

SAFEGUARDING POLICY

CHILD PROTECTION POLICY

At The Island Day Nursery we work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect, be helped to thrive and to be safe from any abuse in whatever form.

We support the children in our care, protect them from maltreatment and have robust procedures in place to prevent the impairment of children's health and development. In our settings we strive to protect children from the risk of radicalisation and we promote acceptance and tolerance of other beliefs and cultures. Safeguarding is a much wider subject than the elements covered within a single policy, therefore this document should be used in conjunction with the nursery's other policies and procedures.

Legal Framework and definition of safeguarding

- Children Act 1989 and 2004
- Childcare Act 2006
- Safeguarding and Vulnerable Groups Act 2006
- Children and Social Work Act 2017
- The Statutory Framework for the Early Years Foundation Stage (EYFDS) 2017
- Working together to safeguard children 2018
- Keeping children safe in education 2019
- Data Protection Act 2018
- What to do if you're worried a child is being abused 2015
- Counter- Terrorism and Security Act 2015

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

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

(definition taken from HM Government document 'Working together to safeguard children 2018).

Policy intention

To safeguard children and promote their welfare we will:

- Create an environment to encourage children to develop a positive self-image
- Provide positive role models and develop a safe culture where staff are confident to raise concerns about personal conduct
- Support staff to notice all signs of abuse and know what action to take
- Encourage children to develop a sense of independence and autonomy in a way that is appropriate to their age and stage of development
- Provide a safe and secure environment for all children
- Promote tolerance and acceptance of different beliefs, cultures and communities
- Help children to understand how they can influence and participate in decision making and how to promote British Values through play, discussion and role modelling
- Always listen to children
- Provide an environment where practitioners are confident to identify where children and families may need intervention and seek the help they need
- Share information with other agencies as appropriate

The Island Day Nursery recognises that abuse does occur in our society and we are vigilant in identifying signs of abuse and reporting concerns. All staff have a duty to protect and promote the

welfare of children. Due to the many hours of care we are providing, staff may often be the first people to identify that there may be a problem. They may well be the first people in whom children confide information that may suggest abuse or to spot changes in a child's behaviour which may indicate abuse.

Our prime responsibility is the welfare and well-being of each child in our care. As such, we have a duty to the children, parents and staff to act quickly and responsibly in any instance that may come to our attention. This includes sharing information with any relevant agencies such as local authority services, health professionals and the police. All staff will work with other agencies in the best interest of the child, including as part of a multi-agency team, where needed.

The Island Day Nursery aims to:

- Keep the child at the centre of all we do
- Ensure all staff are trained and understand the child protection and safeguarding policy and procedures, are alert to the signs of abuse, understand what is meant by child protection
- Be aware of the increased vulnerability of children with Special Educational Needs and Disabilities (SEND) and other vulnerable or isolated families and children
- Ensure that all staff feel confident and supported to act in the best interest of the child, share the information and seek the help the child may need
- Ensure that all staff are familiar and updated regularly with child protection training and procedures and kept informed of changes to local/national procedures
- Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures as set out by The Isle of Wight
- Ensure the information is shared only with those people who need to know in order to protect the child and their best interest
- Ensure that children are never placed at risk while in the charge of nursery staff
- Ensure parents are fully aware of child protection policies and procedures when they register with the nursery and are kept informed of updates as they occur
- Regularly review and update this policy and make sure it complies with any legal requirements and guidance and procedures

Abuse and neglect are forms of maltreatment of a child. Children may be abused within a family, institution or community setting by those known to them or a stranger. This could be an adult or adults, another child or children.

The signs and indicators listed below may not necessarily indicate that a child has been abused but will help us to recognise that something may be wrong, especially if a child shows a number of these symptoms or any of them to 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/carers/staff
- Repeated injuries
- Unaddressed illnesses or injuries
- Sexualised behaviours/play
- Significant changes to behaviour patterns
- Low self-esteem
- Wetting and soiling
- Recurrent nightmares
- Aggressive behaviour
- Withdrawing communication
- Habitual body rocking
- Over friendliness towards strangers
- Excessive clinginess

- Persistently seeking attention

REPORTING PROCEDURES

All staff have a responsibility to report safeguarding concerns and suspicions of abuse. These concerns will be discussed with the Designated Safeguarding Lead (DSL) as soon as possible.

