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SAFEGUARDING AND CHILD PROTECTION POLICY

September 2021

This policy must be reviewed annually unless there are any changes in legislation or guidance in the interim, in which case the policy must be updated as and when necessary.

Review Date: September 2022

Contents

1	Policy Statement	Pg. 2
2	Policy Procedures	Pg. 3
2.1	Adult Roles	Pg. 3
2.2	Record Keeping	Pg. 4
2.3	Decision Making	Pg. 5
2.4	Partnership with families	Pg. 7
2.5	Specific Legal Duties	Pg. 8
2.6	Specific safeguarding issues	Pg. 9
2.7	Safeguarding children with special educational needs and disabilities	Pg.12
2.8	Children Missing Education	Pg.12
2.9	Safeguarding children who are Looked After	Pg.12
2.10	Injuries	Pg.13
2.11	Safe use of ICT and mobile phones	Pg.13
2.12	Escalating/ de-escalating concerns	Pg.13
2.13	The impact of abuse	Pg.13
2.14	Taking action	Pg.14
2.15	Managing allegations of abuse against staff, students or volunteers	Pg.15
2.16	Recruiting staff	Pg.17
2.17	Staff supervision	Pg.17
2.18	Resolution of professional disagreements	Pg.17
Appendix A	Early Years – Role of Designated Safeguarding Lead	Pg.19
Appendix B	File Transfer and Record of Receipt	Pg.24
Appendix C	Fundamental British Values in Early Years	Pg.25
Appendix D	Early Years -Serious accidents, injuries and deaths - what you must report to Ofsted	Pg.27
Appendix E	Concern reporting form	Pg.28
Appendix F	The Local Authority Designated Officer	Pg.30

Safeguarding and Child Protection Policy and Procedures

1. Policy statement:

At Little Acorns Pre-School we believe that it is always unacceptable for a child or young person to experience abuse of any kind and recognise that safeguarding the welfare of all children and young people is everyone's responsibility. We follow Shropshire Safeguarding Community Partnership (SSCP) procedures and acknowledge that the welfare of the child is paramount.

At Little Acorns Pre-School it is our duty to respond promptly and appropriately to all concerns, incidents or allegations of abuse or neglect of a child. We work in partnership with children, young people, their parents, carers and other agencies. Our statutory duties and supporting guidance are set out in The Safeguarding and Welfare Requirements in the Statutory Framework for the Early Years Foundation Stage (EYFS) 2021, the Ofsted Compulsory Childcare Register, Working Together to Safeguard Children 2018 and Keeping Children Safe in Education 2021.

Safeguarding and promoting the welfare of children is defined for the purposes of this policy as:

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

This policy is also based on the following legislation and guidance:

- The Children Act 1989 and 2004 - Safeguarding and promoting the welfare of children is defined as; protecting children from maltreatment, preventing impairment of children's health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and undertaking that role to enable those children to have optimum life chances and to enter adulthood successfully.

Section 3 (5) of the Children Act 1989 states that the law empowers anyone who has care of a child to do all that is reasonable in the circumstances to safeguard his/her welfare.

- Counterterrorism and Security Act 2015 – preventing people being drawn into terrorism and promotion of British values to ensure children are kept safe from radicalisation
- Female Genital Mutilation Act 2003 – Serious Crime Act 2015 - mandatory reporting of FGM from 31st October 2015
- Education and Training (Welfare of Children) Act 2021
- The Rehabilitation of Offenders Act 1974, which outlines when people with criminal convictions can work with children
- Schedule 4 of the Safeguarding Vulnerable Groups Act 2006, which defines what 'regulated activity' is in relation to children
- Statutory guidance on the Prevent duty, which explains schools' duties under the Counterterrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- Keeping Children Safe in Education 2021

- The Statutory Framework for the Early Years Foundation Stage (EYFS) 2021
- The Ofsted Compulsory Childcare Register
- [Shropshire Safeguarding Partnership Threshold Guidance](#)
- [West Midlands Procedures](#)

During COVID-19 Little Acorns Pre-School have implemented a Safeguarding and Child Protection Addendum to ensure that additional safeguarding measures have been put in place. Staff are to refer to the Addendum for specific procedures during COVID-19 as well as following this policy.

This policy and procedure will also link to other setting policies & procedures;

- Behaviour
- Confidentiality
- Staff Induction
- Safer Recruitment
- Special Educational Needs and Disabilities
- Non Attendance
- Health and Safety
- Safe use of ICT
- Whistleblowing

2. Procedure

2.1 Adult Roles & Responsibilities

All staff (including students and volunteers) in this setting are familiar with the definitions and signs and symptoms of abuse or neglect stated in Working Together to Safeguard Children March 2018 as set out in the [West Midlands Procedures](#).

All staff are aware of their individual roles in safeguarding and promoting the welfare of children including their responsibility to be alert to any issues for concern in the child's life at home or elsewhere. We ensure that all staff (including students and volunteers) undergo an induction process where they are given copies of the procedures they must follow if they suspect abuse or neglect. On-going support is provided through regular supervision and appraisals to ensure these policies and procedures are put into practice to protect children.

