

1.10 Safeguarding children and Child protection policy

Part 1: Safeguarding children and child protection procedures

Perins Pre-school is dedicated to the support, development and promotion of high-quality care and education for the benefit of our children, families and community. We are committed to safeguarding children and promoting welfare.

All staff, students and volunteers have a responsibility for safeguarding children, being vigilant and identifying and reporting any safeguarding concerns, in line with this and supporting policies, including:

- Uncollected child policy.
- Lock down policy.
- Looked after children policy.
- Missing child policy.
- Mobile phone, electronic devices and social networking policy
- Nappy changing and intimate care policy.
- Promoting positive behaviour policy
- Special educational needs and disability policy
- Whistleblowing policy.

We ensure all staff, students and volunteers have the necessary knowledge and skills to carry out their duties and have sufficient understanding of how this policy and procedures support them in promoting and safeguarding the welfare of children. This is achieved through recruitment and induction processes and by offering ongoing training and support to all staff, appropriate to their roles.

It is the responsibility of every staff member, student and volunteer to report any breaches of this policy to the Designated Safeguarding Lead (DSL).

Policy Intention

The policy makes it clear that all staff, students and volunteers have a responsibility to safeguard children and young people and to protect them from harm. It aims to raise awareness of how to safeguard and promote the welfare of children and provides procedures should a child protection issue arise.

This policy applies to all children up to the age of 18 years whether living with their families, in state care, or living independently (*Working together to safeguard children 2018*)

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

- Protecting children from maltreatment
- Preventing the impairment of children's health and development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

(*Working together to safeguard children 2018*)

Child protection is an integral part of safeguarding children and promoting their overall welfare. In this policy, child protection shall mean:

- The activity that is undertaken to protect specific children who are suffering, or are at risk of suffering, significant harm.

To safeguard children and promote their welfare we will:

- Develop a safe culture where staff are confident to raise concerns about professional conduct.
- Ensure all staff can identify the signs and indicators of abuse, including the softer signs of abuse, and know what action to take.

- Share information with other agencies as appropriate.

We promote:

- Always listening to children.
- Positive images of children.
- Children developing independence and autonomy as appropriate for their age and stage of development.
- Safe and secure environments for children.
- Tolerance and acceptance of different beliefs, cultures and communities.
- British Values.
- Providing intervention and help for children and families in need.

We have a duty to act quickly and responsibly in any instance that may come to our attention. If in doubt about what constitutes a safeguarding concern, refer to the Designated Safeguarding Lead (DSL). If there is a concern, never do nothing, always do something, including sharing information with any relevant agencies.

Safeguarding is everyone's responsibility.

We aim to:

- Keep the child at the centre of all we do, providing sensitive interactions that develops children's well-being, confidence and resilience. We will support children to develop an awareness of how to keep themselves safe, healthy and have positive relationships.
- Be aware of the increased vulnerability of children with Special Educational Needs and Disabilities, isolated families and vulnerable families, including the impact of the toxic trio on children and Adverse Childhood Experiences (ACEs).
- Ensure that all members of staff feel confident and supported to act in the best interest of the child and to share information and seek help that the child may need at the earliest opportunity.
- Ensure that all members of staff are familiar and are updated with child protection training and procedures and kept informed of changes to local/national procedures, including through annual safeguarding updates.
- Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the Hampshire safeguarding children's partnership.
- Ensure that information is only shared with people who need to know to protect the child and act in the child's best interest.
- Keep the setting safe online, we refer to 'safeguarding children and protection professionals in early years settings: online safety considerations, using appropriate filters, checks and always monitor access and maintaining safeguards around the use of technology by staff, parents and visitors in the setting.
- Ensure that children are never placed at risk while in the care of nursery staff.
- Identify changes in staff behaviour and to act on these (as per the staff behaviour policy)
- Take any appropriate actions relating to allegations of serious harm or abuse against any member of staff working with children, including reporting allegations to Ofsted and other relevant authorities, including Local Authority.
- Ensure that parents/carers are fully aware of our safeguarding children and child protection policies and procedures when they register with the nursery and are kept informed of all updates when they occur.
- Ensure that this policy is regularly reviewed and make sure it complies with legal requirements and any guidance or procedures issued by the Hampshire safeguarding children's partnership.

Designated Safeguarding Lead (DSL)

The DSL has overall responsibility for the safeguarding children and child protection policy and procedures. It is their role to ensure that the policy and procedures are implemented to safeguard and promote the welfare of children. They are responsible for coordinating safeguarding and child protection training for staff across the organisation.

There is always at least one designated person on duty during the opening hours of the pre-school or the designated person is contactable. The designated person receives comprehensive training at least every two years and updates their knowledge on an ongoing basis. They in turn support the ongoing development and knowledge of the staff team with regular safeguarding updates.

