

2.2.3. Safeguarding Children and Child Protection Policy



Designated Safeguarding Officer (DSO)	Deputy Designated Safeguarding Officer (DDSO):
Kalela Ntumba	Nzimoli Munga

This policy must be seen in the context of Working Together To Safeguard Children 2018, the Early Years Foundation Stage 2017 and Barnet Safeguarding Children Board Procedures.

Barnet Safeguarding Children Partnership Contact Details:

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T: 0208 359 4066 **Monday to Friday** 9 am – 5 pm

E: mash@barnet.gov.uk or secure email on mash@barnet.gcsx.gov.uk

Online: [MASH online referral form](#)

After 5pm and at weekends the Out of Hours Emergency Duty Team provided by LB Harrow operates by phone on 020 8359 2000

Policy statement

Our setting is committed to creating and maintaining the safest possible environment for children. We work with children, parents and the community to ensure the rights and safety of children, young people* and vulnerable adults.

We do this by:

- Recognising that all children have the right to freedom from abuse and harm.
- Promoting joint working with parents in the interests of children's welfare and wellbeing.
- Ensuring that all our staff are carefully selected and vetted, have the relevant qualifications and experience, and accept responsibility for helping to prevent the abuse of children in their care.
 - Supporting all staff in bringing concerns to the attention of the Designated Safeguarding Officer, so that they can be considered and acted upon if necessary.
 - Responding quickly and appropriately to all suspicions or allegations of abuse.
 - Providing parents/carers, children/young people with the opportunity to voice any concerns they may have.
 - Adopting positive behaviour management procedures and strategies which are non-violent and do not impose humiliation.
 - Appointing a Named Designated Safeguarding Officer who takes specific responsibility for children's and young people's protection, safety and well-being.
 - Reviewing the effectiveness of the nursery's Safeguarding Children and Child Protection Policy and Procedures regularly.
 - Working with external organisations, for example, Children's Social Care, police, to ensure, as far as is possible, that children/young people are protected.

- Not tolerating bullying. Incidents of bullying will be investigated and treated seriously. Action will be taken to stop the bullying.

Legislation and Guidance

<i>Primary legislation</i>	<i>Secondary legislation</i>
Children Act (1989 s47)	Sexual Offences Act (2003)
Protection of Children Act (1999)	Criminal Justice and Court Services Act (2000)
The Children Act (2004 s11)	Equality Act (2010)
Children and Social Work Act 2017	General Data Protection Regulations (GDPR) (2018)
Safeguarding Vulnerable Groups Act (2006)	Childcare (Disqualification) Regulations (2009)
Childcare Act (2006)	Children and Families Act (2014)
Child Safeguarding Practice Review and Relevant Agency (England) Regulations 2018	Care Act (2014)
	Serious Crime Act (2015)
	Counter-Terrorism and Security Act (2015)

The Children Act 2004 sets out the vision for children based on 5 key outcomes, staying safe, being healthy, enjoying and achieving, making a positive contribution and achieving economic wellbeing. The staying safe outcome is underpinned by a duty for all agencies and service providers to promote safeguarding

Definition of Safeguarding: Safeguarding and Promoting the welfare of children is defined in the Government Guidance ‘Working Together to Safeguard Children’ (2018) as

- Protecting children from maltreatment
- Preventing impairment of children’s health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

Child Protection is a part of safeguarding and refers to the specific activity that is undertaken to protect children who are suffering, or are at risk of suffering, significant harm.

Children have a legal right to be protected from harm under the **European Convention of Human Rights** and the **Children Act 1989**.

The Children Act 1989 provides the legal basis for protecting children from significant harm and providing services for children in need

Section 47 of the Act places a duty on Local Authorities to make enquiries where there is reasonable cause to suspect that a child is suffering, or likely to suffer significant harm. Under the act, Police and the NSPCC also have statutory powers to conduct investigations.

Section 17 of the **Children Act 1989** places a duty on the Local Authority to provide services for children in need, that is, children whose health or development would otherwise be impaired if services were not provided. This might include disabled children or children with complex needs. Services under Section 17 can only be provided with parental consent.

Procedures and guidance

We follow the guidance below and carry out the following procedures to ensure we create and maintain the safest possible environment for children and respond to child protection concerns promptly.

1. General

- We will support families to receive appropriate early help by sharing information with other agencies in accordance with statutory requirements and legislation.
- We will always discuss with parents/carers any concerns we may have unless this would put a child at further risk of serious harm.
 - If the child is in risk of serious harm, we will share information lawfully with safeguarding partners and other agencies where there are safeguarding concerns. We will be transparent about how we lawfully process data.
 - All staff understand how to escalate their concerns in the event that they feel either the local authority and/or their own organisation has not acted adequately to safeguard and know how to follow local safeguarding procedures to resolve professional disputes between staff and organisations.
 - All staff understand what the organisation expects of them in terms of their required behaviour and conduct, and follow our policies and procedures on positive behaviour, online safety (including use of cameras and mobile phones), whistleblowing and dignity at work.
 - Children have a key person to build a relationship with, and are supported to articulate any worries, concerns or complaints that they may have in an age-appropriate way.
 - All staff understand our policy on promoting positive behaviour and follow it in relation to children showing aggression towards other children.
 - Adequate and appropriate staffing resources are provided to meet the needs of children.
 - Applicants for posts within the setting are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.
 - Enhanced criminal records and barred lists checks and other suitability checks are carried out for staff and volunteers prior to their post being confirmed, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.
 - Where applications are rejected based on information disclosed, applicants have the right to know and to challenge incorrect information.
 - Enhanced criminal records and barred lists checks are carried out on anyone living or working on the premises.
 - Information is recorded about staff qualifications, and the identity checks and vetting processes that have been completed including:
 - the criminal records disclosure reference number;
 - certificate of good conduct or equivalent where a UK DBS check is not appropriate;
 - the date the disclosure was obtained; and
 - details of who obtained it.
 - All staff are informed that they are expected to disclose any convictions, cautions, court orders or reprimands and warnings which may affect their suitability to work with children (whether received before or during their employment with us).
 - From 31 August 2018, staff and volunteers in childcare settings that are not based on domestic premises are **not** required to notify their line manager if anyone in their household (including family

members, lodgers, partners etc.) has any relevant convictions, cautions, court orders, reprimands or warnings or has been barred from, or had registration refused or cancelled in relation to any childcare provision or have had orders made in relation to care of their children. For childminders and childcare provided from domestic settings they will be required to notify if anyone in their household has any relevant convictions, court orders or reprimands or had registration refused or cancelled in relation to childcare provision or have had certain Orders made in relation to the care of their children in accordance with the Childcare Disqualification and Childcare Regulations 2018, and Disqualification under the Childcare Act guidance effective from 31 August 2018.

- Staff receive regular supervision, which includes discussion of any safeguarding issues, and their performance and learning needs are reviewed regularly.
- In addition to induction and supervision, staff are provided with clear expectations in relation to their behaviour [outlined in the employee handbook].
- We notify the Disclosure and Barring Service of any person who is dismissed from our employment or resigns in circumstances that would otherwise have led to dismissal for reasons of a child protection concern.
- Procedures are in place to record the details of visitors to the setting.
- Security steps are taken to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.
- Steps are taken 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 us. Parents sign a consent form and have access to records holding visual images of their child. Staff do not use personal cameras or filming equipment to record images.
- Personal mobile phones are not used where children are present.
- The designated person in the setting has responsibility for ensuring that there is an adequate online safety policy in place.
- We keep a written record of all complaints and concerns including details of how they were responded to.
- We ensure that robust risk assessments are completed, that they are seen and signed by all relevant staff and that they are regularly reviewed and updated, in line with our health and safety policy.
- The designated safeguarding officer will support all staff and offer advice, guidance, supervision and support in regards safeguarding matters.
- Information should not be kept private between a parent and a staff member. Where there are significant issues around a child's welfare, wellbeing or protection, these must always be passed onto the Designated Safeguarding Officer or their Deputy. Staff must inform the designated officer at the first opportunity of every significant safeguarding concern; however this should not delay any referrals being made to children's social care, or where appropriate, the LADO, Ofsted or RIDDOR.
- Important and relevant information shared by the parent/carer is passed onto the Designated Child Protection Officer and the key person.
- Incidents or disclosures should be shared with the Designated Officers.
- Any further safeguarding issues will be shared with the team or to the whole staff, if appropriate.

2. Recognising abuse, neglect and/or significant harm

What is meant by abuse, neglect and significant harm?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children maybe abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children. An abused child is any boy or girl, under 18 years of age, who has suffered from, or is believed likely to be, at risk of significant risk of physical injury, neglect, emotional abuse or sexual abuse.

Significant harm - Defining what counts as significant harm or abuse is not easy and a judgement has to be made on a case-by-case basis, supported by evidence and thorough assessment of the risks as well as the family's strengths and supports. Social Workers who undertake these assessments under The Children Act are required to use a national system developed by the Department of Health (DOH) called The Assessment Framework. This provides a systematic way of understanding and analysing what is happening to children within their families and communities and helps to inform decisions about how to respond to the needs of the child. The London Child Protection Procedures provides further guidance and information about the threshold for significant harm on https://www.londoncp.co.uk/files/revised_guidance_thresholds.pdf

There are four main categories of abuse as follows:

1. Physical Abuse - Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, biting and scratching, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Bumps and bruises don't always mean a child is being physically abused. All children have accidents, trips and falls. **And there isn't just one sign or symptom to look out for.** But it's important to be aware of the signs. If a child regularly has injuries, there seems to be a pattern to the injuries or the explanation doesn't match the injuries, then this should be reported.