- Staff will report their concerns to the DSL
- Staff to complete concerns form including, verbatim words and recording on a body map where appropriate. Information to be included will be: Child's name and address, age and date of birth, date and time of observation, exact words spoken by the child, exact position and any types of injuries or marks seen, exact observation of any incident with date and time and names of other people present, any discussions with parents (where deemed appropriate). – See Appendix A
- DSL's to sign and date when they have seen the forms
- If appropriate, the incident will be discussed with the parent/carer and their explanation recorded
- If there are queries/concerns regarding the injury/information then the following procedures will take place

The DSL will:

- Seek advice from other relevant agencies i.e. health visitor
- Complete an Inter -Agency Referral Form (IAR) and submit to the Multi Agency Safeguarding Hub (MASH)
- Speak to the parents/carers unless advised not to do so by the social care team

STAFFING AND VOLUNTEERING

Our policy is to provide a secure and safe environment for all children. We only allow an adult who is employed by the nursery to care for children and who has an enhanced clearance form the Disclosure and Barring Service (DBS) to be left alone with children. We will obtain enhanced criminal record checks for all volunteers and students and do not allow volunteers or students to be unsupervised with children. These checks will be renewed every 3 years.

During induction processes all staff/students and volunteers will be made aware of the DSL's for the setting. The contact telephone number and email address for the LADO are shared with all staff/students and volunteers. (Appendix B)

We have named persons within the nursery who take lead responsibility for safeguarding and co-ordinate child protection and welfare issues, known as the Designated Safeguarding Leads (DSL), there is always at least one designated person on duty during all opening hours of the setting. These designated persons will receive comprehensive training at least every two years and update their training at least every two years and will update their knowledge on an ongoing basis. Although, under the EYFS guidance we are only required to have and DSL, for best practice and to ensure cover at all times we have two/three DSL's in place in each setting.

Keeping children safe is our highest priority and if, for whatever reason, staff do not feel able to report concerns to the DSL they should contact MASH themselves and then inform the LADO (see Whistle Blowing Policy).

Recruitment

- We provide adequate and appropriate staffing resources to meet the needs of all the children
- Applicants for posts within our nurseries are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974. Candidates are informed of the need to carry out checks before posts can be confirmed
- At least one member of staff who has undergone safer recruitment training will be present at staff interviews

- Staff are asked at each supervision (every 6-8 weeks) to declare any changes which may affect their suitability to care for children.
- We abide by the requirements of the EYFS and any OFSTED guidance in respect to obtaining references and suitability checks for all staff, students and volunteers working in the setting are suitable to do so
- We ensure we receive at least two written references before a new member of staff commences employment with us
- All students and volunteers will have an enhanced DBS check conducted on them before their placement starts
- Volunteers, including students do not work unsupervised
- We have procedures for recording the details of visitors to the nursery and take security steps to ensure we have control over who comes into the nursery so that no unauthorised person has unsupervised access to the children
- All visitors/contractors will be supervised whilst on the premises, especially when in the areas the children use
- All staff have access to and comply with the Whistleblowing Policy which will enable them to share any concerns that may arise about their colleagues in an appropriate manner
- All staff will receive regular well being supervision meetings (at least every 6-8 weeks) where opportunities will be made available to discuss any issues relating to individual children, child protection training and any needs for further support
- Safeguarding will be an agenda item at every staff meeting, be it in the form of local/national updates, quizzes, reviewing of policies etc
- Staff will adhere to our Phones and Other Electronic Devices and Social Media Policy at all times

Our nursery has a clear commitment to protecting children and promoting welfare. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of the DSL/General Manager/Directors at the earliest opportunity

Persons responsible for implementing this policy:

Erica Dunwell/Heather Bishop/Rosalind Moreno – Newport

Erica Dunwell/ Heather Bishop – Sandown

Erica Dunwell/Rebecca Kujabi – Wootton

Review: August 2022

APPENDIX A – TYPES OF ABUSE

TYPES OF ABUSE

Attendance

We recognise that regular attendance has a positive impact on a child's learning and development. We record all absences in our child absence folder. If a child is absent without an update from home then we will call parents/carers. If we are unable to make contact with home we will call health visitors or MASH.

