

# Mr. Bee's - Family Centre

North Lynn Springwood St Augustine's

# Safeguarding Children and Child Protection

(including managing allegations of abuse against a member of staff)

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# **Policy statement**

Mr. Bee's is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment' (Children's Workforce Development Council, 2009).

#### Mr. Bee's aim is:

- To ensure every child who attends the setting is safe and protected from harm
- To ensure all those working in the setting, either paid or unpaid, have a clear understanding of the legal responsibility to safeguard and promote the welfare of all children
- To ensure parents/carers have a clear understanding of the legal responsibilities relating to safeguarding and promoting the welfare of all children
- To prevent impairment of health or development
- To enable children to have optimum life chances and enter adulthood successfully

# **Roles and Responsibilities**

- Our Safeguarding Lead Practitioner (SLP) and deputy who co-ordinate child protection issues are named on the useful contact page attached to this policy.
- In the event you are unable to contact the nominated person refer to the contingency plan which is held in the Operational Plan folder, Welfare Section 1.
- Our designated officer who oversees this work on a day to day basis is Karen Gibbons, Senior Early Years Professional.
- The designated Trustee for safeguarding is Jeanette Nowrung.
- We ensure all staff are made aware of our safeguarding policies and procedures and are aware of the location of the Norfolk County Council (NCC) flow chart on the process to follow if they have a concern regarding a child during the induction process.
- Parents and families are made aware of our Duty of Care as an early years and childcare setting in our terms and conditions together with NCC's poster which is displayed in our parent areas.
- A copy of this policy is available on our website (<a href="http://www.mrbeesfscentre.co.uk/childcare-facilities">http://www.mrbeesfscentre.co.uk/childcare-facilities</a>) and on the parent board in each centre.
- We provide adequate and appropriate staffing resources to meet the needs of children.

#### Recruitment

Recruitment procedures are outlined in our Safer Recruitment policy.

Applicants for posts within the setting are clearly informed that the positions are exempt from the

Rehabilitation of Offenders Act 1974.

Candidates are informed of the need to carry out 'enhanced disclosure' checks with the Disclosure

and Barring Service 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.

We abide by Ofsted requirements in respect of references and Disclosure and Barring Service

checks for staff and volunteers, to ensure that no disqualified person or unsuitable person works at

the setting or has access to the children.

Guidance is followed from the Norfolk Safeguarding Children Board's (NSCB) Safer Recruitment

toolkit which forms part of the Safeguarding in early years and childcare folder (June 2012) and the

Department for Education and Skills (DfES) Guidance for Safer Working Practice for Adults who

Work with Children and Young People.

Volunteers, trainees and students are never left alone with children or without appropriate

supervision.

We have procedures for recording the details of visitors to the setting.

We take security steps to ensure that we have control over who comes into the setting so that no

unauthorised person has unsupervised access to the children.

Mr Bee's is committed to 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' (HMG 2015)\*.

**Training** 

We seek out training opportunities with Norfolk County Council for all adults involved in the setting to

ensure that they are able to recognise the signs and signals of possible physical abuse, emotional

abuse, sexual abuse and neglect and that they are aware of the local authority guidelines for making

referrals.

All staff members are trained at an introductory level and Managers undertake further training at

Safeguarding Lead Practitioner Training and Safer Recruitment level every three years.

We ensure that all staff know the procedures for reporting and recording their concerns in the setting.

Mr Bee's is committed to promoting awareness of child abuse issues throughout its training and learning

programmes for adults. It is also committed to empowering young children, through its early childhood

curriculum, promoting their right to be strong, resilient and listened to.

**Definitions of abuse** (Working Together 2015)

Physical abuse is deliberately physically hurting a child. It might take a variety of different forms,

including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a

child. Physical abuse can happen in any family, but children may be more at risk if their parents have

problems with drugs, alcohol and mental health or if they live in a home where domestic abuse happens.

Babies and disabled children also have a higher risk of suffering physical abuse. Physical harm may also

be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Physical abuse can also occur outside of the family environment.

