

Safeguarding Children and Child Protection Policy

Aim:

Playdays Pre-School will work with children, parents and the community to ensure the rights and safety of children and to give them the very best start in life. Our safeguarding policy is based on two areas of key commitments of the Pre-school Learning Alliance Safeguarding Children Policy.

Method:

Key Commitment One – Playdays Pre-School is committed to building a 'culture of safety' in which children are protected from abuse and harm in areas of its service delivery.

Key commitment Two – Playdays Pre-School 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.

Staff & Volunteers

Playdays Pre-School have a designated Safeguarding Person, Terri Clarke. In her absence, the deputy designated safeguarding officer is Angela Russell. We also appoint a member of the committee to oversee this work as a designated Safeguarding Officer Rebecca Ellerker.

We ensure all staff and parents are made aware of our safeguarding policies and procedures. Staff are given access to an e-copy to access at the setting as well as home. Parents receive the information in their parent handbook upon induction. Copies of the full policies are available upon request for parents either in paper format or e-copy.

The pre-school management team provide adequate and appropriate staffing resources to meet the needs of the children. OFSTED staff:child ratio guidance is adhered to. We ensure at a minimum that:

- For children aged 2-3 years, for every 4 children there will be at least 1 member of staff.
- For children aged 3-5 years, for every 8 children there will be at least 1 member of staff.

Volunteers do not work unsupervised at any time.

We abide by the Protection of Vulnerable Groups Act requirements in respect of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern.

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. All visitors are asked to report to the office or the pre-school manager upon arrival and to sign in to the visitor register. ID will be requested and checked before entry will be allowed.

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We take steps to ensure children are not photographed or filmed on video for any other purpose than to record their development or their participation in events organised by the pre-school. Parents sign a consent form and have access to records holding visual images of their child.

Recruitment

All applicants for staffing positions 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.

Playdays Pre-School abide by OFSTED requirements in respect of references and DBS checks for staff and volunteers, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.

Responding to suspicions of abuse

We acknowledge that abuse of children can take many different forms – physical emotional, sexual and neglect. We use NSPCC guidance to inform us about the signs of symptoms of the various types of abuse. These can be found in the policy and procedure folder and safeguarding file.

When children are suffering from abuse, this may be demonstrated through the things they say (direct or indirect disclosure) or through changes in their appearance, their behaviours or their play.

We take into account factors affecting parental capacity, such as social exclusion, domestic violence, parents drug or alcohol abuse, mental or physical illness or parents learning disability.

We are aware of other factors that affect children's vulnerability such as abuse of disabled children, fabricated or induced illness, child abuse linked to beliefs in spirit possession, sexual exploitation of children such as through internet abuse and Female Genital Mutilation that may affect or may have affected children and young people using our provision.

We also make ourselves aware that some children and young people are affected by gang activity, by complex, multiple or organised abuse through forced marriage or honour based violence or maybe victims of child trafficking. While this may be less likely to affect young children in our care we may become aware of any of these factors affecting older children and young people who we may come into contact with.

We use the 'What to do if you're worried a child is being abused, 2015' guidance where we have suspicions to guide us in our next steps to take.

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Procedure for reporting abuse

Where we believe a child in our care or known to us may be affected by any of these factors we follow the procedure for reporting child protection concerns. Where evidence is apparent, the child's keyperson makes a dated record of the details of the concern and discusses what to do with the designated safeguarding person. The information is stored in the child's personal file and is not to be discussed with any other member of staff.

The designated safeguarding person refers the concerns to Plymouth children social care department and is required to fully cooperate with any subsequent investigation. In some cases, this may mean the police or another agency identified by the Local Safeguarding Children's Board.

We take care not to influence the outcome either through the way we speak to children or by asking questions of children.

We take account of the need to protect young people aged 16-19 as defined by the Children Act 1989. This may include students or school children on work placement, young employees or young parents. Where abuse is suspected, we follow the procedure for reporting any other child protection concern. We use the Plymouth Assessment Framework and Threshold Guidance to decide which, if any, action needs to be taken. A copy of the SWCPP Escalation Policy can be found in the Safeguarding file. The views of the young person will always be taken into account, but the setting may override the young person's refusal to consent to share information if it feels necessary to prevent a crime from being committed, or intervene where one may have been. or to prevent harm to a child or adult. Sharing confidential information without consent is done only where not sharing it could be worse than the outcome of having shared it.