Designated Safeguarding Lead (DSL)	Michelle Osman
---	-----------------------

Deputy Designated Safeguarding Lead (DDSL)	Amy Craig
Perins Designated Safeguarding Lead	Alexei Western

In the unlikely event of the DSL or Deputy DSL absence and to ensure immediate action can be taken, contact Perins DSL or contact the Local Safeguarding Partnership.

The Role of the DSL

The role of the DSL is to:

- Monitor and update the safeguarding children and child protection policy and procedures in line with new legislation and to ensure it is effective. This will be done by making sure that everyone understands the correct procedures during their individual reviews.
- Ensure updates and new legislation are reflected in our service as soon as they are known.
- Act as a source of support, advice and expertise for all staff, students, volunteers, children and parents who have child protection concerns.
- Ensure detailed, accurate, secure written records of concerns and referrals.
- Review all written safeguarding reports.
- Assess information provided promptly, carefully and refer as appropriate to external agencies.
- Provide signposting to other organisations.
- Consult with statutory child protection agencies and regulatory bodies where required.
- Make formal referrals to statutory child protection agencies or the police, as required.

In addition, the DSL is required to:

- Keep up to date with good practice and national requirements for safeguarding and child protection.
- Provide information on safeguarding and child protection for the setting.
- Raise awareness of any safeguarding and child protection training needs and implement where necessary.
- Retain up to date knowledge of the role of the local safeguarding partnership arrangements and local child protection procedures.

The DSL DOES NOT investigate whether a child has been abused or investigate an allegation or disclosure. Investigations are for appropriate authorities, usually the police and social services.

Sharing low level concerns

On occasion, inappropriate, problematic or concerning behaviour by staff or other adults is observed but does not meet the threshold for significant harm. This may be classed as a 'low-level' concern, although this does not mean that it is insignificant.

We define a low-level concern as:

- Any concern, no matter how small, that an adult working with children may have acted in a way that is inconsistent with our staff behaviour policy, including inappropriate behaviour outside of work.
- A concern that may be a sense of unease or a 'nagging doubt' and does not meet the harm threshold or is serious enough to refer to the LADO.

We encourage a culture of openness, trust and transparency, with clear values and expected behaviour. All concerns or allegations, however small, will be shared and responded to. All concerns will be shared with the DSL, or other nominated person, as in our reporting procedures. We encourage concerns to be shared as soon as reasonably practicable and preferably within 24 hours of becoming aware of it. However, it is never too late to share a low-level concern.

It is not expected that staff will be able to determine whether the behaviour in question is a concern, complaint or allegation before sharing the information. If the DSL is in any doubt as to whether the information meets the harm threshold, they will consult the LADO.

Occasionally a member of staff may find themselves in a situation which could be misinterpreted or appear compromising to others. If this occurs, staff are encouraged to self-report to the DSL. Equally, a member of

staff may have behaved in a manner which, on reflection, falls below the standards set in our staff behaviour policy. If this occurs, staff are encouraged to self-report to the DSL.

When the DSL receives the information, they will need to determine whether the behaviour:

- Meets, or may meet, the harm threshold (and so contact the LADO).
- Meets the harm threshold when combined with previous low-level concerns (and so contact the LADO).
- Constitutes a 'low-level' concern.
- Is appropriate and consistent with the law and our staff behaviour policy.

The DSL will make appropriate records of all information shared, including:

- With the reporting person.
- The subject matter of the concern.
- Any relevant witnesses (where possible).
- Any external discussions such as with the LSP or LADO.
- Their decision about the nature of the concern.
- Their rationale for that decision.
- Any action taken.

This constitutes a record of low-level concern. We retain all records of low-level concerns in a separate low-level concern file, with separate concerns regarding a single individual kept as a chronology. These records are kept confidential and held securely, accessed only by those who have appropriate authority. Records will be retained at least until the individual leaves their employment.

If the low-level concern arises issues of misconduct, then appropriate actions following our disciplinary procedures will be taken. Records will be kept in personnel as well as in the low-level concerns file.

Monitoring children's attendance

As part of our requirements under the statutory framework we are required to monitor children's attendance patterns to ensure they are consistent and no cause for concern.; We ask parents/carers to inform pre-school prior to their children taking holidays or days off, and all incidents of sickness absence should be reported to the pre-school the same day, so management are able to account for a child's absence.

If a child has not arrived by 10 am or within 1 hours of their afternoon session, the parents will be contacted to ensure the child is safe and healthy. If the parents are not contactable then the emergency contact numbers listed will be used to ensure all parties are safe. Staff will work their way down the emergency contact list until contact is established and we are made aware that all is well with the child and family.