Emotional abuse is the persistent emotional maltreatment of a child. It is also sometimes called

psychological abuse and it can have severe and persistent adverse effects on a child's emotional

development. Although the effects of emotional abuse might take a long time to be recognisable,

practitioners will be in a position to observe it, for example, in the way that a parent interacts with their

child. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and

inadequate. It may include not giving a child opportunities to express their views, deliberately silencing

them or 'making fun' of what they say or how they communicate. Emotional abuse may involve serious

bullying – including online bullying through social networks, online games or mobile phones – by a child's

peers.

Sexual abuse is any sexual activity with a child. You should be aware that many children and young

people who are victims of sexual abuse do not recognise themselves as such. A child may not

understand what is happening and may not even understand that it is wrong. Sexual abuse can have a

long-term impact on mental health. Sexual abuse may involve physical contact, including assault by

penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing,

rubbing and touching outside clothing. It may include non-contact activities, such as involving children in

the production of sexual images, forcing children to look at sexual images or watch sexual activities,

encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for

abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can

commit acts of sexual abuse, as can other children.

**Child sexual exploitation** is a form of sexual abuse where children are sexually exploited for

money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases,

young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection

or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in

sexual activity with the person who is exploiting them. Child sexual exploitation doesn't always involve

physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.

**Neglect** is a pattern of failing to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter. It is likely to result in the serious impairment of a child's health or development. Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action. However, while you may be concerned about a child, neglect is not always straightforward to identify. Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

# **Specific Safeguarding Issues**

Staff members need to be aware of safeguarding issues and be alert to any risks, specifically issues such as child sexual exploitation, fabricated or induced illness, female genital mutilation, private fostering, etc., and the local procedures to respond to risks.

The government website (www.gov.uk) has broad government guidance on a variety of issues. The following is not a comprehensive list and staff members are required to search the government website for advice on other issues.

- child sexual exploitation (CSE)
- bullying including cyberbullying
- domestic violence
- drug
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM)
- forced marriage
- gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- mental health
- private fostering
- preventing radicalisation and the Prevent duty

sexting

teenage relationship abuse

trafficking

Further information on Female Genital Mutilation

Staff members need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. Staff should activate local safeguarding procedures, using existing national and local protocols for multiagency liaison with police and children's social care. Further guidance of FGM can be found in Gov.UK's publication Mandatory Reporting of Female Genital Mutilation – procedural information.

Further information on Preventing Radicalisation

The Counter-Terrorism and Security Act, which received Royal Assent on 12 February 2015, places a duty on specified authorities, including local authorities and childcare, education and other children's services providers, in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism (refer to Gov.UK's The Prevent duty Departmental advice for schools and childcare providers.

The Counter-Terrorism and Security Act 2015 places a duty on local authorities to ensure Channel panels are in place. The panel must include the local authority and chief officer of the local police. Panels will assess the extent to which identified individuals are vulnerable to being drawn into terrorism, following a referral from the police and where considered appropriate and necessary consent is obtained, arrange for support to be provided to those individuals. The Act will require partners of Channel panels to co-operate with the panel in the carrying out of its functions and with the police in undertaking the initial assessment as to whether a referral is appropriate.

Channel Training 'Channel' is the name for the process of referring a person for early intervention and support, including:

identifying people at risk of being drawn into terrorism

· assessing the nature and extent of that risk, and

• developing the most appropriate support plan for the people concerned.

The Channel process is about safeguarding children, young people and adults from being drawn into

committing terrorist-related activity. It is about early intervention to protect and divert people away from

risk before a crime occurs. All staff members complete the Channel General Awareness course online

during their induction process.

**Duty of Care** 

It is a legal requirement that any member of staff or volunteer working in a day-care setting registered

under the Children Act 1989 accepts the responsibility to pass on information and concerns regarding a

child who may have been abused or is likely to be abused.

Social Workers have a legal duty under the Children Act 1989 to investigate such information and

concerns and take any action necessary to protect a child.

Staff members undertake induction and training which provides guidance which will support them in

quickly identifying the maltreatment of a child and know what to do should they suspect a child is at risk

of harm. They are aware a person may abuse or neglect a child by inflicting harm, or by failing to act to

prevent harm.

