

Safeguarding Children / Child Protection Policy

At Cabin Childcare we work with children, parents, external agencies and the community to ensure the welfare and safety of all children in our care. Children have the right to be treated with respect, be helped to thrive and to be safe from 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 setting we strive to protect children from the risk of radicalisation and we promote acceptance and tolerance of other beliefs and cultures (Please see our Prevent/ Promoting British Values Policy).

Safeguarding is a much wider subject than the elements covered in this single policy, therefore this document should be used in conjunction with the settings other policies and procedures.

Legal Frame work and Definition of safeguarding

- . Children act 1989 and 2004
- . Childcare Act 2006
- . Safeguarding Vulnerable Groups Act 2006
- .Working together to safeguard children 2015(updated 2017)
- . Keeping children safe in education 2016
- .What to do if you're worried a child is being abused 2015
- .Counter-Terrorism and Security Act 2015

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

- . Protecting children from maltreatment
- . Preventing the impairment of children's health or development
- .Ensuring that children are growing up in circumstances consistent with 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 children2015)

- . Ensure that all staff feel confident and supported to act in the best interest of the child, share information and seek the help that 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, including through annual safeguarding newsletters and updates.
- . Make any referrals relating to extremism to the police (or the Government helpline) in a timely way, sharing relevant information as appropriate filters, checks and safeguards, monitoring access at all times.
- . Ensure that children are never placed at risk while in charge of Cabin Childcare staff.
- . Identify changes in staff behaviour and act on these relating to the settings staff related policies.
- . Take any appropriate action relating to allegations of serious harm or abuse against any person working with children and report all allegations to Ofsted and any other relevant authorities.
- . Ensure parents are fully aware of child protection policies and procedures when they register with the nursery and are kept informed of any changes and amendments.
- . Regularly review and update this policy with staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by The Herefordshire Safeguarding Board HSCB.

We will support children by offering reassurance, comfort and sensitive interactions.

We will devise activities according to individual circumstances to enable children to develop confidence and self-esteem within their peer group and support them to learn how to keep themselves safe.

Contact Telephone Numbers

MASH Multi Agency Safeguarding Hub 01432 260800

Local Authority Designated Officer Herefordshire Safeguarding Website

OFSTED 0300123 1231

Non-Emergency Police 101

Government helpline for extremism concerns 02073407264

Early Years Help Herefordshire Council Offices Plough lane see council website.

Types of Abuse and particular procedures followed.

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by harming them 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 a stranger. This could be an adult or adults, another child or children.

We follow practice guidance What to do if you're worried a child is being abused (2015).

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 or staff.
- . Unaddressed illness, injuries, or absences.
- . Significant changes to behaviour patterns.

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

- .Low self-esteem
- . Wetting and soiling
- . Recurrent nightmares
- . Aggressive behaviour
- .Withdrawing communication
- . Habitual body rocking
- . Indiscriminate contact or affection seeking
- .Excessive clinginess
- .Persistently seeking attention

We are aware 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

Action needs to be taken if staff have reason to believe that there has been a physical injury to a child, including deliberate poisoning, where there is definite

Knowledge or reasonable suspicion that the injury was inflicted or knowingly not prevented. These symptoms may include bruising or injuries in an area that is not usual for a child, e.g. fleshy parts of arms and legs, back, wrists, ankles and face.

Many children will have cut, grazes, bumps and bruises whilst playing and exploring in the setting at home or in the outside environment. These are always monitored, logged and discussed within the settings team and with parents/carers. If a child arrives at the nursery with an existing injury the setting has an Existing Injury form which is completed and an informal discussion takes place.

Female genital mutilation

This type of physical abuse is practised as a cultural ritual by certain ethnic groups and there is now more awareness of its prevalence in some communities in England including its effect on the child and any other siblings involved. This procedure may be carried out shortly after birth and during childhood as well as adolescence, just before marriage or during a woman's first pregnancy. This varies according to the community.

Symptoms may include bleeding, painful areas, acute urinary retention, urinary infection, septicaemia, incontinence, vaginal and pelvic infections. Also there may be post-traumatic stress and depression.

If the setting had any concerns about a child experiencing any of these conditions we would immediately call MASH Multi Agency Safeguarding Hub. We would also contact the police as a mandatory duty regarding girls under the age of 18.

Fabricated illness

This is also a type of physical abuse. This is where a child is presented with an illness that is fabricated by an adult carer. The care may seek unnecessary medical treatment or investigation. The signs may include exaggerating a real illness or symptoms, complete fabrication of symptoms or including physical illness e.g. starvation, poisoning, inappropriate diet. This may also be presented through false allegations of abuse or

encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.

Sexual abuse

Action needs to be taken if a staff member has witnessed an occasion(s) where a child has indicated sexual activity through words, play, drawing, had an excessive preoccupation with sexual matters or had inappropriate knowledge of adult sexual behaviour or language. 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. The child may become worried when their clothes are removed e.g. nappy changes.

The physical symptoms may include genital trauma, discharge and bruises between the legs or signs of sexually transmitted disease (STD).