If contact cannot be established, then we would assess if a home visit were required to establish if all parties are safe. If contact is still not established, we would assess if it would be appropriate to contact relevant authorities, including the police, for them to investigate further.

Where a child is part of a child protection plan, or during a referral process, any absences will immediately be reported to the Local Authority children's social care team, to ensure the child remains safe and well.

Informing parents

Parents are normally the first point of contact. If a suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of the Local Authority children's social care team, police, or LADO does not allow this to happen.

This will usually be the case where the parent or family member is the likely abuser or where a child may be endangered by the disclosure. In cases the investigating officers will inform parents.

Support to families

The pre-school takes every step in its power to build up trusting and supportive relationships among families, staff, students and volunteers within the pre-school.

The pre-school will continue to welcome a child and their family whilst enquiries are being made in relation to abuse in the home situation. Parents and families will be treated with respect in a non-judgemental manner whilst any external investigations are carried out in the best interest of the child.

Confidentiality

Confidentiality must not override the right of children to be protected from harm. However, every effort will be made to ensure confidentiality is maintained for all concerned if an allegation has been made and is being investigated.

If uncertain about whether sensitive information can be disclosed to a third party, contact the DSL or Phil Segal (data and IT manager) or call the Information Commissioner's Office on 0303 123 1113. They will provide advice about the particulars relating to each individual case, including information which can and cannot be shared.

Staff must not make any comments either publicly or in private about the supposed or actual behaviour of a parent, child or member of staff.

Record keeping and data protection

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child, only if appropriate and in line with guidance of the Local Authority with the provision that the care and safety of the child is paramount. We will do all in our power to support and work with the child's family.

The pre-school keeps appropriate records to support the early identification of children and families which would benefit from early help. Factual records are maintained in a chronological order with parental discussions. Records are reviewed regularly by the DSL to look holistically at identifying children's needs.

Our confidentiality policy will be applied with regards to any information received from an individual. Only persons involved in the investigation should handle this information although any investigating body will have access to all information stored in order to support an investigation.

Part 2: Definitions of abuse

Definition of significant harm

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

Whilst there are no absolute criteria to rely on when judging what constitutes significant harm, consideration should be given to:

- The severity of the ill-treatment, including the degree of harm.
- The extent and frequency of abuse and/or neglect.
- The impact this is likely to have or is having on the child involved.

This may be a single traumatic event, such as a violent assault, suffocation or poisoning, or it can be a combination of events (both acute and long-standing) that impairs the physical, intellectual, emotional, social or behavioural development of the child.

Definitions of abuse and neglect

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 may be abused within a family, institution or community setting by those known to them or, more rarely, a stranger. Perpetrators of abuse can be an adult, or adults, another child or children.

(*What to do if you're worried a child is being abused: Advice for practitioners, 2015 and Working together to safeguard children 2018*)

The signs and indicators listed below may not necessarily indicate that a child has been abused but can help to indicate that something may be wrong, especially if a child shows a number of these symptoms, or any of them or a marked degree.

Indicators of child abuse

- Failure to thrive and meet developmental milestones.
- Fearful or withdrawn tendencies.
- Unexplained injuries to a child or conflicting reports from parents or staff.
- Repeated injuries.
- Unaddressed illnesses or injuries.
- Significant changes to behaviour patterns.

Softer signs of abuse as defined by National Institute for Health and Care Excellence (NICE) include:

Emotional states: Fearful, withdrawn, low self-esteem.

Behaviour: Aggressive, habitual body rocking.

Interpersonal behaviours:

- Indiscriminate contact or affection seeking
- Over-friendliness to strangers including healthcare professionals.
- Excessive clinginess, persistently resorting to gaining attention.
- Demonstrating excessively 'good' behaviour to prevent parent disapproval.
- Failing to seek or accept appropriate comfort or affection from an appropriate person when significantly distressed.
- Coercive controlling behaviour towards parents.
- Lack of ability to understand and recognise emotions.
- Very young children showing excessive comforting behaviours when witnessing parental or carer distress.

Child on child abuse

Child on child abuse is also known as peer-on-peer abuse: children are included as potential abusers in our policy. This may take the form of bullying, physically hurting another child, emotional abuse or sexual abuse. Reporting procedures in these instances remain the same although additional support from relevant agencies may be required to support both the victim and the perpetrator. Children who develop harmful behaviours are also likely to be victims of abuse or neglect.

If child on child abuse is suspected, then any concerns must be reported in line with our safeguarding procedures.

Physical abuse

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.

These symptoms may include bruising or injuries in an area that is not usual for a child, for example fleshy parts of the arms and legs, back, wrists, trunk, ankles, and face.