Responding to suspicions of abuse

• We acknowledge that abuse of children can take different forms - physical, emotional, and

sexual, as well as neglect as defined earlier in this policy.

When children are suffering from physical, sexual or emotional abuse, or may be experiencing

neglect, this may be demonstrated through the things they say (direct or indirect disclosure) or

through changes in their appearance, their behaviour, or their play.

Where such evidence is apparent, the child's key person (or person dealing with the incident)

makes a dated record of the details of the concern and discusses what to do with their

supervisor. This should be completed on a Cause for Concern Form but if rough notes are taken

in the first instance, these MUST be attached to Cause for Concern Form.

Supervisors must immediately report any concerns directly to the Safeguarding Leader

Practitioner (SLP) or deputy whose names appear on the front of this policy.

All records and information are stored in a separate file with limited access, in order to protect the

child. A 'need to know' label is placed beside the child's name on their file which indicates that

another agency is involved and information will be shared with appropriate staff members and

agencies as outlined in our Information Sharing and Looked After Children policies.

We refer concerns to the local authority children's social care department and co-operate fully in

any subsequent investigation. (In some cases this may mean the police or another agency).

• We take care not to influence the outcome either through the way we speak to children or by

asking questions of children.

• We follow the detailed procedures set out by the NSCB's Policies and Procedures as outlined on

their website (see useful contact numbers and websites attached to this policy) when making a

referral to children's social care or other appropriate agencies - please refer to NSCB1 form

attached or download from www.norfolklscb.org.

**Disclosures:** 

Where a child makes a disclosure to a member of staff, that member of staff:

offers reassurance to the child:

listens to the child (at their level and shows concern in non-verbal responses); and

give reassurance that she or he will take action.

The member of staff will not ask leading questions (for example "Did Daddy hit you?"), interrogate the

child or investigate an allegation. Staff members will stay calm and be supportive to the child, listen

carefully and let the child go at their own pace and let the child know you cannot promise to keep secrets or ask a child to keep secrets and ensure they know you will need to pass on information if you believe

they are not safe or at risk.

Recording suspicions of abuse and disclosures:

Staff member makes a record of:

• The child's name:

• The age of the child;

• The date and time of the observation or the disclosure;

Writes objective record of the observation or disclosure;

Records what was happening immediately before the child made disclosure or caused you to

become concerned;

The exact words spoken by the child;

The name of the person to whom the concern was reported, their role with date and time; and

The names of any other person present at the time.

This information is used to complete a Cause for Concern Form (all original notes attached) kept in a

separate locked confidential file which has limited access by staff members.

All members of staff are required to know the procedures for recording and reporting child abuse and to

whom they should report. Child Protection Flow Charts are located in the centre office, staff room and

parent areas and the SLP is named on the first page of this policy. The setting contingency plan

(operational plan) outlines who to contact in the absence of the SLP BUT if you are unable to contact

any of the named individuals YOU MUST contact the MASH team for a consultation or make a referral.

When to make a referral

Taking the previous information into account, children often appear with bruises and scratches and

staff/volunteers are not expected to treat all of these as a sign of child abuse. The majority of injuries to

children happen in understandable and accidental ways which will be explained by listening to the child

and verified by talking to the parent/carer. However, there may be occasions when something happens

which is particularly worrying.

This may include a child who:

• is unwilling to talk about an injury and gives an explanation which does not make sense;

· has a series of unexplained bruises;

• has mood changes and he or she becomes withdrawn or tearful.

is fearful of going home.

Examples of incidences which may need investigating include:

a child having specific injury, mark, bruise or burn; or

a child tells about a worrying incident; or

someone else tells of their concerns about a child; or

there is a more general concern that has built up over a period of time or possibly if a child starts to

self harm (which will be reflected in existing injury/accident/incident; unusual occurrence and cause

for concern forms, procedures for which are outlined below).

specific safeguarding concerns as outlined above.