Recording suspicions of abuse and disclosures

Where a child makes comments to a member of staff that gives cause for concern (disclosure) or observes signs or signals that gives cause for concern, such as significant changes in behaviour, deterioration in general well-being; unexplained bruising, marks or signs of possible abuse or neglect that member of staff:

- Listens to the child, offers reassurance and gives assurance that she or he will take action.
- Does not ask leading questions the child.
- Makes a written record that forms an objective record of the observation or disclosure that includes:
 - The date and time of the observation or disclosure.
 - The exact words spoken by the child as far as possible.
 - The name of the person to whom the concern was reported, with date and time.
 - The names of any other person present at the time.

These records are signed and dated and kept in the child's personal file which is kept securely and confidentially. Where Plymouth Safeguarding Children Board (PSCB) stipulates the process for recording and sharing concerns, we include those procedures alongside this procedure, and follow the steps set down by PSCB.

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Making a referral to the children's social care team

Once the designated safeguarding person has compiled all the information required they will make contact with Plymouth Children's Social Care Team through Plymouth Gateway and follow the guidance set by them.

Plymouth Gateway for Professionals

01752 307160

Informing Parents

Parents are normally the first point of contact. We discuss concerns with the parents to gain their view of events unless we feel this may put the child in greater danger.

We inform parents where we make a record of concerns in their child's file and that we also make a note of any discussion we have with them regarding a concern.

If a suspicion of abuse warrants referral to social care, parents are informed at the same time that the referral will be made, except where the guidance of the PSCB does not allow for this e.g. where it is believed that the child may be placed in greater danger.

This will usually be the case where the parent is the likely abuser. In these cases, the social workers will inform the parents.

Liaising with other agencies

We work within the PSCB guidelines. We have a procedure for contacting Plymouth 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 social services to work well together.

We notify OFSTED of any incident or accident and any changes in our arrangements which may affect the wellbeing of children or where an allegation of abuse is made against a member of staff.

Contact details for National Society for the Prevention of Cruelty to Children (NSPCC) are also kept.

Allegations against staff

We ensure that all parents know how to complain about the behaviour or actions of staff or volunteers within the setting, or anyone living or working on the premises occupied by the setting, which may include an allegation of abuse.

We follow the guidance of PSCB when responding to any complaint that a member of staff, or volunteer within the pre-school, or anyone living or working on the premises occupied by the pre-school, has abused a child.

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We respond to any disclosure by children or staff that abuse by a member of staff or volunteer within the setting, or anyone living or working on the premises occupied by the setting, 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 Designated Officer for safeguarding (LADO) to investigate. 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.

The LADO for Plymouth is Simon White. He can be contacted in Children's Social Care on 01752 307144 or email simon.white@plymouth.gcsx.gov.uk

In Simon's absence, LADO enquiries and/or concerns will be managed by colleagues in the Independent Reviewing Service within Children's Social Care (01752 307160).

We cooperate fully 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 chairperson will suspend the member of staff on full pay, or the volunteer, for the duration of the investigation. This is not an indication of admission that the alleged incident took place, but is to protect the staff as well as children and families throughout the process.

Disciplinary Action

Where a member of staff or volunteer has been dismissed due to engaging in activities that caused for concern for the safeguarding of children or vulnerable adults, we will notify the Independent Safeguarding Authority (ISA) of relevant information so that individuals who pose a threat to children (and vulnerable groups) can be identified and barred from working with these groups.

Training

We seek out training opportunities 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 guidelines for making referrals.

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

Planning

The layout of the pre-school allows for constant supervision. No child is left alone with a member of staff or volunteers in a one to one situation without being visible to others.

Intimate care times are supervised and observed on a regular basis by staff.

Curriculum

Date Written: February 2017

Reviewed: April 2018

To be reviewed: Annually

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We introduce key elements of keeping children safe into our planning to promote personal, social and emotional development of all children, so that they may grow into 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 children.

Confidentiality

All suspicions and investigations are kept confidential and shared only with those who need to know. Any information is shared under the guidance of the PSCB and Information Sharing 2015.

When a child with safeguarding concerns go to school or leave the setting to attend another setting, Child Protection Records are transferred to the new establishment. Contact is made with the safeguarding officer and where possible records are delivered in person. Time is taken to talk through the record highlighting specific concerns. A copy should be retained by Playdays Pre-school before records are handed over. Where it is not possible to deliver records in person, a copy is made to retain at Playdays and the records are sent in a sealed envelope, labelled private and confidential, and posted recorded delivery and addressed to the safeguarding officer.