Many children will have cuts and grazes from exploring and developing. When children enter Pre-School with an existing injury, Parents/Carers will be asked to record the details of the injury. Injuries that are a cause for concern will be followed up with the parents and the Designated Safeguarding Lead (DSL). If a child's injuries are regular occurrence, or there is a pattern to the injuries, then we will report our concerns.

If physical abuse is suspected, then concerns must be reported in line with our safeguarding procedures.

Female genital mutilation

Female Genital Mutilation (FGM) is a procedure where the female genital organs are injured or changed and there are no medical reasons for this. Some ethnic groups practice this form of physical abuse as a cultural ritual. When the procedure happens is dependent on the community and it may occur shortly after birth, during childhood, during adolescence, just before marriage or during a woman's first pregnancy.

It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediately/and or long-term health consequences, including mental health problems, urinary infection, septicaemia, difficulties in childbirth causing danger to the mother and child or death (definition taken from the *multi-agency statutory guidance on female genital mutilation*). Other consequences include shock, bleeding, infections (tetanus, HIV and hepatitis B and C) and organ damage.

FGM is a form of physical abuse, and any concerns must be reported in line with our safeguarding procedures. In addition, there is a mandatory duty to report to police any cases where an act of FGM appears to have been carried out on a girl under the age of 18.

Breast Ironing/flattening

This is also known as "breast flattening" and is the process where young girls' breasts are ironed, massaged and/or pounded down using hard or heated objects for the breasts to disappear or to delay the development of breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage. These actions can cause serious health issues such as abscesses, cysts, itching, tissue damage, infection, discharge of milk, dissymmetry of the breasts, severe fever.

Breast ironing/flattening is a form of physical abuse and any concerns must be reported in line with our safeguarding procedures.

Fabricated illness and injury (FI)

This abuse is when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. The parent or carer may seek out unnecessary medical treatment or investigation; they may exaggerate a real illness and symptoms or deliberately induce an illness through poisoning with medication or other substances or they may interfere with medical treatments. 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.

FI is a form of physical abuse, and any concerns must be reported in line with our safeguarding procedures.

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 the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child

in preparation for abuse. Sexual abuse can take place online and technology can be used to facilitate offline abuse. Adult males do not solely perpetrate sexual abuse; women can also commit acts of sexual abuse, as can other children.

Action must be taken if a staff member witnesses an occasion(s) where a child indicates sexual activity through words, play, drawing, has an excessive preoccupation with sexual matters; or has an inappropriate knowledge of adult sexual behaviour, or language, for their developmental age. This may include acting out sexual activity on dolls/toys or in the role-play area with their peers; drawing pictures that are inappropriate for a child, talking about sexual activities or using sexual language or words.

Additional signs of emotional and physical symptoms are:

Emotional signs	Physical signs
<ul style="list-style-type: none"> ▪ Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age or stage of development. ▪ Personality changes, such as becoming insecure or clingy. ▪ Regressing to younger behaviour patterns, such as thumb sucking or bringing out discarded cuddly toys. ▪ Sudden loss of appetite or compulsive eating. ▪ Being isolated or withdrawn. ▪ Inability to concentrate. ▪ Lack of trust or fear of someone they know well, such as not wanting to be alone with a carer. ▪ Becoming worried about clothing being removed. 	<ul style="list-style-type: none"> ▪ Bruises. ▪ Bleeding, discharge, pains or soreness in their genital or anal area. ▪ Sexually transmitted infections. ▪ Pregnancy

If sexual abuse is suspected, then any concerns must be reported in line with our safeguarding procedures.

Emotional abuse

Working Together to Safeguard Children (1028) defines emotional abuse as the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur separately.

Examples of emotional abuse include:

- Conveying to a child that they are worthless or unloved, inadequate, or vales only insofar as they meet the needs of another person.
- Not giving a child opportunity to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
- Age or developmentally inappropriate expectations being imposed, such as interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploring and learning, or preventing the child participating in normal social interactions.
- Serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.
- A child seeing or hearing the ill-treatment of another.

A child may also experience emotional abuse through witnessing domestic abuse or alcohol and drug misuse by adults caring for them. In England, The Domestic Abuse Act (2021) recognises in law that children are victims of emotional abuse if they see, hear or otherwise experience the effects of domestic abuse.

Signs and indicators may include delay in physical, mental and/or emotional development, sudden speech disorders, overreaction to mistakes, extreme fear of any new situation, neurotic behaviour (rocking, hair twisting, self-mutilation), extremes of passivity or aggression, appearing to lack confidence or self-assurance.

If emotional abuse is suspected, then any concerns must be reported in line with our safeguarding procedures.