If the concern involves an immediate risk of significant harm or a clear allegation of abuse - a referral

MUST be made. If the concern involves a serious concern about a child's welfare such as ongoing

serious neglect or emotional harm - a referral MUST be made. If there is concern but there is lack of

information, or uncertainty about whether to refer - contact the Professional Consultation Line (refer to

guidance for contacting consultation line).

Information on how to make a referral can be found on the 'What to do if you have concerns about a

child' flow chart located in the office, staff room and parent areas and NCC's Safeguarding children in

early years and childcare folder.

It is not necessary to contact the MASH team if children's services are already involved – in this case you would contact the social worker/family support worker / profession involved. HOWEVER, if you cannot reach them – you would then contact the MASH team.

If a referral is made, the designated officer for safeguarding must be informed.

# Long term concern for child's welfare:

#### Attendance:

Regular attendance not only promotes good outcomes for children but monitoring absence can lead to early identification of more serious concerns for a child or family. As such, monitoring attendance has a vital part to play in keeping a child or other family members safe from harm. The following procedure must be followed to record and report concerns around a child's absence:

- Every child's attendance is recorded on the daily attendance register, ensuring the arrival and departure times are recorded accurately.
- When a child is absent and the parent has contacted the centre, the reason for absence is recorded in the comment column of the register.
- When a child is absent and no call received, a courtesy call is to be made by the key person to check on the child and enquire as to when they are likely to return – this should be recorded on the register.
- In the absence of the key person, the shadow key person or room leader should make the call.
- All attempts to contact parent should be recorded on register.
- When a child is absent on a regular basis, the key person should make every effort to discuss the matter with the family and take steps to encourage and support improved attendance.
- Any discussions around attendance should be recorded on the child's observation and next step record.
- In cases where absence forms a regular pattern (unusual occurrence) or where there are any
  concerns about a child (cause for concern) after they return, the Key Person should complete the
  appropriate record and report to the SLP.
- The SLP will thoroughly investigate the absence, recording the family's explanation for absence on the appropriate form.
- Any further concerns by the SLP will initiate following the process for reporting a concern about a child as outlined on Norfolk County Council's flow chart which is displayed in the office and staff room at each centre.

#### Recording and reporting of existing injuries/accidents and incidents:

Recording and reporting of existing injuries/accidents and incident may lead to a concern for a child's welfare over a period of time. Each staff member is provided with guidance on completion of forms at induction and made aware of the location of all forms to be completed by the Room and Centre Lead which include:

- If any child sustains an injury outside of the centre even if accidental and it is noticed upon arrival, the member of staff greeting the parent must discuss with parent/carer upon arrival. This will be recorded on an existing injury/accident/incident form and the parent to sign before they leave the centre.
- If an injury is found later in the day, this should be bought to your room leader's attention immediately and the parent contacted to discuss. Again, this should be recorded on an existing injury/accident/incident form and signed when the child is collected.
- If a child has an accident at the centre, or is involved in an incident, it is to be recorded as an accident/incident on our existing injury/accident/incident form. The person collecting is to be asked to sign the form when they collect the child at the end of the session. If this is not the parent the parent should be telephoned and advised their child has been involved in an incident/accident (time parent informed should be recorded on the form).
- If the child leaves the centre and the person collecting has not signed the form, this should be done by telephoning the parent on the same day. Again, a note should be made on accident/incident record of the time and date a parent has been contacted by telephone. Any additional notes can be made on the back of the form or on a separate piece of paper.
- Remember to give parent tear off slip if it is an accident which involves an injury to the head AND to monitor children who have head injuries, recording times and comments in the medical aid/advice sought section of the form.
- If a child is involved in an accident/incident during breakfast club, a 'school notification slip' should be completed and taken to the school to make them aware of the accident/incident and returned to the centre with a signature and the name of the teacher informed (remember to take a pen if handover takes place on the playground). This slip is to be attached to the centre's existing injury/accident/incident record. The parent should be notified that the child has been involved in an accident/incident by telephone as soon as the child's needs have been met and the accident form completed and the record signed by the parent the next time they are in the setting.
- If a child is involved in an accident/incident on route to the school, the child should be taken directly to the qualified first aid person at the school. A 'school notification slip' should be completed as above (member of staff should keep supply of them) and an existing injury/accident/incident form should be completed on return to the centre and the 'school notification slip' attached. The parent should be notified that the child has been involved in an accident/incident by telephone as soon as the existing

injury/accident/incident record is completed and the record signed by the parent the next time they are in the setting.

