

If anyone at the setting has any concern about a child's safety in the setting or a situation they feel should be reported they are legally obliged to do this. They MUST call the relevant authorities; Ofsted, LA, Police without delay. Keep written records of procedures followed.

This may mean the setting is reinspect or investigated by the LASB (Local Authority Safeguarding Board).

Reporting an allegation against us.

Allegations about professionals refers to allegations that a person in the course of their work, (including volunteering), with children has behaved in a way that has harmed or may have harmed a child. All such allegations should be referred to the Local Authority Designated Officer, (LADO) without delay. The DSL may seek advice and assistance from a solicitor or Citizens Advice Bureau in the event that an allegation is made against them.

Procedure during the investigation:

• The DSL will meet with parents to explain the situation and action taken by the setting and undertake to keep parents informed of any factors affecting the agreed childcare arrangements of children attending the setting.

• The DSL will act upon any advice or instruction given by relevant agencies to ensure that any investigation is not jeopardised.

• The DSL will work closely with other agencies in implementing the actions of a child protection plan designed to support and protect the child.

• The DSL may temporarily close the setting whilst an investigation is ongoing in the event that the practitioner at the setting is the subject of the and the adult: child ratios of the setting cannot be met.

• Ensure that Ofsted are advised of the action taken in respect of the allegation as soon as is practicable and at the latest within 14 days of the allegation being made. And ensure that any action requested by Ofsted is taken in order to comply with the requirements of the registration of the setting.

• The DSL will keep a record of any decisions made and the reasons for making them.

After the investigation is completed:

• Review, amend and implement any appropriate changes to the settings polices and risk assessments if issues are identified during the investigation of the allegation, to ensure that the policies and risk assessments are fit for purpose.

• Ensure that the parents of the children attending the setting are advised of any revisions to working practice that affects their agreed childcare arrangements.

• DSL will review their training needs and will undertake training where a need is identified.

• The DSL has a statutory duty to inform OFSTED and the Local Authority, (if they are not already involved), if they cease work due to a child protection issue.

• The DSL has a statutory duty to inform OFSTED and the Local Authority, (if they are not already involved), if at the end of the investigation a volunteer is removed from the setting or where an adult resident at the premises is being investigated for allegedly causing harm or posing a risk of harm to children at the setting.

Child Protection Records:

• Child protection records must be held separately for a child's personal file.

• DSL will ensure that the records are kept securely in the office and that any sharing of information held in these records is with the consent of parents if appropriate

• Written records of concerns about children will be kept, even where there is no need to make a referral immediately.

• A chronology should be kept at the front of each individual child protection file.

• The record should be regularly reviewed and updated whenever a new concern is raised or additional relevant information becomes available, noting any action taken.

Parents: In the event of an allegation or complaint regarding safeguarding (or any other regarding their child's childcare) against a caregiver, parents can contact their LADO.

Existing Injuries

If children arrive at the setting with an injury it must be reported to us by whoever is bringing the child in so that we can make a record of this which you must sign.

Peer on peer abuse

If we are concerned that a child is being abused or coerced into doing something they don't want to do by another child for example; smoking, drinking alcohol, taking drugs, being exposed to radicalisation or extremism, online pornography, over 18 video games and films etc. then we shall report to social services.

Discrimination and anti-discriminatory practise

We record any discriminatory incidents including racist comments made by children or parents.

Personal Care routine

Please be aware that we may help children with eating, drinking or toileting, washing and dressing because of age, disability or illness. Where possible we encourage children to be independent as early as possible and would like this to be supported at home.

Children not collected

If you have not collected your child we will do the following whilst still taking care of your child.

Timeframe	Who we will call
10 minutes	Call you
20 minutes	Call 2 emergency contacts
30 minutes	Call social services

We will make every attempt to call you with any numbers you have provided before calling social services.

Leaving with the wrong person

We ask that you write on the child record forms anyone who will regularly collect your child. If another person from the person specified arrives to collect we will not allow your child to leave with them unless we have spoken to someone with parental responsibility first or they have provided us with the password specified on the child's form.

Missing Child:

A missing child is described as:

• One whose whereabouts cannot be established and where the circumstances are out of character or context An absent child is described as:

• One who is not at a place where they are expected to be but there is no apparent risk.

Absent children should be monitored over periods of time with consideration given to a child being described as missing if there is a change in circumstances where the level of risk has increased.