Neglect

Working Together to Safeguard Children (2018) defines Neglect as 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 caregivers)
- Ensure access to appropriate medical care or treatment.
- Respond to their basic emotional needs.

An NSPCC briefing (July 2022) found neglect to be the most common form of abuse, with one in ten children in the UK having been neglected. Concerns around neglect have been identified for half of children who are the subject of a child protection plan or on a child protection register in the UK. Younger children are more likely than older children to be the subject of a child protection plan in the England because of neglect, although research suggests that the neglect of older children is more likely to go overlooked.

Signs may include a child persistently arriving at nursery unwashed or unkempt, wearing clothes that are too small (especially shoes that may restrict the child's growth or hurt them), arriving at pre-school in the same nappy they went home in, or a child having an illness or identified special educational need or disability that is not being addressed by the parent. A child may also be persistently hungry if a parent is withholding food or not providing enough for a child's needs.

If neglect is suspected, then any concern must be reported in line with our safeguarding procedures.

Child sexual exploitation (CSE) and Child criminal exploitation (CCE)

Both CSE and CCE are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage of increased status of the perpetrator or facilitator and/or through violence or threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation (*Keeping children safe in education 2022*).

Child Sexual Exploitation (CSE)

CSE is where an individual or group take advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity. The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can occur using technology and may be without the child's immediate knowledge such as through others copying videos or images they may have created and posted on social media.

Signs and symptoms include:

- Physical injuries such as bleeding or bruising.
- Having money or gifts they are unable to explain.

- Sudden changes in their appearance.
- Becoming involved in drugs or alcohol, particularly if it is suspected they are being supplied by older men or women.
- Becoming emotionally volatile (mood swings are common in all young people, but more severe changes could indicate that something is wrong).
- Using sexual language beyond that expected for their age and stage of development.
- Engaging less with their usual friends.
- Appearing controlled by their phone.
- Switching to a new screen when you come near the computer.
- Nightmares or sleeping problems.
- Running away, staying out overnight, missing school.
- Changes in eating habits.
- Talk of a new. Older friend, boyfriend or girlfriend.
- Losing contact with family and friends or becoming secretive.
- Contacting sexually transmitted diseases.

Child Criminal Exploitation (CCE)

CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity. The victim may have been criminally exploited even if the activity appears consensual. CCEs does not always involve physical contact; it can occur through using technology.

Other examples include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country, forced to shoplift or pickpocket, or to threaten other young people. Signs and symptoms are like those for CSE.

If CSE and CCE is suspected, then any concerns must be reported in line with our safeguarding procedures.

County Lines

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

Perpetrators often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. A child is targeted and recruited into county lines through schools, further and higher educational institutions, pupil referral units, special educational needs schools, children's homes and care homes.

Signs and symptoms include:

- Changes in dress style.
- Unexplained, unaffordable new things such as clothes and jewellery.
- Missing from home or school and/or significant decline in performance.
- New friends with those who do not share any mutual friendships with the victim, gang association or isolation from peers and social networks.
- Increase in anti-social behaviour in the community including weapons.
- Receiving more texts or calls than usual.
- Unexplained injuries.
- Significant changes in emotional well-being.
- Being seen in different cabs or taxis driven by unknown adults.
- A child being unfamiliar with where they are.

If involvement in county lines is suspected, then any concerns must be reported in line with our safeguarding procedures.

Domestic Abuse

The definition of domestic abuse from the Domestic Abuse Act 2021 is:

Behaviour of a person (A) towards another person (B) is 'domestic abuse' if:

- A and B are each aged 16 or over and are personally connected to each other
- The behaviour is abusive.

Behaviour is 'abusive' if it consists of any of the following:

- Physical or sexual abuse
- Violent or threatening behaviour
- Controlling or coercive behaviour
- Economics abuse (any behaviour that has substantial adverse effect on B's ability to acquire, use or maintain money or other property and/or obtain goods or services).
- Psychological, emotional or other abuse.

It does not matter whether the behaviour consists of a single incident or a course of conduct.

Domestic abuse can happen to anyone regardless of gender, age, social background, religion, sexuality or ethnicity and domestic abuse can happen at any stage in a relationship.

Signs and symptoms of domestic abuse include:

- Changes in behaviour, such as becoming very quiet, anxious, frightened, tearful, aggressive, distracted and depressed.
- Visible bruising or single, or repeated, injury with unlikely explanations.
- Changes in the manner or dress, e.g., clothes to hide injuries that do not suit the weather.
- Stalking, including excessive phone calls or messages.
- Partner or ex-partner exerting an unusual amount of control or demands over work schedule.
- Frequent lateness or absence from work.

