

**8.1 Safeguarding and Child Protection Policy**

TNB fully recognises its responsibilities for safeguarding and child protection.

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| **Policy agreed (date):** | March 2024 |
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| **Next review (date):** | March 2025 |

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| **Key Safeguarding Personnel** | | | |
| **Role** | **Name** | **Tel.** | **Email** |
| **Designated Safeguarding Lead (DSL)** | **All TNB settings have an appointed designated safeguarding lead.**  **Contact details are available from the setting.** | | |
| **Deputy DSL(s) (DDSL)** | **There are deputy designated safeguarding leads appointed in all TNB settings.**  **Contact details are available from the setting.** | | |
| **Executive Coordinator** | **Sarah Hawkins** | **01980 633962**  **07436 070904** | **ec@tnbearlyyears.org** |
| **Designated Safeguarding Trustee** | **Damion Baines** | [**safeguarding@tnbearlyears.org**](mailto:safeguarding@tnbearlyears.org) | |
| **Chair of Trustees** | **Vicki Seth** | **victoria.seth614@mod.gov.uk** | |
| **Mental Health First Aiders** | **There are trained Mental Health First Aiders in all TNB settings.**  **Contact details are available from the setting.** | | |

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| **Children’s Social Care referrals:**  Multi-Agency Safeguarding Hub (MASH):  Out of hours:  **Further contact details:**  Government helpline for extremism concerns  Child exploitation and Online protection command (CEOP) | 0300 456 0108  0300 456 0100  020 7340 7264  https://www.ceop.police.uk/safety-centre/ |

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| If you believe a child is **at immediate risk** of significant harm or injury,  you **must** call the police on 999. |

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| If you need to refer a concern regarding staff practice, please either contact the DSL within the setting, the Executive Coordinator or chair of trustees from TNB Garrison Early Years and Play charity and they will contact MASH who in turn will notify the LADO or you can contact MASH directly on 0300 456 0108 |
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| **Scope** |

Safeguarding children is defined as:

* ensuring that children grow up with the provision of safe and effective care
* acting to enable all children to have the best life chances
* preventing impairment of children's mental and physical health or development and
* protecting children from maltreatment.

The term ‘safeguarding children’ covers a range of measures including child protection procedures. It

encompasses a whole-setting preventative approach to keeping children safe.

Consequently, this policy is consistent with all other policies adopted by the trustees and should be

read alongside the following policies relevant to the safety and welfare of our children:

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| * IT policy * Health and safety policy | * Whistleblowing policy |  |

**This policy applies to all staff in our settings.** For the purposes of this policy:

* **Staff** refers to all those working for or on behalf of the charity, full-time or part-time, in a paid or regular voluntary capacity.
* **A volunteer** is a person who performs an activity that involves spending time unpaid in the settings, (except for approved expenses).
* **Parent** refers to birth parents and other adults who are in a parenting role, for example stepparents, foster carers and adoptive parents.
* **Child** refers to all children on roll and any child under the age of 18 who comes into contact with our settings, this includes unborn babies.

**Any safeguarding concerns or disclosures of abuse relating to a child whether in the setting or outside of the setting and online are within the scope of this policy.**

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| **Expectations** |

* All staff, students, bank staff and volunteers are made aware of and adhere to the policy.
* All staff, students, bank staff and volunteers understand their duty to ensure safeguarding and child protection concerns are reported to the Designated Safeguarding Lead (DSL) and Children’s Services (via the Multi Agency Safeguarding Hub – MASH).
* All staff understand thresholds of significant harm (please see appendix for details) and understand how to access services for families.
* All staff understand expectations of required behaviour and conduct, and follow our policies and procedures on positive behaviour, online safety, whistleblowing and dignity at work.
* All staff will inform a DSL at the first opportunity of every significant safeguarding concern; however, this will not delay any referrals being made to Children’s Services, the LADO, Ofsted or Riddor.
* Parents are made fully aware of child protection policies and procedures when they register with the setting and are kept informed of all updates when they occur.
* The setting will be kept safe online using appropriate filters, checks and safeguards, monitoring access at all times and maintaining safeguards around the use of technology by staff, parents and visitors to the setting.