Physical abuse symptoms include:	It can also include other injuries and health problems, such as:
bruises	scarring
broken or fractured bones	the effects of poisoning, such as vomiting, drowsiness or seizures
burns or scalds	breathing problems from drowning, suffocation or poisoning.
bite marks.	

Head injuries in babies and toddlers can be signs of abuse so it's important to be aware of these. Visible signs include:

swelling
bruising
fractures
being extremely sleepy or unconscious
breathing problems
seizures
vomiting
unusual behaviour, such as being irritable or not feeding properly.

2. Sexual abuse – When a child or young person is sexually abused, they're forced or tricked into sexual activities. They might not understand that what's happening is abuse or that it's wrong. And they might be afraid to tell someone. Sexual abuse can happen anywhere – and it can happen in person or online. It's never a child's fault they were sexually abused – it's important to make sure children know this.

There are 2 types of sexual abuse – contact and non-contact abuse. And sexual abuse can happen in person or online.

Contact abuse is where an abuser makes physical contact with a child. This includes:	Non-contact abuse is where a child is abused without being touched by the abuser. This can be in person or online and includes:
sexual touching of any part of a child's body, whether they're clothed or not	exposing or flashing
using a body part or object to rape or penetrate a child	showing pornography
forcing a child to take part in sexual activities	exposing a child to sexual acts
making a child undress or touch someone else.	making them masturbate
Contact abuse can include touching, kissing and oral sex – sexual abuse isn't just penetrative.	forcing a child to make, view or share child abuse images or videos
	making, viewing or distributing child abuse images or videos
	forcing a child to take part in sexual activities or conversations online or through a smartphone.

Knowing the signs of sexual abuse can help give a voice to children. Sometimes children won't understand that what's happening to them is wrong. Or they might be scared to speak out. Some of the signs you might notice include:

<i>Emotional and behavioural signs:</i>	<i>Physical signs:</i>
Avoiding being alone with or frightened of people or a person they know.	Bruises.
Language or sexual behaviour you wouldn't expect them to know.	Bleeding, discharge, pains or soreness in their genital or anal area.
Having nightmares or bed-wetting.	Sexually transmitted infections.
Alcohol or drug misuse.	Pregnancy.
Self-harm.	
Changes in eating habits or developing an eating problem.	

2. Emotional abuse – Emotional abuse is any type of abuse that involves the continual emotional mistreatment of a child. It's sometimes called psychological abuse. Emotional abuse can involve deliberately trying to scare, humiliate, isolate or ignore a child. Emotional abuse is often a part of other kinds of abuse, which means it can be difficult to spot the signs or tell the difference, though it can also happen on its own. **Emotional abuse includes:**

- humiliating or constantly criticising a child
- threatening, shouting at a child or calling them names

- making the child the subject of jokes, or using sarcasm to hurt a child
- blaming and scapegoating
- making a child perform degrading acts
- not recognising a child's own individuality or trying to control their lives
- pushing a child too hard or not recognising their limitations
- exposing a child to upsetting events or situations, like domestic abuse or drug taking
- failing to promote a child's social development
- not allowing them to have friends
- persistently ignoring them
- being absent
- manipulating a child
- never saying anything kind, expressing positive feelings or congratulating a child on successes
- never showing any emotions in interactions with a child, also known as emotional neglect.

Signs of emotional abuse

There might not be any obvious physical signs of emotional abuse or neglect. And a child might not tell anyone what's happening until they reach a 'crisis point'. That's why it's important to look out for signs in how a child is acting.

As children grow up, their emotions change. This means it can be difficult to tell if they're being emotionally abused. But children who are being emotionally abused might:

- seem unconfident or lack self-assurance
- struggle to control their emotions
- have difficulty making or maintaining relationships
- act in a way that's inappropriate for their age.

The signs of emotional abuse can also be different for children at different ages.

<i>Signs in babies and toddlers</i>	<i>Signs in older children</i>
Babies and pre-school children who are being emotionally abused or neglected might:	Older children might:
be overly-affectionate to strangers or people they don't know well	use language you wouldn't expect them to know for their age
seem unconfident, wary or anxious	act in a way or know about things you wouldn't expect them to know for their age
not have a close relationship or bond with their parent	struggle to control their emotions
be aggressive or cruel towards other children or animals.	have extreme outbursts
	seem isolated from their parents
	lack social skills
	have few or no friends.

4. Neglect - Neglect is the ongoing failure to meet a child's basic needs and the most common form of child abuse². A child might be left hungry or dirty, or without proper clothing, shelter, supervision or health care. This can put children and young people in danger. And it can also have long term effects on their physical and mental wellbeing.

Types of neglect

Neglect can be a lot of different things, which can make it hard to spot. But broadly speaking, there are 4 types of neglect.

- **Physical neglect-** A child's basic needs, such as food, clothing or shelter, are not met or they aren't properly supervised or kept safe.
- **Educational neglect-** A parent doesn't ensure their child is given an education.
- **Emotional neglect-** A child doesn't get the nurture and stimulation they need. This could be through ignoring, humiliating, intimidating or isolating them.
- **Medical neglect-** A child isn't given proper health care. This includes dental care and refusing or ignoring medical recommendations.

Signs of neglect

Neglect can be really difficult to spot. Having one of the signs doesn't necessarily mean a child is being neglected. But if you notice multiple signs that last for a while, they might show there's a serious problem. Children and young people who are neglected might have:

Poor appearance and hygiene	Health and development problems
being hungry or not given money for food	body issues, such as poor muscle tone or prominent joints
having the wrong clothing, such as no warm clothes in winter	missed medical appointments, such as for vaccinations
anaemia	poor language or social skills
medical or dental issues	repeated accidental injuries, often caused by lack of supervision
not given the correct medicines	thin or swollen tummy
regular illness or infections	untreated injuries
skin issues, such as sores, rashes, flea bites, scabies or ringworm	
tiredness	
weight or growth issues.	
being smelly or dirty	
having unwashed clothes	
having frequent and untreated nappy rash in infants.	

Change in behaviour	Housing and family issues
becoming clingy	living in an unsuitable home environment, such as having no heating
becoming aggressive	being left alone for a long time
being withdrawn, depressed or anxious	taking on the role of carer for other family members.
changes in eating habits	
displaying obsessive behaviour	
finding it hard to concentrate or take part in activities	
missing school	
showing signs of self-harm	
using drugs or alcohol.	

3. Role of the Designated Safeguarding Officer

We are committed to building a 'culture of safety' in which children, young people and vulnerable adults are protected from abuse and harm in all areas of our service delivery.

Our designated safeguarding officer who co-ordinates child, young person and vulnerable adult protection issues, and oversees this work is: **Kalela Ntumba**

When the setting is open but the designated person is not on site, a suitably trained deputy is available at all times for staff to discuss safeguarding concerns. Our deputy designated safeguarding officer is: **Nzimoli Munga**

The DSO and their deputy are responsible for:

- Ensuring that all staff receive appropriate safeguarding and child protection training so that they are up to-date with current legislation, policy and practice and are able to respond sensitively and appropriately to any child protection concerns.
- Ensuring that all staff and students new to the setting receive induction training to enable them to understand and adhere to the setting's policies.
- Ensuring that they understand Local Safeguarding Partners (LSPs) safeguarding procedures, attends relevant LSPs training at least every two years and refreshes their knowledge of safeguarding at least annually.
- Ensuring that child protection referrals are made using the format agreed by Barnet Safeguarding Children Partnership or the format required by other boroughs if the child is not a Barnet Council resident.
- Ensuring they are up to date with information disseminated by the Local Authority and Ofsted.
- Ensuring the setting's child protection and safeguarding policies and procedures are maintained, up-to-date and are disseminated and adhered to by all staff
- Ensuring they have relevant links with statutory and voluntary organisations with regard to safeguarding.
- Ensuring that all staff are trained to understand our safeguarding policies and procedures and that parents are made aware of them too.
- Ensuring all staff understand that safeguarding is their responsibility.
- Ensuring that all staff have an up-to-date knowledge of safeguarding issues, are alert to potential indicators and signs of abuse and neglect and understand their professional duty to ensure safeguarding and child protection concerns are reported to the local authority children's social care team or the NSPCC. They receive updates on safeguarding at least annually.
- Ensuring all staff are confident to ask questions in relation to any safeguarding concerns and know not to just take things at face value but can be respectfully sceptical.
- Ensuring all staff understand the principles of early help (as defined in *Working Together to Safeguard Children*, 2018) and are able to identify those children and families who may be in need of early help and enable them to access it.
- Ensuring all staff understand the thresholds of significant harm and understand how to access services for families, including for those families who are below the threshold for significant harm, according to arrangements published by the LSPs.
- Ensuring all staff understand their responsibilities under the General Data Protection Regulation and the Data Protection Act 2018, and understand relevant safeguarding legislation,

statutory requirements and local safeguarding partner requirements and ensure that any information they may share about parents and their children with other agencies is shared appropriately and lawfully.

4. Working in partnership with parents/carers

The Nursery is committed to developing and maintaining a culture of openness and honesty and to working in partnership with parents to ensure the best interest of children and their families.

