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| **1.3** | **Safeguarding and Child Protection Policy** |

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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 within our care, protect them from maltreatment and have robust procedures in place to prevent the impairment of children’s health and development. We strive to protect children from the risk of radicalisation and we promote acceptance and tolerance of other beliefs and cultures (please refer to our inclusion and equality policy for further information). Safeguarding is a much wider subject than the elements covered within this 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 Vulnerable Groups Act 2006
* The Statutory Framework for the Early Years Foundation Stage (EYFS) 2017
* Working together to safeguard children 2015
* What to do if you’re worried a child is being abused 2015
* Counter-Terrorism and Security Act 2015.
* Guidance and procedures of Bournemouth and Poole Local Safeguarding Children Board (LSCB)

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 the HM Government document ‘Working together to safeguard children 2015).*

**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 professional conduct
* 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.

We are aware that abuse does occur in our society and we are vigilant in identifying signs of abuse and reporting concerns. Our practitioners 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 believe 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 for children’s social care, health professionals or 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.

We aim to:

* Keep the child at the centre of all we do
* Ensure staff are trained to understand the child protection and safeguarding policy and procedures, are alert to identify possible signs of abuse, understand what is meant by child protection and are aware of the different ways in which children can be harmed, including by other children through bullying or discriminatory behaviour
* Ensure staff understand how to identify early indicators of potential radicalisation and terrorism threats and act on them appropriately in line with national and local procedures
* 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
* Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the Bournemouth and Poole Safeguarding Children Board
* Make any referrals relating to extremism to the police (or the Government helpline) in a timely way, sharing relevant information as appropriate
* Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest
* Ensure that children are never placed at risk while in the charge of our practitioners
* Take any appropriate action relating to allegations of serious harm or abuse against any person working with children or living or working on the preschool premises including reporting such allegations to Ofsted and other relevant authorities
* Ensure parents are fully aware of child protection policies and procedures when they register with the preschool and are kept informed of all updates when they occur
* 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 Bournemouth and Poole Local Safeguarding Children Board.

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.

We are signed up to the Bournemouth and Poole Local Safeguarding Children’s Board (LSCB) compact, Multi Agency Risk Assessment Conference (MARAC) information sharing protocol and also the Personal Information Sharing Agreement (DV1 Alerts).

We aim to develop strong relationships between all members of the children’s families in order for us to identify if they require extra support and work with other professionals and organisations to provide this support as quickly and effectively as possible. This is made possible through our Key Person system, which allocates every child enrolled in the setting a specific member of staff who is responsible for liaising with the child’s family about their development and time spent in our care. This relationship allows the practitioner to notice changes in children’s, and sometimes the adults, behaviour effectively and then use a number of observational techniques and conversations with the family to identify possible causes for the change (3.4).

Building strong communication links with the parents is vital, as an on-going dialogue enables the parents to share events and issues with the practitioners as they arise enabling the practitioner to offer tailored and specific support to the child as it is needed.

**Practitioner Training and Awareness**

Our policy is to provide a secure and safe environment for all children. We only allow an adult who is employed by the preschool to care for children and who has an enhanced clearance from the Disclosure and Barring Service (DBS) to be left alone with children. We do not allow volunteers to be alone with children or any other adult who may be present in the preschool regardless of whether or not they have a DBS clearance.

All applicants for posts within the preschool 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. Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information. All practitioners 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.

We give preschool members, volunteers and student’s regular opportunities via their half term supervision to declare changes that may affect their suitability to care for the children. This includes information about their health, medication or about changes in their home life such as whether anyone they live with in a household has committed an offence or been involved in an incident that means they are disqualified from working with children and this information is also stated within every practitioner’s contract. All practitioners will receive these supervision meetings where opportunities will also be made available to discuss any issues relating to individual children, child protection training and any needs for further support. We abide by the requirements of the Safeguarding Vulnerable Groups Act 2006 and the Childcare Act 2006 in respect of any person who is disqualified from providing childcare, is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern and this is reported to Ofsted and our LA.

We abide by the requirements of the EYFS and any Ofsted guidance in respect to obtaining references and suitability checks for practitioners, students and volunteers, to ensure that all practitioners, 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 long term students will have enhanced DBS checks conducted on them before their placement starts and we use the DBS update service to re-check staff’s criminal history and suitability to work with children.