A missing child maybe an indicator of:

- Problems at home/ family conflict
- Abuse or neglect
- Mental health problems, bullying
- Peer pressure
- Sexual exploitation/trafficking
- Female Genital Mutilation

If a child fails to attend the setting without explanation and where the parents/ emergency contacts do not contact us or cannot be contacted, we will seek advice and act on their instructions from:

- Children and Young People's Services: 01243 642200
- Out of Hours Emergency Duty Service: 03302226664/ 07711769657

Minor Concerns (incidences) Incidences, (that are not defined as allegations of serious harm or abuse), are minor concerns or welfare issues that require clarification of understanding, changes to a child's childcare arrangements or review of working practice. When incidence occurs, we will accurately record any conversation / action taken or in the Accident, Incident and Medicine folder.

In the Event of an Allegation of Serious Harm or Abuse we will:

Listen – Record – Report – Follow up

• Ensure that they (and any other practitioner working at the setting), keep, all handwritten/typed records of any verbal conversations (which should be recorded verbatim), submitted documents/letters, communication with relevant agencies or professionals, action taken and the parents responses to action taken during the investigation period.

• All records should be dated and signed and detail where the information was disclosed and who was present.

• Not promise confidentiality when questioning the child/ person disclosing the allegation but will offer appropriate reassurance, that their concern has been taken seriously and will be investigated

• Explain to parents the DSL is referring a concern providing that, the DSL is satisfied that to discuss the referral the referral with the parents will not put the child at increased risk of significant harm.

• Obtain consent from parents to share information where appropriate.

• Ensure that when making a referral they are speaking to the appropriate person and only give relevant information

• Follow the statutory guidance to notify agencies with statutory responsibilities without delay, of any serious concerns relating to the safety or welfare of children attending the setting

• Inform Ofsted who is responsible for ensuring that the setting adheres to the requirements of registration which includes safeguarding measures procedures. We will follow any advice given regarding action to be taken in order to safeguard the safety and welfare of the children attending the premises. Child protection records:

• Child protection records must be held separately from a child's personal file.

The DSL will ensure that the records are kept securely in the office and that any sharing of information held in these records is with the consent of parents if appropriate.

• Written records of concerns about children will be kept, even where there is no need to make a referral immediately.

• A chronology should be kept at the front of each individual child protection file.

• The record should be regularly reviewed and updated whenever a new concern is raised or additional relevant information becomes available, noting any action taken. Transfer and retention of child protection records:

• Where a child transfers to school or to a new setting, copies of child protection documentation must be passed within 14 days, in confidence to the receiving school/setting and that they are sent separately from any personal file information.

• The DSL must ensure that the documents are received by the new setting/schools SLP.

• The DSL should arrange a meeting at the new school / setting to hand over the documentation to the receiving DSL.

• In the event that it is not possible to meet in person the documents should be securely sent to the new DSL and telephone contact made to complete the hand over, (and having confirmed the identity of the person receiving the telephone call).

• Records will be retained in line with the Local Authorities guidance on the Transfer and Retention of Child Protection Records. Professional Safety: An allegation about professionals refers to allegations that a person in the course of their work with children has behaved in a way that has harmed or may have harmed a child. All such allegations should be referred to the Local Authority Designated Officer, (LADO) without delay. The DSL may seek advice and assistance from a solicitor or Citizens Advice Bureau in the event that an allegation is made against them. Procedure during the investigation:

• The DSL will meet with parents to explain the situation and action taken by us and undertake to keep parents informed of any factors affecting the agreed childcare arrangements of children attending the setting.

• The DSL will act upon any advice or instruction given by relevant agencies to ensure that any investigation is not jeopardised.

• The DSL will work closely with other agencies in implementing the actions of a child protection plan designed to support and protect the child.

• The SETTING may temporarily close the setting whilst an investigation is ongoing in the event that the setting is the subject of the investigation or the adult: child ratios of the setting cannot be met.

• Ensure that Ofsted are advised of the action taken in respect of the allegation as soon as is practicable and at the latest within 14 days of the allegation being made. And ensure that any action requested by Ofsted is taken in order to comply with the requirements of the registration of the setting.

• DSL will keep a record any decisions made and the reasons for making them.

After the investigation is completed:

• Review, amend and implement any appropriate changes to the settings polices and risk assessments if issues are identified during the investigation of the allegation, to ensure that the policies and risk assessments are fit for purpose.