Procedures for working in partnership with parents/carers:

- During the settling in process, Nursery Managers explain to parents and carers, that the setting has a duty to report concerns about children's safeguarding, to Children's Social Care.
- Additional opportunities to explain this statutory duty and to remind parents of the importance of reporting all marks, bruises and accidental injuries to their key person, need to be raised regularly, e.g. during meetings, about progress reports or transition.
- Staff are required to talk the concern through with the Designated Safeguarding Officer or in his/her absence, his/her Deputy, to agree who will be best placed to meet the parent/carer and what exactly will be discussed.
 - All confidential discussions with parents must be held in a private space.
 - If a parent or carer reports an accident which occurred out of the Nursery, this must be recorded on an Existing Injury form in our EyLog app or on a hard copy, and signed by the parent.
 - All staff are reminded to only record factual information with clear objective evidence.
 - All disclosures of any abuse from children, such as hitting, need to be responded to professionally and without prejudice.
 - The main focus is on what has been seen or observed by asking the parent/carer about the concern in a straightforward and non-judgmental way. For instance, if the concern is about an injury: "That's quite a nasty bump on his head, do you mind telling me how it happened?" It is important to be sensitive and approach the conversation without making assumptions.
 - It is important to remind the parent of our statutory duty to ask this type of question, to ensure children's welfare and well-being.
 - During the discussions, staff must maintain positive interaction and active listening to what the parent/carer says.
 - Parents may appear nervous because it is stressful to be questioned like this. But does the explanation seem reasonable and is it consistent with what you have noticed? Make a note of exactly what was said as soon as possible.
 - After the meeting - talk it over again with the Designated Safeguarding Officer or their Deputy to agree whether the issue is resolved or needs further action.
 - If it shows evidence of abuse requiring follow up action OR if there have been previous concerns, then Children's Social Care will need to be informed and they will advise on continued liaison with parents/carers.
 - In cases of suspected sexual abuse and cases where a child would be in immediate danger or at risk of significant harm if taken home again by the parents/carers, Children's Social Care must always be contacted first, not the parents. They will advise on next steps of action. **Multi-agency Safeguarding Hub (MASH) Barnet can be contacted on 0208 359 4066 (Referral and Advice Team).**

5. What to do if you have concern about a child?

We are committed to responding promptly and appropriately to all incidents, allegations 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' \(HMG, 2015\)](#) and the Care Act 2014.

1. Responding to the child: Good Practice points if a child discloses abuse or you have a concern

Where a child makes comments to a member of staff that give cause for concern (disclosure), or a member of staff observes signs or signals that give 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 must take the following actions:

- react calmly so as not to frighten or deter the child
- listen to the child, offer reassurance and give assurance that she or he will take action;
- do not question the child, although it is OK to ask questions for the purposes of clarification;
- do not stop the child / young person who is freely recalling significant events. Allow them to continue at their own pace.
- offer comfort bearing in mind the age and needs of the child.
- if the child has disclosed sexual abuse, ask them when it happened but nothing more. Whether a child is asked this question will depend upon the child's age and understanding.
- tell them that they were right to tell you and it was not their fault and they are not bad.
- tell them who you are going to tell so that they can be made safe – children may fear that what they have said will be passed on to everyone and they need to know that this will not be the case
- do not be tempted to give false reassurances to the child but tell them that you will do your best to protect or help them.
- ensure the safety of the child / young person

2. Recording suspicions of abuse and disclosures

Accurate and timely recording is vitally important as not only is this good practice, but the notes may form part of the evidence in a child protection investigation. In this event, they may be needed for a case conference or legal proceedings.

Staff must take the following actions to record suspicions of abuse and disclosures:

- As soon as possible, take care to record in writing what was said, using the child's own words on a Blank Incident Form. Only record factual information, with clear, objective evidence of what you have seen or heard.
- Record the date, time, setting, any names mentioned, to whom the information was given and other people present. Sign and date the record.
- A separate record must be recorded for each incident.
- Record any subsequent events and actions, including parent/carer's feedback, on a new Incident or Conversation log form.

- Carefully draw and describe in writing, any mark you have seen, on the Child Protection body map form. Use this map to:
 1. provide a written description,
 2. draw a visual picture of the type of injury (for example, show the difference between an alleged slap mark, possibly showing finger marks, versus a smaller more defined mark or bruise, possibly caused by child falling on a toy);
 3. to identify the exact site of injury, especially on the face, soft tissues and other parts of the body, more likely to be involved in non-accidental injuries.

- A child may recall former abuse once in a safe situation. Although they may be under no current threat to their safety, any disclosure must be raised with the Designated Child Protection Officer immediately and followed through appropriately.
 - If a staff may also have concerns about a child's welfare where there has not been any disclosure or allegation. In the best interests of the child, these concerns should be raised with the Designated Safeguarding Officer and followed through appropriately. Recording concerns in writing and raising issues with the Designated Safeguarding Officer, is a key tool to safeguarding and protecting children.
 - Where the local safeguarding partners safeguarding procedures stipulates the process for recording and sharing concerns, we include those procedures alongside this procedures and follow the steps set down by the local safeguarding partners.

3. What to do next?

- Report your concerns immediately, and always **within one working day** to your Designated child protection officer or in their absence, the Deputy, who will complete the Record of Concerns Form recording the date and time when the form is received and a summary of actions following up reporting this concern:
 - ***The DSO will make a written record that forms an objective record of the observation or disclosure that includes: the date and time of the observation or the disclosure; the exact words spoken by the child as far as possible; the name of the person to whom the concern was reported, with the date and time; and the names of any other person present at the time.***
 - All records of concerns, emails, notes of phone conversations and actions are signed and dated and kept in the child's personal file, which is kept securely and confidentially.
 - Barnet Children's Service offers a consultation line for advice if you are not sure whether a concern should be referred. This should not be used for urgent situations when you should refer directly to the referral and assessment team.
 - Designated safeguarding persons should refer directly to Barnet Referral and Assessment Team during office hours and the Emergency Duty Team out of office hours.
 - If your designated child protection person, deputy or manager is unavailable, contact the Barnet referral and assessment team for advice.

Barnet Consultation Line: For consultation, advice or to talk through a situation without having to give case names call 020 8359 4336. Operates from 9.30 -11.30 Tuesday and Wednesday.

Referral and Assessment Team (during office hours) call 020 8359 4066/4097.

Out of Hours Service call 020 8379 2000 (after 5.15 pm Monday to Thursday, 5pm Friday and weekends and public holidays).

In an emergency, contact the Police Child Abuse Investigation Team or dial 999

Police Child Abuse Investigation Team call 020 8733 5070 between 8am-6pm. At all other times-contact this number where the controller will take initial details and contact the appropriate out of hour's officer on 020 8200 1212.

Ofsted also need to be notified as soon as reasonably practicable, but not later than 14 days after the event. Ofsted Helpline 0300 123 1231.

4. Sharing Concerns with Parents and Carers

- Parents are normally the first point of contact. It is good practice in most cases to inform parents about any concerns that may arise and advice as to how this should be approached can be sought from the children's Service Referral and Assessment Team.
- Concerns will be normally discussed with parents to gain their view of events, unless it is felt that this may put the child or other person at risk, or may interfere with the course of a police investigation, or may unduly delay the referral, or unless it is otherwise unreasonable to seek consent. Advice will be sought from social care, or in some circumstances police, where necessary.
- Parents are informed when 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 procedures of the local safeguarding partners does not allow this, for example, where it is believed that the child may be placed at risk. This will usually be the case where the parent is the likely abuser or where sexual abuse may have occurred.
- If there is a possibility that advising a parent beforehand may place a child at greater risk (or interfere with a police response) the designated person should consider seeking advice from children's social care, about whether or not to advise parents beforehand, and should record and follow the advice given.

5. Exceptions to sharing concerns

- If you think a child will suffer further harm as a result of speaking to the parent or carer.
- Where immediate action needs to be taken to protect the child.
- Where you think the child might be removed immediately.
- Where there is a concern about sexual abuse, always seek advice first.

6. Information Sharing and management of data

It is vital that early years staff and volunteers can share information appropriately as part of their day-to-day work and this is especially important in relation to safeguarding children.

The Government has issued guidance on Information Sharing for all those who work with children and adults who may be parents. Full details can be found at

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf

The guidance can be summarised by the following Seven golden rules for information sharing:

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.

2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.

3. Seek advice from other practitioners, or your information governance lead, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.

4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.

5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.

6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see principles).

7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

The Data Protection Act 2018 (DPA) along with the GDPR applies to anyone who handles or has access to information concerning individuals. Everyone in our setting has a legal duty to protect the privacy of information relating to individuals. DPA sets standards which must be satisfied when processing personal data (defined as information that will identify a living individual). The DPA also gives rights to the people the information is about i.e. subject access rights lets individuals find out what information is held about them. Everyone responsible for using personal data has to follow strict rules called 'data protection principles'. They must make sure the information is:

- used fairly, lawfully and transparently
- used for specified, explicit purposes
- used in a way that is adequate, relevant and limited to only what is necessary
- accurate and, where necessary, kept up to date
- kept for no longer than is necessary
- handled in a way that ensures appropriate security, including protection against unlawful or unauthorised processing, access, loss, destruction or damage

The quantity and variety of data held on children, families and on staff is always expanding. Whilst this data can be very useful in improving services, data could be mishandled; stolen or misused therefore it is important that all records are handled with sensitivity and in line with the above act.

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 local safeguarding partners and in line with the GDPR, Data Protection Act 2018, and Working Together to Safeguard Children 2018.