As part of induction, training will include the Pre-School's behaviour policy as well as the staff induction policy, and the child protection policy. Keeping Children Safe in Education 2021 Part 1 must be read by all members of the staff. Governing bodies and proprietors, working with the senior leadership team and especially the designated safeguarding lead, should ensure that those staff who do not work directly with children read either Part one or Annex A. All Designated Safeguarding Leads, management and governing bodies should read KCSiE 2021 in its entirety.

All staff are expected to update their safeguarding and child protection training at least every three years. In addition, all staff members should receive regular safeguarding and child protection updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

The Designated Safeguarding Lead (DSL) who will take the lead for safeguarding and child protection issues is: **Diana Scott**

The deputy Designated Safeguarding Lead is: **Kelly Boulton**

The committee member who oversees this work is: **Samantha Martin**

Our Designated Safeguarding Lead will update their child protection/safeguarding training regularly and has specific responsibilities as listed in **Appendix A**

2.2 Record Keeping

When a concern about a child's welfare or safety is raised it will be discussed with the designated lead and recorded. The designated lead will decide if the concern should be shared with another agency (see **decision making** below) or kept on record in case future concerns arise.

Records should include:

- **a clear and comprehensive summary of the concern;**
- **details of how the concern was followed up and resolved;**
- **a note of any action taken, decisions reached and the outcome.**

All records will be stored in a separate confidential file in a locked cabinet in a secure place with restricted access.

Where children leave Little Acorns (including in year transfers) the designated safeguarding lead should ensure their child protection file is transferred to the new school or Pre-School as soon as possible, and within 5 days for an in-year transfer or within the first 5 days of the start of a new term. When a child/pupil transfers to another school/setting within this or another authority, the confidential information held is forwarded under confidential cover and separate from the child's/pupil's main file to the DSL for child protection in the receiving school/setting. This should be transferred separately from the main pupil file, ensuring secure transit and confirmation of receipt should be obtained (**Appendix C**).

In addition to the child protection file the DSL will consider sharing information with the new setting/school/college in advance of a child leaving.

Information sharing is vital in identifying and tackling all forms of abuse and neglect, and in promoting children's welfare, including their educational outcomes. Schools and colleges have clear powers to share, hold and use information for these purposes. We follow the guidance in the HM Government (HMG) 2018 guide 'Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers' and the HMG 2015 guide 'What to do if you are worried a child is being abused'.

Staff should be proactive in sharing information as early as possible to help identify, assess, and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to the local authority children's social care. Governing bodies and proprietors are aware that among other obligations, the Data Protection Act 2018, and the UK General Data Protection Regulation (UK GDPR) place duties on

organisations and individuals to process personal information fairly and lawfully and to keep the information they hold safe and secure.

When information is being accumulated prior to possible referral we will start a chronology of events. Some chronologies will need to be produced for a specific reason for example, when a new relationship is started, during multi-agency meetings, from the start of a significant event, or from the start of the date parameters set by a statutory case review. The chronology should then continue throughout the intervention, or for as long as is required.

The designated lead will regularly review all child protection chronologies to decide if the accumulation of events is having a detrimental impact on a child and must be referred to Compass. If the designated lead decides not to refer, the reason will be noted on the child's chronology.

2.3 Decision making – 'Accessing the right service at the right time'

We take a holistic approach to safeguarding all children in our care and recognise that different families need a different level of support at different times. To enable us to recognise at which level a family might require support; we use the Shropshire Safeguarding Community Partnership Multi-Agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire. Shropshire [Threshold Document](#)

This guidance identifies four levels to ensure all children receive the support and intervention they need to achieve a positive life experience. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of parents and carers and we aim to develop good, professional relationships to ensure that we have a shared understanding of each child's needs.

It should be noted that if parents demonstrate a lack of co-operation or appreciation about the concerns we identify, this may raise the level of the need and required level of action.

Level 1 – Universal

Children with no additional needs and where there are no concerns. Typically, these children are likely to live in a resilient and protective environment where their needs are met. These children will require no additional support beyond that which is universally available.

We follow the Statutory Framework for the Early Years Foundation Stage 2021 to provide individual support for all children. Each child is allocated a key person who will make a relationship both with the child and his or her family. The key person will make observations and keep records to ensure there are no barriers to a child's learning and establish stable and affectionate relationships.

Consent must be sought to access services and share information with others. Any information sharing between agencies without consent must be clear as to its legal basis.

Ensure privacy information is shared with the family and a consent form completed.

Support is provided by services identified as universal in local communities and are available to all. These include: schools, colleges, early years and childcare provision, primary healthcare provision (i.e. GP, hospitals), and the voluntary and community sector.

Universal support will most likely be provided by a single agency and/or existing support from family, friends, the community.

It is these Universal Services who are best placed to ensure children and families have access to the Early Help Offer. The needs of the child/young person are appropriately met within this framework.

Universal Services are constant and remain involved if/when the child/family move up to other levels of need.

Level 2 – Children in need of Early Help

These children can be defined as needing some additional support without which they would be at risk of not meeting their full potential.