All children can witness and be adversely affected by domestic abuse in the context of their home life. Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children.

Where incidents of domestic abuse are shared by our own staff, students or volunteers we will always respect confidentiality and not share information without their permission. However, we will share this information, without permission, in cases of child protection or where we believe there is an immediate risk of serious harm to the person involved.

If domestic abuse is suspected, then any concerns must be reported in line with our safeguarding procedure.

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.

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 and symptoms include:

- 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.
- A neighbour who has not been seen for an extended period.
- Change in resident's mood and/or demeanour.
- Increased anti-social behaviour.

If cuckooing is suspected, then any concerns must be reported in line with our safeguarding procedures.

Child trafficking and modern slavery

Child trafficking and modern slavery is when children are recruited, moved, transported and then exploited, forced to work or are sold.

For a child to have been a victim of trafficking there must have been:

- Action: recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation.
- Purpose: sexual exploitation, forced labour or domestic servitude, slavery, financial exploitation, illegal adoption, removal of organs.

Modern slavery includes slavery, servitude and forced or compulsory labour and child trafficking. Victims of modern slavery are also likely to be subject to other types of abuse such as physical, sexual and emotional abuse.

Signs and symptoms for children include:

- Being under control and reluctant to interact with others.
- Having few personal belongings, wearing the same clothes every day or wearing unsuitable clothes.
- Being unable to move around freely.
- Appearing frightened, withdrawn, or showing signs of physical or emotional abuse.

If child trafficking or modern slavery are suspected, then any concern must be reported in line with our safeguarding procedures.

Forced marriage

A forced marriage is defined as 'a marriage in which one, or both spouses, do not consent to the marriage but are coerced into it. Duress can include physical, psychological, financial, sexual and emotional pressure.'

Where incidents of forced marriage are shared by our own staff, students or volunteers, we will always respect confidentiality and not share information without their permission. However, we will share this information without permission in cases of child protection, or where we believe there is an immediate risk of serious harm to the person involved.

If it is suspected that a forced marriage is being planned, then any concerns must be reported in line with our safeguarding procedures.

Honour based abuse (HBA)

HBA is described as 'incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including FGM, forced marriage, and practices such as breast ironing.; (*Keeping children safe in education 2022*). Such abuse can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their 'honour' code. It is a violation of human rights and may be domestic, emotional and/or sexual abuse such as being held against their will, threats of violence or actual assault. It often involves wider family networks or community pressure and so can include multiple perpetrators.

Signs and symptoms of HBA include:

- Changes in how the child dresses or acts, such as not 'western' clothing or make-up.
- Visible injuries, or repeated injury with unlikely explanations.
- Signs of depression, anxiety or self-harm.
- Frequent absences.
- Restrictions on friends or attending events.

Where incidents of HBA are shared by our own staff, students, or volunteers we will always respect confidentiality and not share information without their permission. However, we will share this information without permission in cases of child protection, or where we believe there is an immediate risk of serious harm to the person involved.

If HBA is suspected, then any concerns must be reported in line with our safeguarding procedures.

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.
- Children's actions are believed to have brought bad fortune to the family or community.

If CALFB is suspected, then any concerns must be reported in line with our safeguarding procedures.

Extremism and radicalisation

Under the Counterterrorism and Security Act 2015, there is a duty to safeguard vulnerable and at-risk children by preventing them from being drawn into terrorism. This is known as the Prevent Duty.

Children can be exposed to different views and receive information from various sources and some of these views may be considered radical or extreme. Radicalisation is the way a person comes to support or be involved in extremism and terrorism; usually it's a gradual process so those who are affected may not realise what's happening. Radicalisation is a form of harm.

The process may involve:

- Being groomed online or in person.
- Exploitation, including sexual exploitation.
- Psychological manipulation.

- Exposure to violent material and other inappropriate information.
- The risk of physical harm or death through extremist acts.

For further information visit The Prevent Duty website.

If radicalisation or extremism is suspected, then any concerns must be reported in line with our safeguarding procedures. This includes reporting concerns to the police.

Online Safety

While the growth of internet and mobile device use can bring many advantages, the use of technology has become a significant component of many safeguarding issues such as child sexual exploitation and radicalisation.

There are four main areas of risk associated with online safety:

- Content – being exposed to illegal, inappropriate or harmful material such as pornography, fake news, racist or radical and extremist views.
- Contact – being subjected to harmful online interaction with other users such as commercial advertising or adult posing as children or young adults.
- Conduct – personal online behaviour that increases the likelihood of, or causes, harm, such as making, sending and receiving explicit images and online bullying.
- Commerce – risks such as online gambling, inappropriate advertising, phishing and or financial scams.