Breast Ironing

Breast ironing, also known as breast flattening is the process where young girls breasts are ironed, massaged and or pounded through the use of hard or heated objects in order for the breasts to disappear or delay the development of the breasts entirely. Although this is unlikely to happen to children in the nursery due to their age, we will ensure any signs of this in young adults or older children are followed up using the usual safeguarding referral processes.

Child Criminal Exploitation (including county lines)

Child Criminal Exploitation is defined as “where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity...”

County lines refer to a phone line through which drug deals can be made. An order is placed and typically a young person will deliver the drugs.

Children missing from the setting

If a child is absent from the setting with out any contact from parent/carers the following steps will be followed:

- Call home to enquire after child's health/welfare
- If no response after 2 days – call Health Visitor
- Submit Inter Agency Referral Form to MASH

If at any point we feel that child is in immediate danger we will report to the Police on 999.

The setting will record all phone calls made from home to explain why a child is absent from the setting in the Child Absence Book in the office. The Managers will use this to spot patterns of absenteeism.

Child Sexual Exploitation (CSE)

Working together to Safeguard children defines CSE as ... “a form of 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 wants and/or b) for the financial advantage of increased status of the perpetrator or facilitator”.

Indicators a child may be at risk of CSE include:

- Going missing for periods of time
- Regularly missing school
- Appearing with unexplained gifts/possessions
- Having older boyfriends/girlfriends
- Suffering from Sexually transmitted infections
- Mood swings or changes in emotional well being
- Drug and alcohol misuse
- Displaying inappropriate sexualised behaviour

CSE can happen to a child of any age, gender, ability or social status. Often the victims of CSE are not aware that they are being exploited and do not see themselves as a victim.

Children with Family Members in Prison

Children who have a family member in prison are at a greater risk of poor outcomes including poverty, stigma, isolation and poor mental health. The setting will aim to:

- Understand and respect the child's wishes

- Keep as much contact as possible with the parent/care giver
- Be sensitive through the curriculum
- Provide extra support

Domestic Abuse

Domestic abuse is any incident of controlling or threatening behaviour, violence or abuse between those over the age of 16.

Children who witness domestic abuse are recognised as 'significant harm' in law. These children may become aggressive, display anti- social behaviours, suffer from depression or anxiety or fail to meet age appropriate milestones.

Emotional Abuse

Emotional abuse can lead to a severe adverse effect on the behaviour of a child and their emotional development. Examples can include a child constantly being shouted at, being out down, having inappropriate age or developmental expectations put upon them.

The child may not always have physical signs of emotional abuse.

Indicators of emotional abuse can include:

- Child becoming withdrawn/wary or anxious
- Struggles to control their emotions
- Having difficulty making relationships
- Being overly affectionate to strangers
- Being aggressive to peers or adults

Fabricated Illness

This is where a child is presented with an illness that is fabricated by the parent/carer. The parent/carer may seek out unnecessary medical treatment or investigation. The signs may include a parent/carer exaggerating a real illness or symptoms or complete fabrication of symptoms or inducing physical illness e.g. through poisoning, starvation or inappropriate diet.

If we are concerned that a child may be suffering from a fabricated illness or induced illness we will liaise with the Health Visitor and if need contact MASH via an Inter- Agency Referral Form (IAR).

Female Genital Mutilation (FGM)

This type of abuse is practiced as a cultural ritual by certain ethnic groups. FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue and hence interferes with the natural function of girls and women's bodies. Symptoms may include bleeding, painful areas, acute urinary infection, vaginal and pelvic infections, difficulty sitting down, depression as well as physiological concerns.