Their identified needs may relate to their health, educational, or social development, and are likely to be short term needs. If ignored these issues may develop into more worrying concerns for the child.

In addition to the Whole Family Assessment, specific local tools and pathways should be used where there are concerns about possible harm to the child.

Early Help aims to provide a multi-agency response when a single agency is not able to progress and help the child and their family.

The existing single agency or multi-agency team should work with the family and each other to complete a Whole Family Assessment and Action Plan.

At this stage a lead professional/practitioner should be identified who can build a relationship with the whole family and ensure that the whole family's needs are met and any actions progressed.

Consent must be sought to access services. Any information sharing between agencies without consent must be clear as to its legal basis.

Ensure privacy information is shared with the family and a consent form completed.

Level 3 – Targeted Early Help

This level applies to those children identified as requiring targeted support and who meet at least 2 of the 6 Strengthening Families criteria in the Whole Family Assessment. It is likely that for these children their needs and care are compromised.

These children will be those who are vulnerable to harm or experiencing adversity. In addition to the Whole Family Assessment, specific local tools and pathways should be used where there are concerns about possible harm to the child.

These children are potentially at risk of developing acute/ complex needs if they do not receive targeted early help.

If a child continues to have unmet needs which cannot be met by Universal or Early Help support, then the existing single agency or multi-agency team should work with the family and each other to review the Whole Family Assessment and Action Plan and follow the Request for Intervention Pathway to request more intensive family support from a Targeted Early Help Family Support Worker.

Consent must be sought from the family to access services. Any information sharing between agencies without consent must be clear as to its legal basis.

Ensure privacy information is shared with the family and a consent form completed

Level 4 – Complex Significant Needs

These are children whose needs and care at the present time are likely to be significantly compromised and or they are suffering or likely to suffer significant harm and so who require intervention from Shropshire Council Children's Social Care.

An immediate referral to Compass should be made for assessment under Section 17 or Section 47 of the Children Act 1989.

Specific local tools and pathways and the Shropshire Threshold Matrix should be used to support their referral and help practitioners to assess significant harm to the child.

Child in Need

Section 17 of the Children Act (1989) states that a child shall be considered in need if:

- They are unlikely to achieve, maintain or have the opportunity of achieving or maintaining a reasonable standard of health or development without the provision of services by a local authority.
 - Their health and development is likely to be significantly impaired, or further impaired, without the provisions of such services
- and/or;
- They are disabled.

Child Protection

Section 47 of the Children Act 1989 states that the authority shall make necessary enquiries to enable them to decide whether they should take action to safeguard or promote the child's welfare where there is reasonable cause to suspect a child is suffering or likely to suffer significant harm.

Where it is suspected that a child may be suffering or be at risk of suffering significant harm; referring practitioners must inform parents or carers that they are making a referral to Compass, and seek consent unless to do so may:

- Place the child at increased risk of significant harm; or
- Place any other person at risk of injury; or
- Obstruct or interfere with any potential Police investigation; or
- Lead to unjustified delay in making enquiries about allegations of significant harm.

Guidance for assessment practice can be found on page 13 of the Shropshire Threshold document.

(Taken from: Multi-agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire 2021) *Threshold Document*

2.4 Partnership with families

A copy of this policy is made available to all parents prior to their child joining our school/setting as well as details of the complaints procedure. In general, any concerns will be discussed with parents and we will offer support. All conversations, whatever the outcome, should be recorded appropriately to show that they took place, identify what was agreed and evaluate how effectively they enabled needs to be met. In this way quality conversations can demonstrate their impact on successful practice, including improvements in decision making and joint working. Conversations should continue to inform the on-going planning and reviewing.

Practitioners working with families at a Universal, Early Help or Targeted level will need to obtain the consent of the family before any information is held or shared with other agencies. If the practitioner does not gain the family's consent and in future has ongoing concerns, they should consider contacting Compass for advice and guidance. Except for child protection matters, referrals to Compass cannot be accepted without parents having been consulted first.

Consent is not required for child protection referrals where it is suspected that a child may be suffering or be at risk of suffering significant harm; however, the referring practitioner, would need to inform parents or carers that they are making a referral, unless to do so may:

- Place the child at increased risk of Significant Harm; or
- Place any other person at risk of injury; or
- Obstruct or interfere with any potential Police investigation; or
- Lead to unjustified delay in making enquiries about allegations of significant harm.

The child's interest must be the overriding consideration in making such decisions. Decisions should be recorded. If consent is withheld by the parent:

- If it is felt that the child's needs can be met through Early Help, then discussion with the family should take place about the completion of an Early Help Assessment and provision of services through an Early Help Plan. Early help consultations are available from the Early Help Advisors for support in managing these situations.
- For another agency familiar with the child and family to make the approach about information sharing to the family.
- No assessment should take place. The rationale for this decision will be recorded on the concerns form.
- The combination of the concerns and the refusal to consent to enquiries being made may result in the concerns being defined as child protection concerns. In this case, information sharing may proceed without parental consent. The consultation and the decision to proceed without consent must be recorded on the case papers.

If a child has been injured or is in imminent danger of being injured then we will contact the emergency services, medical or police, immediately on 999.

