



Safeguarding Policy

Introduction

As an Ofsted regulated preschool, we comply with the local child Safeguarding procedures, and it is our duty to record and report to children services any concerns regarding the possible abuse of children in our care (emotional, physical, sexual or neglect). If an allegation is made against a member of staff in the preschool, the correct procedure is followed.

Our prime responsibility is the welfare and well-being of children in our care. As such it is our duty to the children, parents/carers, and staff to act quickly and responsibly in any instance that may come to our attention. All staff will work as part of a multi-agency team where needed in the best interest of the child.

The Legal framework for this policy

- Children act (2004/1989)
- Working together to safeguard children (2018 / 2020)
- Safeguarding Vulnerable Groups Act (2006)
- Counter-Terrorism Act and Security Act (2015)
- Multi-Agency Practise Guidelines
- Female Genital Mutilation Act 2003
- Serious Crime Act 2015

Prevent Duty

In Line with section 26 of the counterterrorism and security act (2015) we understand the importance of staff members being able to recognise and identify vulnerable children and to have "due regard to the need to prevent people from being drawn into terrorism".

We recognise the importance of protecting children from the risk of radicalisation and promoting British values in the same way we would protect and safeguard children from any other abuse.

We will ensure all staff members are able to notice changes in children's behaviour as we would do with any kind of safeguarding matter as there is no single way of being able to identify a child who is at risk of being vulnerable or susceptible to radicalisation/extremism.

Due to the increased risk of online radicalisation, we ensure that children within the setting will only have supervised use of internet-based technology, any games and programmes used are age appropriate. Staff at the preschool have access to the internet, however this is not for personal use (which is acknowledged yearly in the staff code of conducts).

The preschool will educate families via the termly newsletter as well as the social media page, the importance of internet safety.



All staff members are also aware of the appropriate time to make a referral to the "Channel Programme".

Our Aim

It is our aim to ensure that all the children receive the highest level of care, provision, and education.

The health, safety, and welfare of all our children are of paramount importance to all the adults who work in our preschool. Our children have the right to protection, regardless of age, gender, race, culture, background, or disability. Children have the right to be safe within the preschool.

We are committed to:

- Building a "culture of safety" in which children are protected from abuse and harm in all areas of its service delivery.
- Responding promptly and appropriately to all incidents or concerns of abuse that may occur and to work with statutory agencies in accordance with the procedures that are set down in "what to do if you're worried a child is being abused"
- Promoting awareness of child abuse issues throughout its training and learning programmes for adults
- Empowering young children, our preschool curriculum, promoting their rights to be strong, resilient, and listened to.
- Ensuring that all staff are alert to the signs and understand what is meant by safeguarding and are aware of the different ways in which children can be harmed
- Ensuring we have a robust training system, in which all staff are confident in the policies and procedures relating to the safeguarding and welfare of the children

It is within the preschool safeguarding policy to provide a secure and safe environment for all children from abuse. The preschool will therefore not allow an adult to be left alone who has not received their enhanced DBS check clearance and received two references from previous employers or character testimonials, and all our staff will receive updated and relevant safeguarding training as part of their ongoing staff development and training. As a minimum staff will complete intermediate safeguarding training face to face every 2 years, FGM and Prevent training once per a year. A full morning face to face safeguarding refresher led by the setting DSL and DDSL. Staff will be updated as required on any safeguarding changes to the preschool practise, as well as staff having regular reminders and refreshers to ensure that their knowledge is robust.



We abide by Ofsted requirements in respect of references and Disclosure and Barring Services checks for all staff and volunteers to ensure that no disqualified person or unsuitable person has any access or contact with the children.

We know how important staff ratios are and ensure that we follow the legal requirements for the minimum numbers of staff present with the children at any time as set out in the Early Years Foundation Stage statutory framework.

Our Designated Safeguarding Leads Officer is **ELLIE WILSON** who works together and alongside our Deputy Safeguarding Officer **RACHEL PAYNE** to co-ordinate child protection issues.

Looked after children

Early years settings are committed to providing quality provision based on equality of opportunity for all children and their families. All staffs are committed to doing all they can to enable "looked after" children in their care to achieve and reach their full potential. We recognise that children who are being looked after have often experienced traumatic situations, emotional or sexual abuse or neglect. However, we also recognise that not all looked after children have experienced abuse and that there are a range of reasons for children to be taken into the care of the local authority. Whatever the reason, a child's separation from their home and family signifies a disruption in their lives that has impact on their emotional well-being.