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| **Staffing and volunteers** |

* We follow safer recruitment practices including informing applicants for posts that the positions are exempt from the Rehabilitation of Offenders Act (1974), obtaining references and enhanced criminal record checks with the Disclosure and Barring Service (DBS) before working unsupervised with children.
* Enhanced DBS checks are obtained for volunteers in the setting. Volunteers and visitors never have unsupervised access to children.
* Members of the board of Trustees are DBS checked and vetted by OFSTED by way of the EY2 documentation.
* Information is recorded about staff qualifications; the vetting processes and the dates DBS checks were made. Staff that are EU Nationals are checked for their suitability to work and this is documented.
* All staff, students, bank staff and volunteers 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).
* 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 child protection concern.
* Staff from other settings or agencies who are regular visitors with unsupervised responsibility for children (Regulated Activity) are included on the Single Central Record (SCR).
* Ongoing suitability of staff is monitored through regular supervisions, peer observations, annual declaration of staff suitability, safeguarding competencies and regular review of DBS including an annual check on the update service.
* The setting will provide adequate and appropriate staffing resources to meet the needs of all children.
* Staff members, volunteers and students will receive regular opportunities during supervision and by having an open-door policy to declare changes that may affect their suitability to care for the children. This includes information about their health, medication or about changes to their home life such as child protection plans for their own children.
* Staff are aware not to contact parents/carers and children through social media on their own personal social media accounts and they will report such incidents to the management team to deal with.
* Staff are aware that if wearing a smart watch, they must put it in flight mode whilst at work. This is to ensure safeguarding practices are adhered to and the member of staff is focused on the children and their role. If a member of staff is found, during a spot check or otherwise, to not have their watch in flight mode or to be showing it to the children, this will be classed as gross misconduct where employment could be terminated.
* All staff have access to, and comply with, the Whistleblowing policy which provides information on how they can share any concerns about colleagues in an appropriate manner. We encourage a culture of openness and transparency and all concerns are taken seriously.
* We ensure all staff are aware of the signs to look for regarding inappropriate behaviour from colleagues, parents and visitors to the setting. This may include inappropriate sexual comments; excessive one-to-one attention, unwanted physical attention beyond the requirements of their usual roles and responsibilities; or inappropriate sharing of images. This is not an exhaustive list, any changes in behaviour and inappropriate behaviour must be reported and acted upon immediately.
* The employee handbook and code of conduct policy sets out staff behaviours that should be avoided as well as those that constitute safe practice and supports our commitment to safeguarding children.

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| **Staff training** |

* Staff are trained from induction to understand the Safeguarding and Child Protection Policy and procedures, are alert to identify possible signs of abuse and are aware of the different ways in which children can be harmed, including by other children.
* Training is sought for trustees and 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, child sexual exploitation and neglect and are aware of the procedures for reporting and recording.
* Designated Safeguarding Leads (DSL) will receive appropriate training every two years.
* We ensure that all staff receive updates on safeguarding via newsletters, online training and discussion at staff meetings.

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| **Designated Safeguarding Lead (DSL)** |

* We have named persons within the setting who take lead responsibility for safeguarding and coordinating child protection and welfare issues, known as the Designated Safeguarding Lead (DSL).
* There will always be at least one DSL on duty or contactable during opening hours.
* The DSL will ensure the setting’s safeguarding policy and procedures meet the EYFS Safeguarding requirements and local safeguarding procedures and are reviewed in line with current guidance.
* The DSL will take the lead on responding to staff information relating to child protection concerns.
* The DSL will provide advice, support and guidance on an ongoing basis to staff, students and volunteers.
* The DSL will help staff identify children who may need early help or who are at risk of abuse.
* The DSL will help staff to ensure the right support is provided to families.
* The DSL will liaise with the local authority and other agencies with regard to child protection concerns.
* The DSL will manage and monitor accidents, incidents and existing injuries; ensuring accurate and appropriate records are kept.
* The DSL will attend case conferences and external safeguarding meetings, as required, by external agencies.

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| **Organisation** |

* The management team will ensure adequate staff resources are provided to meet the needs of the children and will ensure the deployment of staff within the setting allows for constant supervision and support.
* Where children need to spend time away from the rest of the group, the door will be left ajar or other safeguards will be put into action to ensure the safety of the child and the adult.
* The layout of the playrooms allows for constant supervision. Children are not left alone with staff, volunteers or other children in a one-to-one situation without being visible or in earshot of others.
* Careful consideration is given to the positioning of changing tables and changing facilities to provide privacy for the children whilst also being mindful of keeping children safe.
* Staff will stay vigilant to safeguard the whole setting environment and be aware of potential dangers on the setting boundaries such as drones or strangers lingering.
* Steps are taken to ensure children are not photographed or filmed for any other purpose than to record their development or their participation in events organised by the setting. Parents sign a consent form and have access to records regarding holding visual images of children.
* We also have a Phone and Other Electronic Devices and Social Media policy which states how we keep children safe from these devices whilst at the setting. This also links to our Online Safety policy.
* A Special Educational Needs and Disability (SEND) policy is in place and outlines the identification, assessment and provision to aid a child with SEND and the role of the SENCO. Information is shared appropriately with other staff regarding a child’s Education Health Care Plan (EHCP) and continual sharing takes place as the child moves to another setting. There is a strong communication with parents throughout. Measures are put in place to support the individual needs of a child and staff are fully aware of the appropriate care actions.
* We advise against staff transporting children to and from the setting but acknowledge there may be occasions when this may happen. In such instances, the DSL is informed and responds accordingly.
* We ensure that robust risk assessments are completed and that they are regularly reviewed and updated, in line with our Health and Safety policy.