• Ensure that the parents of the children attending the setting are advised of any revisions to working practice that affects their agreed childcare arrangements.

• The DSL will review their training needs and will undertake training where a need is identified.

• The setting has a statutory duty to inform OFSTED and the Local Authority, (if they are not already involved), if at the end of the investigation a volunteer is removed from the setting or where an adult resident at the premises is being investigated for allegedly causing harm or posing a risk of harm to children at the setting.

Disqualification and disqualification by Association

Everyone in the setting over the age of 16 has a DBS check and these are updated annually via the update service.

We ask staff to tell us if they think anything could have changed for themselves or anyone they are associated with.

We are entitled to suspend anyone for not following these procedures.

For more information please see

https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006

https://www.gov.uk/government/publications/disqualification-under-the-childcare-act-2006

Camera and Mobile Phones

Any images taken of children attending the setting should be in the interest of recording children's learning and development. Parental consent will be sought to use images of children engaging in play activities, crafts and outings for the purposes of learning journals and for use on Facebook or our Website. Where parents request and to reinforce parent partnership, images of their early year's child will be sent to them during the day via WhatsApp. We will ensure that no unauthorised images are taken of persons attending the

setting. Parents and visitors are asked to sign the 'Visitors Book' which includes notation of when a device has been handed in to the for safe storage.

• We are not permitted to bring a personal camera or memory card into the designated areas of the setting during operating hours.

• Adults at the premises are not permitted to take their mobile phone or other devices into the designated areas of the setting during operating hours. Mobile phones are to be placed in a locked cupboard and remain there for the duration that the setting is open other than when staff are on lunch breaks – they are able to use their mobile phones in the Forest School building while on a break as long as no children are present.

• Parents, carers, or other visitors are not permitted to keep mobile telephones, (or other devices capable of taking images), on their person when attending the setting during its operating hours. we will ask any person visiting to hand in such devices for safe storage for the duration of their visit.

• Written permission must be obtained from a child's parent/s prior to any image being taken of a child.

• Images of children may only be taken using the setting camera/ mobile phone and which we will ensure is securely stored when not in use. Non-Compliance - The camera belonging to the setting, images stored on the settings computer and this policy can be scrutinised by the Safeguarding Officer at any time for non-compliance. We reserve the right to refuse entry when a visitor does not hand over a camera or mobile telephone known to be in their possession.

Internet Safety

We will ensure that we comply with the requirements of the Great Britain, Data Protection Act 1998, (DPA). The DPA outlines the responsibilities of the setting to keep the records of the setting and the information contained within them confidential and having in place measures to ensure access to such information is protected. To respect and protect the privacy of, the staff, parents and children who attend the setting when accessing the settings website and Facebook page. To safeguard children attending the setting from unsupervised internet use. To prevent misuse of internet provided at the setting.

E-Safety <u>https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/online-safety/</u>

We will

• Ensure that all personal information held electronically is password protected.

• That access beyond the settings website profile page is restricted by using administrator settings to permit who may view the website.

• In the event that an application is used to set up an online child record service, all staff will use password protection to ensure that parents can only access their own child's information. (Not in use at this time)

• Facebook will be used to advertise the setting, to facilitate contact from prospective clients and to offer an alternative private messaging service to parents. Administration and access to the service is the responsibility of the staff and they must ensure that appropriate privacy settings are in place.

• Only photographs of the children's crafts/ activities/ outings will be used on the settings Website and Facebook and with parental permission.

• In the event that staff use an online child record service (Tapestry), we will use password protection to ensure that parents can only access their own child's information. Photographs that have been taken as part of the observations made on children attending the setting may be used to share information to parents about their child's care and learning. Parents will be required to provide written consent to permit us to upload photographs to their child's online records.

• We will ensure that when using electronic devices to provide a play activity that the game is; downloaded and that the device's security setting prevents on-line use, appropriate to a child's age and level of development, that the child understands the activity is time limited and ensures they know how to use the device safely. We will supervise the child during the play activity. Use of electronic devices at the setting, are intended for occasional use only.

• All camera's and mobile telephones will be stored securely in the settings locked cupboard. Please refer to the settings, Camera and Mobile Telephone Policy.

