

Safeguarding & Child Protection Policy for Nursery/ Pre-school/ Out of School Club

(Throughout this policy any references to parents may also apply to an adult who has parental responsibility or local authority responsibility for a child)

Please see Annex for definitions of abuse

The setting is committed to ensuring all children are safeguarded, and take all complaints, allegations or suspicions seriously, including allegations made against staff members. All procedures are in line with Children's Multi-Agency and Resilience Safeguarding Board (MARS) guidelines.

All staff, students and volunteers are provided with a copy of the Safeguarding Policy and Procedures during their induction, and their supervisor will ensure they understand the procedures to be followed by discussing these with them and asking them to sign and date to say they have read and understand them.

Safeguarding Coordinator (DSL)

All concerns must be raised with the Designated Safeguarding Lead **Leahna Carmichael** who will follow the procedures set out by the Children's MARS board. In the absence of the first DSL the deputy safeguarding officer is **Melissa Simpson**. The DSL or deputy will be available for staff to discuss safeguarding concerns.

Training

The DSL and deputy will undertake safeguarding training every two years and knowledge and skills will be refreshed at regular intervals, but at least annually. The training will include effective safeguarding procedures regarding internet and online safety.

Additionally, all staff, committee, students, volunteers will be given appropriate training on safeguarding at induction, and this will be updated on a regular basis and at least annually for example via in-house training, emails, e-bulletins. online training and newsletters. Safeguarding knowledge and competencies will be continually monitored through supervision, staff meetings and ongoing discussions.

Students and long-term volunteers (aged 17 or over) and apprentices (aged 16 or over) may only be counted in ratios at the level below their level of study if they are



suitable, competent and responsible, and they hold a valid and current paediatric first aid qualification.

Recruitment Recruitment of staff is in line with the Children's MARS Standards for Safer Recruitment policy and procedures. The Children's MARS Board adheres to safe recruitment procedures, therefore ensuring that applicants are suitable to work with children. References will be sought for all staff who work directly with children or who are likely to have unsupervised access to children. Where possible 2 references will be sought, one from the previous employer. Where possible references will be followed up with a phone call. All staff will be required to have a Disclosure and Barring Service check before starting work in the setting.

The setting must keep records to demonstrate to Ofsted that the checks have been done, including the DBS reference number, date of issue and details of who carried out the check.

All staff are provided with a copy of the Safeguarding Policy and Procedures during their induction, and the Supervisor will ensure they understand the procedures to be followed. In addition, all staff receive ongoing training on safeguarding issues. All staff will have access to Working Together to Safeguard Children and be required to read '*What to do if you're worried a child is being abused – Summary*' (Department for Education).

Use of mobile phones and cameras and other electronic devices with imaging and sharing capabilities used in the setting.

Use of mobile phones and cameras and other electronic devices with imaging and sharing capabilities are used to take photographs/videos of the children during their time in the provision. These photographs/videos are used to update children's progress and are shared with the child's parents. Relevant permissions are obtained from parents that specify what the images can be used for.

Photographs/videos taken on digital devices are used for specific purposes and then deleted. Photographs/videos on any assessment app are used in accordance with the apps security measures, my privacy policy and shared with the child's parents only.

In line with the GDPR and Data Protection Act (2018) images will only be used for agreed purposes and no images will be stored for any longer than necessary. Cameras will be stored securely on the premises. All other electronic devices used to take images or store photos (e.g. tablet or computer) will be password protected.



Teddy Bears Childcare



No images are taken on a mobile phone or any staff member's personal device under any circumstances. No images will be transferred to any staff member's personal electronic device or computer.

No personal mobile phones are used on the premises at any time only on lunch breaks away from the children either by staff, parents or visitors. All personal mobile phones must be stored in the office / locker / staffroom.

Disciplinary procedures will be taken against any member of staff who fails to comply with the above.