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| **Curriculum** |

* Children are taught about keeping safe to promote their personal, social and emotional development. This enables them to develop a positive self-image, to become strong, resilient and develop an understanding of why and how to keep safe. This includes how to stay safe when using the internet, (e-safety).
* We promote tolerance and acceptance of different beliefs, cultures and communities.
* We allow and encourage children within the setting to set themselves challenges and take risks to support their development and encourage independence.

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| **Visitors** |

* Details of visitors to the setting are recorded. The setting ensures that no unauthorised person has unsupervised access to the children.
* Visitors and contractors are supervised whilst on the premises, especially when in areas the children use.

**Site safety**

* Risk assessments are undertaken and maintained in accordance with the setting’s Health and Safety policy.

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| **Responding to suspicions of abuse** |

* Flowcharts provided by Wiltshire Council Safeguarding Team and SVPP that set out the required procedure for staff to follow when they have a safeguarding concern about a child are displayed in the staffroom and adult cloakrooms for easy reference.
* We acknowledge that abuse of children can take different forms; physical, emotional and sexual, as well as neglect. (Please see appendix for further details.)
* Staff are aware of the increased vulnerability of children with Special Educational Needs and Disability (SEND), isolated families and vulnerabilities in families including the impact of the toxic trio on children and Adverse Childhood Experiences (ACE’s).
* Staff understand the inequalities of race, gender, language, religion, sexual orientation or culture and the impact of other factors, such as fabricated or induced illness; child abuse linked to beliefs in spirit possession; sexual exploitation of children, including through internet abuse; Female Genital Mutilation and radicalisation or extremism.
* Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by afflicting harm, or by failing to act to prevent harm. Children may be abused within a family, institution or community setting by those known to them or rarely a stranger. This could be an adult, adults, another child or children.
* We are aware that children and young adults may need protecting from bullying including online bullying, racism, gender-based violence, child on child abuse and the impact of “sexting”, “upskirting” or viewing of inappropriate/indecent material.
* When children are suffering from physical, sexual or emotional abuse, or experiencing neglect, this may be demonstrated through a range of behaviours. (Please see appendix, page 14.)
* Drugs and alcohol: We are aware of the ‘hidden harm’ concerning parents with drug and alcohol problems. Should any person arrive at the setting to collect a child, showing signs of being under the influence of alcohol or other substances, we are duty bound to inform the relevant authorities. This can be the police, the Multi Agency Safeguarding Hub (MASH) or Army Welfare Services (AWS) Safeguarding team.
* We also consider other factors affecting parental capacity and risk, such as social exclusion, domestic violence, radicalisation, mental or physical illness or parent’s learning disability.
* Private Fostering: We are aware that children’s vulnerability is potentially increased when they are privately fostered and when we know that a child is being cared for under a private fostering arrangement, we inform Children’s Services.
* The D/DSL consistently monitors all children with concerns, whether a referral to MASH/IFD (Integrated front door) has been made or not and provides feedback where appropriate to any staff who share concern.

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| **Monitoring children’s attendance** |

* As part of our requirements, under the statutory framework and guidance documents, we are required to monitor children’s attendance patterns to ensure they are consistent and no cause for concern.
* Parents should inform the setting prior to the children taking holidays or days off and all incidents of sickness absence should be reported to the setting the same day, so the management team are able to account for a child’s absence.
* If a child does not arrive at a session when expected and there are concerns about the child’s welfare, the DSL will contact the child’s parent. If the DSL is unable to contact them then the emergency contact numbers listed may be used to ensure all parties are safe. It is a parent’s responsibility to keep their emergency contact details updated.
* Where a child is part of a child protection plan, or during a referral process, any absences will immediately be reported to Children’s Services to ensure the child remains safe and well.