• The use of internet at the setting will be restricted to set hours and for Tapestry use only to ensure continuous supervision of children in their care. The exception to this restriction would be in the event of responding to urgent communication or to share information in relation to the safeguarding responsibilities towards the children attending the setting. Please refer to the settings, Safeguarding Policy.

• We will ensure that personal use for email and storage of their personal data is either password protected. We will provide the setting with a business tablet and ensure that that it is only used for business use. The tablets must remain on the premesis overnight.

• Parents will be advised during the introductory period that responses to emails and Facebook messaging will be handled at the end of the afternoon session, (after 6pm) and that more urgent communication should be made using the settings mobile telephone number or house telephone number. Parents should be advised that it may not be appropriate to respond to calls immediately during session periods but that they should expect a return call from us at the earliest opportunity. Voicemail messages will be deleted once a reply has been given/ within 21 days/ or kept for records if required.

Parents are invited to join a WhatsApp group to promote a good parent- setting relationship. This is to share news and information – it is not to be used to send

photographs of the children or to give any private or personal information. Please refer to the settings WhatsApp policy.

Social Media

We will ensure that for each member of staff are talking in closed forums that they never disclose any information whatsoever that could lead anyone to identify a child or a family in our setting.

Accident, Incident and Emergency

The recording of accidents and incidents is a statutory requirement and the records kept are open to inspection by Social Services Department at any time. The aim of this policy is to outline procedures to deal with any accident or emergency related to the setting and to ensure adherence to the statutory obligation.

At least one practitioner who has a current paediatric first aid certificate will be at the setting at all times. We will undertake training by the Daisy Foundation to ensure that they hold a current nationally approved and accredited paediatric first aid training qualification. The paediatric first aid qualifications must be renewed every three years. In the event of an accident happening whilst caring for a child/ren the parents will be contacted and kept informed of the situation. We will hold a current DBS certificate, (Disclosure and Barring Service) and will be checked annually using the update checking service. All adults residing at the premises will hold current DBS certificates approved through Ofsted and as such adult is able to provide up to two hours of emergency care. We will hold a current Public Liability Insurance and require parent/s of all children attending the setting to disclose relevant health details and sign consent to administer first aid to their child. We will ensure that the procedures for first aid are discussed with the parent/s and consent to administer first aid to their child. We will ensure that the procedures for first aid are discussed with the parent/s and consent to administer first aid to a current first aid to a current first aid to a child is signed.

Parents will be encouraged to discuss any health and safety concerns with us. Emergency contact details should be up-dated every six months. Parent/s are advised of their responsibility to inform us of any changes to the emergency contact details. Accident records will be reviewed termly in order to identify any patterns or trends of recurring injuries.

Risk Assessments

We will undertake risk assessments for all areas of the setting environment. We have a rolling review approach to risk assessments. When there are changes to the setting environment, a potential risk is identified or action is required and taken to improve the safety of the environment, we will review and amend risk assessments accordingly.

Risk assessments will be undertaken for specific activities, (including off site activities) where they are not adequately covered by the settings risk assessments. These assessments should form part of any review of the planned activity / off site activity.

Accident Prevention will take all reasonable steps for keeping the setting environment safe.

• Risk assessments are undertaken for each area of the setting environment and will be reviewed annually. Where risks are identified between the review period we will record the identified risk /action taken on the relevant assessment sheet.

• Staff will supervise children in the setting environment and when on an excursion.

• Where appropriate risk assessments will be undertaken by the staff for planned activities and off site activities

- All glass is either covered with safety plastic or complies with BS standards
- Hazardous materials or substances are stored in locked cupboards/cabinets
- Fire safety equipment has been installed and is regularly checked by the Manager.
- We will regularly practice fire safety procedures with the children in their care
- We will use safety equipment appropriate to the age of the children in their care.
- Smoking is not permitted on the premises or setting boundaries.

• We will ensure that equipment including toys and play resources are checked and cleaned regularly and safely stored when not in use. Any broken resources are removed and replaced. Where appropriate equipment will be fitted with the correct safety harness.

• Children will be offered toys and play resources appropriate to their age and stage of development

• We will stop children from playing in doorways, climbing furniture or using toys and equipment other than for its intended purpose.

• We will ensure that the main door is bolted across the top so that children cannot leave undetected. The bolt installed can be opened easily by an adult in the event of an emergency. The children will be taught never to cross the door threshold, (no matter who is at the other side), unless a staff member is present.