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

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child in accordance with the Confidentiality and Client Access to Records Procedure and only if appropriate under the guidance of PSCB.

Child at Risk Alert (CARA)

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Reviewed: April 2018

To be reviewed: Annually

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Playdays Pre-School has signed up to the CARA Project. CARA is a joint initiative between the police, Plymouth city council, early years' settings and schools to provide early reporting on any domestic abuse incident that occurs outside the setting which may impact the child in the setting. The project identifies key adults who are trained to liaise with the police and use the information shared, in confidence, whilst ensuring the pre-school is able to make provision for possible difficulties experienced by children or their families who may have been involved in or witnessed a domestic abuse incident. This may be something as simple as letting a child bring their favourite toy into pre-school on that day, or making provisions if a child is tired because that have been kept awake due to an incident.

- Upon induction Parents receive an information sheet about Encompass.
- Two members of staff have received training in CARA procedures.
- When present, the manager will take the call from the CARA project. In their absence, the deputy manager should take the call.
- If a call is received, all information should be dealt with as advised in the guidance and training received.
- If the child also attends another setting, staff will ensure they are also contacted.

Prevent Duty

All employees have a duty to prevent and protect children from being drawn into terrorism and extremism. This can be achieved through supporting children in their Personal, Social and Emotional development in an age appropriate way linking to the Early Years Foundation Stage. Employees have a duty to ensure children learn about right and wrong, children learn and value each other's culture and viewpoint, recognise and see positive approaches of similarities and differences between themselves and other. Further support can be gained from a helpline 020 7340 7264 or counter.extremism@education.gsi.gov.uk

Practitioners should be alert to harmful behaviours by influential adults in the child's life. This may include:

- discriminatory and/or extremist discussions between parents, family and/or staff members
- they take action when they observe behaviour of concern
- practitioners are able to identify children who may be vulnerable to radicalisation, and know what to do when they are identified

All staff at Playdays Pre-school have undertaken training to identify signs of terrorism and extremist behaviour using the online programme Channel General Awareness. This is completed during their induction period.

Female Genital Mutilation (FGM)

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FGM is illegal in England under the FGM Act 2003. Playdays Pre-school recognise it is a type of abuse and violence against women and girls. FGM comprises all procedures involving partial or total removal of the external female genitalia for non- medical reasons.

At Playdays, safeguarding of the children in our care is paramount. Staff are aware of the possibility of a girl being at risk of FGM, and recognise that this might not be a child directly in our care but a family member or friend. We recognise that FGM occurs as a result of religious beliefs, nationality and that unusual events could be a sign of FGM e.g. child being removed from setting for 6 weeks or more by parents or relatives.

If a member of staff is concerned about a child or a disclosure has been made they should report this to the safeguarding officer following the normal safeguarding procedure.

Types of FGM

1. Type 1 – often referred to as clitoridectomy. This is the partial or total removal of the clitoris and in very rare cases only the prepuce (fold of skin around the clitoris).
2. Type 2 – often referred to as excision. This is the partial or total removal of the clitoris and labia minora (inner folds of vulva) with or without excision of the labia majora (outer folds of skin of the vulva).
3. Type 3 – Often referred to as infibulation. This is the narrowing of the of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the labia minora, or labia majora, sometimes by stitching, with or without removal of the clitoris.
4. Type 4 – this includes all other harmful procedures to the female genitalia for non-medical purposes e.g. pricking, piercing, incising, scraping, and cauterizing the genital area. Deinfibulation refers to the practise of cutting open the sealed vaginal opening in a woman who has been infibulated, which is often necessary for improving health and wellbeing as well as to allow intercourse or to facilitate childbirth.

Playdays recognises that there are no health benefits to FGM and it harms girls and women in many ways, interfering with the natural function of their bodies.

The reasons why FGM are performed vary from one region to another as well as over time, and include a mix of sociocultural factors within families and communities. The most common reasons are:

- Social conventions. There is social pressure to conform to what others do and have been doing, as well as the need to be accepted socially and the fear of being rejected in the community, are strong motivator to FGM. In some communities FGM is universally performed and unquestioned.
- FGM is considered necessary as part of raising a girl and a way to prepare her for adulthood and marriage.
- FGM is motivated by beliefs about what is considered acceptable sexual behaviour. It aims to ensure premarital virginity and marital fidelity. FGM in some communities is believed to reduce a woman's libido and therefore believed to help her resist extramarital sexual acts. Where a type 3 FGM has taken place, the fear of the pain of opening it, and the fear this is found out, is expected to further discourage extramarital sexual intercourse.