In our setting, we place emphasis on promoting children's right to be strong, resilient, and listened to. Our policy and practise guidelines for looked after children are based on two important concepts, attachment, and resilience. The basis of this is to promote secure attachments in children's lives as the basis for resilience.

What is abuse?

A person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Staff in the preschool recognise that child abuse can and does happen in all types of families.

The following identifies some possible manifestations of child abuse; however, these lists are not exhaustive.

Neglect- is the persistent failure to meet basic physical and psychological needs, which may result in the serious impairment of the child's medical problems, emaciation or under nourishment. Staff may notice behavioural signs such as a child who always seems hungry, tired, has ill -fitting clothes, poor personal hygiene, e.g., soiled, unchanged nappies, etc.

Procedure:

- The concern should be discussed with the parent/carer.
- Such discussions will be recorded, and the parent/carer will have access to such records.



- If there appears to be any queries regarding the circumstances the DSL/DDSL will take appropriate action - such as a referral to the Medway child protection/MASH team.

Physical abuse- physical signs may involve unexplained bruising/marks in unlikely areas, facial bruising, hand/finger marks, bite marks, burns, lacerations, or abrasions. Staff may notice several behavioural signs that also indicate physical abuse such as a child that shy's away from physical contact, is withdrawn or aggressive towards others or their behaviour changes suddenly.

Procedure:

- All signs of marks/injuries noticed on a child will be recorded immediately on a pre-existing injury form, where the injury is explained and signed by parents
- The incident will be discussed parent/carer at the earliest opportunity (when signing form)
- If there appears to be any queries or concerns regarding the injury, the DSL/DDSL will take appropriate action - such as a referral to the Medway child protection/MASH team.

Sexual abuse -physical signs may include bruising consistent with being held firmly, discomfort in walking/sitting, pain or itching in the genital area, discharge, or blood on under clothes, or loss of appetite. Behavioural signs may include drawings or play showing indicators of sexual activity, sexually explicit language, and knowledge of adult sexual behaviour, seductive behaviour towards others, poor self-esteem and a child who is withdrawn.

Procedure:

- The observed instances will be detailed in a confidential report.
- The observed instances will be reported immediately to the DSL/DDSL.
- The matter will be referred by the preschool DSL/DDSL.

Emotional abuse - physical signs of emotional abuse may include a general failure to thrive, not meeting expected developmental milestones and behaviourally a child may be attention seeking, telling lies, have an inability to have fun and join in play, low self-esteem, speech disorders, and be inappropriately affectionate towards others.

Procedure:

- The concerns should be discussed with the parent/carer by the key worker and DSL/DDSL.
- Such discussions will be recorded, and the parent/carer will have access to such records



- If there appears to be any queries or ongoing concerns after discussion with parent/carer the DSL/DDSL will take appropriate action - such as a referral to the Medway child protection/MASH team.

Recording suspicions of abuse and disclosures (preschool safeguarding form):

Staff will record their concerns, including their observation (marks/injury) or the disclosure shared to them, the record must include-

- Child's details
- Date, time, location of the observation or disclosure
- EXACT words spoken by the child, this should not be changed by an adult "to sound better".
- Name of the person who the concern was reported to with date and time and names of any other person present at the time.
- Any discussion held with parents/carer
- Name and signature of person completing the report/observation.

However, when identifying any potential instances of abuse, staff must always be aware that children may demonstrate individual, or combinations of indicators detailed above but may not be the subject of abuse. Individual or isolated incidents do not necessarily indicate abuse. Staff should always remain vigilant and must **NOT** ignore warning signs and contact the relevant services at any stage for support.

Female Genital mutilation (FGM)

As our duty of care, we have a statutory obligation under national safeguarding protocols (e.g working together to safeguard children) to protect young girls and women from FGM as it is an illegal, extremely harmful practise and a form of abuse.

It is essential that we work closely together with other agencies if we suspect a child has suffered or is likely to suffer FGM as appropriate safeguarding efforts. This is reflected in the Multi-Agency Practise Guidelines.