• We will ensure that the outdoor space is securely fenced, locked and checked before and after children play in that environment.

• We will encourage anyone in the setting environment to be safety aware and to use safety equipment correctly when appropriate.

• Where practicable, we will adhere to a child's normal sleep routine. Sleeping children must be visually checked at regular intervals and be in audible range using a baby monitor. The temperature of the room will be no more than 20 degrees.

- Assess the accident to establish the required first aid/response at all times.
- Treat any injuries promptly and provide comfort and reassurance as appropriate
- Use protective equipment and dispose of used first aid items safely.

• Seek appropriate medical advice or assistance where required. Please refer to section below, titled, in the event of serious injury

• Record the accident/incident in the Accident, Incident & Medication Folder, notify the parent/s on the day of the accident and ensure that the record is countersigned when the child is collected.

- Monitor the child for the duration of the session.
- Clean the first aid kit if necessary and restock any first aid items used
- Clean down environment if needed.

• Review any relevant risk assessment and take any reasonable action to prevent reoccurrence of accident/incident In the Event of a Serious Injury or Illness

In the event that any child, staff member, volunteer, parent or visitor sustains a serious injury/illness requiring medical attention the following procedure applies.

- Assess the environment for hazard's to prevent further injury to anyone
- Assess the injured/sick person to establish the required emergency first aid response

• Ensure the safety and well-being of the children and any others present when responding to the situation.

• Seek appropriate advice and/or assistance from health or emergency services

• Maintain the dignity and comfort of the person injured/sick whilst awaiting medical assistance and observe any reasonable instructions that are given by health/ emergency services.

• Contact the parents if the injured person is a child in their care at the earliest opportunity to notify them of the accident/ill health.

- Maintain the adult: child ratios within the setting.
- Parents will be advised to meet the child at hospital if they cannot reach the premises prior to emergency services transporting the child to hospital.

• Record the accident/illness/incident in the Accident, Incident & Medication Folder, notify the parent/s on the day of the accident and ensure that the record is countersigned.

• Notify Ofsted of any serious accident/illness, in writing and within 14 days of the accident/illness occurring and comply with any requirements made by Ofsted.

• Inform the local Child Protection Authority of any serious injury or death of a child and comply with any advice or action given by that authority.

• Report the incident to the, Reporting of Injuries, Diseases and Dangerous Occurrence (RIDDOR).

• May seek relevant support from other services or professionals to manage distress resulting from serious accident. Incidents we will use the Accident, Incident& Medication Folder to record incidents that have required their intervention.

Such incidents affecting any person attending the setting include but are not limited to:-

- Accidents where no obvious injury can be seen.
- Using hurtful behaviour
- A child deliberately inflicting harm on another child
- Verbal/physical abuse Please refer to section below
- Lost child from setting- see section below
- Death of a Manager, child or other person at the setting-please refer to section below

Other Incidents will be recorded in the setting Incident book include but are not limited to:-

- In the event of burglary or vandalism at the property
- Causing damage to the property
- Failing to comply with the settings ground rules
- In the event of heating failure or burst water pipes at the premises

• Following a fire the Manager will record the time, location, details of who was involved / witnessed the incident. We will accurately record the nature of the incident and detail the action that was taken, (including any physical intervention or possible triggers for behaviour). Any injury resulting from an incident must be recorded. Parent/s will be informed either after the incident has been managed, (serious incident) or at the time of collecting their child. We will maintain confidentiality and endeavour to discuss the incident with parent/s in a respectful and sensitive manner. The incident record must be countersigned by the parent/s on the day of the incident. Serious Incidents In the event a serious incident occurs, we will take all reasonable steps to maintain and safeguard the well-being and safety of all persons on the premises. Depending on the nature and severity of the incident we will,

• Notify Ofsted of any serious incident, in writing and within 14 days of the incident occurring and comply with any requirements made by them

• Inform the local Child Protection Authority of any serious injury or death of a child and comply with any advice or instruction given by that authority.

• Report the incident to the, Reporting of Injuries, Diseases and Dangerous Occurrence (RIDDOR).