When making a level 4 referral to Compass we will ensure we have a record of all details required detailed on a [Shropshire Multi-Agency Referral Form](#)

2.5 Specific legal duties to report

Legislation has recognised and criminalised the following types of abuse and placed duties on education settings to report offences to the authorities:

- **Radicalisation and the Prevent Duty**

The government set out its definition of British values in the 2015 Prevent Strategy – this promotes the values of:

- democracy
- the rule of law
- individual liberty

- mutual respect
- tolerance of those of different faiths and beliefs

Our setting promotes these values to ensure that children build resilience.- See Appendix D

If a member of staff has a concern about a pupil/s they should follow the Pre-School's normal safeguarding procedures, including discussing with the designated safeguarding lead as set out in the Child Protection/safeguarding policy.

The designated lead should contact West Mercia Prevent Team:

Sgt Calum Forsyth – 07970 047227

DC Holly Aungiers – 01386 591815

Prevent@westmercia.pnn.police.uk

- **Female Genital Mutilation (FGM)**

Whilst all staff should speak to the designated safeguarding lead (or deputy) about any concerns about female genital mutilation (FGM), there is a specific legal duty on teachers. If a teacher, during their work in the profession, discovers that an act of FGM appears to have been carried out on a girl under the age of 18, the teacher must report this to the police.

Please refer to <https://www.gov.uk/government/publications/female-genital-mutilation-leaflet>

We may not seek parental consent if this may put the girl at increased risk.

- **Domestic abuse and honour-based violence**

Children living in households where there is domestic abuse such as coercion or violence, including honour-based violence, could be at significant risk of harm. We will seek support for victims and their children through Compass.

Depending on the level of risk, we may or may not consult parents before contacting Compass.

2.6 Specific safeguarding issues

To ensure that our children and young people are protected from harm, we need to understand what types of behaviour constitute abuse and neglect. Staff are made aware of specific safeguarding issues (listed below) through child protection training, reading up to date guidance such as Keeping Children Safe in Education 2021, Statutory Framework for the Early Years Foundation Stage stated in Section 3 – The Safeguarding and Welfare Requirements and accessing SSCP procedures at <http://www.safeguardingshropshireschildren.org.uk/>

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following the child protection policy, and speaking to the designated safeguarding lead or a deputy.

Children may need a social worker due to safeguarding or welfare needs. Local authorities will share this information with the school, and the DSL will hold and use this information so that decisions can be made in the best interests of the child's safety, welfare and educational outcomes.

This setting ensures that the DSL is continually updated in all areas below. They are familiar with the referral pathways and specific toolkits and guidance available on the [SSCP website](#).

Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example, information for schools, colleges and early years settings can be found on the TES, MindEd and the NSPCC websites. Staff can access government guidance as required on the issues listed below via [Annex B in Keeping Children Safe in Education](#) and other government websites.

<ul style="list-style-type: none"> Bullying including cyberbullying (cyber crime). Child Criminal Exploitation: County Lines (CCE) Child missing from education, home or care Child sexual exploitation (CSE) Children and the court system Children with family members in prison Domestic violence Drugs Health and Wellbeing e.g. fabricated or induced illness, medical conditions, mental health and behaviour. Faith based abuse So - called honour-based abuse (including Female Genital Mutilation and Forced Marriage. Gangs and youth violence Gender-based violence/violence against women and girls (VAWG) 	<ul style="list-style-type: none"> Homelessness Hate Hate related Incident Reporting Form Missing children and adults' strategy Modern Slavery Private fostering Preventing radicalisation Relationship abuse Peer on Peer Abuse e.g., Sexting (youth produced sexual imagery), Sexual Violence & Sexual Harassment Trafficking Private Fostering Online safety
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All staff should be aware that safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside of these environments. All staff, but especially the DSL and deputy DSLs should consider whether children are at risk of abuse and exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms (but not limited to) sexual exploitation, criminal exploitation, and serious youth violence. Please see link [Contextual Safeguarding](#):

Both Child sexual exploitation (CSE) and Child criminal exploitation (CCE) are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation. The DSL can obtain local information regarding Exploitation from SSCP and by attending local briefings.

Peer on Peer / child on child abuse

Staff should recognise that children can abuse their peers. Abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up”. Victims of peer abuse should be supported as they would be if they were the victim of any other form of abuse, in accordance with this policy. A zero-tolerance approach will be adopted by all staff at Little Acorns Pre-School.

Peer on peer abuse occurs when a young person is exploited, bullied and/or harmed by their peers who are the same age or similar age.

Staff are aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to:

- bullying (including cyberbullying);

- abuse in personal intimate relationships between peers
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence such as rape, assault by penetration and sexual assault
- sexual harassment such as sexual comments, remarks, jokes or online
- Causing someone to engage in sexual activity without consent
- sexual or sexist name calling
- inappropriate or unwanted sexualised touching
- consensual and non-consensual sharing of nudes and semi nudes images and or videos (also known as sexting or youth produced sexual imagery); Upskirting, typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.
- sexting (also known as youth produced sexual imagery)
- revenge porn
- initiation/hazing type violence and rituals.