There is a mandatory duty to report to police any case where an act of FGM appears to have been carried out on a girl under the age of 18. We will ensure this is carried out in our settings.

Forced Marriage

Forced Marriage is ... "a marriage in which one or both spouses cannot consent to the marriage and duress is involved."

Characteristics of a forced marriage can include: an extended absence from school/college, excessive parental restriction, a history of siblings leaving education to marry early, poor performance, evidence of self harm/eating disorders/substance misuse, evidence of family disputes. On their own these characteristics may not indicate forced marriage.

Homelessness

We recognise being homeless or being at risk of being made homeless is a real risk to a child's welfare. The impact of losing a place of safety and security can affect a child's behaviours and

attachments. In line with the Homelessness Reduction Act 2017 the settings will promote links into the Local Housing Authority for the parent/carer in order to raise/progress concerns at the earliest opportunity. We recognise that whilst referrals and/or discussion with the Local Housing Authority should be progressed as appropriate, this does not and should not, replace a referral into MASH where a child has been harmed or is at risk of harm.

Honour Based Violence

Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community. Crimes of honour may not always include violence but can include psychological abuse.

If staff believe a crime has been committed then the police must be called.

Missing, Exploited and Trafficked Children (MET)

Within Hampshire and the Isle of Wight the acronym MET is used to identify all children who are missing, believed to be at risk of being exploited or who are at risk of or are being trafficked.

All settings will monitor patterns of absence and families will be telephoned on the child's second day of absence if we have had no communication from them.

Neglect

Signs of neglect can include; child being unkempt, unwashed, wearing clothes that are too small, constant illnesses, seeking out food, craving attention.

We will use the Isle of Wight neglect Toolkit as an aid to determine the level of neglect.

Indicators of Neglect can include:

- Child is constantly hungry
- Poor fitting/inappropriate clothes shoes
- Unkempt appearance
- Child is dirty/dirty clothes etc
- Child is constantly tired
- Child constantly coming into setting in soiled/wet nappies
- Child presenting regularly with injuries i.e. bruising which may indicate lack of supervision

Non-Mobile Baby Bruising Protocol

If a child who is not yet mobile i.e. rolling/crawling/pulling themselves up/walking presents with a bruise then we will immediately refer to the Multi Agency Safeguarding Hub in line with the Isle of Wight protocol.

Parental Mental Health

The term mental health is used to cover a wide range of conditions from eating disorders, mild depression through to psychotic illnesses. Parental mental illnesses does not necessarily have an adverse impact on a child's developmental needs. It is essential that the diagnosis of a parent/carers mental health is not seen as defining the level of risk to the child. The impacts of parental mental health can include:

- the child's physical and emotional needs are neglected
- the parent's needs are taking precedence over the child's
- a child acting as a young carer
- a child having restricted social and recreational activities
- a child missing nursery regularly
- a child may adopt paranoid or suspicious behaviour
- obsessive compulsive behaviours involving the child

Parental Substance Misuse

Substance misuse applies to the misuse of alcohol as well as problem drug use. Parental substance misuse of drugs and alcohol becomes relevant to child protection when substance misuse impairs their parenting capability.

For children the impact of parental substance misuse can include:

- inadequate food/heat/clothing
- lack of engagement or interest from parents
- behavioural difficulties – inappropriate behaviour
- bullying (due to poor physical appearance)
- Tiredness/lack of concentration
- Child talking about drugs
- Injuries/accidents due to lack of parental supervision
- Taking on a caring role
- Poor attendance/late arrival

All staff will report to MASH any child who comes in smelling of cannabis or their belongings smell of cannabis i.e. changing bag/clothes/pushchair

Peer on peer abuse

We recognise that peer on peer abuse does take place, so we include children in our policies when we talk about potential abusers. This may take the form of bullying, physically hurting another child, emotional abuse or sexual abuse. We will report this in the same way as we do for adults abusing children and will take advice from appropriate bodies on this area.