6. Making a referral to the local authority children's social care team

Early Years and Childcare

Early years providers have a duty under section 40 of the Childcare Act 2006 to comply with the welfare requirements of the early years foundation stage (EYFS)⁴⁴. Early years providers must ensure that:

- They are alert to any issues of concern in the child's life;
- They have and implement a policy and procedures to safeguard children. This must include an explanation of the action to be taken when there are safeguarding concerns about a child and in the event of an allegation being made against a member of staff. The policy must also cover the use of mobile phones and cameras in the setting, that staff complete safeguarding training that enables them to understand their safeguarding policy and procedures, have up-to-date knowledge of safeguarding issues, and recognise signs of potential abuse and neglect;
- They have a practitioner who is designated to take lead responsibility for safeguarding children within each early years setting and who must liaise with local statutory children's services as appropriate. This lead must also complete child protection training.

Where we are concerned that a child or young person may be at imminent risk of significant harm, we will call 999 or call 0208 359 4066 to make a Child Protection Contact Referral or fill Child Protection Referral form online which is available with guidance on Barnet County Council Website at: [Worried about the safety of a child](#) by clicking on the button **Safeguarding concern referral**.

WHEN IN DOUBT, CONCERNS MUST BE SHARED APPROPRIATELY.

Procedures for making referral to the Local Authority

1. Making an initial contact

An Initial Contact is made where Children's Social Care is contacted about a child, who may be a Child in Need, and where there is a request for general advice, information or a service.

All contacts need to be considered alongside thresholds for Children in Need and/or the CAF criteria and a decision made within 24 hours regarding the level of response required.

At any time, an Initial Contact may become a Referral if it appears that statutory services may be required for a Child in Need.

Any significant information received about a child who is an open case should be regarded as an Initial Contact, passed to the child's allocated social worker and recorded on the electronic data base.

The Common Assessment Framework (CAF) is not a referral form, although it may be used to support a referral or a specialist assessment.

The duty support officer will check the electronic data base records to see if the child or family is known and, if known, retrieve information on them. Any such information will be passed to the MASH

Manager who will establish whether the enquiry can be dealt with by the provision of information and advice or re-direction to other agencies or services. (See Section 2, Screening Process).

Information to be Provided with a Contact

When making contact with Children's Services, we may share the following information with them:

- Full names, dates of birth and gender of children (including surnames used);
- Family address (current and previous) and, where relevant, school/nursery attended;
- Identity of those with Parental Responsibility;
- Names and dates of birth of all members of the household (including all surnames used);
- Ethnicity, first language and religion of children and parents/carers;
- Details of any extended family or community who are significant for the child;
- Any special needs of the children including the means in which they communicate;
- Any significant / important recent or past events/incidents in the child or family life, including previous concerns;
 - Cause for concern including details of allegations, their sources, timing and location of incidences;
 - The child's current location and emotional and physical condition;
 - Whether the child needs immediate protection;
 - Details of any alleged perpetrator;
 - Referrer's relationship with and knowledge of the child and his or her family;
 - Known current or previous involvement of other agencies/professionals e.g. schools, GPs;
 - Background information relevant to referral e.g. positive aspects of parents care, previous concerns, pertinent parental issues e.g. mental health, domestic abuse, drug or alcohol abuse, threats and violence towards professionals;
 - Information regarding parents' knowledge of and agreement to the contact/ referral.

Providing Parents with Information and Obtaining Agreement to Share Information with Other Agencies

The Data Protection Act should never be a barrier to 'sharing information' where the failure to do so would result in a child or vulnerable adult being placed at risk of harm or indeed on those occasions where seeking consent might increase the risk of harm. The Act ensures that information shared is done appropriately.

The manner in which the provision of information and obtaining agreement from parents to share information is required, or not required, is as follows:

- Parents Informed and agreement obtained to share information is obtained - The child and family will, where possible, be informed about the contact into Children's Services and parents' permission will generally be sought by Children's Services before discussing information about them with other agencies;
 - Parents Informed Only - In this instance, the child and family will be informed only, but agreement to share is not obtained due to various reasons (e.g. It was not possible to gain agreement but it is in the best interest of the child to share information urgently);
 - Parents Not Informed and Agreement to Share Information is Not Obtained - Permission is not required if any criteria below apply:

If parent(s) have not been informed prior to the contact, the professional referrer should be asked to inform them unless it is considered to do so might place the child at an increased likelihood of suffering significant harm by:

- The behavioural response it prompts e.g. a child being subjected to abuse, maltreatment or threats / forced to remain silent if alleged abuser informed;
- Leading to an unreasonable delay;
- Leading to the risk of loss of evidential material;
- Placing a member of staff from any agency at risk.
- Inter-agency discussion without parental permission may also be justified if it is concluded that information held in other organisations is likely to inform a decision to conduct Section 47 Enquiries.

In the absence of consent by the parents the Lead Professional will make a judgement as to whether, without help, the needs of the child to be safeguarded will escalate.

A Children's Services Team Manager from the Local Authority will authorise any decision to discuss the referral with other agencies without parental knowledge or permission, and the reasons for such action will be recorded. When there is a possibility that a crime may have been committed, discussion with the Police may occur prior to informing the parents of the concern.

2. Screening Process

The following process applies to new cases of children previously unknown to the authority, and to closed cases.

The process of contacts must include screening against the Threshold Criteria for Children in Need and/ or CAF and must include internal electronic database and agency checks to establish whether the family is previously known, and whether there is a Child Protection Plan in relation to the child and/or whether the child is Looked After.

The screening process should establish:

The nature of the concern;

- How and why it has arisen;
- What the child's needs appear to be;
- Whether the concern involves Significant Harm;
- Whether there is any need for urgent action to protect the child or any children in the household.

This process will involve:

- Discussion with the referrer;
- Consideration of any existing records, including whether the child is the subject of a Child Protection Plan:

- Involving other agencies as appropriate and in accordance with Information sharing advice for safeguarding practitioners;
- Consent from the parent or carer should normally be sought;

- However, the Data Protection Act should never be a barrier to 'sharing information where the failure to do so would result in a child or vulnerable adult being placed at risk of harm' or indeed on those occasions where seeking consent might increase the risk of harm; o Information should always be 'necessary and proportionate'.
- If there is suspicion that a crime may have been committed including sexual or physical assault or neglect of the child, the Police must be notified immediately.

Personal information about non-professional referrers should not be disclosed to the parents or other agencies without the referrer's consent.

The parent's consent should usually be sought before discussing a referral with other agencies unless this may place the child at risk of Significant Harm, in which case the manager should authorise the discussion of the referral with other agencies without parental knowledge or consent. The authorisation should be recorded with reasons.

3. Outcomes of Contacts / Referrals

The outcome of a contact, which must be authorised by the MASH Manager, may be:

- That the child does not appear to be a Child In Need, which will result in one of the following: the provision of information, advice, sign-posting to another agency and/or no further action;
- That the child does not appear to be a Child in Need, and consent is sought for referral for Early Help intervention;
- That the child appears to be a Child in Need with a moderate level of need, in which case, the manager may authorise an Assessment;
- That the child appears to be a Child in Need with a high level of need, which must result in an Assessment;
- That it is suspected that the child is suffering or is likely to suffer from Significant Harm, which will result in an Assessment, with a view to conducting a Strategy Discussion, prior to a Section 47 Enquiry commencing;
- Professional referrers must be advised of the outcome of the contact.

Feedback on the contact should also be provided to non-professional referrers in a manner consistent with respecting the confidentiality of the child.

The child and family must be informed of the action to be taken.

The child should be seen as soon as possible if the decision is to undertake an assessment.

Where requested to do so by local authority children's social care, professionals from other parts of the local authority such as housing and those in health organisations have a duty to cooperate under section 27 of the Children Act 1989 by assisting the local authority in carrying out its children's social care functions.

4. Progress to Referral

An Initial Contact will be progressed to a Referral where the MASH Manager considers statutory assessment and/or services may be required for a Child in Need.

Referrers should have the opportunity to discuss their concerns with a qualified social worker. The referrer should be asked specifically if they hold any information about difficulties being experienced by the family/household due to domestic violence and abuse, mental illness, substance misuse and/or learning difficulties.

The MASH social worker should clarify with the referrer, where known, the nature of the concerns and how and why they have arisen.

They will obtain as much of the following information as possible:

- Full names, dates of birth and gender of children;
- Family address and, where relevant, school/nursery attended;
- Identity of those with Parental Responsibility;
- Names and dates of birth of all members of the household;
- Ethnicity, first language and religion of children and parents;
- Any special needs of the children including the means in which they communicate;
- Any significant recent or past events;
- Cause for concern including details of allegations, their sources, timing and location;
- The child's current location and emotional and physical condition;
- Whether the child needs immediate protection;
- Details of any alleged perpetrator;
- Referrer's relationship with and knowledge of the child and his or her family;
- Known involvement of other agencies;
- Information regarding parents' knowledge and agreement to referral.

5. Timescales

Once received, all contacts must be written up and a decision made about the outcome **within one working day** of the initial contact. (Note: This should be as soon as possible where it is evident the child is seen as requiring immediate protection/urgent action).

Within one working day, the MASH Manager should make a decision about the type of response that is required. This will include determining whether:

The child requires immediate protection and urgent action is required;

- There is reasonable cause to suspect that the child is suffering, or likely to suffer, Significant Harm, and whether enquires must be made and the child assessed under Section 47 of the Children Act 1989.
- The child is in need, and should be assessed under Section 17 of the Children Act 1989;
- Any services are required by the child and family and what type of services; and
- Further information required in order to help the local authority to decide what further action to take.