Emotional symptoms could include a distinct change in a child's behaviour. They may become withdrawn or overly extroverted and outgoing. They may withdraw away from a particular adult and become distressed if they reach out for them, but may also be particularly clingy to a potential abuser so all symptoms and signs should be looked at together and assessed as a whole.

If a child starts to talk openly to an adult about abuse they may be experiencing the following procedure will take place.

Procedure

- . The adult should reassure the child and listen without interrupting if the child wishes to talk.
- . The observed instances are to be reported immediately to the Nursery Manager and Designated Safeguarding Officer.
- . The observed instances will be detailed in a confidential report.
- . The matter will then be referred to MASH Multi Agency Safeguarding Hub.

Child sexual exploitation

Working together to Safeguard Children 2015 (updated 2017) defines CSE as 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 wants or needs 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 occur through technology.

We will be aware of the possibility of Child Sexual Exploitation (CSE) and the signs and symptoms this may manifest as. If the Cabin Childcare team have any concerns, we will follow the procedures as for other concerns and will record and refer as appropriate.

Emotional abuse

Action should be taken if a member of staff has reason to believe that there is a severe, adverse effect on behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection. This relates to practice by parents/carers, family members, peers, nursey staff and other professionals.

Areas that are signs of concern are extremes of discipline where a child is shouted at or put down on a consistent basis, lack of emotional attachment by a parent, or it may include parents or carers placing inappropriate age or developmental expectations upon them. Emotional abuse may also be imposed through the child witnessing domestic abuse and alcohol and drug misuse by adults caring for them.

The child is likely to show extremes of emotion with this type of abuse. This may include shying away from an adult who is abusing them, becoming withdrawn, aggressive or clingy in order to receive their love and attention. This type of abuse is harder to identify as the child is not likely to show any physical signs.

Neglect

Action should be taken if a staff member has reason to believe that there has been any type of neglect on a child

Examples

- . Exposure to any kind of danger, including cold, starvation or failure to seek medical treatment, when required.
- . Persistently arriving in an unwashed or unkempt state.
- . Persistently hungry.
- . May also be shown through emotional needs for example if a child may not be receiving attention at home they may show signs of craving love and affection in the setting.
- . May be clingy.

Reporting Procedures

All staff a responsibility to report any safeguarding concerns and suspicions of abuse. These concerns will be discussed with the Designated Safeguarding coordinator DCSO as soon as possible.

- . Staff will report their concerns to the DCSO or Deputy DCSO.
- . Any signs of marks/injuries to a child or information a child has given will be recorded and stored in the settings confidential child log. This log is stored in the office.
- . If appropriate, the incident will be discussed with the parent/carer, such discussions will be recorded and the parent will have access to these records on request and the DSCO may feel this is an appropriate time to start part 10f the Early Help Assessment EHA form, depending on severity of the issue/concern.

The designated safeguarding lead will:

- . If the concern meets certain criteria previously mentioned earlier the MASH team and any other relevant bodies will be contacted.
- . The setting can contact MASH at any time to discuss concerns and seek advice.
- . Inform OFSTED
- . Record the information and action taken relating to the concern raised.
- . Speak to parents unless advised not to by LA children's social care MASH.
- . The Designated safeguarding lead will follow up action taken by LA children's social care MASH if they have not contacted the setting within the time frame set out in Working Together to Safeguard Children 2015(revised 2017)

Keeping children safe is our highest priority and if, for whatever reason, staff do not feel able to report concerns to the DCSO or deputy DCSO they should call MASH or the NSPCC and report their concerns anonymously.

All staff have their own personal profile with information and contact numbers.

Recording Suspicions of Abuse and Disclosures.

- . Child's name
- .Child's address
- . Age of the child and date of birth

- . Date and time of the observation or the disclosure
- .Exact words spoken by the child
- .Exact position and type of any injuries or marks seen
- . Exact observation of any incident including any concern was reported, with date and time; and names of any other person present at the time
- . Any discussion held with parent (where deemed appropriate)

These records should be signed by the person reporting concern/disclosure and the manager/ DSCO dated and kept in the confidential child log.

If a child starts to talk to an adult about potential abuse, it is important not to promise the child complete confidentiality. This promise cannot be kept. It is vital that the child is allowed to talk openly and disclosure is not forced or words put into the child's mouth. As soon as possible after the disclosure details must be logged accurately.

It may be thought necessary that through discussion with all concerned the matter needs to be raised with MASH local authority children's social care and Ofsted.

Staff involved may be asked to supply details and evidence to support concerns. The setting expects all members of staff to comply with these requirements in anyway necessary to ensure the safety of the children.

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

Informing parents

Parents are normally the first point of contact. If suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of MASH team/police does not allow this. This will usually be the case where the parent or family member is the likely abuser or where a child may be endangered by this disclosure. In these cases the investigating officers will inform parents.

Confidentiality

All suspicions, enquiries and external investigations are kept confidential and shared only with those who need to know. Any information is shared in line with guidance from the local safeguarding children's board.