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- Where women are financially dependent on their husbands, marriageability is a strong factor in carrying out FGM.
- FGM is associated with cultural ideals of femininity and modesty, which include the notion that girls are clean and beautiful after removal of body parts that are considered unfeminine or male.
- There are no religious scripts which prescribe the practice, practitioners often believe FGM has religious support.
- Religious leaders take varying positions with regard to FGM. Some promote it, some consider it irrelevant to religion. And others contribute to eliminating FGM.

Playdays recognise that a girl at immediate risk of FGM may not know what's going to happen. But she might show signs that we become aware of:

- A long holiday abroad or going 'home' to visit family.
- Relative or cutter visiting from abroad.
- A special occasion or ceremony to 'become a woman' or get ready for marriage
- A female relative being cut – a sister, cousin, or older female relative such as mother or aunt.

A girl or woman who's had female genital mutilation (FGM) may:

- have difficulty walking, standing or sitting
- spend longer in the bathroom or toilet
- appear withdrawn, anxious or depressed
- have unusual behaviour after an absence from school or college
- be particularly reluctant to undergo normal medical examinations
- ask for help, but may not be explicit about the problem due to embarrassment or fear.

Long-term effects of FGM

Girls and women who have had FGM may have problems that continue through adulthood, including:

- difficulties urinating or incontinence
- frequent or chronic vaginal, pelvic or urinary infections
- menstrual problems
- kidney damage and possible failure
- cysts and abscesses
- pain when having sex
- infertility
- complications during pregnancy and childbirth
- emotional and mental health problems.

Legal framework

- Children's Act 1989 s47
- Protection of Children Act 1999
- Data Protection Act 1998
- Every Child Matters 2004

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- Safeguarding Vulnerable Groups 2006
- Sexual Offences Act 2003
- Criminal Justice and Court Services Act 2000
- Equalities Act 2010
- Data Protection Act 1998 (Non-Statutory Guidance)
- Information Sharing 2015
- General Data Protection Regulations (GDPR) (2018)

Important Contacts

Plymouth Gateway for Professionals	01752 307160
Plymouth Gateway for Public	01752 668000
Police Child Abuse Investigation Unit	01752 284522
Early Years Safeguarding and Welfare Officer	07795 121445 01752 308997
NSPCC child abuse helpline	0808 800 5000
Local Authority Designated Person – Simon White	01752 307144
Multi Agency Hub (Coordinated Safeguarding Support)	01752 305200
Out of Hours Service	01752 346984

Further Information

Held in pre-school

E-Safety Policy

PCSB – Domestic Abuse and Children – Guidance when children are living in homes with known domestic abuse

Safer Recruitment Good Practise Guidance

Information Sharing Guidance 2015

What to do if you're worried a child is being abused Guidance 2015

Online

Working Together to Safeguard Children 2015

Framework for the Assessment of Children in Need and their Families (DoH 2000)

The Common Assessment Framework for Children and Young People: A Guide for Practitioners (CWDC 2010)

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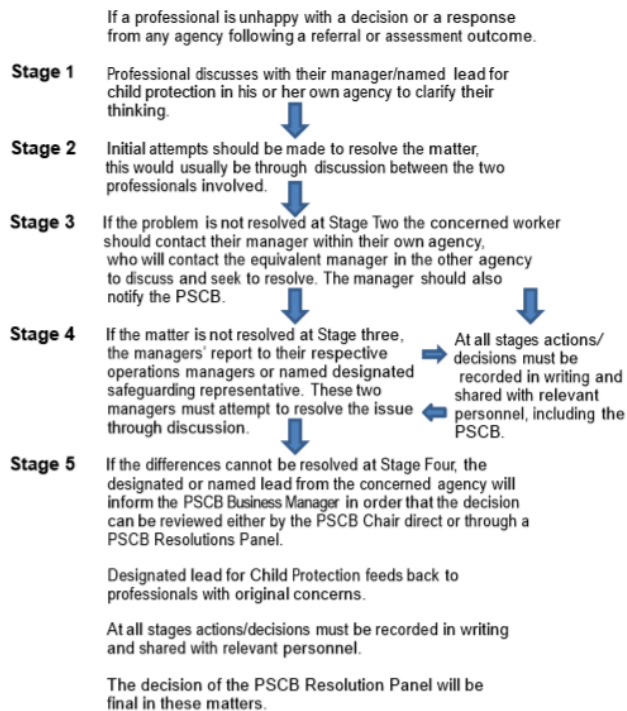
Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (HMG 2007)