Report online safety concerns to the DSL and to the Child Exploitation and Online Protection Centre (CEOP): <https://www.ceop.police.uk/sfaety-centre/>
Inappropriate content received via email must be reported to the DSL and to the Internet Watch Foundation (IWF): <https://www.iwf.org.uk/>

Adult sexual exploitation

As part of our safeguarding procedures, we will also ensure that staff and students are safeguarded from sexual exploitation.

Up skirting

Up skirting is a criminal offence. It involves taking a picture of someone's genitals or buttocks under their clothing without them knowing, either for sexual gratification or in order to humiliate, or distress, the individual. This is a criminal offence, and any such action would be reported following our reporting procedures.

If up skirting is suspected, then any concerns must be reported in line with our safeguarding procedures.

Part 3: Reporting procedures

Public interest disclosure (whistleblowing)

Whistleblowing is the term used when a worker passes on information concerning wrongdoing. All safeguarding allegations, internal or external, current or historical, must be passed onto the DSL. We will cooperate fully with the authorities involved and follow any guidance given.

We believe in keeping children safe is the highest priority and if, for whatever reason, concerns cannot be reported to the DSL or the deputy DSL, concerns can be reported to the Perins DSL or anonymously to the NSPCC, the police or the LA social services safeguarding children team.

Allegation against our staff

An allegation against our staff may relate to a person who has:

- Behaved in a way that has harmed a child or may have harmed a child.
- Possible committed a criminal offence against or related to a child.
- Behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children.
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children.

We will make every effort to maintain the confidentiality of all parties while an allegation or concern is being investigated. Dealing with an allegation can be stressful experience and, to support the staff member, a named person (usually the DSL or deputy DSL) to liaise with will be offered. The timeframes for an investigation will follow the guidelines of other involved authorities.

We reserve the right to suspend a staff member until the investigation is concluded. Further action will be determined by the outcome of the investigation.

Founded allegations are considered gross misconduct, in accordance with our disciplinary procedures, and may result in the termination of employment. DBS will be informed to ensure their records are updated and Ofsted will be informed. We retain the right to dismiss any member of staff in connection with founded allegations following an inquiry.

All safeguarding records are 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 further DBS checks and avoids unnecessary reinvestigation.

Unfounded allegation will result in all rights being reinstated. A return-to-work plan will be put in place for any member of staff returning to work after an allegation has been deemed unfounded. Individual support will be offered to meet the needs of the staff member and the nature of the incident such as more frequent supervisions, coaching and mentoring or external support services.

If the staff member resigns during the investigation, we will inform DBS, Ofsted and the police, where appropriate.

Support for staff during safeguarding incidents

The DSL will support staff throughout any of the process listed above and will organise appropriate counselling should this be required.

Any member of staff who has concerns about the content of this policy and its procedures, should speak to the DSL as soon as possible. If any member of staff wishes to talk confidentially about any safeguarding concern or any other issue relating to child protection or personal circumstances, it is important to do this as soon as possible.

Reporting procedure

We will always act on behalf of the child and will do everything possible to ensure the safety and welfare of any child and so will take all allegations of potential abuse seriously. All concerns reported to staff will be pursued, regardless of the nature of the concern and to whom the allegation relates.

All staff have a responsibility to report safeguarding and child protection concerns and suspicions of abuse. These concerns will be discussed with the DSL as soon as possible, as follows:

	Staff member role	DSL role
	On receiving information that causes a safeguarding concern.	On receiving information that causes a safeguarding concern.
Step 1	<p>Contact the DSL immediately. This must be a verbal conversation to ensure the concern is clearly understood and action is taken.</p> <p>If the DSL is unavailable, contact the Deputy DSL, Perins DSL, LSP, NSPCC, social services or police until you can have a verbal conversation.</p> <p>For children who arrive at nursery with an existing injury, an 'existing injury' form will be completed. If there are queries or concerns regarding the injury or information given, follow these procedures.</p>	If it is believed a child is in immediate danger, contact the police
Step 2	<p>Write a cause for concern form including: Child's name and DOB. Name and position of person completing the form. Date, time and location and name of anyone else present. Details of concern/disclosure – exact words spoken by the child. Position of any injuries seen. Action taken. Any relevant information. Signature and date of person making the report and DSL.</p>	<p>Sign and date report received from staff member, state if information has been shared and with whom and any action taken.</p> <p>Securely store the information.</p> <p>If the safeguarding concern relates to a child, contact the Local Authority children's social care team, report concerns and seek advice immediately, or as soon as it is practical to do so.</p> <p>If the safeguarding concern relates to an allegation against an adult, contact the LADO by an online form and report the concern to Ofsted.</p> <p>A full investigation into any allegation will be carried out by the appropriate professionals to determine how this will be handled.</p> <p>Note any actions requested by LADO/ Ofsted and follow instructions</p>
Step 3	<p>If you feel the report is not being taken seriously or are worried about an allegation getting back to the person in question, then it is your duty to inform the LA social care team yourself directly.</p> <p>Follow all instructions from the LA and/or Ofsted, co-operating where required.</p>	<p>If appropriate, discuss the concern or incidents with parents unless it is believed that this would place the child at greater risk of harm.</p> <p>Record all discussions.</p> <p>Follow all instructions from the LA and/or Ofsted, cooperating where required.</p> <p>Record all information and actions taken.</p>
Step 4		If the DSL is not the owner/manager and there is an allegation against a member of staff, then the owner/manager must be