- If more than one child is involved in an accident/incident, individual forms are to be completed. Each form should ONLY include the name of the child for whom the parent needs to sign and information regarding the other child kept confidential.
- In the event a parent queries an incident and/or accident which has not been witnessed and recorded in the usual way, the Existing injury/accident and incident form should be completed immediately (outlining the parents concerns and/or the child's injury at the time of reporting) and investigated by the room leader and must be brought to the attention of the childcare manager immediately.
- Completed forms should be kept out of sight of other parent/children until signed by the parent.
   Signed forms should be removed from the Existing injury/accident/incident file and returned to the office for recording on log sheet and safe and confidential filing.
- Forms should be checked at the end of every day and signed. These forms will be kept in a file in date order and added to the Existing Injury/Accident and Incident form log sheet by the Centre Lead/Lead Practitioner or SLP (see further notes under Health and Safety) and used to identify areas of risk within the setting or health and welfare concerns for an individual child. Once added to log filed into individual child's folder.
- In the case of serious injury, diseases and dangerous occurrences a Serious Incident form will need to be completed - please refer to the 'Recording and Reporting of Accident and Incidents' policy.

Unusual Occurrence Form: These are to be completed by staff member if they are concerned about a change in a child's behaviour (clinginess and/or soiling themselves) or any other occurrence which may not be within the child's usual behaviour. These are to be placed on child's records and referred to in the future which may support staff in identifying the cause of the change of behaviour and be in a better position to support the child.

Cause for Concern Form: If a number of Unusual Occurrence Forms are completed which give rise to a concern for the child's welfare and which may lead to a safeguarding incident, a Cause for Concern Form should be completed and referred to Safeguarding Lead Practitioner (see flow chart). The designated officer for safeguarding will review the Cause for Concern forms during routine visits.

# **Guidance for contacting Consultation Line:**

You should phone your local area consultation line when you are unsure whether or not to make a formal referral. This might be because, although you feel clear about the situation you are dealing with, you are unsure as to whether it meets the criteria for a referral to NCC Children's Services, or more likely, that

you would like to discuss your understanding with an advanced practitioner experienced in child protection work.

The consultation line must be contacted in the event:

• a child has marks on their body which are the result of an intentional act such as hitting, biting or

violent incident which may have been carried out by the parent, adult in the household or an older

sibling.

A family has previously had the involvement of children's services and or has been subject to

Section 47 and 17 of the Children's Act.

There are two types of professional consultation. The first, where you ring to discuss and share information on an identified child requires you to inform the family. The second, where you may want to talk through a situation about a child without sharing the child's details which does not require you to

inform the family in which case you would requires a general professional consultation.

• Telephone Customer Services on 0344 800 8020 (office hours) and request a professional

consultation.

Customer Services will put your call directly through to the MASH team (Multi-Agency Safeguarding

Hub). Remember to take the name and the contact details of the person you speak to and indicate if

you would like to discuss an identified child or would like a general professional consultation.

You will then have an opportunity to discuss your concerns (remember to have the child's details at

hand in case you have to make a referral).

All concerns will be logged by the MASH team.

• The MASH team will advise if the circumstances presented and the information known meets the

criteria for making a formal written referral by the setting and/or what other action should be taken.

If it is agreed that further action needs to be taken following the consultation then the family must be

informed of that agreement unless it is felt that to inform the family may put the child at risk of harm, in

which case a referral should be made under child protection procedures - you will be given guidance

as to whether parents should be informed and who should inform them.

If no further action from the MASH team or Children's Services is needed at present, then the setting

staff must continue to observe the child for signs or signals that give cause for concern and seek

further clarity by calling the consultation line again.

All new concerns must be recorded as outlined above and referred again to the MASH Team on 0344

800 8020 (office hours only) if there are new or continuing concerns.