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| **Looked after children** |

* We will ensure our staff are aware of how to keep looked after children safe. To do this, we ask that we are informed of:
  + The legal status of the child, (e.g. whether the child is being looked after under voluntary arrangements with consent of parents or on an interim or full care order).
  + Contact arrangements for the biological parents (or those with parental authority).
  + The child’s care arrangements and the levels of authority delegated to the carer by the authority looking after him/her.
  + The details of the child’s social worker and any other support agencies involved.
  + Any child protection plan or care plan in place for the child.
* Please refer to the Looked After Children policy for further details.

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| **Reporting** |

* Where a child makes comments to a member of staff that gives cause for concern (disclosure), or a member of staff observes signs or signals that gives cause for concern, that member of staff:
  + Listens to the child, offers reassurance and gives assurance that she or he will take action.
  + Does not question the child, although it is ok to ask questions to clarify.
  + Makes a written record that forms an objective record of the observation or disclosure that includes: the date and time of the observation or disclosure; the exact words spoken by the child as far as possible; the name of the person to whom the concern was reported, with the date and time; and the names of any other person present at the time.
  + These records are signed and dated and kept within a separate, confidential file for the child which is held in a secure location within the manager’s office.
* The DSL is informed of the issue at the earliest opportunity, and within one working day.
* For children who arrive at the setting with an existing injury, a form will be completed along with the parent/carer’s explanation as to how the injury happened. Staff will have professional curiosity around any explanations given. Any concerns around existing injuries will be reported.
* We take account of the need to protect young people aged 16-19 years which may include students on work placement, young employees or young parents. Where abuse is suspected, we follow the procedure for reporting any other child protection concerns. The views of the young person will always be taken into account but the setting may override their refusal to consent to share information if it feels it is necessary to prevent harm to a child or adult.
* We work with Operation Encompass, a partnership between Wiltshire police and educational settings. The setting will be notified if there has been a domestic abuse incident which the child may have witnessed. The DSL and the child’s key person will monitor and support the child’s emotional needs. We are aware not to do anything that will put the child/ren or the non-abusing adult at risk.

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| **Making a referral** |

* The setting makes a telephone call referral to the MASH team. Within 24 hours of the initial telephone referral, the setting will then complete the Inter Agency Referral Form (IARF) online. This is emailed directly to the MASH team.
* A copy of ‘What to do if you’re worried a child is being abused or neglected’ (2020) is available online and is used for guidance alongside Wiltshire Safeguarding Vulnerable People Partnership.
* Having referred concerns to the local authority children’s social care team, we co-operate fully in any subsequent investigation. This may mean the Police, Army Welfare Service (AWS) safeguarding team, if the child is from a military family, or another agency identified by Children’s Services.

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| **Informing parents** |

* We believe in building trusting and supportive relationships with families, staff and volunteers.
* We make clear to parents our roles and responsibilities in relation to child protection.
* Parents are normally the first point of contact. Concerns are discussed with parents to gain their views of events, unless it is felt that this may put the child at risk or interfere with the course of a police investigation. Advice will be sought from Children’s Services if necessary.
* Parents are informed when we make a record of concerns and we also make a note of any discussion we have with them regarding a concern.
* If a suspicion of abuse warrants referral to Children’s Services, parents are informed at the same time that the referral is made, except 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. The DSL will therefore contact Children’s Services (via the MASH), record and follow the advice given.
* We offer guidance in Child Protection Plans and Children in Need Plans and work with the child’s social care worker in supporting the child and their family, subsequent to any investigation.
* We will continue to welcome the child and the family whilst investigations are being made in relation to any alleged abuse. Parents and families will be treated with respect in a non-judgemental manner whilst any external investigations are carried out in the best interest of the child.

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| **Liaison with other agencies** |

* We ensure that information is only shared with those people who need to know in order to protect the child and act in their best interest.
* We share information with other agencies as appropriate.
* We notify the registration authority (Ofsted or MASH) of any incident or accident and any changes in our arrangements which may affect the wellbeing of children or where an allegation of abuse is made against a member of staff (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 allegation being made.

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| **Early help services** |

* When a child/and or family would benefit from support but do not meet the threshold for Local Authority Social Care Team, a discussion will take place with the family around Early Help services.
* Early help provides support as soon as a concern or area of need emerges, helping to improve outcomes and prevent escalation onto local authority services.
* The setting will work in partnership with parents/carers to identify any early help services that could benefit the child or the family’s circumstances such as family support, foodbank support, counselling or parenting services.