Visitors to the provision are not permitted to take photographs of the children in our care, unless previously agreed with the parents.

The provision is registered with the Information Commissioner's Office (ICO). Please see <http://www.ico.org.uk> for further information.

Online Safety

As the registered childminder I will ensure that appropriate filters and monitoring systems in place on all digital appliances to protect learners from harmful online material.

Online safety information and resources will be shared with staff and parents and updated regularly to ensure that information is current and relevant to emerging themes.

Safe Eating

Whilst children are eating there will always be a member of staff sat next to the children in the room with a valid paediatric first aid certificate. Children will always be within sight and hearing of a responsible adult when eating.

Toileting

In addition to the registered childminder, assistants and students must have received a letter of suitability alongside their DBS to support intimate care routines. Intimate care and toileting will be supported by the childminder or assistant in a manner that protects their dignity at all times.



Teddy Bears Childcare



Attendance

Attendance of children will be closely monitored, and any absences will be followed up in a timely manner in line with our attendance policy. This will include identifying any patterns or trends and consideration will be given to a child's/parent's and/or carer's vulnerability and their home life. Any concerns raised will be followed up with SPOC or Children's family services.

Where possible 3 emergency contact details will be kept in the setting.

Lockdown

The provider is vigilant to the risk of unexpected and unwanted persons within the setting and has a lockdown procedure to keep children safe.

Early Help and supporting families

The provider recognises the importance of building positive, trusting, and co-operative relationships with families. Providing support and help early is key to protecting and improving outcomes for children. The provider is aware of the North Lincolnshire Council One Family Approach and works in partnership with other agencies offering preventative, targeted support to empower and support families in times of need.



NL Family

Safeguarding Children procedure

Dealing with concerns regarding children in our care.

If providers have concerns about children's safety or welfare, they must immediately notify their local authority children's social care team, in line with local reporting procedures, and, in emergencies, the police. Providers must also take into account the government's statutory guidance 'Working Together to Safeguard Children' and 'Prevent duty guidance for England and Wales'. All schools are required to have regard to the government's statutory guidance, and other childcare providers may also find it helpful to read this guidance.

(EYFS statutory framework for Group and school-based providers 2024 section 3.7)

The provider must notify North Lincolnshire Council Children's Services Single Point of Contact (SPOC) of any concerns in relation to a child as identified by the Children's Multi-Agency Resilience and Safeguarding (MARS) Board of allegations of abuse. The



setting can seek advice from Children's Services Single Point of Contact prior to making a referral.

The Voice of the Child

Listening to and capturing the voice of the child is essential for effective safeguarding practice. All adults should understand the different ways children may communicate, whether this be verbal or non-verbal.

Dealing with concerns regarding children in our care.

All staff members are responsible for the safety and well-being of the children, including protecting them from harm. If any member of staff is worried that a child may be being harmed, or if a child discloses abuse, or if a third party expresses concerns to a member of staff, they must adhere to the following procedures.

1. Ask to speak with the Safeguarding Coordinator (**Leahna Carmichael**), in private, if possible, be mindful of staffing ratios.
2. The Safeguarding Coordinator and the staff member discuss the concern and decide what action needs to be taken. A decision will need to be made in relation to whether it is appropriate to make a referral to the Children's Services Single Point of Contact (SPOC). During this discussion full written details including dates and times, parties involved, any supporting information from staff or explanations from parents/carers, will be recorded.
3. If no referral is being made, then a written record is to be completed and stored on the child's file. This written record should then be shared with parents/carers on collection.
4. If a referral is to be made, then the Safeguarding Coordinator must ring North Lincolnshire Council Children's Services Single Point of Contact (SPOC) on 01724 296500 or if it is out of office hours 01724 296555. Parental consent should be sought unless by doing so this would put the child at further risk. The Safeguarding Officer will be responsible for providing as much information as possible to Children's Services (SPOC) to aid their investigation. The referral must then be followed up in writing with 48 hours of making the referral.
5. Direction as far as what to do next will be taken from Children's Services (SPOC).
6. All records will be kept secure and confidential and must be signed and dated.