Information Sharing: Guidance for Practitioners and Managers (HMG 2008)

Independent Safeguarding Authority www.isa-gov.org.uk

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Escalation Policy For Professionals with Child Protection or Child Welfare Concerns



Escalation Policy

A guide for professionals in the resolution of professional disagreements in work relating to the safety of children

This leaflet can be made available in other formats and languages. Please contact the PSCB Safeguarding Business Unit on Plymouth 307144.

Introduction

Occasionally situations arise when workers within one agency feel that the decision made by a worker from another agency on a child protection or child in need case is not a safe decision. Disagreements could arise in a number of areas, but are most likely to arise around:

- Levels of Need
- Roles and responsibilities
- The need for action
- Communication

The safety of individual children is the overriding consideration in any professional disagreement and any unresolved issues should be addressed with consideration given to the risks that might be present for the child.

All workers should feel able to challenge decision making and to see this as their right and responsibility in order to promote the best multi-agency safeguarding practice. The escalation policy provides workers with the means to raise concerns they have about decisions made by other professionals or agencies by:

- Avoiding professional disputes that put children at risk or obscure the focus on the child
- resolving the difficulties within and between agencies quickly and openly
- Identifying problem areas in working together where there is a lack of clarity and to promote the resolution via amendment to protocols and procedures

Effective working together depends on an open approach and honest relationships between agencies. Problem resolution is an integral part of professional co-operation and joint working to safeguard children.

Resolution should be sought within the shortest timescale possible to ensure the child is protected. Disagreements should be resolved at the lowest possible stage, however if a child is thought to be at risk of immediate harm discretion should be used as to which stage is initiated.

Stages of the policy

Please also refer to the escalation policy flowchart at the end of this leaflet.

Stage One

Any worker who feels that a decision is not safe or is inappropriate should initially consult a supervisor/manager to clarify their thinking in order to identify the problem, to be specific as to what the disagreement is about and what they aim to achieve. They should also be able to evidence the nature and source of their concerns and should keep a record of all discussions.

Stage Two

Initial attempts should be taken to resolve the problem at the lowest possible level. This would normally be between the people who disagree. It should be recognised that differences in status and/or experience may affect the confidence of some workers to pursue this unsupported.

Stage Three

If the problem is not resolved at stage two the concerned worker should contact their supervisor/manager within their own agency who should raise the concerns with the equivalent supervisor/manager in the other agency. The manager should also notify the PSCB Business Manager, who will keep a record of all on-going disagreements.

Stage Four

If the problem is not resolved at stage three the supervisor/manager reports to their respective operations manager or named/designated safeguarding representative. These two managers must attempt to resolve the professional differences through discussion. The PSCB Business Manager should be advised of any outcome.

Stage Five

If it has not been possible to resolve the professional differences within the agencies concerned the matter should be referred to the Chair of the Plymouth Safeguarding Children Board, (via the PSCB Business Manager) who may either seek to resolve the issue direct or to convene a Resolution Panel.

This panel must consist of the Plymouth Safeguarding Children Board representatives from three agencies (including the agencies concerned in the professional differences, where possible).

The panel will receive representations from those concerned in the professional differences and make a decision as to the next course of action, resolving the professional differences concerned.

At all stages of the process actions and decisions must be recorded in writing and shared with relevant personnel, to include the worker who raised the initial concern. In particular this must include written confirmation between the parties about an agreed outcome of the disagreement and how any outstanding issues will be pursued.

It may be useful for individuals to debrief following some disputes in order to promote continuing good working relationships.

The decision of the Plymouth Safeguarding Children Board Resolution Panel will be final in this matter.

Timescales

Some matters may be resolved very quickly, and this will be determined locally by the complexity of the issues. In all cases, the matter will be resolved as speedily as possible, and the primary focus will be on ensuring that the safety and welfare of the child concerned is assured whilst discussions take place.

Contact us

For more information please contact the PSCB Safeguarding Business Unit:
Telephone: 01752 307144

Website: www.plymouth.gov.uk/pscb

Email: pscb@plymouth.gov.uk

Address: Plymouth Safeguarding Children Board, Midland House, Notte Street, Plymouth, PL1 2EJ