Physical Abuse

The symptoms of physical abuse can include; bruising or injuries to a child in an area that is not normal for a child, unexplained injuries, burns and scalds. Children and babies can also be abused through shaking or throwing.

We recognise that all children have cuts and grazes from normal childhood injuries. We log these in discussion with parents/carers.

Indicators of physical abuse can include:

- Bruising
- Broken bones/fractures
- Burns or scalds
- The child becomes withdrawn
- Aggressive behaviours towards peers/adults

Prevent/Radicalisation

The prevent duty requires that all staff are aware of the signs that a child may be vulnerable to radicalisation. As part of the preventative process resilience to radicalisation will be built through the promotion of fundamental British values through the curriculum. Staff take part in online Prevent training once every 2 years.

Sexual abuse

Sexual abuse can be shown through a child's indicated sexual activity through words, drawing and an excessive pre-occupation with sexual activity i.e. dolls/toys or in the role play area.

The physical signs of sexual abuse can include:

- genital trauma
- discharge and bruises between the legs
- signs of a sexually transmitted disease
- a distinct change in the child's behaviour
- the child becoming withdrawn or overly extrovert
- child may become distressed around a particular adult.

TECHNOLOGIES

We recognise that technology is continually changing and along with it there is an increase of risks and issues. Access to the internet and other tools that technology provides is an invaluable way of finding, sharing and communicating information. While technology itself is not harmful, it can be used by others to make children vulnerable and abuse them.

With the current speed of on-line change, some parents and carers have a limited understanding of online risks and issues. Parents may underestimate how often their children come across potentially harmful and inappropriate material on the internet and may be unsure about how to respond. Some of the risks could be:

- Unwanted contact
- Grooming
- Online bullying, including sexting
- Digital footprint

Gaming

Online gaming is an activity in which the majority of children and many adults get involved. The setting will raise awareness with parents via newsletters/ sharing of relevant resources and the sharing of training.

Grooming

Online grooming is the process by which one person with an appropriate sexual interest in children will approach a child online with the intention of developing a relationship with that child, to be able to meet them in person and intentionally cause harm. The setting will support parents to recognise the signs of grooming via newsletters/ sharing of relevant resources and sharing training opportunities.

Online Reputation

Online reputation is the opinion others get of a person when they encounter them online. It is formed by posts, photos that have been uploaded and comments made by others on people's profiles. It is important that children and staff are aware that anything is posted could influence their future professional reputation.

Sexting

Sexting often refers to the sharing of naked pictures or videos through mobile phones and/or the internet.

The setting will use age appropriate educational material to raise awareness and promote online safety.

All children will have supervised access to the internet whilst in our care and staff will abide by the Phones and Other Electronic Devices and Social Media Policy at all times.

Trafficked Children and Modern Slavery

Any child transported for exploitative reasons is considered to be a trafficking victim. There is evidence that children (both of UK and other citizenship) are being trafficked internally within the UK and this is regarded as a more common form of trafficking in the UK.

Trigger Trio

The term trigger trio is used to describe domestic violence, mental ill health and substance misuse.

Upskirting

In 2019 the Voyeurism Offences Act came into force and made the practice of upskirting illegal. Upskirting is defined as someone taking a picture under another person's clothing without their knowledge, with the intention of viewing their genitals or buttocks, with or without their underwear. If staff are made aware that upskirting has occurred it will be reported to the police immediately.

APPENDIX B – CONCERNS FORM

APPENDIX C – USEFUL CONTACTS

Contact telephone numbers

- Isle of Wight Safeguarding children partnership – www.iowscp.org
- Local Multi Agency Safeguarding Hub – **0300 300 0901**
- Local Authority Designated Officer (LADO) - **01962 876364** - **child.protection@hants.gov.uk**
- NSPCC – **0808 800 500**
- OFSTED – **0300 123 1231**
- Emergency Police – **999**
- Non - emergency police – **111**
- Government helpline for extremism concerns – **020 7340 7264**
- Female Genital Mutilation Helpline – **0800 028 3550**