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| **Allegations against staff, volunteers or bank staff** |

* We ensure that all parents, staff and volunteers know how to complain about the behaviour or actions of staff, students or volunteers which may include an allegation of abuse. We provide information on how to escalate concerns if they are not satisfied. Concerns may come from a parent, child, colleague or a member of the public.
* We respond to any inappropriate behaviour by members of staff, students or volunteers or any other person who works on the setting premises regardless of whether the allegation relates to the setting’s premises or elsewhere.
* An allegation may relate to behaving in a way that has harmed a child or may have harmed a child; possibly committing a criminal offence against or related to a child; behaviour towards a child or children in a way that indicates he or she may pose a risk of harm to children or behaviour that indicates they may not be suitable to work with children.
* We respond to any disclosure by children or staff that abuse by a member of staff or volunteer may have taken, or is taking place, by first recording the details of any such alleged incident.
* The allegation should be reported to the DSL at the setting immediately. If this person is the subject of the allegation, then this should be reported to another DSL, the manager, the deputy, executive coordinator, manager at another setting or to MASH.
* We offer any such complaint immediately to MASH to investigate and/or offer advice who in turn may refer to the Local Authority Designated Officer (LADO). No internal investigation will occur until and unless the LADO has expressly given consent for this to occur.
* We also report any such alleged incident and the measures we have taken to Ofsted (unless MASH or the LADO advise that the incident does not meet the threshold and is therefore unnecessary).
* The setting will follow all instructions from the Children’s Services and Ofsted and ask all staff members to do the same and cooperate where required.
* The designated person will take steps to ensure the immediate safety of children, parents, and staff on that day within the setting.
* TNB Garrison Early Years and Play reserves the right to suspend any member of staff during an investigation. Legal advice may be sought to ensure compliance with the law.
* All enquiries, external investigations and interviews will be documented and kept in a locked file for access by the relevant authorities.
* Founded allegations will be passed to the relevant organisations including the local authority, Wiltshire Safeguarding Vulnerable People Partnership and where an offence is believed to have been committed, the police will also be informed.
* Founded allegations will be dealt with as gross misconduct in accordance with our disciplinary procedures and may result in the termination of employment. If a member of staff is dismissed because of a proven or strong likelihood of child abuse, inappropriate behaviour towards a child**,** or other behaviour that may indicate they are unsuitable to work with children such as drug or alcohol abuse, or other concerns raised, a referral to the Disclosure and Barring Service will be made. Ofsted will also be notified immediately of this decision
* All safeguarding records will be kept until the person reaches normal retirement ages or for 21 years and 3 months if that is longer. This will ensure accurate information is available for references and future DBS checks.
* Unfounded allegations will result in all rights being reinstated.
* A return to work plan will be put in place for any member of staff returning to work after an allegation has been deemed unfounded. Individual support will be offered to meet the needs of the individual staff member and the nature of the incident; this may include more frequent supervisions, coaching and mentoring and external support.

**Low level concerns**

TNB operates a ‘low-level’ concerns procedure. ‘Low-level’ refers to behaviour that is: inconsistent with expectations set out in the employee handbook, including inappropriate conduct outside of work, and/or does not meet the allegations threshold, or is otherwise not considered serious enough to consider a referral to the LADO.

* All low-level concerns will be reported to the manager, if the concern is about the manager, then report to the executive coordinator; low-level concerns about the executive coordinator will be reported to the chair of trustees. Ensure executive coordinator is made aware of low level concerns.
* TNB will:
* Ensure all staff are clear about what appropriate behaviour is (as set out in the employee handbook) and are confident in distinguishing expected and appropriate behaviour from concerning, problematic or inappropriate behaviour, in themselves and others.
* Empower staff to share any low-level safeguarding concerns.
* Provide a responsive, sensitive and proportionate handling of such concerns when they are raised, for both the child/ren and the adult; and,
* Respond to reports of low-level concerns in accordance with our HR conduct procedures by addressing unprofessional behaviour and support the individual to correct it at an early stage. If the concern has been raised via a third party, the executive coordinator will collect as much evidence as possible by speaking:
  + - * directly to the person who raised the concern, unless it has been raised anonymously.
      * to the individual involved and any witnesses.
* Reporting low-level concerns helps to create and embed a culture of openness, trust and transparency in which TNB’s values and expected behaviour are constantly lived, monitored and reinforced by all staff.
* Staff are encouraged to self-refer where they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards.
* All low-level concerns will be recorded in writing, (ideally using a low level concern form which can be found in each setting), retained and reviewed to help recognise any weakness in TNB’s safeguarding system so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.
* Please refer to *Allegations and concerns against adults in education settings flowchart low level concerns* as shown in each setting.