Children can experience peer-on-peer sexual abuse in a wide range of settings, including:

- at school
- at home or in someone else's home
- in public spaces
- online

It can take place in spaces which are supervised or unsupervised. Within a school context, for example, peer-on-peer sexual abuse might take place in spaces such as toilets, the playground, corridors and when children are walking home. All staff should understand, that even if there are no reports in their schools or colleges it does not mean it is not happening, it may be the case that it is just not being reported.

All staff should be aware of indicators, which may signal that children are at risk from, or are involved with serious violent crime. These may include increased absence from school, a change in friendships or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs.

All staff should be aware of the associated risks and understand the measures in place to manage these. Advice for schools and colleges is provided in the Home Office's Preventing youth violence and gang involvement and its Criminal exploitation of children and vulnerable adults: county lines guidance.

It is vital that staff at Little Acorns Pre-School understand that the child who is perpetrating the abuse may also be risk of harm. Staff should make every effort to ensure that the perpetrator is also treated as a victim and undertake assessments to conclude this. Sensitive work must be undertaken with the child who is perpetrating, by helping them to understand the nature of their behaviour and the effect it has on others may prevent abuse.

Staff must be able to use their professional judgement in identifying when what may be perceived as "normal developmental childhood behaviour" becomes abusive, dangerous and harmful to others. Designated leads may need to consult with the SSCP Threshold document to help with their decision making.

The Designated Safeguarding Lead has attended Brook Traffic Light Training which will support in identifying developmentally typical behaviours or those that may be referred to as problematic or harmful.

2.7 Safeguarding children with special educational needs and disabilities

It is recognised that children with special educational needs or disabilities (SEND) can present additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group of children. These can include: assumptions that indicators of possible abuse such as behaviour, mood and injury, relate to the child's impairment without further exploration; children with SEND can be disproportionately impacted by issues such as bullying, without necessarily showing outward signs; communication barriers.

It is important, therefore, to be particularly sensitive to these issues when considering any aspect of the welfare and safety of such children, and to seek professional advice where necessary.

Any reports of abuse involving children with SEND will therefore require close liaison with the Designated Safeguarding Lead (or deputy) and the SENCO.

2.8 Children Missing Education

There are many reasons why we want young children to have regular attendance at our setting. As well as supporting their learning and development, we want to try to make sure that children are kept safe, their wellbeing is promoted, and they do not miss out on their entitlements and opportunities. In a small minority of cases, good attendance practice may also lead to the earlier identification of more serious concerns for a child or family and may have a vital part to play in keeping a child or other family members safe from harm.

In our setting, we have procedures for recording and following up any unexplained non-attendance and know how to respond to different problems and where to access advice, support or whom to alert if concerns arise.

2.9 Safeguarding children who are Looked After

Staff are aware the most common reason for children becoming looked after is because of abuse and/or neglect. Appropriate staff have the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. Appropriate staff members also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her. The designated safeguarding lead has details of the child's social worker and the name of the virtual school head in the authority that looks after the child.

The designated teacher for looked after children will work with the Local Authority to promote the educational achievement of registered pupils who are looked after or who have left care through adoption, special guardianship, child arrangement orders or who are adopted from state care outside of England and Wales.

The designated safeguarding lead should have details of the child's social worker and the name of the virtual head teacher. The designated safeguarding lead should work closely with the designated teacher.

2.10 Injuries

At the beginning of each session or school day parents are requested to notify us of any accidents, incidents or injuries which may affect their child before leaving him/her at the setting. A note will be made of any existing injuries and how the injury was received will be recorded. A body map may be used to indicate any marks/bruises (Refer to body map in [Multi-agency referral form \(MARF\)](#))

Any serious injury occurring in the setting e.g. broken bone, is reported to Health and Safety Executive (HSE) via RIDDOR. This is also reported to Ofsted within 14 days (see **Appendix F**).

2.11 Safe use of ICT and mobile phones please also see separate policy.

Appropriate use of mobile phones is essential at Little Acorns Pre-School.

Staff can use their personal mobile phones during their break times in designated areas. During working hours, they must be kept out of the reach of children and parents in the Pre-School kitchen, a secure area accessible only to staff. All staff are made aware of their duty to follow this procedure, and to challenge anyone not adhering to it.

Visitors to the setting (including parents) must also leave mobile phones in pockets or bags and will be asked not to use their mobile phone whilst in the Pre-School building.

Important contact details of the children are kept on the setting's mobile phone in case of an emergency. The mobile phone is kept in the Pre-School office and can not be accessed by children, visitors or families.

We believe that photographs validate children's experiences and achievements and are a valuable way of recording milestones in a child's life. Parental permission for the different ways in which we use photographs is gained as part of the initial registration at Little Acorns. We take a mixture of photos that reflect the Pre-School environment, sometimes this will be when children are engrossed in an activity either on their own or with their peers. To safeguard children and adults and to maintain privacy, cameras are not to be used during intimate care situations by adults or children.

Little Acorns Pre-School uses Tapestry, an online learning journal to record children's achievements and communicate with parents and carers. Please see Tapestry policy for further information.