6. Recording of Referrals

All Initial Contacts and Referrals should be recorded on the Children's Social Care electronic database.

7. What happens after a referral has been made?

- It is important that you work closely with all professionals involved in order to keep the child safe
- If children's services decide to conduct an investigation, you may be asked to attend a meeting or child protection case conference with support from the designated child protection person. You will be expected to provide information to help the assessment and if a child protection case conference is called, to give a view about whether the child should be subject to a child protection plan. In this event, further information and advice will be provided that explains your role and contribution.
- If it is decided to provide services, you will have a valuable contribution as part of a co-ordinated plan of support and it is important to maintain regular communication with the child's allocated social worker
- It may be that at the point of referral, the level of concern does not meet the threshold for statutory intervention and you may be asked to continue to monitor the situation for evidence of further concerns. It may be appropriate to consider a CAF (see below).

8. The Common Assessment Framework (CAF)

The CAF is a way of identifying when a child or young person has additional needs for support and putting a plan in place for services to work together as a team around the child.

It provides an opportunity for early intervention to support families in building on strengths and addressing difficulties before problems escalate.

The CAF enables information to be gathered together in one place and shared with consent so that families do not have to keep repeating their story to lots of different professionals. If a number of services are involved, then one of them will be appointed as a 'Lead Professional' to co-ordinate the plan of action.

Childminders or early years staff and volunteers may be well placed to identify support needs and to consider whether a CAF would help.

However, the CAF is a voluntary process that can only be entered into with the consent of the parents or carers.

If a CAF is already in place, then you may be part of the team providing support to the child and family.

Note. The CAF should not be confused with child protection procedures and where there are concerns about the risk of abuse follow guidance in the previous section

Further information about the CAF can be obtained from

<https://www.barnet.gov.uk/sites/default/files/assets/workingwithchildren/cafguidanceformanagerandsandpractitioners/cafguidanceformanagersandsandpractitioners.pdf>

7. Liaison with other agencies and multi-agency working

We are committed to working with external organisations (for example Children’s Social Care, the police, the local authority, the Local Safeguarding Children Boards) to promote the welfare of children in our local area and ensure that children / young people are protected and the Prevent duty builds on such existing local partnership arrangements.

We know the importance of effective engagement with parents/family as they are in a key position to spot signs of radicalisation. It is important to assist and advise families who raise concerns and be able to point them to the right support mechanisms.

- We work within the local safeguarding partners guidelines.
- The current version of [‘What to do if you’re worried a child is being abused’](#) is available for parents and staff and all staff are familiar with what they need to do if they have concerns.
- We have procedures for contacting the local authority regarding child protection issues and concerns about children’s welfare, including maintaining a list of names, addresses and telephone numbers of professionals working with children and families in Barnet, to ensure that it is easy, in any emergency, for the setting and children's social care to work well together.
- We notify Ofsted of any incident or accident and any changes in our arrangements which may affect the well-being of children or where an allegation of abuse is made against a member of staff (whether the allegations relate to harm or abuse committed on our premises or elsewhere). Notifications to Ofsted are made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made.
- Contact details for the local National Society for the Prevention of Cruelty to Children (NSPCC) are also kept.

8. Allegations against staff and persons in position of trust

1. Introduction

Tiddley Tots Nursery is committed to providing the highest level of care for both its pupils and its staff. We aim to ensure all children in our care are safe from harm at the setting and outside of the setting. It is extremely important that any allegations of abuse against any member of staff, or volunteer in our setting is dealt with thoroughly and efficiently, maintaining the highest level of protection for the child whilst also giving support to the person who is the subject of the allegation.

It is essential that any allegation of abuse made against a member of staff, students on placement or volunteers in our setting are dealt with fairly, quickly, and consistently, in a way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation. All staff and volunteers should understand what to do if they receive an allegation against another member of staff or they themselves have concerns about the behaviour of another member of staff.

2. What to do if an allegation is made or you have concerns about a practitioner?

If an allegation is made against an employee, STAFF must take the following initial actions:

- Make sure that the child or young person is safe and away from the subject of the allegation or concern.
- Report any concern or allegation in the first instance to your Designated Safeguarding Officer (unless they are the subject of the concern, in which case you should go to the Deputy Designated safeguarding officer or the next most senior person within the nursery, e.g. your manager/nursery director).
- You should record the observation or information that has given cause for concern and sign and date the notes.
- Follow any advice given about what information should be shared with the parent/carer.

Staff should NOT:

- Investigate or ask leading questions if seeking clarification;
- Make assumptions or offer alternative explanations;
- Promise confidentiality, but give assurance that the information will only be shared on a 'need to know' basis.

For Further guidance the Flowchart on Managing Child Protection Related Allegations against Staff, Process within London Borough of Barnet can be found on our Safeguarding Board and by clicking on the link below.

<https://beitshvidler.org.uk/assets/School-information/Policies/Flowchart.pdf>

All allegations that meet the criteria below must be reported to the LADO (Local Authority Designated Safeguarding Officer) within one working day. **Barnet's LADO** should be contacted via the Multi Agency Safeguarding Hub (MASH) Team by calling them on 020 8359 4066. The MASH team are available Monday to Thursday 9 am to 5.15 pm and Friday 9 am to 5 pm. Outside of these hours you should report any concerns that need an immediate response to our emergency duty team on 020 8359 2000. To make online referral please go to [Worried about the safety of a child](#) on Barnet website and click on the button Safeguarding concern referral. The **LADO** deals with allegations against staff within the children's workforce in Barnet. Where one of the following allegations have been made, these must be reported to the LADO within one working day:

- behaved in a way that has harmed or may have harmed a child;
- possibly committed a criminal offence against or related to a child;
- behaved towards a child/ren in a way that indicates they may pose a risk of harm to children.

If an allegation is made against an employee, the Designated Safeguarding officer/ Deputy Designated Officer or Senior Management must take the following initial actions:

When informed of a concern or allegation, the senior manager should not investigate the matter or interview the member of staff, child concerned or potential witnesses. They must:

- Obtain written details of the concern / allegation, signed and dated by the person receiving (not the child / adult making the allegation);
- Approve and date the written details;

- Record any information about times, dates and location of incident/s and names of any potential witnesses;
- Record discussions about the child and/or member of staff, any decisions made, and the reasons for those decisions.
- Notify the relevant officer within the local authority LADO (Local Authority Designated Officer) **within one working day** by calling them on 020 8359 4066 (Monday to Thursday 9am to 5.15 pm and Friday 9am to 5 pm). Outside of these hours you should report any concerns that need an immediate response to our emergency duty team on 020 8359 2000. To make online referral please go to [Worried about the safety of a child](#) on Barnet website and click on the button Safeguarding concern referral.
- Notify Ofsted within 14 days by calling them on 0300 123 1231.
- Not give any information, under no circumstances at this stage, about the concerns/allegations be given to a person who is implicated or against whom an allegation has been made. For additional guidance on what to say/how to behave, see [Guidance on What to Say](#).

The **LADO** can also be contacted for advice regarding concerns or suspicions about behaviour towards children by staff within Barnet's children's workforce. This includes volunteers as well as paid staff and those in a position of trust for example faith leaders. **Barnet's LADO** should be contacted via the Multi Agency Safeguarding Hub (MASH) Team by calling them on 020 8359 4066. The MASH team are available Monday to Thursday 9 am to 5.15 pm and Friday 9 am to 5 pm. Outside of these hours you should report any concerns that need an immediate response to our emergency duty team on 020 8359 2000. To make online referral please go to [Worried about the safety of a child](#) on Barnet website and click on the button Safeguarding concern referral.

3. What happens after the Local Authority has been informed?

The LADO/ Local Authority Team of Designated Officers will advise on and oversee the actions/measures that must be taken in response to the allegation including notifications to the following:

- The child(ren)'s Social Worker;
- Whether it is necessary for the child to move placements;
- The Regulatory Authority;
- Depending on the outcome of the LADO's investigation, referring the member of staff to the Disclosure and Barring Service.

The LADO will also advise the Designated Safeguarding Officer (DSO) /senior managers in relation to informing the parents of the child/ren involved. Acting on this advice, if it is agreed that the information can be fully or partially shared, the senior manager should inform the parent/s. In some circumstances, however, the parent/s may need to be told straight away (e.g. if a child is injured and requires medical treatment).

The parent/s and the child, if sufficiently mature, should be helped to understand the processes involved and be kept informed about the progress of the investigation and of the outcome where there is no criminal prosecution. This will include the outcome of any disciplinary process, but not the deliberations of, or the information used in, a hearing.

The DSO/senior managers should also seek advice from the LADO, the police and / or Children's social care about how much information should be disclosed to the accused person.

The LADO will consult with the senior managers from the home and other relevant agencies (e.g. the Placing Authority and the area authority, the Police, relevant Social Workers and the Regulatory Authority), in order to manage and coordinate decisions which will need to be taken in relation to the member of staff against who the allegation has been made. For example, it may be necessary to move or suspend staff or transfer them to other duties which do not involve direct contact with children or vulnerable adults.

The DSO/senior managers will be consulted as to whom should contribute to the investigation of the allegation including attending an allegations strategy meeting.

If, at the conclusion of the investigation, the member of staff is removed from working with children, a referral must be made to the Disclosure and Barring Service.

4. Confidentiality

We will make every effort to maintain confidentiality and guard against publicity while an allegation is being investigated or considered. Apart from keeping the child, parents and accused person (where this would not place the child at further risk) up to date with progress of the investigation, information should be restricted to those who have a need to know in order to protect children, facilitate enquiries, and manage related disciplinary or suitability processes.