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| **Escalation process** |

* If we feel that a referral made has not been dealt with properly either by the local authority or by the setting or that concerns are not being addressed, we will follow the Case Resolution Protocol.
* We ensure that staff are aware of how to escalate concerns and are aware of the Whistleblowing policy (8.2, TNB Policy Handbook) if their concerns are not being addressed.
* Ultimately, if an issue cannot be resolved and the member of staff believes a child remains at risk because the setting or the local authority has not responded appropriately, the NSPCC have introduced a whistle-blowing helpline 0800 028 0285 for professionals who believe that:
  + Their own or another employer will cover up the concern.
  + They will be treated unfairly by their own employer for complaining.
  + If they have already told their own employer and they have not responded.

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| **Confidentiality** |

* All suspicions, enquiries and investigations are kept confidential, shared only with those who need to know and in line with guidance from the local authority.
* We will keep appropriate records to support the early identification of children and families that would benefit from support.
* Factual records and parental discussions are maintained in a chronological order. Records are reviewed regularly by the DSL to look holistically at identifying children’s needs.
* All staff, students and volunteers are bound by confidentiality and any information will not be discussed out of work, or this may become a disciplinary matter.
* We have due regard to the Data Protection Act (2018), General Data Protection Regulations (GDPR) and Information Commissioner’s Office (ICO) and any personal information is held securely and in line with these guidelines. These do not prohibit the collection and sharing of personal information, even without consent if this would put the child at further risk. We will ensure any information is recorded and shared in an appropriate way.
* We keep a written record of all complaints and concerns including how they were dealt with.
* Our setting has a clear commitment to protecting children and promoting welfare. Should anyone believe that this policy is not being upheld, then the Whistleblowing Policy must be followed and the matter must be reported to the attention of the setting manager, DSL or executive coordinator at the earliest opportunity. (Contact details are listed in Key Safeguarding Personnel, page 1.)

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| **Appendix** |

**Indicators of child abuse**

* Failure to thrive and meet developmental milestones.
* Fearful or withdrawn tendencies.
* Unexplained injuries to a child or conflicting reports from parents, carers or staff.
* Repeated injuries.
* Unaddressed illnesses or injuries.
* Significant changes to behaviour patterns.

**Peer-on-peer abuse**

* This may take the form of bullying, physically hurting another child, emotional or sexual abuse.
* We will report this in the same way we do for adults abusing children and will take advice from the appropriate bodies on this area; to provide support for both the victim and the perpetrator, as they could also be a victim of abuse. We know that children who develop harmful sexual behaviour have often experienced abuse and neglect themselves.

**Physical abuse**

* A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or care fabricates the symptoms of, or deliberately induces, illness on a child.
* All children can suffer injuries during their early years as they explore and develop. If an explanation of how a child received their injury doesn’t match the injury itself or if a child’s injuries are a regular occurrence or there is a pattern to their injuries, then these concerns will be reported.

**Fabricated illness**

* Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. The parent or carer may seek out unnecessary medical treatment or investigation; they may exaggerate a real illness and symptoms or deliberately induce an illness through poisoning with medication or other substances or they may interfere with medical treatments.
* Fabricated illness is a form of physical abuse and any concerns will be reported, in line with our safeguarding procedures.

**Female genital mutilation (FGM)**

* FGM can also be known as Female Genital Cutting. It is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim. The practice causes severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death (definition taken from the Multi-agency Statutory Guidance on Female Genital Mutilation).
* The procedure may be carried out shortly after birth and during childhood as well as adolescence, just before marriage or during a woman’s first pregnancy and varies widely according to the community.
* FGM is child abuse and is illegal in the UK. It can be extremely dangerous and can cause:
  + Severe pain
  + Shock
  + Bleeding
  + Infection such as tetanus, HIV and hepatitis B and C
  + Organ damage
  + Blood loss and infections
  + Death in some cases
* If you have concerns about a child or family, you should contact Wiltshire Safeguarding Vulnerable People Partnership in the same way as other types of physical abuse. We have a mandatory duty to report to police any case where an act of FGM appears to have been carried out on a girl under the age of 18.