Wherever possible parents need to be made aware that a referral is being made to Children's Services, however in some instances this may not be appropriate. Consent should be gained from parents to contact Children's services (SPOC) unless that by doing so it may place the child at risk of further harm. Where consent is not given



providers can still contact Children's Services (SPOC) if they have concerns that a child is suffering or at risk of suffering significant harm.

In the event of disclosure from a child:

- Listen to the child carefully
- Make no observable judgement
- Do not question the child
- Remain calm
- Do not make promises that cannot be kept, such as promising not to tell any one
- Reassure the child that it is not their fault

All concerns need to be kept as a clear written record, observations of the facts, not opinions. If a child confides in you, record what they said, try to use the exact words. Do not begin to question the child. This is important, for any investigations that may follow. Do not put pressure on the child to respond but allow the child to talk and always take what the child says seriously.

Dealing with concerns and allegations against staff members or any other person working with the children

Registered providers must inform Ofsted, or the agency with which a provider of CoDP is registered, of any allegations of serious harm or abuse by anyone living, working, or looking after children at the premises. This must happen whether the allegations of harm or abuse are alleged to have been committed on the premises or elsewhere, for example, on a visit. Registered providers must also notify Ofsted/ their agency of the action they have taken in response to the allegations. Ofsted/the agency must be notified as soon as is reasonably practicable, but in any event within 14 days of the allegations being made. A registered provider who, without a reasonable excuse, fails to do this commits an offence.

(EYFS statutory framework for Group and school-based providers 2024 section 3.8)

The provider must inform Ofsted of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises and of the action taken in respect of these allegations. These notifications must be made as soon as is reasonably practical, but at least within 14 days of the allegation being made



Teddy Bears Childcare



The manager/safeguarding co-ordinator in this setting with responsibility in respect of allegations against staff, volunteers or students is **Leahna Carmichael**. The designated person must, where required

- Refer to the Local Authority Designated Officer (LADO)
- Gather information
- Take part in strategy meetings
- Progress and liaise jointly with the LADO

If the manager/safeguarding co-ordinator in this setting with responsibility in respect of allegations against staff, volunteers and students is not available or is the subject of such an allegation then contact **Melissa Simpson**.

Parents should also understand the procedure to follow if they have any concerns regarding a member of staff at the setting.

The concerns may be about the behaviour/language of a:

- Member of staff, student or volunteer from the setting
- Member of staff, student or volunteer from another service/setting received or attended by the child

The behaviour/language could take a number of forms, for example;

- Seeing an adult hit a child
- Observing an adult using inappropriate restraint or language
- Witnessing the neglect of basic care needs of a child
- Inappropriate sexual comments to children OR adults in the setting
- Excessive one-to-one attention beyond the requirements of their usual role and responsibilities
- Inappropriate sharing of images
- Any other inappropriate behaviour or language
- Inappropriate behaviours in their personal life that may give concerns to caring for children

If you have any concerns, the procedure is as follows:

First, do all you can to challenge the perpetrator's behaviour/language immediately without putting any child or yourself at undue risk

- Inform the perpetrator of your concerns
- Ask him/her to move to an area where there is no contact with children.



- Advise him/her that you will immediately inform the safeguarding coordinator/manager within the setting of what you have witnessed.

If the perpetrator continues; take any appropriate action you can to separate any children and the perpetrator, and call for assistance

It is essential that you stay with the child/ren until you can transfer them to the care of another responsible adult (ideally their key person).