Support to families

Cabin Childcare takes every step in its power to build up trusting and supportive relations among families, staff, students and volunteers within the nursery.

Cabin Childcare continues to welcome the child and the 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.

A confidential log is kept for all children in the setting and shared with the children's parents or those who have parental responsibility. Information is only shared in line with guidance of the Herefordshire Safeguarding Board Guidelines. Cabin Childcare will do everything in its power to support and work with each individual child and their family.

Allegations

If an allegation is made against a member of staff, student or volunteer or any other person who works at the setting regardless of whether the allegation relates to the nursery premises or elsewhere, we will follow the procedure below.

The allegation should be reported to the senior manager on duty. If this person is the subject of the allegation then this should be reported to the owner/registered person DSCO/deputy manager.

The Local Designated Officer (LADO), OFSTED and The Herefordshire Safeguarding Board will be informed immediately in order for this to be investigated by the appropriate bodies promptly.

- . The LADO will be informed immediately for advice and guidance
- . If as an individual you feel this will not be taken seriously or are worried about the allegation getting back to the person in question then it is your duty to inform the LADO yourself directly.
- .A full investigation will be carried out by the appropriate professionals (LADO, Ofsted, LSCB) to determine how this will be handled
- . The setting will follow all instructions from the LADO, Ofsted, LSCB and ask all staff members to do the same and co-operate where required.
- . Support will be provided to all those involved in an allegation throughout the external investigation in line with LADO support and advice.
- . Cabin Childcare reserves the right to suspend any member of staff during investigation.

.All enquires/external investigations/ interviews will be documented and kept in a locked file for access by the relevant authorities.

Unfounded allegations will be passed on to the relevant organisations including the local safeguarding authority. Where an offence is believed to have been committed, the police and Ofsted will be notified and will result in a termination of employment. The setting will also notify the DBS to keep records up to date.

- . All records will be kept until the person reaches normal retirement age or for 21 years and 3 months. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary reinvestigation.
- . Cabin Childcare retains the right to dismiss any member of staff in connection with founded allegations following an inquiry.
- . Counselling will be available for any member or the setting who is affected by an allegation, their colleagues in the nursery and the parents.

Monitoring children's attendance

As part of our requirements under the statutory framework and guidance documents we are required to monitor all children's attendance patterns to ensure they are consistent and no cause for concern.

We have daily registers and any absences are recorded in our daily room log. Any absence which is out of the norm or for a long period is recorded and a conversation/meeting is held with parents and carers to discuss reasons etc.

Parents are requested to inform the setting of absence and holidays.

This does not stop parents taking precious time with their children, but enables children's attendance to be logged so we know the child is safe.

Looked after children

As part of our safeguarding practice we will ensure our staff are aware of how to keep looked after children safe. In order to do this we ask that we are informed of:

- . Legal status of the child (e.g whether the child is being looked after under voluntary arrangements with consent of parents or on an interim or full care order)
- . Contact arrangements for the biological (or those with parental responsibility)
- . The child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her.

- . The details of the child's social worker and any other support agencies involved
- . Any child protection plan or care plan in place for the child in question

Staffing and volunteering

Our policy is to provide a secure and safe environment for all children. Cabin Childcare only allow an adult who is employed by the setting and who has an enhanced clearance from the Disclosure and Barring Service (DBS) to be left alone with children. We will obtain enhanced criminal records checks (DBS) for all volunteers and do not allow any volunteers to be unsupervised with children.

All staff attend child protection and safeguarding training in house and with other agencies. All new staff are made aware of the settings safeguarding procedures and policies in their induction period. They are made aware of contact numbers for LADO and The Herefordshire Safeguarding Board contact MASH team.

Cabin Childcare has named persons within the nursery who take lead responsibility for safeguarding and co-ordinate child protection issues.

We have a lead designated co-ordinator for safeguarding, and a Deputy who works alongside the lead who also attends training and updates. Both staff members inform the team of changes, and updates regularly within the day, individual discussions or full staff training.

The designated staff members are

Lorraine Castle and Elizabeth Ross-Whittall

Other Policies relating to Safeguarding and Child Protection which can be found in our Policies and Procedures File.

- . Prevent Duty and Promoting British Values
- . Emergency in the Workplace
- . SEND Policy
- .Equal Opportunities Policy
- . Partnership with parents
- . Policy on Outings
- . Procedure for dealing with unacceptable behaviour
- . Whistleblowing
- . Premises and Security

- . Photography/videos
- . Behaviour management
- . Confidentiality
- . Data protection
- .Procedure for late and uncollected children
- . Lost children
- . Use of mobile phones
- . Visitors
- . Students/ Volunteers
- . Internet and Social Networking.
- . Arrival and departure procedure

Cabin Childcare 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 Cabin Childcare's manager/owner /DSL/registered person at the earliest opportunity.

This policy was adopted on	Signed on behalf of the nursery	Date for review
Jan 2024	Elizabeth Ross-Whittall	Jan 2025