**Breast ironing/flattening**

* Breast ironing also known as ‘Breast Flattening’ is the process where young girls’ breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear, or delay the development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage.
* Breast ironing is a form of physical abuse and can cause serious health issues such as:
  + Abscesses
  + Cysts
  + Itching
  + Tissue damage
  + Infection
  + Discharge of milk
  + Dissymmetry of the breasts
  + Severe fever

**Sexual abuse**

* Sexual abuse involves forcing, or enticing, a child or a young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.
* The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.
* They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse.
* Sexual abuse can take place online and technology can be used to facilitate online abuse.
* Adult males do not solely perpetrate sexual abuse; women can also commit acts of sexual abuse, as can other children.
* Action must be taken if a staff member witnesses an occasion(s) where a child indicates sexual activity through words, play, drawing, has an excessive preoccupation with sexual matters; or has an inappropriate knowledge of adult sexual behaviour, or language, for their developmental age. This may include acting out sexual activity on toys or in the role-play area with their peers; drawing pictures that are inappropriate for a child, talking about sexual activities or using sexual language or words.
* If a child is being sexually abused, you may see both emotional and physical symptoms.
* Emotional signs:
  + Being overly affectionate or knowledgeable in a sexual way inappropriate to the child’s age
  + Personality changes such as becoming insecure or clingy
  + Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
  + Sudden loss of appetite or compulsive eating
  + Being isolated or withdrawn
  + Inability to concentrate
  + Lack of trust or fear of someone they know well, such as not wanting to be alone with a carer
  + Becoming worried about clothing being removed
  + Suddenly drawing sexually explicit pictures or acting out actions inappropriate for their age
* Physical signs:
  + Bruises
  + Bleeding, discharge, pain or soreness in the genital or anal area
  + Sexually transmitted infections
  + Pregnancy

**Child Criminal Exploitation (CCE)**

* CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence.
* The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.
* CCE can include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country, forced to shoplift or pickpocket, or to threaten other young people.
* Some of the following can be indictors of CCE:
  + Children who appear with unexplained gifts or new possessions.
  + Children who associate with other young people involved in exploitation.
  + Children who suffer from changes in emotional well-being.
  + Children who misuse drugs and alcohol.
  + Children who go missing for periods of time or regularly come home late.
  + Children who regularly miss school or education or do not take part in education.

**Emotional abuse**

* Working Together to Safeguard Children defines emotional abuse as the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development.
* It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate.
* It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
* It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation of corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
* Signs and indicators may include:
  + Physical, mental and emotional development lags
  + Sudden speech disorders
  + Overreaction to mistakes
  + Extreme fear of any new situation
  + Neurotic behaviour (rocking, hair twisting, self-mutilation)
  + Extremes of passivity and aggression
  + Appear unconfident or lack self-assurance
* Action should be taken if the staff member has reason to believe that there is a severe, adverse effect on the behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection. Children may also experience emotional abuse through witnessing domestic abuse and alcohol and drug misuse by adults caring for them.

**Neglect**

* Working Together to Safeguard Children defines Neglect as the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development.
* Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:
  + Provide adequate food, clothing and shelter (including exclusion from home or abandonment).
  + Protect a child from physical and emotional harm or danger.
  + Ensure adequate supervision (including the use of inadequate caregivers).
  + Ensure access to appropriate medical care or treatment.
  + It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.
* Signs may include a child persistently arriving at nursery unwashed or unkempt, wearing clothes that are too small (especially shoes that may restrict the child’s growth or hurt them), arriving at nursery in the same nappy they went home in or a child having an illness or identified special educational need or disability that is not being addressed by the parent.
* A child may also be persistently hungry if a parent is withholding food or not providing enough for a child’s needs.
* Neglect may also be shown through emotional signs, e.g. a child may not be receiving the attention they need at home and may crave love and support at nursery.
* Neglect may occur through pregnancy as a result of maternal substance abuse.
* Action should be taken if the staff member has reason to believe that there has been any type of neglect of a child.

**County Lines**

* The National Crime Agency (NCA) describe county lines as a term used to describe gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of ‘deal line.’
* Customers will live in a different area to where the dealers and networks are based, so drug runners are needed to transport the drugs and collect payment.
* Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims.
* Children can be targeted and recruited into county lines in a number of locations including schools, further and higher educational institutions, pupil referral units, special educational needs schools, children’s homes and care homes.
* Signs and indicators to be aware of include:
  + Changes in the way young people you might know dress.
  + Unexplained, sometimes unaffordable new things (e.g. clothes, jewellery, cars etc.).
  + Missing from home or schools and/or significant decline in performance.
  + New friends or relationships with those who don't share any mutual friendships with the victim or anyone else.
  + May be carrying a weapon.
  + Receiving more texts or calls than usual.
  + Sudden influx of cash, clothes or mobile phones.
  + Unexplained injuries.
  + Significant changes in emotional well-being.
  + Young people seen in different cars/taxis driven by unknown adults.
  + Young people seeming unfamiliar with your community or where they are.
  + Truancy, exclusion, disengagement from school.
  + An increase in anti-social behaviour in the community.
  + Unexplained injuries.
  + Gang association or isolation from peers or social networks.