		informed as they have a duty of care for their employees.
Step 5		If the LA have not been in contact within the timeframe set out in Working together to safeguard children 2018, it must be followed up. Never assume that action has been taken.
Step 6	Safeguarding procedures will be reviewed to ensure the process has been applied in line with the policy.	

If a concern is raised anonymously and we have no contact details, we will treat the concern as valid and follow the procedures as above. If a malicious call is suspected, the procedures will still be followed: a child may be in danger. The Information Commissioners Office (ICO) will be contacted to ensure permitted data sharing.

Part 4: Recruitment, selection, induction and training

Recruitment and selection

Through the implementation of our employment policy, we endeavour to prevent unsuitable people from becoming members of staff. Procedures include relevant checks such as requesting references, establishing the identity of applicant and conducting criminal records disclosures. Staff have enhanced DBS checks. Clear person specification criteria and processes during the recruitment and selection process enable us to determine a candidate's suitability for the role.

We have specific responsibilities, as outlined in this policy for any staff, students and learners under the age of 18 whether living with their families, in state care, or living independently.

Induction for staff

As part of our induction process, all new workers will receive basic training on this safeguarding children and child protection policy, so they have the necessary knowledge and skills to safeguard and promote the welfare of children.

Within the first week of induction, all staff will receive this policy. It is the manager's responsibility to ensure all new staff members understands it and can follow it. All staff are expected to keep their safeguarding knowledge and skill up to date and report any concerns they may have. We maintain records to ensure all have received the training they need.

Learners on placements or in employment

We hold responsibility for ensuring that learners on placement or in employment are familiar with and sign up to this policy and agree to work within this framework. Learners and students under the age of 18 will be protected as children. Risk assessments will be completed to ensure their safety and well-being are protected during their employment or training period. If situations arise during employment or placement which identifies those aged 18 or under are at risk from abuse or neglect, we will contact the appropriate bodies to ensure the individual is safeguarded.

Responding to and recording disclosures

Staff, volunteers or students may receive a safeguarding disclosure. See the guidance below for responding to and reporting disclosures if abuse.

Responding to a child's disclosure of abuse – what to do and say.

- Stay calm and listen carefully.
- Try not to look shocked and reassure them that this is not their fault.
- Find an appropriate opportunity to say that the information will need to be shared and do not promise to keep the information shared a secret.
- Allow the child to continue at their own pace.
- Only ask questions for clarification and avoid asking any questions that may suggest a particular answer.
- Reassure the child that they have done the right thing, let them know what you will do next and with whom the information will be shared.
- Record the disclosure in writing using the child's own words as soon as possible, but not while the child is talking.
- Include date and time, any names mentioned and to whom the information was given.
- Sign and date the record, store it securely and refer the disclosure to the setting DSL.

Legal framework

We adhere to all current legislation, as below:

- The Children Act (England and Wales) 1989
- The Children Act 2004
- The Childcare Act 2006
- Children and Social Work Act 2017
- The Data Protection Acts 1984, 1998 and 2018
- Safeguarding Vulnerable Groups Act 2006
- Working together to safeguard children 2018
- Keeping children safe in education 2022
- The Counter – Terrorism and Security Act 2015
- The Sexual Offences Act 2003
- Criminal and Justice and Court Services Act 2000
- FGM Act 2003
- Freedom of Information Act 2012
- The Domestic Abuse Act 2021
- The Human Rights Act 1998
- The police Act 1997

Relevant non-statutory guidance:

- Child Sexual Exploitation, DfE 2017
- Information Sharing, DfE 2015
- What to do if you're worried a child is being abused, DfE 2015

This policy was adopted by

Perins Pre-school

On

24th April 2023

Date to be reviewed

24th September 2023

Signed on behalf of the provider

Michelle Osman

Name of signatory

Michelle Osman

Role of signatory (e.g. chair, director or owner)

Pre-School Manager