5. Support

The home, together with Children's Social Care and / or Police, where they are involved, should consider the impact on the child concerned and provide support as appropriate. Liaison between the agencies should take place in order to ensure that the child's needs are addressed.

Following consultation with the LADO, the accused member of staff should be provided with information about the allegation and the initial actions agreed. They should be advised to contact their union or professional association. Human Resources should be consulted in order that appropriate support can be provided via the organisation's Occupational Health or Employee Welfare Arrangements.

5. Suspension

Suspension is a neutral act and it should not be automatic. We will consider suspension in any case where:

- There is cause to suspect a child is at risk of harm; or
- The allegation warrants investigation by the police; or
- The allegation is so serious that it might be grounds for dismissal.
- The possible risk of harm to children should be evaluated and managed in respect of the child/ren involved and any other children in the accused member of staff's home, work or community life.

If an allegations strategy meeting is held, attendees should discuss whether suspension is appropriate.

If a suspended person is to return to work, we will consider what help and support might be appropriate (e.g. a phased return to work and/or provision of a mentor), and also how best to manage the member of staff's contact with the child concerned, if still in the workplace.

6. Record Keeping

We will keep a clear and comprehensive summary of the case record on a person's confidential personnel file and give a copy to the individual. The record should include details of how the allegation was followed up and resolved, the decisions reached and the action taken. It should be kept at least until the person reaches normal retirement age or for ten years if longer.

The purpose of the record is to enable accurate information to be given in response to any future request for a reference if the person has moved on. It will provide clarification where a future DBS request reveals non convicted information, and will help to prevent unnecessary reinvestigation if an allegation re-surfaces after a period of time. In this sense it may serve as a protector to the individual themselves, as well as in cases where substantiated allegations need to be known about to safeguard future children.

- A separate record is held by the LADO.
- Details of allegations that are found to be malicious will be removed from personnel records.

7. Referrals to the Disclosure and Barring Service

If an allegation is substantiated and, we remove the individual from work (or would have done had the person not left first) because the person poses a risk of harm to children, the DSO/senior managers, in consultation with the LADO, must make a referral should be made to the Disclosure and Barring Service (DBS).

Where individual staff continue to have concerns about a colleague or in relation to conduct of an investigation made in response to an allegation, the Whistleblowing Policy and Procedure should be followed.

9. Training

We are committed to promoting awareness of child abuse issues throughout our training and learning programmes for adults. We are also committed to empowering children through our early childhood curriculum, promoting their right to be strong, resilient and listened to.

- Training opportunities are sought 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 (including child sexual exploitation) and neglect and that they are aware of the local authority guidelines for making referrals. Training opportunities should also cover extra familial threats such as online risks, radicalisation and grooming, and how to identify and respond to families who may be in need of early help, and organisational safeguarding procedures.
- Designated persons receive appropriate training, as recommended by the local safeguarding partners, every two years and refresh their knowledge and skills at least annually.

- We ensure that all staff know the procedures for reporting and recording any concerns they may have about the provision.
- We ensure that all staff receive updates on safeguarding via emails, newsletters, online training and/or discussion at staff meetings at least once a year.

10. Safer recruitment

Safe recruitment and selection practice are vital to safeguarding and protecting children.

- All staff and volunteers are carefully selected. The Nursery recruitment procedures are in line with LBB safer recruiting guidelines.
- DBS checks are carried out for all staff, apprentices, and agency supply workers before they are allowed to work at the nursery.
- DBS disclosures are recorded on the Nursery's Single Central Record.
- All new members of staff, apprentices and agency supply workers complete the induction process and sign to agree that they have understood our policies, procedures including basic safeguarding practices.

Vetting and barring

We understand our duties in relation to the Safeguarding Authority procedures. The Disclosure and Barring Service (DBS) is responsible for the disclosure of criminal records (previously CRB's) and the Independent Safeguarding Authority for barring. We have a duty to meet any requirements of the Independent Safeguarding Authority (ISA) including the following:

- A person who is barred by the Independent Safeguarding Authority from working with children or vulnerable adults will be breaking the law if they work or volunteer, or try to work or volunteer with those groups.
- An organization that knowingly employs a barred individual to work with children or vulnerable adults will also be breaking the law.
- If a member of staff or volunteer is dismissed because they have harmed a child or vulnerable adult, or would have been dismissed if they not left, we must refer this information to the Independent Safeguarding Authority (ISA).
- We will check ISA information on an on-going basis to ensure that the setting remains up to date with the current information.

11. Children with special educational needs and/or disabilities

The risks to disabled children may be increased by:

- their need for practical assistance and physical dependency, including intimate care, which may be delivered by a number of different carers;
- by possible communication difficulties and lack of access to strategies to keep themselves safe, or
- by the increased risk that they may be socially isolated.

Staff members who work with children in any capacity must be particularly aware of and sensitive to how the effects of abuse or harm may present, and be able to pick up on any changes in behaviour or

presentation that might indicate a concern. Concerns must be shared immediately with the Designated Safeguarding Officer or in their absence, the Deputy. Staff will have important information about individual children's presentation, their levels of understanding and how best to communicate with them. All staff working with children with special educational needs or disabilities will receive appropriate training to enable them to meet the needs of these children appropriately and to recognise and report any concerns.

This should be read in conjunction with the setting's separate policies on Nappy changing Policy and the Sickness and Medication Policy.

12. Children harming other children

- It is part of our duty of care that we make sure that children are protected from harm from other children.
- In an early years setting with children under aged five years, biting, pushing, scratching and hitting may all occur at times.
- Please refer to our Behaviour policy for managing these incidents. It is especially important that if you think a child is targeting another child, you raise this issue with the Designated Safeguarding Officer or Deputy, immediately.
- In recording and reporting incidents it is important that the identity of the child who hurt the other child is not disclosed.
- This is part of our duty of confidentiality to all children and families. If a parent asks who has hurt their child, please show your understanding of their upset, anger, or pain, but explain that we are not able to share this information.
- Refer to the Nursery Manager if necessary.

13. Boundaries and good practice

All staff should have a clear understanding of good professional practice and boundaries in order to safeguard children and themselves. What constitute appropriate good professional practice and boundaries is regularly discussed and revisited during staff meetings.

Good professional practice and boundaries include:

- Raising concerns about poor or unsafe practice in relation to children to the Designated Safeguarding Officer.
- **Reporting allegations made by a child immediately to the Designated Child Protection Officer or Deputy.**
- In the case of allegations made about the Nursery Manager or people in position of trust, these should be reported to the Nursery Directors or Local Authority Designated Officer (LADO) within one working day; and to Ofsted within 14 days.
- Being mindful of the need to maintain clear professional boundaries with parents and service users and ensure confidentiality of information about children and families attending the setting.
- No staff should babysit/work for parents or carers in a private capacity

14. Behaviour Management Policy

Please refer to the Nursery's Behaviour Management Policy for detail information

Remember that:

- There may be occasions when a child is a danger to others or themselves, when time out/moving out of the room to a safe space is used.
- It is never acceptable to hit, smack, shake, pull or to threaten any of these actions to child whilst you are at work in the nursery.
- It is also not acceptable for a parent/carer or any other adult to do this in the nursery (please report this concern to the Designated Safeguarding Officer if this happens).

15. Bullying

Bullying is a behaviour that both parents and practitioners worry about. Bullying is a deliberate, aggressive and repeated action, which is carried out with intent to cause harm or distress to others. It requires the child to have 'theory of mind' and a higher level of reasoning and thinking, all of which are complex skills that most three-year-olds have not yet developed (usually after the age of four along with empathy). Therefore, an outburst by a three-year-old is more likely to be a reflection of the child's emotional well-being, their stage of development or a behaviour that they have copied from someone else.

Young children are keen observers and more likely to copy behaviours, which mimic the actions of others, especially the actions of people they have established a relationship with. These are learnt behaviours rather than premeditated behaviours because children this young do not have sufficiently sophisticated cognition to carry out the type of bullying an older child can do. Unless addressed early, this type of pre-bullying behaviour in young children can lead on to bullying behaviour later in childhood. The fear is that by labelling a child as a bully so early in life we risk influencing negative perceptions and expectations of the child which will impact on their self-image, self-esteem and may adversely affect their long term behaviour. This label can stick with the child for the rest of their life.

We know that children feel happy if they are safe and secure. It is all staff and parents' responsibility to foster an anti-bullying ethos in the nursery. Incidents of bullying will be investigated and treated seriously, and action will be taken to stop the bullying.

A child who is bullying has reached a cognitive development stage where s/he is able to plan to carry out a premeditated intent to cause distress to another. Bullying can occur in children of any age.

If a child is found to be bullying another child/ren:

- We will show the children who have been bullied that we are able to listen, take their concerns seriously and act upon them
- We intervene to stop the child who is bullying from harming the other child or children
- We give reassurance to the child or children who have been bullied
- We explain to the child doing the bullying why her/his behaviour is not acceptable
- We help the child who has done the bullying to recognise the impact of his/her actions

- We make sure that children who bully receive positive feedback for considerate behaviour and are given opportunities to practise and reflect on considerate behaviour
- We do not label children who bully as 'bullies'
- We recognise that children who bully may be experiencing bullying themselves, or be subject to abuse or other circumstances causing them to express their anger in negative ways towards others
- We recognise that children who bully are often unable to empathise with others and for this reason we do not insist that they say sorry unless it is clear that they feel genuine remorse for what they have done
 - We discuss what has happened with the parents of the child who did the bullying and work out with them a plan for handling the child's behaviour; and
 - We share what has happened with the parents of the child who has been bullied (without sharing confidential details such as the name of the child who carried out the bullying), explaining that the child who did the bullying is being helped to adopt more acceptable ways of behaving

In no circumstances will physical punishment, humiliation, denial of food or drink be used as punishment in line with the Children's Acts, Every Child Matters, and the Statutory Framework for the Early Years Foundation Stage and The Practice Guidance for the Early Years Foundation Stage and the UN Convention for the Rights of Children.