**Cuckooing**

* Cuckooing is a form of county lines crime in which drug dealers take over the home of a vulnerable person in order to criminally exploit them as a base for drug dealing, often in multi-occupancy or social housing properties.
* Signs that this is happening in a family property may be:
  + An increase in people entering or leaving the property.
  + An increase in cars or bikes outside the home.
  + Windows covered or curtains closed for long periods.
  + Family not being seen for extended periods.
  + Signs of drug use or an increase in anti-social behaviour at the home.
* If we recognise any of these signs, we will report our concerns as per our reporting process.

**Contextual safeguarding**

* As young people grow and develop, they may be vulnerable to abuse or exploitation from outside their family. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online.
* As part of our safeguarding procedures, we will work in partnership with parents/carers and other agencies to work together to safeguard children and provide the support around contextual safeguarding concerns.

**Domestic Abuse / Honour Based Abuse / Forced Marriages**

* Honour based abuse and forced marriage is where one or both people are pressured into a marriage against their wish and duress is used to enforce the marriage. Forced marriage is classed as domestic violence. Duress includes psychological, sexual, financial or emotional pressure and physical violence. We look at these areas as a child protection concern.

**Extremism – the Prevent Duty**

* Under the Counter-Terrorism and Security Act 2015, we have a duty to safeguard at risk or vulnerable children and to have “due regard to the need to prevent people from being drawn into terrorism and refer any concerns of extremism to the police”. (In Prevent priority areas the local authority will have a Prevent Lead who can also provide support).
* Children can be exposed to different views and receive information from various sources. Some of these views may be considered radical or extreme. Radicalisation is the way a person comes to support or be involved in extremism and terrorism. It is a gradual process so young people who are affected may not realise what is happening.
* Radicalisation is a form of harm. The process may involve:
  + Being groomed online or in person.
  + Exploitation, including sexual exploitation.
  + Psychological manipulation.
  + Exposure to violent material and other inappropriate information.
  + The risk of physical harm or death through extremist acts.
* We have a Prevent Duty and Radicalisation policy in place.. Please refer to this for specific details.
* We help tackle radicalisation through the use of:

<https://www.wiltshire.gov.uk/article/1038/PREVENT-Safeguarding>.

<https://actearly.uk/>

**Up skirting**

* Up skirting involves taking a picture of someone’s genitals or buttocks under their clothing without them knowing, either for sexual gratification or in order to humiliate, or distress, the individual.
* This is a criminal offence and any such action would be reported following our reporting procedures.

**Child abuse linked to faith or belief (CALFB)**

* Child abuse linked to faith or belief (CALFB) can happen in families when there is a concept of belief in:
* Witchcraft and spirit possession, demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs).
* The evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context).
* Ritual or multi murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies.
* Use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation.
* This is not an exhaustive list and there will be other examples where children have been harmed when adults think that their actions have brought bad fortune.

**Legal framework and definition of safeguarding**

* Children Act (1989, 2004)
* Childcare Act (2018)
* Safeguarding Vulnerable Groups Act (2006)
* Children and Social Work Act (2017)
* The Statutory Framework for the Early Years Foundation Stage (EYFS) (2023)
* Working Together to Safeguard Children (2018)
* Keeping Children Safe in Education (2023)
* Data Protection Act (2018)
* GDPR (2018)
* Counterterrorism and Security Act (2015)
* Inspecting Safeguarding in Early years, Education and Skills settings (2019)
* Prevent Duty (2015) updated 2023

**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: Guidance for Practitioners providing Safeguarding Services (DfE 2015)
* Disclosure and Barring Service: [www.gov.uk/disclosure-barring-service-check](http://www.gov.uk/disclosure-barring-service-check)
* Revised Prevent Duty Guidance for England and Wales (HMG, 2023)
* Bruising and injuries to babies and non-mobile children (WSCB 2019)
* This policy works alongside other specific policies to cover all aspects of child protection.

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| --- | --- | --- |
| This policy was adopted by: | NAME OF SETTING |  |
| On: | March 2024 |  |
| Date to be reviewed: | March 2025 |  |
| Signed on behalf of: | TNB Garrison Early Years and Play | |
| Name of signatory: | NAME | |
| Role of signatory: | Manager | |

\*A ‘young person’ is defined as 16 to 19 years old – in our setting they may be a student, worker, volunteer, or parent.