- Be aware that if, at the end of the consultation, the MASH team believes there to be a child protection concern to investigate but you do not, then they can proceed with an investigation without your agreement.
- Equally, if the response the SLP receives following a consultation is inadequate, does not meet the needs of the child/family or leaves a child at risk of harm they may still make a referral in the usual way.
- The setting can expect to receive a written record of the conversation within a maximum of ten working days.
- The SLP must keep a record of the consultation phone .call (including the full name of the MASH team member and the time called) and its outcome on the child's safeguarding file together with the written record received.
- If a referral has been advised, the investigation will be led by Children's Services and all staff will be expected to co-operative fully.
- If a consultation line is contacted and/or a referral made, the designated officer for safeguarding must be informed.

# Allegations and concerns about adults who work with children in the setting

- We ensure that all parents know how to complain about the behaviour or actions of staff, volunteers
  or students within the setting, or anyone working on the premises which may include an allegation of
  abuse.
- We follow the guidance of the NSCB when responding to any complaint that a member of staff, or volunteer within the setting, or anyone living or working on the premises occupied by the setting, has abused a child (see flowcharts in office).
- We respond to any disclosure by children or member of staff of an allegation of abuse by a member of staff, volunteer or student within the setting or anyone working on the premises which may have taken, or is taking place, by first recording the details of any such alleged incident.
- We refer any such complaint immediately to the Local Authority's Designated Officer to investigate (contact numbers shown below). The LADO will be involved in the management and oversight of individual cases – providing advice and guidance to staff members, liaising with the police and other agencies and monitoring the progress of cases to ensure that they are dealt with as quickly as possible consistent with a thorough and fair process.
- We also report any such alleged incident to Ofsted and what measures we have taken. We are aware that it is an offence not to do this.
- If the LADO and OFSTED is contacted, the designated officer for safeguarding must be informed.
- We co-operate entirely with any investigation carried out by children's social care in conjunction with the police.

• Where the management committee and children's social care agree it is appropriate in the

circumstances, the Senior Early Years Professional will suspend the member of staff (pay to be

negotiated) or the volunteer, for the duration of the investigation. This is not an indication of admission

that the alleged incident has taken place, but is to protect the staff as well as children and families

throughout the process.

Any referral must be followed up in writing within 24 hours by completing LADO referral forms and

email directly to the LADO.

**Disciplinary action** 

Where a member of staff or a volunteer is dismissed from the setting because of misconduct relating to a

child, we currently notify OFSTED and the LADO.

**Confidential Records and Information Sharing** 

All information is held and processed in compliance with the Data Protection Act 2008.

Any information recorded will be kept in a separate named file, in a secure cabinet and not with the

child's academic file. These files will be the responsibility of the SLP. Child protection information will

only be shared within centre on the basis of 'need to know in the child's interests' and on the

understanding that it remains strictly confidential. Staff and volunteers MUST respect this and not

share sensitive information with unauthorised others - any breach in confidentially may lead to

disciplinary and/or dismissal. Any doubts regarding the sharing of information or keeping it confidential

is bought to the attention of the Manager, Deputy or SLP immediately (please refer to our Confidentiality

Policy and Information Sharing Policy).

Child protection information will only be kept in the file and this file will be kept up to date. Records of

concern, copies of referrals, invitations to child protection conferences, core groups and reports will be

stored here. All our safeguarding files will include chronological Child Protection Record recording

significant events in the child's life as it relates to safeguarding and child protection.

When a child leaves our setting, the SLP will make contact with the DSL (Designated Safeguarding

Lead) at the new school/setting and will ensure that the child protection record and file is forwarded to

the receiving school in an appropriately agreed manner. We will retain a copy of the child protection

record with notes to demonstrate how the file has been transferred; this may be in the form of a written

confirmation of receipt from the receiving school and/or evidence of recorded delivery if it is necessary to

post documents. In situations whereby a child leaves our setting and we are not sure of settings

transferring to, the SLP will ensure the relevant member of the Norfolk County Council (NCC) MASH

team is informed (i.e. social worker and/or consultation line). Likewise, if a child leaves without notice,

we will contact the NCC MASH team to notify them of the situation.