In all cases where a concern has been raised, inform the Manager/Safeguarding coordinator or most senior person on site immediately. They will deal with the staff member in line with Children's MARS /Ofsted policies and procedures and/or disciplinary and grievance procedure (continue to ensure that ratios are met at all times)

Take notes of what you have heard or seen and what has been said - if it is not possible to take notes at the time, do so immediately afterwards. Keep the notes taken at the time, without amendment, omission or addition, whatever subsequent reports may be written. The notes should be dated and signed. The notes should cover what you saw, who said what, what action you took, and the details of date, time and location and name of child and perpetrator.

Allegation of Harm or Concern around quality of care and practice?

The manager/safeguarding co-ordinator should determine whether the incident is an allegation of potential or actual harm or **alternatively** a concern about quality and care/practice or complaint. Guidance around this can be found in Children's MARS Managing Allegations against people who work with children policy and procedure.

Allegation of Harm - If the information relates to a concern, allegation or suspicion that a member of staff, manager, owner, committee member, student, volunteer or carer who works with children has:

- Behaved in a way that has harmed a child, or may have harmed a child
- Possibly committed a criminal offence against or related to a child
- Behaved towards a child or children in a way that indicates they may pose a risk of harm to children
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children

or where:

- Concerns arise about the person's behaviour with regard to his/her own children



- Concerns arise about the behaviour in the private or community life of a partner, member of the family or other household member.

You should:

Report the matter immediately to the Manager/Safeguarding Coordinator or named deputy in her absence or where the Manager/Safeguarding Coordinator is the subject of the allegation.

If you are the person to whom the allegation of a staff member, student, volunteer or carer who works with children harming a child is reported you must not investigate the matter by interviewing the accused person, the child or potential witnesses, but should:

- Avoid asking leading questions
- Record the incident in writing, just recording the facts and include:
 - When the alleged incident took place (time and date)
 - Who was present
 - What was said to have happened
 - Sign and date the written record
- Contact the Local Authority Designated Officer (LADO) for advice about what to do next. Contact the LADO on 01724 298293. The LADO will then liaise with other agencies and advise the setting of next steps to be taken
- Ofsted **must** also be informed of any allegations on 0300 123 123 1 within 14 days at the latest. A registered provider who without reasonable excuse, fails to comply with this requirement commits an offence
- If the allegation or suspicion involves a child or young person suffering, or at risk of, significant harm, the Safeguarding Coordinator/Manager must also make a telephone referral to the Children's Services
- Following the telephone referral, the Safeguarding Coordinator/Manager must follow up the concerns in writing to Children's Services within 24 hours.

Please also see the Children's MARS Managing Allegations against people who work with children policy and procedure.

Concern around quality of care and practice – If the concern does not relate to harm and is deemed to be a care and practice issue, this should be documented as a low level concern and signed by the manager/DSL and person concerned. A copy of the concern and any subsequent actions should be kept in the provision and a copy given to the person concerned.



Whistleblowing

All staff have a duty to report any concerns about poor or unsafe practice, or potential failures in the nursery's safeguarding arrangements. Whistleblowing is essential to ensuring that children remain safe, and all concerns will be taken seriously, investigated appropriately, and treated confidentially in line with our safeguarding policies.

We encourage a culture of openness, where staff feel safe to raise concerns without fear of reprisal. Any concerns should be reported to the Designated Safeguarding Lead (DSL) or the nursery manager. If concerns remain unresolved, or staff feel they cannot approach the DSL or manager, staff are encouraged to escalate to the Local Authority Designated Officer (LADO) or contact the NSPCC Whistleblowing Helpline: 0800 028 0285 or Ofsted Whistleblowing helpline: 0300 1233155

Providers will make available to staff the following documents:

What to do if you are worried a child is being abused – Department for Education 2015

Working Together the Safeguard Children - Department for Education 2023

Information sharing - advice for practitioners providing safeguarding services to children, young people, parents and carers 2024

The Statutory Framework for the Early Years Foundation Stage – Group and school based providers - Department for Education 2025