• Under all reasonable circumstances we endeavour to keep the setting operating. In the event that an incident leads to the closure of the setting parents should be notified at the earliest opportunity to arrange collection of their child/ren. Please refer to the Evacuation Policy The setting operates within a locked building that cannot be entered without the necessary key. Should burglary or vandalism occur such that it impacts on the normal day to day running of the setting parents will be informed at the earliest opportunity of any changes to their childminding arrangements. Verbal /Physical Abuse Verbal/ physical abuse towards us, children, parent's, volunteer or visitor will not be tolerated under any circumstances.

• Should a person become abusive we will attempt to calm the situation.

• We will ensure that the children in their care are in an appropriate safe place away from the incident

• We reserve the right to ask any adult who is verbally / physically abusive to leave the premises

• We will contact the police for assistance when a person refuses to leave the premises

• In the event of assault the police will be contacted for assistance and will follow any direction's that they give.

• Ofsted will be notified at the earliest opportunity and we will comply with any requirements made by them.

• In the event that a child has sustained an injury then the we will follow the procedures outlined in the Safeguarding Policy

• In the event of any injury we will follow the Accident, Incident and Emergency policy

Lost Child from the Setting

We will take all reasonable steps to prevent a child leaving the setting unsupervised. We will take the following precautions to ensure children remain safely in their care

- Non-registered rooms are locked during contracted hours
- Ensure that any safety gates are secured
- The exterior doors are always remains locked
- All gates surrounding the premises are padlocked at all times and that fencing
- Teach the children the settings ground rules Procedure

In the event that a child is lost we will;

- Check the setting environment, all other areas of the premises and outdoor areas.
- Contact the parent/s concerned immediately after the check has been completed.

• Notify the police for assistance and follow any reasonable advice/instruction given by them.

- Record the incident in the Accident and Incident Book.
- Notify Ofsted and settings insurance company of the situation.

• Ensure the safety of and give reassurance to the other child/ren in their care whilst the incident is managed.

Death of a person at the setting

In the event of a death at the setting the following procedure will take place:

- The Police will be informed immediately and we will take guidance from the emergency service
- The next of kin will be contacted as soon as possible

• All children at the setting at the time of the incident will be cared for away from the incident area. • Suitable adults or other responsible will be used to ensure the children are appropriately supervised when managing the incident

• Parent/s of the other children attending the setting will be contacted to collect their child as soon as possible.

• The date, time and personal details, witness details, nature of incident and action taken must be recorded accurately as a serious incident in the Accident, Incident & Medication Folder

• Ofsted must be informed as soon as possible after managing the incident.

• The Health and Safety Executive will be informed in compliance with RIDDOR Contact Details of Organisations and Professional Bodies Ofsted Piccadilly Gate Tel: 0161 618 8524 Shore Street E: enquiries@ofsted.gov.uk Manchester W: www.ofsted.gov.uk M1WD PACEY Head Office Tel: 0800 169 4486 Royal Court W: http://pacey.org.uk 81 Tweedy Road Bromley, Kent BR11TJ St. John Ambulance <u>http://www.sia.org.uk/sia'training-courses.aspx</u>

Health and Safety Executive (RIDDOR) RIDDOR Reports Health and Safety Executive Redgrave Court Merton Road Bootle Merseyside L20 7HS Incident Contact Centre: 0345 300 9923

NHS Non- Emergency Number111

Local Authority Social Services

Business Practice and Confidentiality

We will comply with the requirements of the Great Britain, Data Protection Act 1998, (DPA). The DPA outlines the responsibilities to keep the records of the setting and the information contained within them confidential and having in place measures to ensure access to such information is protected.

We will register with the Information Commissioners Office, (ICO) if they chose to store data electronically. We will advise parents about this policy to the parents during a child's settling in period. We will ensure that parents and resident adults at the premises are aware of the importance and legal requirements to maintain confidentiality and data protection of personal information concerning the children and their families attending the setting. We will undertake Safeguarding training and review training needs regularly to ensure that their knowledge is up to date.

We will ensure that

• We only use stored data about children and their families for the purpose that it was obtained and recorded

• Any personal information held at the setting is relevant, accurate and up to date. Such records include but are not restricted to, personal details, emergency contact details, permission / consent forms and copies of completed registration forms.

• Keep a register of attendance

• Maintain accurate written records of a child's chronic ill health, known allergies or preexisting injury and that accidents and incidents are recorded in the settings, Accident, Incident & Medication folder that is countersigned by the parents.