Through induction, staff and volunteers are made aware of our 'acceptable use of technology' policy both at home and in the workplace. If any staff or volunteers breach this policy, then we will take disciplinary action which may result in a referral to the Disclosure and Barring Service.

2.12 Escalating / de-escalating concerns

Just because a child is assessed at a point in time as meeting certain threshold criteria does not mean that they always will. An assessment is an on-going process, not an event; children's needs often change over time. The Designated Lead for Safeguarding will maintain an overview of all children with a plan to ensure children's needs are being met at the right level of intervention. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of the parents and carers – a lack of co-operation or appreciation about the concern may of itself raise the level of the need and required response.

2.13 The impact of abuse

The impact of child abuse should not be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach, and the rest of their childhood and their adulthood may be characterised by anxiety or depression, self-

harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships and long-term medical or psychiatric difficulties.

2.14 Taking action

Key points to remember for taking action are:

- in an emergency take the action necessary to help the child, for example, call 999
- report your concern to the DSL immediately
- if the DSL is not able to be contacted ensure action is taken to report the concern to children's social care
- do not start your own investigation
- share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family
- complete a record of concern (Appendix F)
- seek support for yourself if you are distressed.

If you suspect a child is at risk of harm

There will be occasions when you suspect that a child may be at serious risk, but you have no 'real' evidence. The child's behaviour may have changed, or you may have noticed other physical but inconclusive signs. In these circumstances, you should try to give the child the opportunity to talk. The signs you have noticed may be due to a variety of factors and it is fine to ask the child if they are alright or if you can help in any way. Staff at Little Acorns Pre-School have been made aware of the Shropshire Children Reporting Concern guidance.

Use the welfare concern form (see **Appendix F**) to record these early concerns. If the child does begin to reveal that they are being harmed, you should follow the advice in the section below 'If a child discloses information to you'.

If, following your conversation, you remain concerned, you should discuss your concerns with the designated person.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following the procedures set out in this policy and by speaking with the DSL.

If a child tells you that they've been abused

It takes a lot of courage for a child to tell someone that they are being neglected and or abused. They may feel ashamed, particularly if the abuse is sexual, their abuser may have threatened what will happen if they tell, they may have lost all trust in adults, or they may believe, or have been told, that the abuse is their own fault.

If a child talks to you about any risks to their safety or wellbeing you will need to let them know that you must pass the information on – you are not allowed to keep secrets. The point at which you do this is a matter for professional judgement. If you jump in immediately the child may think that you do not want to listen, if you leave it till the very end of the conversation, the child may feel that you have misled them into revealing more than they would have otherwise.

All staff should be able to reassure children that they are being taken seriously and that they will be supported and kept safe. A child should never be given the impression that they are creating a

problem by reporting abuse, sexual violence or sexual harassment. Nor should a child ever be made to feel ashamed for making a report.

During your conversation with the child:

Allow them to speak freely.

- Remain calm and do not overreact – the child may stop talking if they feel they are upsetting you.
- Give reassuring nods or words of comfort – ‘I’m so sorry this has happened’, ‘I want to help’, ‘this isn’t your fault’, ‘You are doing the right thing in talking to me’.
- Do not be afraid of silences – remember how hard this must be for the child.
- Under no circumstances ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the child’s mother think about all this.
- At an appropriate time tell the child that to help them you must pass the information on.
- Do not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused.
- Avoid admonishing the child for not disclosing earlier. Saying ‘I do wish you had told me about this when it started’ or ‘I can’t believe what I’m hearing’ may be your way of being supportive but the child may interpret it that they have done something wrong.
- Tell the child what will happen next. The child may agree to go with you to see the designated person. Otherwise let them know that someone will come to see them before the end of the day.
- Report verbally to the designated person.
- Write up your conversation as soon as possible on the record of concern form and hand it to the designated person.
- Seek support if you feel distressed.

Refer to **Appendix F**

2.15 Managing allegations of abuse made against staff (this includes apprentices & supply staff), students or volunteers (see Appendix H)

As part of our whole school approach to safeguarding, Little Acorns Pre-School will ensure that we promote an open and transparent culture in which all concerns about all adults working in or on behalf of the Pre-School (including supply staff, volunteers and committee members) are dealt with promptly and appropriately.

There are two levels of concern;

1. Allegations that may meet the harms threshold.
2. Allegation/concerns that do not meet the harms threshold – which may be referred to as ‘low level concerns’.

Allegations which might indicate that a person would pose a risk of harm to children if they continue to work in regular or close contact with children in their present position will be taken seriously. We have a duty to inform Ofsted of any serious allegations made against a person which suggests he or she 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; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children; or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

We also have a duty of care towards our staff. We provide support for anyone facing an allegation and provide employees with a named contact if they are suspended. It is essential that any allegations of abuse made against members of staff or volunteers are dealt with very quickly, in a fair and consistent way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

Where the school or college identify a child has been harmed, that there may be an immediate risk of harm to a child or if the situation is an emergency, they should contact children's social care and as appropriate the police immediately. There are two aspects to consider when an allegation is made:

- Looking after the welfare of the child - the designated safeguarding lead is responsible for ensuring that the child is not at risk and referring cases of suspected abuse to the local authority children's social care.
- Investigating and supporting the person subject to the allegation - the case manager should discuss with the LADO, the nature, content and context of the allegation, and agree a course of action.