All practitioners are required to attend a safeguarding awareness training session provided by the local authority within the first term of joining us, as part of their induction process. This training will enable them to identify any signs of abuse and abusers/potential abusers, or neglect and children who may be in need of additional support or referred to our designated safeguarding lead (3.5), it will also cover how to record and report concerns and how to create a safe and secure environment for the children in our preschool. During induction practitioners will be given contact details for the LADO (local authority designated officer), the local authority children’s services team, the Local Safeguarding Children Board (LSCB) and Ofsted to enable them to report any safeguarding concerns, independently, if they feel it necessary to do so.

Our DSL is **Karen Brown** the deputy in her absence is **Jane Tuvey**. Both have undertaken a 2 full-day multi-agency safeguarding training which enables us to identify, understand and respond appropriately to signs of possible abuse and neglect. They have overall responsibility for safeguarding the children in the setting. Karen attends termly LA safeguarding forums to keep her knowledge up-to-date as well as attending an update session every two years. They will liaise with other agencies including social care as needed (3.4).

The designated safeguarding lead has the responsibility to and involves but is not limited to (3.5):

* Liaising with local statutory children's services agencies, and with the LSCB.
* Providing support, advice and guidance to any other staff on an ongoing basis, and on any specific safeguarding issue as required
* To keep accurate and detailed records and keep those confidential
* To attend regular training and inform the team of new indicatives
* To receive DV1 alerts and MARAC requests from the Local Authority, dealing with these sensitively when communicating with the family and keeping such information secure.

All Practitioners are made aware of their role in respect to the safeguarding children procedure. This is achieved by enabling each practitioner to access safeguarding awareness update sessions every 2 years – we also review and update our policies regularly and changes in procedure are discussed (and written in the minutes) at our half-termly team meetings (3.6).

**Our Environment**

Little Fish aims to provide an environment in the pre-school which encourages the children to develop a positive self-image and supportive relationships between their peers and the adults with whom they interact. The setting also encourages the children to develop independence alongside the ability to work co-operatively with others, building trust which enables them to express their feelings and emotions in an acceptable way.

We plan activities which assist the children to explore and recognise their emotions and feelings and the vocabulary they may require to communicate this to adults who care for them. Our registration board, on which the child add their names on entry, has symbols for happy, sad, worried and tired and the children can move their names throughout the day next to the picture depicting the feeling they are experiencing, We also include activities which develop methods for self-protection, for example in small group work discussing what to do if you get lost. Our Monkey ‘Safe Sally’ constantly encourages safe play and interaction with others.

The layout of the setting allows for constant supervision, where children need to spend time away from the rest of the group, for example if they are sleeping they are monitored regularly to ensure they remain safe. For the majority of the time we can both see and hear the children, if we cannot do both we will ensure that we can either see them, or hear them. Whenever there are children on the premises there is always a minimum of 2 practitioners on site. All visitors to the preschool sign in on our register, no visitor is signed in unless we are either expecting them, for example a prospective parent or by checking their ID. No visitor, volunteer or student is ever left alone with a child in any part of the building.

For more details on vetting of employed staff and policy on visitors and students please refer to the following policies contained in this document:

* Practitioners Responsibilities and Expectations
* Student Placement
* Visitors Policy

Our Complaints policy contains details of how parents and families can make a complaint about the pre-school, or its practitioners, including allegations of abuse. In the case of an allegation of abuse being made then the complaint would be immediately reported to the LADO at the Local Authority and Ofsted. It would then be investigated using the LSCB guidelines.

**Safeguarding Procedures**

All practitioners are made aware (through training) of the four main categories of abuse (3.6):

* Physical
* Emotional
* Psychological
* Neglect

They are aware of, and know how to identify the signs and symptoms of possible abuse and neglect, by knowing the children and families well, through our Key Person system they are able to identify and respond to in a timely and appropriate way (3.6):

* Significant changes in children’s behaviour
* Deterioration in children’s general well being
* Unexplained bruising, marks or injuries and/or conflicting reports from parents or staff members about how they were obtained
* Repeated injuries
* Unaddressed illnesses or injuries
* Unkempt appearance
* Weight loss
* Tiredness and lethargy
* Comments children make which give cause for concern
* Any reasons to suspect neglect or abuse outside the setting, for example in the child’s home; and/or
* In-appropriate behaviour displayed by other members of staff, or any other person working with the children. For example: inappropriate sexual comments; excessive one-to-one attention beyond the requirements of their usual role and responsibilities; or inappropriate sharing of images.
* Significant absences, especially if families are returning to home nations for long periods
* Expressing views opposed to British Values
* Failure to thrive and meet developmental milestones
* Fearful or withdrawn tendencies
* Aggressive behaviour

\*The signs and indicators listed above 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.