• Keep an up to date learning journal for all pre-school children as required under the Statutory Framework for Early Years Foundation Stage (EYFS)

• Records relating to individual children are retained for a reasonable period of time after the child has left the setting

Access to confidential information:

• We will ensure that all confidential written records are easily accessible but stored in a locked cupboard

• We will ensure that any personal data held electronically is secured by a password.

• Parents will have ready access to the records and books of their own child/ren but will not have access to information about any other child.

• We will not discuss individual children with anyone other than the parents of that child

• We will request that parents respect their right to privacy when any confidential information about us (or their family), becomes known during their working relationship.

Sharing of information to third parties

Confidential records and information should only be shared or made accessible to outside professionals with parental consent and following individual rights as outlined in the DPA. Parents should give parental consent to specific information they wish to share and understand the purpose for which it is being disclosed. Appropriate protection needs to be in place if personal information is to be disclosed to persons outside of the United Kingdom. Breaching confidentiality without parental consent:

In order to adhere to the Government statutory guidance, Working Together to Safeguard Children 2013, we may in the event of a child protection concern breach confidentiality of a child and their family if seeking parental consent would put a child at risk of significant harm or abuse. In making a judgement to breach confidentiality we will have undertaken appropriate safeguarding training and will consider the following when making an informed decision to do so and;

• The impact the sharing of confidential information without consent will have on the child and their family

• Decide what confidential information is relevant when sharing a concern. The information must be accurate, adequate and relevant in order to share only the information necessary and appropriate when making their report.

• Seek appropriate advice from the relevant local childcare services. In this instance the West SussexMulti Agency Safeguarding Hub, (known as, the MASH team), will be contacted in the event that we require advice about, the next steps or appropriateness of approaching the child's parents about the concern

• On making an informed decision we will make a record of the concerns they have, the actions that they have taken including seeking advice, the details of why the report is made or not and to whom it is made.

The Children's Act 2004 allows for circumstances under which we may be asked to provide information about a child in their care to other professional bodies. In this instance that we are permitted to breach confidentiality but is only required to provide information that is relevant to the situation. We are not required to inform the parents or obtain parental consent and to do so may put a child at risk of significant harm or abuse. We may be requested by a parent to share information with others such as a doctor or health visitor. Although confidentiality has been breached it has been done with the agreement and informed consent of a parent. In this instance the parent must provide a written consent and detail what information they want us to share. We will only pass on the necessary information in line with The DPA principles.

Document Retention

- Information relating to safeguarding and welfare requirements of the EYFS until the child is 21 years and 3 months old for insurance purposes.
- Information relating to the learning and development requirements handed over to parents when the child leaves or when they start full time school.
- Photos of the child handed over to parents or destroyed unless the provider has specific written permission from parents to keep them (this permission may be recalled at any time).

Inform parents that if you have a safeguarding concern about their child the information you might need to record and retain on file includes –

- Child's name and date of birth
- Child's address
- Date and time of the record
- Factual details as presented to you by the child or a witness
- Details of any previous concerns
- Parent comments relating to, for example, the injury or incident
- Action taken as a result of the disclosure
- Follow-up records such as a list of other agencies and professionals involved, with dates and times of contact.

Other relevant information might also be attached to a referral such as -

- Accident and first aid record forms
- Incident record forms
- Accident and injury at home record forms
- Documents relating to the child's care and learning in the provision.

Note that it is not my responsibility and I am not trained to investigate concerns and I will always refer to the relevant agency.

Smoking, Alcohol and Drugs

No one working on the premises will take drugs, drink alcohol or smoke during the working day, even during unpaid breaks.

We will inform Ofsted if medication is prescribed to any staff that may affect their work.

If parents/carers arrive with or to collect a child suspected under the influence of alcohol or drugs we will call the police to report (if driving) and report to the Local Safeguarding Board.

County Lines

Any child can be exploited, no matter their background. Criminal exploitation is also known as '**county lines**' and is when gangs and organised crime networks groom and exploit children to sell drugs. Often these children are made to travel across **counties**, and they use dedicated mobile phone '**lines**' to supply drugs.

Criminals are deliberately targeting vulnerable children – those who are <u>homeless</u>, experiencing learning difficulties, going through family breakdowns, struggling at school, living in care homes or <u>trapped in poverty</u>.

These criminals groom children into trafficking their drugs for them with promises of money, friendship and status. Once they've been drawn in, these children are controlled using threats, violence and sexual abuse, leaving them traumatised and living in fear.