An electronic copy of the child protection record will be created and saved securely onto Head Office

server and kept in line with safeguarding file retention set by Norfolk County Council. The hard copy of

the child protection record will be securely disposed of after one year.

E-Safety: Refer to separate policy.

Support to families

We believe in building trusting and supportive relationships with families, staff and volunteers in the

group.

• We make clear to parents our role and responsibilities in relation to child protection, such as for the

reporting of concerns, providing information, monitoring of the child, and liaising at all times with the

local children's social care team.

• We will continue to welcome the child and the family whilst investigations are being made in relation

to any alleged abuse.

We follow the Child Protection Plan as set by the child's social care worker in relation to the setting's

designated role and tasks in supporting that child and their family, subsequent to any investigation.

Confidential records kept on a child are shared with the child's parents or those who have parental

responsibility but only if appropriate under the guidance of the NSCB.

Informing parents

Parents are normally the first point of contact.

If a suspicion of abuse is recorded, parents are informed at the same time as the report is made,

except where the guidance of the NSCB does not allow this (in case of sexual abuse and in some

instances physical abuse).

Parents are not informed if by doing so it increases the risk of significant harm to the child – in this

event, the advice and guidance provided by children's services or the police will be followed.

Further information on information sharing can be found in our Information Sharing policy.

Liaison with other agencies

We work within the NSCB guidelines.

• We have a copy of 'What to do if you're worried a child is being abused\*' for parents and staff and all

staff are required to read this publication; be familiar with what do to if they have concerns; and know

who is the designated Safeguarding Lead Professional.

 We have procedures for contacting the local authority on child protection issues, including maintaining a list of names, addresses and telephone numbers of social workers, to ensure that it is

easy, in any emergency, for the setting and children's services to work well together.

We notify the registration authority (Ofsted and the LADO – see useful contact numbers and

websites attached to this policy) of any incident or accident and any changes in our arrangements

which may affect the wellbeing of children.

• If a referral is to be made to the local authority social care department, we act within the area's

Safeguarding Children and Child Protection guidance in deciding whether we must inform the child's

parents at the same time.

• We have been provided with a copy of 'Safeguarding in early years and childcare' and it is used to

review policy and ensure safe practice is embedded in all our policies.

**Early Help:** 

If a child or family falls below the threshold for statutory social care intervention and it has not been possible to get the support needed after talking to the family's health visitor or local children's centre.

contact will be made with the Early Help Team with the consent of the parents (contact number below).

**Planning** 

The layout of the rooms allows for constant supervision. No child is left alone with staff or volunteers

in a one-to-one situation without being visible to others.

Curriculum

• We introduce key elements of keeping children safe into our programme to promote the personal.

social and emotional development of all children, so that they may grow to be strong, resilient and

listened to and that they develop an understanding of why and how to keep safe.

We create within the setting a culture of value and respect for the individual, having positive regard for

children's heritage arising from their colour, ethnicity, languages spoken at home, cultural and social

background.

We ensure that this is carried out in a way that is developmentally appropriate for the children.

Whistle blowing - Refer to separate policy.

#### Mr. Bee's Policies linked to safeguarding:

- Whistle blowing
- Valuing diversity and promoting equality
- Supporting Children with special educational needs
- Achieving Positive Behaviour
- Managing children with allergies, or who are sick or infectious (including reporting notifiable diseases) and administering medicines
- Making a complaint
- Uncollected Child
- Missing Child
- Fire Safety and Emergency Evacuation
- Intimate Care and Nappy Changing
- Admissions
- Safer Recruitment
- Supervision, Appraisal and Personal Development
- Lone Worker Policy
- Emergency Cover Policy
- Induction of staff, volunteers and managers
- Student placement
- The role of the key person and settling in
- Partnership with parents
- Confidentiality
- Health and Safety General
- Recording and Reporting of Accidents and Incident
- E-Safety
- Maintain children's safety and security on premises
- Critical Incident
- Information Sharing
- Supervision of children on walks and outings