All practitioners then follow the procedures for the setting which are based on the guidance set out in the publication ‘What to do if you are worried a child is being abused – Summary’ published by DCSF (2006) (3.7).

Ongoing concerns that don’t necessarily meet the threshold for referral are recorded by the practitioners and collected in the child’s confidential record by the named persons. These may be used to request the support of additional services such as Local Authority, Family Outreach, Health Visitors and ourselves. As a pattern emerges or a concern grows, we will contact Social Care to keep them informed and to take action following the advice given.

The practitioner must report their concerns to the safeguarding co-ordinator (DSL) immediately. Where an observation or disclosure has been made the practitioner must record in writing the following information:

* The child’s name
* The date and the time of the observation or the disclosure
* An objective record of the observation or disclosure
* The exact words spoken by the child
* The exact position and type of any injuries or marks seen
* Exact observation of any incident including any other witnesses
* The name of the person to whom the concern was reported, with date and time and the names of any other person present at the time
* The names of any other person present at the time

The named person will add to the record:

* The child’s address
* The age of child and date of birth
* Any discussion held with the parent(s) (where deemed appropriate)

These records are signed and dated by all practitioners involved and by the Safeguarding lead and stored in the child’s confidential record with a chronology sheet used to collate this data. These records are stored in a secure drawer in the filing cabinet and if any records are stored electronically they are protected by a unique password so that only the safeguarding lead can access them.

Any information is shared in line with guidance from the LSCB. All suspicions and investigations are kept confidential and shared only with those who need to know, in some cases, the Key Person will be told some of the details of the concerns but not the full picture. This enables them to provide targeted care for the child, without prejudicing the Key Person’s view of the parents.

All records of concerns, referrals, discussions and decisions made must be made in writing, be accurate and kept in chronological order. Any information is shared under the guidance of the Local Safeguarding Children Board. The Safeguarding lead can (and has) contacted the Local Social Care Help desk to discuss concerns with them to seek advice on whether to report the concerns to them or other organisations.

**Disclosures**

In the case of a disclosure the practitioner must be careful not to influence the child as this could jeopardise any future criminal investigation. The practitioner will listen to the child, communicating with them in a way which is appropriate to their age, understanding and preference, taking into account those who have additional support needs or have English as an additional language. In whatever form the communication takes place the practitioner must record all the details accurately, and ensure they contain date and time.

If the practitioner is concerned about the disclosure made by a child then it is important to offer the child reassurance but under no circumstances should they promise to keep what the child tells them a secret, they should always tell the child that they may need to tell ‘Auntie Karen’ and in the language the child will understand, that other grown-ups may also need to be told, so that they can help the child and keep them safe.

**Physical abuse**   
Action needs to be taken if practitioners 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 the arms and legs, back, wrists, ankles and face.

Many children will have cuts and grazes from normal childhood injuries. These should also be logged and discussed with the DSL, all parents must complete an ‘existing injury form’ to record any injury a child has sustained outside of preschool.

Children and babies may be abused physically through shaking or throwing. Other injuries may include burns or scalds. These are not usual childhood injuries and should always be logged and discussed with the DSL.

**Female genital mutilation**  
Although uncommon with preschool age children, we need to be aware of older siblings. 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. Symptoms may include bleeding, painful areas, acute urinary retention, urinary infection, wound infection, septicaemia, in-continence, vaginal and pelvic infections with depression and post-traumatic stress disorder as well as physiological concerns. If you have concerns about a child relating to this area, you should contact children’s social care team in the same way as other types of physical abuse.

**Fabricated illness**  
This is also a type of physical abuse. This is where a child is presented with an illness that is fabricated by the adult carer. The carer may seek out unnecessary medical treatment or investigation. The signs may include a carer exaggerating a real illness or symptoms, complete fabrication of symptoms or inducing physical illness, e.g. through poisoning, starvation, inappropriate diet. This may also be presented through false allegations of abuse or encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.