16. Early Help and Support to Families

- We believe in building trusting and supportive relationships with families and staff.
- Early help will be considered for a child and family as soon as it is identified they would be likely to benefit from support.
 - Early help can mean taking action at an early stage in a child's life or it can mean taking action at an early stage in the development of a problem. It is about stepping in as early as possible either at the first signs of a problem or before a problem becomes apparent to prevent that problem from getting worse.
 - Early help can be offered through the Nursery where there is access to a range of services including health, benefits and housing advice, parenting support and guidance.
 - Where a child and family would benefit from coordinated support from more than one agency an inter-agency assessment will be offered. These early help assessments, currently through eCAF, should identify what help the child and family require to prevent needs escalating to a point where intervention would be needed via a statutory assessment.
 - A lead professional will be identified from within the agencies engaged in coordinated support for the child and family. This could be a family support worker, families first worker (within a family requiring support at least one child will be over 5), key person, health or other professional.
 - Referrals for early help assessments through targeted family support at the link Children's Centre can be made by a range of professionals or parents can self-refer directly to the Children's Centre. If a referral is made to Children's Services Contact Team and it doesn't meet the threshold for statutory intervention but it is thought the child and family would benefit from early help the referral will be passed to early years targeted family support to offer a service to the families.
 - We make clear to parents our role and responsibilities in relation to child protection, such as for the reporting of concerns, information sharing, 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 worker in relation to the setting's designated role and tasks in supporting that child and their family, subsequent to any investigation.
- We will engage with any child in need plan or early help plan as agreed.
- 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 the local safeguarding partners.

17. E-safety and use of digital devices

Mobile phones and digital devices can present several problems when not used appropriately:

- mobile phones and personal devices can allow Internet access and bypass the nursery security settings and filtering.
- mobile phones with integrated cameras could lead to child protection, bullying and data protection issues with regards to inappropriate capture, use or distribution of images of children or staff.

Use of mobile phones

Staff must not have personal mobile phones with them when they are working with children at the nursery. This also applies to apprentices and visitors. Staff mobile phones must be kept in the office/staff room and used only when staff are on break time in the designated area or outside the nursery. Staff mobile phones must not be stored in any area that is being used or accessed by the children.

- The telephone number of the nursery should be used by staff expecting a personal call and for emergency contact.
- Staff are not permitted to use their own personal phones or devices for contacting children and their families within or outside of the setting in a professional capacity.
- Keeping mobile phones in rooms while working with children constitutes a staff disciplinary matter.
- Parents, carers and visitors are requested not to use their mobile phones while on the nursery premises. Nursery staff will remind parents of the policy by reminding them to switch off their phones when they enter the nursery or asking them to leave the rooms to take calls when necessary.

Use of digital cameras, tablets and any other digital devices

- Staff should not use personal devices such as mobile phones or cameras to take photos or videos of pupils and will only use work provided equipment for this purpose.
- Personal cameras are not allowed in the nursery setting and should not be used on off-site activities, home visits and outings.
- The nursery holds digital camera for staff and where appropriate we will take photographs of children for display, observations or learning journey books.
- Parents and visitors are not permitted to take photographs or recordings of the children.

- **No one is permitted to photograph or record images in the following areas:**
 - **Changing areas**
 - **Toilet areas**
 - **Private spaces**
- Children can only be photographed if permission of parents/carers is given.
- Those taking photos, including staff/apprentices/professional photographers must identify themselves.
 - Professional photographers will be required to have formal identification which must be worn at all times.
 - Children's images will not be used for promotional or press releases unless parents/carers have consented.
 - Unsupervised access to children or one-to-one photo sessions is prohibited.
 - Personal details which might make a child vulnerable, for example, address, email address, phone number should never be revealed.

E-safety

Children should never be allowed to use the internet in the setting without adult supervision. Please refer to the E-safety policy.

Staff who use the nursery's ICT and communications systems:

- must use it responsibly and keep it safe.
- must maintain safe professional boundaries with parents. This includes not giving their personal email address to nursery users or befriending nursery users on social networks such as Facebook.
- **must treat as confidential any passwords** provided to allow access to ICT equipment.
- must report known breaches of this policy, including any inappropriate images or other material which may be discovered on the nursery's ICT systems.
- must comply with any ICT security procedures governing the use of systems in the nursery including anti-virus measures.
- must ensure that it is used in compliance with this policy.

18. Prevent Duty 2015

We understand that protecting children from the risk of radicalisation is part of childcare providers' wider safeguarding duties and is similar in nature to protecting children from other harms (e.g. drugs, gangs, neglect, sexual exploitation), whether these come from within their family or are the product of outside influences. The statutory framework for the Early Years Foundation Stage sets standards for learning, development and care for children from 0-5, thereby assisting their personal, social and emotional development and understanding of the world. The Prevent Duty summarises the requirements for schools and childcare providers in terms of four general themes: risk assessment, working in partnership, staff training and IT policies.

If a member of staff has a concern about a particular child, they should follow the nursery's normal safeguarding procedures, including discussing with the Designated Safeguarding Officer, and where deemed necessary, with children's social care.

Risk assessment

We understand that there is no single way of identifying an individual who is likely to be susceptible to a terrorist ideology. As with managing other safeguarding risks, we understand the need to be alert to changes in children's behaviour and family circumstances which could indicate that they may be in need of help or protection. Children at risk of radicalisation may display different signs of concerning behavior. Even very young children may be vulnerable to radicalisation by others, whether in the family or outside, and display concerning behaviour.

General safeguarding principles apply to keeping children safe from the risk of radicalisation as set out in the relevant statutory guidance, "Working together to safeguard children" and "Keeping children safe in education".

Nursery staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately and follow the nursery safeguarding procedures when and where concerns are raised.

Nursery staff should understand when it is appropriate to make a referral to the Channel programme. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for settings to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages.

Detailed guidance on Channel is available at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/425189/Channel_Duty_Guidance_April_2015.pdf

Working in partnership

We are committed to working with external organisations (for example Children's Social Care, the police, the local authority, the Local Safeguarding Children Boards) to promote the welfare of children in our local area and ensure that children / young people are protected and the Prevent duty builds on such existing local partnership arrangements.

We know the importance of effective engagement with parents/family as they are in a key position to spot signs of radicalisation. It is important to assist and advise families who raise concerns and be able to point them to the right support mechanisms.

Staff training

We understand the importance of Prevent awareness training to equip staff to identify children at risk of being drawn into terrorism and to challenge extremist ideas. An online general awareness training is completed by each member of staff to introduce them to the topics covered by this advice, including how to identify factors that can make people vulnerable to radicalization. The training can be found on

<https://www.elearning.prevent.homeoffice.gov.uk/edu/screen1.html>

We will also ensure that the Designated Safeguarding Officer provide advice and support to other members of staff on protecting children from the risk of radicalisation.

IT policies

We understand the need to ensure that children are safe from inappropriate sites including terrorist and extremist material when accessing the internet in our setting. We will ensure that suitable filtering is in place. We also understand our role to play in equipping families with young children children to stay safe online, both at home and outside.

Building children's resilience to radicalisation

As a nursery, we already have a strong focus on children's personal, social and emotional development. We are committed to doing this in an age-appropriate way, through ensuring children learn right from wrong, mix and share with other children and value other's views, know about similarities and differences between themselves and others, and challenge negative attitudes and stereotypes. We encourage our children to recognise and manage risk, to understand and manage difficult situations and to make safer choices through developing positive character traits such as resilience, persistence, self-esteem and confidence. The key person system ensures that every child in the nursery can build a safe trusting relationship with a significant adult.

19. Promoting British Values

As a nursery, we promote the fundamental British values of democracy, the rule of law, individual liberty and mutual respect and tolerance for those with different faiths and beliefs. We ensure we actively promote principles and values which:

- enable children to develop their self-knowledge, self-esteem and self-confidence.
- enable children to distinguish right from wrong and to follow nursery expectations which will prepare them to respect the civil and criminal law of England in the future.
- encourage children to accept responsibility for their behaviour, show initiative and understand how they can contribute positively to the lives of those living and working in the locality in which the setting is situated and to society more widely
 - enable children to acquire a broad general knowledge of and respect for public institutions and services such as fire fighters, health services, libraries, police and green spaces in the locality
 - Further tolerance and harmony between different cultural traditions by enabling children to acquire an appreciation of and respect for their own and other cultures
 - Encourage respect for other people, paying particular regard to the protected characteristics set out in the Equality Act 2010
 - Encourage making choices from an early age to support growing understanding and respect for democracy and support for participation in the democratic process,

Foundation years, has published the following good practice examples demonstrating what promoting fundamental British Values means in the early years. (<https://foundationyears.org.uk/wp-content/uploads/2017/08/Fundamental-British-Values-in-the-Early-Years-2017.pdf>)

20. Safeguarding Vulnerable Adults

We have a responsibility to prevent the abuse of adults (Safeguarding Vulnerable Groups Act 2006) and will therefore refer to the following for guidance and procedures:

- [Barnet Council Policy and Procedure on Safeguarding Vulnerable Adults](#)

21. Harmful traditional practices

Harmful traditional practices (HTP) include:

- female genital cutting/mutilation
- so called 'honour' based violence and 'honour' killings
- early, child and forced marriage
- abuse linked to a belief in spirit possession
- breast ironing also known as breast flattening

Harmful traditional practices are based on tradition, culture, custom and practice, religion and/or superstition. They have often been embedded in communities for a long time and are born out of community pressure. They are committed and actively condoned by the child's parents or significant adults within the child's/young person's community.