If a child in our care shows signs and symptoms (see below) of FGM or we have good reason to suspect the child is at risk of FGM, we **MUST** refer the child using our existing standard safeguarding procedures as it is a form of child abuse. When a child is identified as "at risk" of FGM, this information **MUST** be brought to the child's GP attention and health visitor (as per section 47 of The Children's Act 1989)

Important Signs & Symptoms to look out for if you suspect the child is "at risk" of FGM

- Family comes from a community that is known to practice FGM
- Family may have limited contact with people outside family



- It is known that the mother has FGM
- Family does not engage with professionals (health, school, other)
- Parents say that they or a relative will take the child abroad for a prolonged period
- The child has spoken about a holiday to her country of origin or another where the procedure is practiced
- Child has confided that she is to have a "special procedure" to "become a woman" or to be "more like her mum/sister/aunt" etc
- Family/child are already known to social services

Important Signs & Symptoms to look out for if you suspect the child has had FGM

- Child regularly attends GP appointments, has frequent Urinary Tract Infections (UTI'S)
- Increased emotional and physiological needs e.g withdrawals, depression or significant changes in behaviour.
- Child talks about pain/discomfort between legs
- Child has difficulty walking, sitting for long periods of time- which wasn't a problem previously

Significant or Immediate Risk

- Child confides in a member of staff/professional that FGM has taken place
- Parent or family member discloses to professional/ preschool, child has had FGM

Breast Ironing

Breast ironing also known as "breast flattening" is the process where young girls' breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear, or delay the development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage. Breast Ironing/Flattening is a form of physical abuse and can cause serious health issues such as:

- Abscesses
- Cysts
- Itching
- Tissue damage



- Infection
- Discharge of milk
- Dissymmetry of the breasts
- Severe fever

If preschool staff suspect this type of abuse is happening or has happened, they **MUST** report their concerns to the DSL or DDSL immediately, who will then complete the necessary steps for reporting.

County Lines

The National Crime Agency (NCA) describe county lines as a term used to describe gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of 'deal line.' Those that buy/use the drugs will live in a different area to where the dealers and networks are based, so drug runners are needed to transport the drugs and collect payment. Offenders will often use coercion, intimidation, violence and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including education/social clubs etc.

Signs and indicators to be aware of include:

- Changes in the way young people sometimes unaffordable new things e.g. clothes, trainers, tech items
- Missing from home or schools and/or significant decline in performance
- New friends or relationships with those who don't share any mutual friendships with the victim or anyone else
- May be carrying a weapon
- Receiving more texts or calls than usual
- Sudden influx of money, clothes or mobile phones
- Unexplained injuries
- Significant changes in emotional well-being
- Young people seen in different cars/taxis driven by unknown adults
- Young people seeming unfamiliar with your community or where they are
- Unexplained injuries



Preschool staff should be aware that this may not be our preschool children directly, but older siblings or family members, preschool staff should be vigilant to any changes within the child's home and any concerns to follow their safeguarding procedures and inform the DSL or DDSL.

Cuckooing

Cuckooing is a form of county lines crime in which drug dealers take over the home of a vulnerable person in order to criminally exploit them as a base for drug dealing. Signs that this is happening in a family property may be an increase in people entering or leaving the property, an increase in cars or bikes outside the home; windows covered or curtains closed for long periods, family not being seen for extended periods; signs of drug use or an increase in anti-social behaviour at the home. If we recognise any of these signs, preschool staff will report their concerns to the DSL or DDSL.

Toxic Trio

The 'toxic trio' is made up of three issues: domestic abuse, mental ill-health, and substance misuse. These issues often co-exist, particularly in families where significant harm to children has occurred. The Children's Commissioner reported in 2018 that 100,000 children in England were in a household where one adult faces all three 'toxic trio' issues to a severe extent, and 420,000 children were in a household where one adult faces all three to a moderate/severe extent.

One reason why these issues often co-exist is that a parent misusing drugs, or alcohol is more likely to be in a relationship where domestic abuse occurs - those who misuse drugs or alcohol have a greater chance of experiencing mental ill-health. Conversely, adults with mental health problems are more likely to abuse drugs or alcohol; there are many different situations that could lead to all three of the toxic trio arising.