**Procedure:**

* All signs of marks/injuries to a child, when they come into nursery or occur during time at the nursery, will be recorded as soon as noticed by a staff member
* The incident will be discussed with the parent at the earliest opportunity, where felt appropriate
* Such discussions will be recorded and the parent will have access to such records
* If there are queries regarding the injury, the local authority children’s social care team will be notified in line with procedures set out by the Local Safeguarding Children Board (LSCB).

**Sexual abuse**  
Action needs be taken if the staff member has witnessed an occasion(s) where a child indicated sexual activity through words, play, drawing, had an excessive preoccupation with sexual matters or had an 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. for nappy changes.

The physical symptoms may include genital trauma, discharge and bruises between the legs or signs of a sexually transmitted disease (STD). Emotional symptoms could include a distinct change in a child’s behaviour. They may be withdrawn or overly extroverted and outgoing. They may withdraw away from a particular adult and become distressed if they reach out for them, but they 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 procedure below will be followed.

**Procedure:**

* The adult should reassure the child and listen without interrupting if the child wishes to talk
* The observed instances will be detailed in a confidential report
* The observed instances will be reported to the nursery manager or DSL
* The matter will be referred to the local authority children’s social care team.

**Emotional abuse**  
Action should be taken if the staff member has reason to believe that there is a severe, adverse effect on the behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection.

This may include 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.

**Procedure:**

* The concern should be discussed with the DSL
* The concern will be discussed with the parent
* Such discussions will be recorded and the parent will have access to such records
* A PEHA may need to be completed
* If there are queries regarding the circumstances the matter will be referred to the local authority children’s social care team.

**Neglect**  
Action should be taken if the staff member has reason to believe that there has been persistent or severe neglect of a child (for example, by exposure to any kind of danger, including cold, starvation or failure to seek medical treatment, when required, on behalf of the child), which results in serious impairment of the child's health or development, including failure to thrive.

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 nursery 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.

Neglect may also be shown through emotional signs, e.g. a child may not be receiving the attention they need at home and may crave love and support at nursery. They may be clingy and emotional. In addition, neglect may occur through pregnancy as a result of maternal substance abuse.

**Procedure:**

* The concern will be discussed with the parent
* Such discussions will be recorded and the parent will have access to such records
* A PEHA may need to be completed
* If there are queries regarding the circumstances the local authority children’s social care team will be notified.

**Monitoring attendance of children**  
Although it is not compulsory for children to attend the early years setting, under our safeguarding responsibilities we are required to monitor children’s attendance and patterns of absence. If a child is not going to attend a session, we ask parents/carers to share the length and reason for the absence. This information will enable us to monitor illnesses that may occur across the setting.

The management of the setting is required to monitor all absences in order to safeguard children, and demonstrate this during inspections, so parents must inform us of any absences and the reasons for it at the earliest possibility so it can be recorded on registers.

**Informing parents**  
The child’s 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 LSCB/ local authority children’s social care 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.

**Practitioner Concerns and Making a Referral**

If any practitioner has any concerns about the welfare of a child in their care then they should first share these concerns with the Designated Safeguarding Lead or in her absence, her deputy. If they believe that the child and their family would benefit from support from an agency then they can either contact the Children’s Centres to request a Family Outreach Worker to work with the family, or we can ask our ELIT and Welfare officers from the Local Authority to make an assessment of the child’s needs in preschool.

Children’s Centre Rossmore 01202 261962

Children’s Centre Ted Webster 01202 261550

Children’s Centre Branksome 01202 261540

If we have ongoing concerns or there are situations which we are concerned about, or we want to check to see if the family is already known to social care and currently receiving or have in the past received support from Poole Children and Young People’s Social Care (CYPSC); we can use the MASH (Multi Agency Safeguarding Hub) system in Poole by phoning 01202 735046 and talking through the concerns with the team of professionals, including a Social worker in the Hub team.

Poole LA have launched its new Early Help Assessment Tool to replace the Common Assessment Framework (CAF), the Poole Early Help Assessment (PEHA) has a comprehensive process which gathers information from the child(ren) and parents or other family members involved as well as other professionals involved. The Assessment informs an action plan, which has clear targets and identifies who is responsible for achieving them. A multi-agency TAC or TAF meeting will be arranged to monitor and ensure ongoing progress and improvements

If at any point in the process any professional involved gains information that leads them to think the child’s needs would now reach the CYPSC higher thresholds they can contact the Hub for advice and support if needed to make the referral.