The LADO may ask for additional information, such as previous history, whether the child or their family have made similar allegations previously and the individual's current contact with children. There may be situations when the LADO will want to involve the police immediately, for example if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

The initial sharing of information and evaluation may lead to a decision that no further action is to be taken regarding the individual facing the allegation or concern; in which case, this decision and a justification for it will be recorded by both the Registered Person/Headteacher and the LADO, and agreement reached on what information should be put in writing to the individuals concerned and by whom. The Registered Person/Headteacher will then consider with the LADO what action should follow both in respect of the individual and those who made the initial allegation.

If further action is required, we will follow the advice of the LADO and co-operate with any investigations. We will follow instructions about what can be disclosed to the accused and whether he/she should be suspended whilst further investigations take place. This is not an indication of admission that the alleged incident has taken place but is to protect the staff as well as children and families throughout the process. Clear advice will be given to workers on the process of investigation by other agencies. We will follow advice about how to inform families about the allegation.

In all cases, we will notify Ofsted within 14 days of the allegations first being made and inform them about what actions are being taken by completing the on-line form at:

https://ofstedonline.ofsted.gov.uk/ofsted/Ofsted_Early_Years_Notification.ofml

If the member of staff/volunteer is found to be a risk to children and vulnerable adults, the Disclosure & Barring Service will be notified. You will need to consider who makes the referral if an allegation is made against the Designated Safeguarding Lead e.g., if an allegation is made against the Designated Safeguarding Lead the Registered Person will make the referral. If we are aware of

the details of a child who has or may have been harmed by a member of staff or volunteer, we will contact Compass to make a referral to seek support for the child.

There is a legal requirement for employers to make a referral to the DBS where they think that an individual has engaged in conduct that harmed (or is likely to harm) a child; or if a person otherwise poses a risk of harm to a child. [Safeguarding Vulnerable Groups Act 2006](#)

Whistleblowing

Whistle blowing is a mechanism by which adults can voice their concerns in good faith, without fear of repercussion. Any behaviour by colleagues that raises concern regardless of source will be recorded and reported to the designated practitioner or appropriate agency. Please read separate Whistle Blowing policy.

2.16 Recruiting Staff

Please also read separate Safer Recruitment policy.

We provide adequate and appropriate staffing resources to meet the needs of children. (More information can be found in our recruitment and retention policy).

Job adverts and application packs refer to our safeguarding policy and procedures.

Applicants for posts are clearly informed that positions are exempt from the Rehabilitation of Offenders Act 1974. We ensure that we meet our responsibilities under the Safeguarding Vulnerable Groups Act 2006.

Where applicants are rejected because of information that has been disclosed, we will inform the applicant about their right to know and to challenge incorrect information.

We comply with the Safeguarding and Welfare Requirements in the Statutory Framework for the Early Years Foundation Stage (EYFS) 2021 and the Compulsory Childcare Register, [Keeping Children Safe in Education 2021](#) in respect of references and Enhanced Disclosure and Barring Service checks for staff and volunteers to ensure that no disqualified or unsuitable person works with or has access to the children.

We have procedures for recording the details of visitors, including prospective candidates, to the setting and ensure that we have control over who comes into the premises so that no unauthorised person has unsupervised access to the children.

2.17 Staff Supervision (including students and volunteers)

To ensure that all staff are alert to any issues for concern, staff receive regular training and updates in safeguarding and child protection through a range of training and supervision activities. This includes both formal and informal supervision, annual appraisals, staff meetings and access to SSCP approved training. Individual supervision offers staff an opportunity to receive coaching to improve their practice with children and address any issues resulting in poor performance. Individual supervision also provides a safe space in which to raise any concerns they may have about the conduct of other adults connected with the setting.

Staff supervision is also used to ensure that all staff remain suitable to work with children. If a member of staff is taking medication which may affect their ability to care for children, the staff member should seek medical advice. The setting will ensure that staff members only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member's ability to look after children properly.

Staff are also required to disclose any information, which may lead to their disqualification as outlined in The Statutory Framework for the EYFS 2021 3.14-3.18 and Keeping Children Safe in Education 2021.

2.18 Resolution of professional disagreements

When practitioners are working together in the complex business of safeguarding children there will inevitably be occasions when there are professional differences of opinion or concerns about practice decisions, actions or lack of actions to a referral, assessment or the progress of child's plan. In these circumstances practitioners have a duty to take action to address professional disagreements as soon as they arise in a way that is appropriate and proportionate

Examples of case-specific professional disagreements include:

- When there is disagreement about the response to a referral made by one agency to another agency or service (e.g. decision making).
- When there is disagreement about the outcome of an assessment.
- When there is serious concern about the implementation of a child's Plan and disagreement about how this should be addressed (e.g. agreed actions not being followed through).
- When there is serious concern about the effectiveness of a child's Plan in bringing about the necessary changes and disagreement about how this should be addressed (e.g. drift/delay).
- When there is disagreement over the sharing of information in a case.