However, they become trapped in criminal exploitation, the young people involved feel as if they have no choice but to continue doing what the criminals want.

Signs:

- Returning home late, staying out all night or going missing
- Being found in areas away from home
- Increasing drug use, or being found to have large amounts of drugs on them
- Being secretive about who they are talking to and where they are going
- Unexplained absences from school, college, training or work
- Unexplained money, phone(s), clothes or jewellery
- Increasingly disruptive or aggressive behaviour
- Using sexual, drug-related or violent language you wouldn't expect them to know
- Coming home with injuries or looking particularly dishevelled
- Having hotel cards or keys to unknown places.

If you think a young person you know could be in danger call 999, or if you have non-urgent information to share with the police, contact Crimestoppers on 0800 555 111.

If you are concerned about a child's welfare, <u>contact your local social care</u> <u>department.</u> We also have <u>a guide for parents</u> who may be concerned about their child.

Breast Ironing

Breast Ironing is practiced in some African countries, notably Cameroon. Girls aged between 9 and 15 have hot pestles, stones or other implements rubbed on their developing breast to stop them growing further. In the vast majority of cases breast ironing is carried out by mothers or grandmothers and the men in the family are unaware. Estimates range between 25% and 50% of girls in Cameroon are affected by breast ironing, affecting up to 3.8 million women across Africa.

Why does breast ironing happen?

The practice of breast ironing is seen as a protection to girls by making them seem 'childlike' for longer and reduce the likelihood of pregnancy. Once girls' breasts have developed, they are at risk of sexual harassment, rape, forced marriage and kidnapping; consequently, breast ironing is more prevalent in cities. Cameroon has one of the highest rates of literacy in Africa and ensuring that girls remain in education is seen as an important outcome of breast ironing.

Breast ironing is physical abuse

Breast ironing is a form of physical abuse that has been condemned by the United Nations and identified as Gender-based Violence. Although, countries where breast ironing is prevalent have ratified the African Charter on Human Rights to prevent harmful traditional practices, it is not against the law.

Breast ironing does not stop the breasts from growing, but development can be slowed down. Damage caused by the 'ironing' can leave women with malformed breasts, difficulty breastfeeding or producing milk, severe chest pains, infections and abscesses. In some cases, it may be related to the onset of breast cancer.

Breast Ironing in the UK

Concerns have been raised that breast ironing is also to be found amongst African communities in the UK, with as many as a 1,000 girls at risk. Keeping Children Safe in Education (2016) mentions breast ironing on page 54, as part of the section on so-called 'Honour Violence'. Staff worried about the risk of breast ironing should speak to the Designated Safeguarding Lead as soon as possible who can speak with social services.

Upskirting

"Upskirting" became a specific criminal offence under the Voyeurism (Offences) Act 2019 on 12 April this year. It typically involves taking a photograph under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks for sexual gratification or causing humiliation, distress or alarm. The revised version of Keeping Children Safe in Education lists upskirting as one example of peer on peer abuse of which school staff should be aware.

Upskirting is now a form of peer-on-peer abuse

It's a criminal offence and is now listed in paragraph 27.

Definition: upskirting is typically when a photograph is taken under a person's clothing without them knowing, for sexual gratification or to cause the victim humiliation, distress or alarm.

New information on serious violent crime (29-30)

The new text says that all staff need to know the indicators that may signal that children are at risk from, or are involved with, serious violent crime. Including:

- Unexplained gifts/new possessions these can indicate children have been approached by/involved with individuals associated with criminal networks/gangs
- Increased absence from school
- Change in friendship/relationships with others/groups
- Significant decline in performance
- Signs of self-harm/significant change in wellbeing
- Signs of assault/unexplained injuries

Staff should also be aware of the associated risks and understand the measures in place to manage them.

Useful Contacts:

NSPCC: <u>https://www.nspcc.org.uk/preventing-abuse/safeguarding</u>

Child line: https://www.childline.org.uk/

NHS: Non- Emergency Number 111

Covid 19 – 191

Ofsted - 0300 123 1231

Police – Local 101 FGM Concerns – 0800 028 3550 Local Safeguarding Children Board – 01403 229900 Insurance Company – Royal and Sun Alliance via Preschool Learning Alliance Prevent Officer (MASH) – 0330 222 6664 Department for Education DfE – 0370 000 2288