If the Safeguarding Lead believes that the situation is more urgent she will contact the Social Care Helpdesk for advice or to request intervention. In the majority of cases the carer with parental responsibility will be asked for their permission prior to referral, in fact when referral to the Family Outreach Workers or Home Start are made, the responsible adult needs to contribute to the referral process. The exception is when the Safeguarding Lead believes that doing so would place the child at increased risk of significant harm during a referral and will agree with the agency referred to what the child and parents are told, by whom and when. The contact numbers for these agencies are:

Local Authority Childcare Officers 01202 261940

Social Care Help Desk (Poole) 01202 735046  
*including the MASH*

Emergency Duty Officer 01202 668123

Police 01202 222222

Government helpline for extremism concerns020 7340 7264

Other useful contact details for safeguarding organisation can be found on the ‘Bournemouth and Poole Local Safeguarding Children Board’ website [www.bournemouth-poole-lscb.org.uk](http://www.bournemouth-poole-lscb.org.uk) or by calling the following agencies:

Children’s Board (LSCB) 01202 458873

Ofsted 0300 1231231

Non-emergency Police 101

NSPCC 08088 005000

A referral made to Social Care by telephone will be confirmed in writing within 48 hours.

**Following a Referral**

The pre-school will share with a referral agency any information they require as quickly, whilst maintaining accuracy, as possible, we will also make additional observations as requested. We will also continue to offer and provide support of the child and /or members of the family as required, including those made as part of an agreed and shared plan (e.g. a Child Protection plan, Child in Need plan or the PEHA process).

The pre-school continually strives to build and maintain trusting and supportive relationships with the families of the children in our care, the practitioners who work with us, the volunteers and our students to develop a caring, welcoming and safe environment.

We will continue to welcome the child and the family into this safe environment whilst investigations are being made in relation to possible abuse in the child’s home situation, this includes offering support to parents who are in highly stressful home environments where there are contributing factors, like ill health, low income, loss of employment, bereavement, misuse of alcohol or drugs and domestic violence. 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 with the priority of ensuring the care and safety of the child remaining paramount; we will do all we can within our remit, and in co-operation with other agencies to support and work with the family to keep them together as they tackle the issues they are facing. However, if we feel that the child is at risk we will not hesitate to act to protect the child from any harm.

**Allegations against a Practitioner, student or volunteer**

We are aware of the requirement to inform Ofsted of any allegations of serious harm or abuse by any person working or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere), and that we must also notify Ofsted of the action taken in respect of the allegations. These notifications must be made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made. Failure to inform Ofsted without reasonable excuse fails to comply with this requirement and commits an offence (3.8).

In the first instance 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/DSL/deputy manager instead. The Local Authority Designated Officer (LADO), Ofsted and the LSCB will then be informed immediately in order for this to be investigated by the appropriate bodies promptly.

If *an allegation is made against a practitioner, volunteer or student in the setting the following procedure will be followed (3.4):*

* All details of the allegation will be recorded immediately and accurately, noting the child or adult’s exact words and taking note of the situation in which the allegation was made.
* Ofsted and the Local Authority LADO will be informed as early as possible by the Safeguarding Lead or deputy, for advice and guidance.
* The Local Children’s Social Care helpdesk will be contacted for advice and to log the complaint for them to investigate.
* The practitioner, volunteer or student accused will be informed by the Safeguarding Lead on the day the complaint is received.
* A full investigation will be carried out by the appropriate professionals (LADO, Ofsted, LSCB) to determine how this will be handled
* The preschool will follow all instructions from the LADO, Ofsted, LSCB and ask all staff members to do the same and co-operate where required
* All enquiries/external investigations/interviews will be documented and kept in a locked file for access by the relevant authorities
* All records will be kept until the person reaches normal retirement age or for 21 years and 3 months years if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary reinvestigation
* The Safeguarding Lead will make a decision, in conjunction with Local Social Care, Local Authority Designated Officer (LADO) and Ofsted, about the action that should be investigation in to the allegation is concluded.
* Support, supervision and counselling will be offered to this practitioner and their colleagues throughout the investigation and after its conclusion to provide them with the support to continue in their role, in line with LADO support and advice.
* The preschool reserves the right to suspend any practitioner during an investigation
* Unfounded allegations will result in all rights being reinstated
* We will provide the investigating agency with all the information they ask of promptly, accurately and objectively.
* Once the investigation is completed the practitioner will be notified of the outcome. It the allegation is upheld then the practitioner’s employment will be terminated and the setting will supply the police and social care any additional information they may need to pursue and criminal conviction. Ofsted will be notified immediately of this decision. The preschool will also notify the Disclosure and Barring Service (DBS) to ensure their records are updated
* If the allegation is disproved then the practitioner will be provided with support to return to work at the earliest opportunity. They will receive continued support via the mentoring and supervision system for a minimum of the first term following their return to work.