**Useful Contacts and Websites:** 

Name: **Contact Information:** 

**SLP North Lynn:** Lisa Webster 01553-777097

> Deputies: Sally Wright, Rachel Richardson, Matthew Foulkes

**SLP Springwood**: Anna Calton 01553-766661

SLP St. Augustine's: Jess Smith 01553-816907

Deputy: Shelly Brown

Mr Bee's Designated Officer for Karen Gibbons (SLP) 01553-777097 / 766661 /

Safeguarding Senior Early Years Professional 692797

**Trustee for Safeguarding:** Jeanette Nowrung 01553-770439 or 815644

**Professional Consultation Line:** Children's Services Multi-0344 800 8020

Agency Safeguarding Hub

(MASH)

LADO: 01603 223473

LADO@norfolk.gov.uk

**NSCB1 Referral Form:** Complete and return within 24 www.norfolklscb.org

> hours. Email address:

mash@norfolk.gcsx.gov.uk

The MASH Team Manager Floor 5, Vantage House

Fisher's Lane Norwich NR2 1ET Fax: 01603-762445

**OFSTED:** 0300 123 1231

Health and 0345 300 9923 Fatal or major incidents only:

Safety Executive (HSE): All others complete on line at: http://webcommunities.hse.gov.

> uk/connect.ti/concernsform/ans werQuestionnaire?qid=594147

Police: Non-emergency 101

> **Emergency Services** 112

Duty Detective Sergeant within Email: **Specialist Police Advice:** 

the MASH MASHSupervisors@norfolk.pnn.

police.uk

Norfolk Main number 01553-614931

**County Council Early Years:** 

Early Help West Norfolk and King's Lynn 01553 669276

#### Legal framework

- Primary legislation\*\*
- Children Act (1989)
- Protection of Children Act (1999)
- Data Protection Act (1998)
- The Children Act (2004)
- Safeguarding Vulnerable Groups Act (2006)
- Secondary Legislation\*\*
- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Human Rights Act (1999)
- Race Relations (Amendment) Act (2000)
- Race Relations (Amendment) Act (1976) Regulations
- Equalities Act (2006)
- Data Protection Act (1998) Non Statutory Guidance

#### **Further Guidance**

- Working Together to Safeguard Children (revised March 2015) currently available online and copy saved on each centre's office computer.
- What to do if you're Worried a Child is Being Abused (HMG 2015)\*
- Framework for the Assessment of Children in Need and their Families (DoH 2000)
- Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (HMG 2007)
- Information Sharing: Practitioners' Guide (HMG 2015)\*
- NSCB: Child Protection and Safeguarding Consultation Lines: Information for agencies/staff working with children and young people Leaflet 5 (NSCB 2012)\*
- NSCB: Safeguarding in early years and childcare (NSCB 2012).
- Guidance for Safer Working Practice for Adults who Work with Children and Young People (DfES 2009).
- Safeguarding Children Board (<u>www.norfolklscb.org</u>).
- Mandatory Reporting of Female Genital Mutilation procedural information (https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/469448/FGM-Mandatory-Reporting-procedural-info-FINAL.pdf)

#### Forms:

- Cause for Concern
- Child Protection Record
- Norfolk LSCB NSCB1 Referral Form (e-copy available from www.norfolklscb.org).
- LADO Consultation Form (e-copy available from www.norfolklscb.org).
- LADO Referral Form (e-copy available from www.norfolklscb.org).

#### Flow Charts and Posters

- Duty of Care in early years and childcare settings
- Managing Allegations and concerns about adults who work with children in a group setting.
- Flow Chart showing steps to take if anyone in a childcare setting has a concern about a child.
- \* Copy in Operational Plan (Box 1)
- \*\* Available http://www.opsi.gov.uk/

# Re: Safeguarding Children and Child Protection

This policy was reviewed at a meeting of	Mr. Bee's Family Centre	name of setting
Held on	14 <sup>th</sup> July 2016	(date)
Date to be reviewed	July 2017	(date)
Signed on behalf of the management committee		
Name of signatory	Jeanette Nowrung	
Role of signatory (e.g. chair/owner)	Trustee	
Centre Manager's Signature:		