Keeping children safe, helping families thrive – Department for Education 2024

Keeping Children Safe in Education - Department for Education 2025

The Prevent duty - Prevent duty guidance update: a briefing for schools and early years providers 2023

The Prevent Duty – Prevent Duty Guidance for England and Wales – The Home Office 2023

One Family Approach - Helping Children and Families in North Lincolnshire Document – North Lincolnshire Children's Multi-Agency Resilience and Safeguarding (MARS) Board

Managing Allegations against adults who work with children – North Lincolnshire Children's Multi-Agency Resilience and Safeguarding (MARS) Board



Annex

Definitions of abuse

Physical: Physical abuse happens when a child is deliberately hurt, causing physical harm. It can involve hitting, kicking, shaking, throwing, poisoning, burning or suffocating. It's also physical abuse if a parent or carer makes up or causes the symptoms of illness in children. For example, they may give them medicine they don't need, making them unwell. This is known as fabricated or induced illness (FI).

Sexual: Sexual abuse is forcing or enticing a child to take part in sexual activities. It doesn't necessarily involve violence, and the child may not be aware that what is happening is abuse. Child sexual abuse can involve contact abuse and non-contact abuse. Contact abuse happens when the abuser makes physical contact with the child. Non-contact abuse involves non-touching activities, and it can happen online or in person.

Emotional abuse: this is present in virtually all child protection incidents but can also constitute abuse in its own right. It involves persistent or severe emotional ill treatment or torture causing, or anything that causes severe adverse effects on the emotional stability of a child. Emotional abuse also deeply affects children who witness or hear domestic abuse.

Neglect: Neglect is not meeting a child's basic physical and/or psychological needs. This can result in serious damage to their health and development. Neglect is the most common type of child abuse. It often happens at the same time as other types of abuse. Neglect can be difficult to identify. Isolated signs may not mean that a child is suffering neglect, but multiple and persistent signs over time could indicate a serious problem.

Child Exploitation including Sexual Exploitation, Criminal Exploitation, County Lines and Risks Outside the Home

All staff members will be aware of how children can be exploited and will act on any concerns immediately. This also includes recognising where older children may be at risk. If a staff member has concerns, they will follow their normal safeguarding referral route or in an emergency call the police directly. Staff should be alert to any issues of concern in the child's life at home or elsewhere.

It is recommended that a staff member should receive specific awareness raising sessions on CSE, CCE and County lines and disseminate to all other staff.



Prevent Agenda

All staff should be aware of the Prevent agenda and how to identify and assess the risk of children being drawn into terrorism, including extremist ideas that are part of the terrorist ideology.

Staff should be alert to changes in children's behaviour, which could indicate that they may be in need of help or protection. Staff should use their professional judgement in identifying children who might be at risk of radicalisation and act accordingly.

The Provision will promote fundamental British values of democracy, rule of law, individual liberty, mutual respect and tolerance for those with different faiths and beliefs, which are already implicitly embedded in the 2017 Early Years Foundation Stage.

It is recommended that a staff member should receive specific awareness raising sessions on the Prevent agenda and disseminate to all other staff.

Female Genital Mutilation

All staff should be aware of female genital mutilation and the risk factors for young girls. Staff should respond to any concerns immediately either through following their normal safeguarding referral route or directly to the NSPCC FGM helpline, 0800 028 3550. Information and risk factors regarding FGM should be shared with all staff.

Breast Flattening

Breast ironing, also known as breast flattening, is the pounding and massaging of a pubescent girl's breasts using hard or heated objects to try to stop them developing, or to make them disappear entirely. All staff should be aware of breast flattening and the risk factors for young girls. Staff should respond to any concerns immediately either through following their normal safeguarding referral route or directly to the police or the NSPCC. Information regarding breast flattening should be shared with all staff.