The following people must be contacted in the event of any concern of an allegation against the Practitioners. There may be times when preschool employees and those working with young children will want to report to us concerns about practices and procedures for the safeguarding of children and young people. In the case of the allegation against the Designated Safeguarding Lead or registered persons, any practitioner can contact the following in confidence:

Local Authority Designated Officer (LADO) 01202 714677 John McLaughlin

07779 880352

Local Authority Childcare Officer 01202 261940 Lucy Stopford, Janice Watkins

Ofsted Whistle Blowing Helpline 0300 1233155

whistleblowing@ofsted.gov.uk

WBHL  
Ofsted  
Piccadilly Gate  
Store Street  
Manchester M1 2WD

If you are someone who wishes to complain about a service you use that we inspect or regulate, we will deal with your concerns through our normal complaints procedure.

Before contacting the helpline Free, confidential advice on Whistle blowing in the work place can be sought from the independent whistleblowing charity:

Public Concern at Work; it can help you to decide whether and/or how to raise your concern. You can call on 020 7404 6609 or email [**helpline@pcaw.co.uk**](mailto:helpline@pcaw.co.uk).

[**Public Concern at Work website**](http://www.pcaw.co.uk/) – it includes guidance on whistleblowing legislation.

**Non-mobile Children**Most children over two are independently mobile, however we need to consider that we will enrol children who are affected by disability and could therefore be non-mobile. But we also have a duty of care to the younger siblings of our enrolled children who will be non-mobile.

To ensure we meet this duty of care we refer to the Bournemouth & Poole Local Safeguarding Children Board’s Protocol for ‘Bruising, bleeding, fractures and possible injuries in Children who are Not Independently Mobile’, which states:

While the guidance recognises that professional judgement and responsibility have to be exercised at all times it errs on the side of safety by requiring that:

* All not independently mobile children with bruising or a burn or scald should be referred to Paediatrics AND to Children’s Social Care.
* All not independently mobile children with bleeding, a swelling of the head or a reduction in movement of a limb (which may indicate a fracture at that site) should be discussed with a consultant paediatrician. There should be a low threshold for referring to both Paediatrics and Children’s Social Care.

Other marks, abrasions or presentations in children not independently mobile always require an explanation, and action should be based on professional judgement and usual safeguarding practice. Professionals should not suggest a possible reason for the bruising / bleeding / swelling but ask an open question to seek an explanation from the parent / carer.

**E-Safety**   
Our preschool is aware of the growth of internet use and the advantages this can bring. However it is also aware of the dangers and strives to support children, staff and families in using the internet safely. Within the preschool we do this by:

* Ensuring we have appropriate antivirus and anti-spyware software on all devices and updating them regularly
* Using approved devices to record/photograph in the setting
* Never emailing personal or financial information
* Reporting emails with inappropriate content to the internet watch foundation (IWF [www.iwf.org.uk/](https://www.iwf.org.uk/))
* Ensuring content blockers and filters are on our computers, laptops and any mobile devices
* Ensuring children are supervised using internet devices
* Integrating e-safety into preschool daily practice by discussing computer usage ‘rules’ deciding together what is safe and what is not safe to do online
* Talking to children about ‘stranger danger’ and deciding who is a stranger and who is not, comparing people in real life situations to online ‘friends’
* We encourage staff and families to complete a free online e-safety briefing which can be found at <http://moodle.ndna.org.uk/>

Our preschool 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 manager/owner/DSL/registered person at the earliest opportunity.

**Photography and Video at Pre-school Events**We recognise that parents and carers are likely to want to record early years setting productions or special events, and families will value the memories evoked from such images for years to come.

We now request that parents and carers sign an Acceptable Use Agreement to cover the taking and use of such images, to ensure that the requirements of the Data Protection Act 1998 are adhered to and the wishes of other parents/carers are respected, as found in the ‘Online Safety – A toolkit for Early Years Settings’ booklet.

Practitioners are also made aware of the restriction of the use of mobile phones and cameras in the pre-school in the Media and Interactive Technology Policy.