They include rituals, traditions or other practices that have a detrimental effect on the physical, mental and emotional health of the victim. Many of the practices involve bias against groups of children, particularly girls and children with disabilities. Many involve physical abuse and pain leading, in some cases intentionally, to death or serious injury. Others involve mental abuse. Force-feeding is also a harmful traditional practice that is based on families wanting to ensure that their child, both girls and boys, are getting enough to eat. It also has detrimental medical, physical and psychological effects on the child.

Our nursery is committed to working towards preventing and addressing harmful traditional practices in Barnet by:

- raising awareness of the dangers of the practices, and encouraging the reporting of concerns about harmful traditional practices
- promoting community participation in tackling harmful traditional practices

If you think that a child/young person is in immediate danger you must ring the police on 999.

If you think that a child/young person is at risk of HTP you must make an immediate referral to Barnet's Multi-agency Safeguarding Hub (MASH) by contacting them on 0208 359 4066, or emailing them at mash@barnet.gov.uk for information and advice concerning children/young people at risk of HTP.

Key links to support groups

- [IMECE](#)
- [IKWRO](#)
- [KMEWO](#)

- [Karma Nirvana](#)
- [Asiana](#)
- [Stop honour killings](#)
- [NHS - female genital mutilation](#)
- [NSPCC FGM helpline](#)
- [Violence against women and girls \(VAWG\)](#)

22. Domestic violence

In September 2012 the government widened the definition of domestic violence to include 16-17-year olds and to reflect coercive control. The new definition was implemented in March 2013.

Domestic violence is defined as:

'Any incident or pattern of incidents of controlling*, coercive** or threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- psychological
- physical
- sexual
- financial
- emotional

**Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.*

***Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.'*

This definition, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

The Department of Health estimates that, every year, 750,000 children experience domestic violence. It is likely that this figure is higher due to under-reporting. Seeing or overhearing violence to another person in the home has adverse effects on a child's development and welfare. In families where there is domestic violence, children are at increased risk of being physically and sexually abused. Unborn children are also at increased risk; domestic violence is a prime cause of miscarriage, still birth, premature birth, foetal psychological damage, foetal physical injury and foetal death.

Nationally, domestic violence is reported to be an issue in approximately 75% of cases where children are subject to a child protection plan. Domestic violence was a factor in three-quarters of cases where children had been killed or seriously injured. All agencies need to work together to identify and protect these children/young people.

If you are concerned about a child where there is, or you suspect, domestic violence in the home or you have concerns that a young person's intimate relationship is abusive, please contact Multi-agency Safeguarding Hub on 0208 359 4066.

The Freephone 24 Hour National Domestic Violence Helpline is a national service for women experiencing domestic violence, their family, friends, colleagues and others calling on their behalf.

24-hour Freephone: 0808 2000 247

23. Private fostering

Private fostering is an arrangement where a child or young person under the age of 16 (or under 18 if they are disabled) is living away from their parents with someone who is not an immediate blood relative for 28 days or more. When a child is living with someone from their extended family such as a cousins, great grandparents, great aunts or uncles or parents cousins. When a child is living with a family friend. There may be many reasons why children and young people are living away from home or their parents have arranged for someone else to care for them. The arrangement is made between the child's parents and the private foster carer whose responsibility is the day to day care of the child.

These include:

- Family or relationship breakdown
- They have moved in with a friend or the family of their boyfriend or girlfriend
- Parents working overseas
- Parental illness/or following the death of a parent
- Children being sent to the UK for education purposes whilst their parents remain overseas
- Foreign language students placed with host families

What the law says?

The law requires parents and carers to notify Barnet County Council of any private fostering arrangements where the child or young person is living away from their parents and home for more than 28 days. Unfortunately, many people are not aware of this and therefore do not notify the council even though the law requires them to do so.

Please contact Barnet's Private Fostering via MASH on 0208 359 4066 or email them on mash@barnet.gov.uk for advice and to [make a referral](#).

24. Sexual exploitation

Children at risk of sexual exploitation or who are being sexually exploited are a vulnerable group. All agencies need to work together to identify and protect them.

Sexual exploitation of children and young people involves situations and relationships where they, or a third person or persons, receive something which could be food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money, as a result of them performing sexual activities and/or others performing sexual activities on them. Children are often groomed for future sexual exploitation.

Children can be trafficked for sexual exploitation. Unaccompanied minors, disabled children, looked after children and those involved in gangs, or on the fringes of gangs, are at increased risk of sexual exploitation. Child sexual exploitation can occur through the use of technology without the child's immediate recognition. For example, being persuaded to post sexual images on the internet/mobile phones, without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion, and intimidation are common. Involvement in exploitative relationships are in the main characterised by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

If you think a child is at risk of sexual exploitation or is being sexually exploited you must make an immediate referral to Multi-agency Safeguarding Hub, 0208 359 4066, mash@barnet.gov.uk

25. Premises

Planning

- The layout of the rooms allows for constant supervision. No child is left alone with staff or in a one-to-one situation without being within sight and/or hearing of other staff.

CCTV

- Tiddley Tots Nursery is securely monitored by a CCTV surveillance system. The Nursery Manager and Owner are both responsible for the operation of the system for ensuring compliance with this policy.

- We recognise that the use of CCTV has become a common feature of our daily lives and while its use is generally accepted, CCTV operators have certain duties and responsibilities to those whose images are caught on camera.

- The Nursery complies with the Information Commissioners CCTV Code of Practice to ensure it is used responsibly and safeguards both trust and confidence in its continued use.

- Cameras are located at strategic points on the premises. No camera is hidden from view and all will be prevented from focusing on areas of private accommodation. The digital recorder and single effectiveness of the limited system it is not possible to guarantee that the system will detect every incident taking place on the site. The system has been installed by the nursery with the primary purpose of monitoring:

- Staff interaction with children
- Ensuring children are appropriately cared for
- Facilitate the identification of any activities/event which might warrant disciplinary proceedings being taken against staff and assist in providing evidence to the Nursery Manager
- Reducing the threat of a child being abducted
- Damaged to the building
- Theft
- Assist in the prevention and detection of crime
- Helping ensure the safety of all the users, staff, children, parents and visitors, consistent with the respect for the individual's privacy
- Deter those having criminal intent
- The system will not be used to provide images for the world-wide-web or record any sound.

26. Early Years Foundation Stage (EYFS)

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 so that they develop an understanding of why and how to keep safe.
- We create within the setting a culture of value and respect for individuals, 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.

Further guidance

- Working Together to Safeguard Children (HMG, 2018)
- 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)
- The Common Assessment Framework for Children and Young People: A Guide for Practitioners (CWDC 2010)
- Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (HMG 2008)
- Hidden Harm – Responding to the Needs of Children of Problem Drug Users (ACMD, 2003)
- Information Sharing: Advice for Practitioners providing Safeguarding Services (DfE 2018)
- Disclosure and Barring Service: www.gov.uk/disclosure-barring-service-check
- Revised Prevent Duty Guidance for England and Wales (HMG, 2019)
- Inspecting Safeguarding in Early Years, Education and Skills Settings, (Ofsted, 2019)
- Safeguarding Children (Pre-school Learning Alliance 2013)
- Safeguarding through Effective Supervision (Pre-school Learning Alliance 2013)
- The New Early Years Employee Handbook (Pre-school Learning Alliance 2016)
- People Management in the Early Years (Pre-school Learning Alliance 2016)
- Barnet MASH protocol

https://thebarnetscp.org.uk/assets/1/barnet_mash_operational_protocol_updated_october_2018.pdf

- Barnet Children and Young People's Safeguarding Handbook

https://thebarnetscp.org.uk/assets/1/barnet_mash_operational_protocol_updated_october_2018.pdf

- London Borough of Barnet Family Service Procedures Manual – Initial Contacts and Referrals

https://www.proceduresonline.com/barnet/fs/p_contacts_referral.html

- Allegations against staff within the children's workforce in Barnet

https://www.proceduresonline.com/barnet/fs/files/alleg_staff_workforce.pdf

- Allegations Against Staff and Volunteers

https://www.proceduresonline.com/barnet/rh/p_alleg_staff.html

Policy Changes Log

What was changed/added?	When
Added more contact details for MASH Barnet	08/12/2020
Moved Legislation to page 2 and added definitions of main terms used in the policy	08/12/2020
Re-worded some of the titles to make it more clear for staff to understand	08/12/2020
Highlighted some important terms in red colour	08/12/2020
Re-wrote section 5. What to do if you have a concern about a child to make it clearer to understand	08/12/2020
Added what happens after referral has been made and information about the Common Assessment Framework	08/12/2020
Amended section 8. Allegations Against Members of Staff to include explanation of the action to be taken in the event of an allegation being made against member of staff	08/12/2020
Added more information in Section 15. Bullying	08/12/2020