Infant Oral Mutilation (Ebinyo)

Infant oral mutilation is a primitive traditional practice involving the 'gouging out' of a young infant's healthy primary teeth/buds. This can lead to transmission of blood-borne diseases such as HIV/ AIDS, septicemia and death. Infant Oral Mutilation is usually carried out by 'healers' who perceive it to be a remedy for common childhood illness. All staff should be aware of Infant Oral Mutilation and the risk factors for young children. Staff should respond to any concerns immediately either through following their normal safeguarding referral route or directly to the police or the NSPCC. Information regarding Infant Oral Mutilation should be shared with all staff.



Domestic Abuse

Seeing, hearing or knowing of a parent being abused is traumatic for children and can have long-term damaging emotional and psychological effects. All staff should be aware of the impact of domestic abuse on children and where it is suspected that a child is at risk of harm by witnessing or hearing domestic abuse staff follow their normal safeguarding referral route or in an emergency call the police directly. Staff should also be aware of coercive control and the impact this will have on children's well-being. Information regarding domestic abuse and coercive control should be shared with all staff.

Operation Encompass

Children are negatively impacted by experiencing domestic abuse and the impact of this can last throughout a child's lifetime. Where an Operation Encompass notification is received into the setting, staff will be mindful of any adverse effects this may have on a child and ensure appropriate support and care is offered where required.

Peer on peer abuse

Children are vulnerable to abuse by their peers, and such abuse should be taken as seriously as abuse by adults. Providers should not dismiss abusive behaviour as normal between young people/children (however a child's age and stage of development will be considered). Providers should be aware of any incidences of peer-on-peer abuse and respond to these within their normal safeguarding procedures. Information regarding peer-on-peer abuse should be shared with all staff.

Honour Based Abuse and Forced Marriage

Providers should be aware of incidences of honour-based abuse and/or forced marriage. Honour based abuse can be described as a collection of practices which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour.

Forced marriage is when someone does not consent and faces physical and/or psychological pressure to marry. Staff can respond to concerns by contacting Karma Nirvana <https://karmanirvana.org.uk/> or in case of emergency phoning 999. Information regarding honour-based abuse and forced marriage should be shared with all staff.

Witchcraft and faith-based abuse

Belief in witchcraft, spirit possession and faith-based ideals can impact on a child's welfare and safety. Themes such as witchcraft abuse or the belief that children can be



spirit possessed and the harmful religious practices that occur as a result of this can impact children being abused. Often children are blamed or scapegoated to be the reason why bad things are happening. Various triggers can lead children to being labelled as witches. These may include things such as poverty, deprivation, unemployment, ill health, lack of success and so on. Staff should respond to any concerns immediately either through following their normal safeguarding referral route or directly to the police or the NSPCC.

Injuries to babies and non-mobile infants

Bruising to babies and non-mobile infants may be caused by medical issues e.g. birth trauma or birthmarks, however this is rare. Other unusual marks on the skin or unusual sites of bleeding (e.g., bleeding from the mouth in young children) without a clear explanation may also be a sign of non-accidental injury and should also give cause for concern.

There may also be occasions where an explanation is given that another child has caused the injury. This should still be further explored.

In all cases, unless the specific mark that has been identified has been confirmed as arising from birth trauma, birthmark or a medical condition, any practitioner who identifies a bruise/injury to an infant or child who is non-mobile or suspects that an injury to a child is non-accidental as a result of abuse or neglect should make a contact/referral to Children's Services Single Point of Contact.

Useful contacts

Children and Family Services for referral – 01724 296500
01724 296555 [out of hours]

Local Authority Designated Officer [LADO] – 01724 298293

Ofsted whistleblowing - 0300 1233155

NSPCC Whistleblowing - 0800 0280285 - help@nspcc.org

The Blue Door domestic abuse service - (01724) 841 947 – info@thebluedoor.or

This policy was adopted by	Teddy Bears Childcare
Policy Created	26/01/2024
Last Reviewed	09/09/2025
Name and role of signatory	Leahna Carmichael (DSL/Deputy Manager)