It is important to be aware of the toxic trio, because it is viewed as a key indicator of increased risk of harm to children and young people. Studies such as Brandon et al. (2012)

have shown that, in 86% of incidents where children were seriously harmed or died, one or more of the trios played a significant role - similar findings are reported inside Botham et al. (2016).



Domestic Violence

The Serious Crime Act 2015 section 76 created a new offence of "controlling or coercive behaviour in an intimate or family relationship".

The Domestic Violence, Crime and Victims Act 2004 extended provisions to help stop domestic abuse and created the new offence of "causing or allowing the death of a child or vulnerable adult". This Act was amended in 2012 by the Domestic Violence, Crime and Victims (Amendment) Act 2012 to include 'causing or allowing serious physical harm (equivalent to grievous bodily harm) to a child or vulnerable adult'.

Where domestic abuse is taking place in a child's home the child is at risk of harm, whether they witness the violence or not. This may take the form of physical abuse, sexual abuse, emotional abuse or neglect. If preschool staff feel that there are any signs or symptoms that domestic abuse may be occurring, they will report their concerns immediately to the preschool DSL or DDSL.

Signs may include:

- Visible signs of injury on the adult being abused
- Changes in behaviour of the adult(s) and child - e.g. the abused adult may become withdrawn, show low levels of self-esteem
- One adult being visibly worried about what their partner may say in a certain situation (e.g. if the child has become dirty or injured at nursery)
- One adult becoming scared of their partner
- Adults becoming isolated from their friends or family
- Signs of abuse in the child

Honour based Violence

'Honour' based violence (HBV) is a type of domestic abuse which occurs due to the families 'honour'. Some families believe that certain actions bring shame on the family and may react with punishment. This may be rejecting a forced marriage, having a relationship not approved by the family, wearing the wrong clothing or wearing makeup. This can happen in families from a variety of cultures and countries and also happens within the UK.

Signs of HBV may include changes in behaviour of the person undergoing the violence, changes in how they dress or act and also in comments they make.

If signs of HBV are present in a parent or staff member within the preschool then staff should address their concerns to either the DSL or DDSL.



Forced Marriage

The preschool are aware arranged marriages are part of some cultural practices and, also recognise there is a clear distinction between a marriage in which both parties are willing and able to give an informed consent to, and a marriage which is forced. Forced marriage is a criminal offence.

A forced marriage is a marriage in which one or both spouses do not and/or cannot consent to the marriage and duress is involved. If we become aware of a forced marriage occurring then we will report it to the DSL or DDSL. The DSL/ DDSL will then report it to the children's social care team, if the person is under the age of 18, as this is a child protection issue.

Snack Time - Children will be provided with food items that are suitable for their dietary requirements, all food will be prepared following the Food Standards Agency guidelines, to ensure food is prepared to limit the chances of choking. During all times when a child is eating, they will be in sight and hearing of a member of staff, this member of staff must hold a valid paediatric first aid qualification.

Whistle Blowing - Expressing concerns about a member of staff

A system in place for all preschool staff to access, should they have any concerns about how a staff member or volunteer is behaving around the preschool children. This is a final procedure, should you feel that neither the DSL or DDSL have taken your concerns seriously.

You must contact Medway Council First Response first and then inform OFSTED.

Medway Council First Response: 01634 334466 / triage@medway.gov.uk

Ofsted: 03001233155 / whistleblowing@ofsted.gov.uk

If you wish to discuss your concerns anonymously before taking the 'whistle blowing' steps, staff can contact the NSPCC Whistle Blowing advice line.

08000280285 / help@nspcc.org.uk

Useful contact information

Police/Ambulance/Fire - 999

The Samaritans - 116 123

Non - emergency police calls - 101

Anti - Terrorist Hotline - 0800 789 321



NSPCC FGM Helpline - 0800 028 3550

FGM Helpline email - fgm.help@nspcc.org.uk

Refuge Domestic abuse helpline - 020 7395 7700

Childline - 0800 1111

Medway Safeguarding Children's Partnership - 01634 336329 - [Medway Safeguarding Out of hours - 03000 41 91 91](tel:03000419191)
By Email : mscp@medway.gov.uk

First Response for Safeguarding concerns - 01634 334466 By e-mail: triage@medway.gov.uk