Designated Safeguarding Leads and managers will consult with the procedures for resolving professional disagreements by accessing it on the [West Midlands Child Protection Procedures website](#) . Designated Safeguarding Leads will record any actions taken and outcomes on file.

Signature:	Date Policy adopted:
Position	Review Date:

Staff Name	Staff Signature	Date

Appendix A

Early Years

The role of the Designated Safeguarding Lead

The Registered Person/Body should ensure an appropriate practitioner must be designated to take lead responsibility for safeguarding children as the designated safeguarding lead.

The designated safeguarding lead should take lead responsibility for safeguarding and child protection (including online safety). This should be explicit in the role holder's job description.

This person should have the appropriate status and authority within the setting to carry out the duties of the post. The role of the designated safeguarding lead carries a significant level of responsibility, and they should be given the additional time, funding, training, resources and support they need to carry out the role effectively.

Their additional responsibilities include providing advice and support to other staff on child welfare, safeguarding and child protection matters, taking part in strategy discussions and interagency meetings, and/or supporting other staff to do so, and to contributing to the assessment of children.

Deputy designated safeguarding leads

It is a matter for individual settings as to whether they choose to have one or more deputy designated safeguarding leads. Any deputies should be trained to the same standard as the designated safeguarding lead and the role should be explicit in their job description.

Whilst the activities of the designated safeguarding lead can be delegated to appropriately trained deputies, the ultimate lead responsibility for child protection, as set out above, remains with the designated safeguarding lead, this lead responsibility should not be delegated.

Availability

There must be a designated safeguarding lead (or a deputy) always available for staff in the setting to discuss any safeguarding concerns.

Whilst generally speaking the designated safeguarding lead (or deputy) would be expected to be available in person, it is a matter for individual settings, working with the designated safeguarding lead, to define what "available" means and whether in exceptional circumstances availability via phone and or Skype or other such media is acceptable.

It is a matter for the setting and the designated safeguarding lead to arrange adequate and appropriate cover arrangements for any out of hours/out of term activities.

Manage referrals

The designated safeguarding lead is expected to refer cases:

- of suspected abuse and neglect to the local authority children's social care as required and support staff who make referrals to local authority children's social care;
- to the Channel programme where there is a radicalisation concern as required and support staff who make referrals to the Channel programme;

- where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required; and
- where a crime may have been committed to the Police as required. NPCC - When to call the police should help understand when to consider calling the police and what to expect when working with the police.

Working with others

The designated safeguarding lead is expected to:

- act as a source of support, advice and expertise for all staff;
- act as a point of contact with the safeguarding partners;
- liaise with the headteacher or principal to inform him or her of issues- especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
- as required, liaise with the “case manager” (as per Part four) and the local authority designated officer(s) (LADO) for child protection concerns in cases which concern a staff member;
- liaise with staff (especially special educational needs coordinators (SENCOs), or the named person with oversight for SEN in a setting) on matters of safety and safeguarding and welfare (including online and digital safety) and when deciding whether to make a referral by liaising with relevant agencies so that children’s needs are considered holistically;
- promote supportive engagement with parents and/or carers in safeguarding and promoting the welfare of children, including where families may be facing challenging circumstances;
- work with the Registered Person/Body and relevant senior staff, taking lead responsibility for promoting educational outcomes by knowing the welfare, safeguarding and child protection issues that children in need are experiencing, or have experienced, and identifying the impact that these issues might be having on children’s attendance, engagement and achievement at the setting. This includes:
- ensure that the setting knows who its cohort of children who have or have had a social worker are, understanding their academic progress and attainment, and maintaining a culture of high aspirations for this cohort; and,
- support staff to provide additional academic support or reasonable adjustments to help children who have or have had a social worker reach their potential, recognising that even when statutory social care intervention has ended, there is still a lasting impact on children’s educational outcomes.

Information sharing and managing the child protection file

The designated safeguarding lead is responsible for ensuring that child protection files are kept up to date. Information should be kept confidential and stored securely. It is good practice to keep concerns and referrals in a separate child protection file for each child.

Records should include:

- a clear and comprehensive summary of the concern;

- details of how the concern was followed up and resolved;
- a note of any action taken, decisions reached and the outcome.

They should ensure the file is only accessed by those who need to see it and where the file or content within it is shared, this happens in line with information sharing guidance.

Where children leave the setting the designated safeguarding lead should ensure their child protection file is transferred to the new setting/school as soon as possible. This should be transferred separately from any other files on the child being shared, ensuring secure transit, and confirmation of receipt should be obtained.

Receiving settings/schools should ensure key staff such as designated safeguarding leads and SENCOs, are aware as required. Lack of information about their circumstances can impact on the child's safety, welfare and educational outcomes. In addition to the child protection file, the designated safeguarding lead should also consider if it would be appropriate to share any additional information with the new setting/school in advance of a child leaving to help them put in place the right support to safeguard this child and to help the child thrive in the next setting/school. For example, information that would allow the new setting/school to continue supporting children who have had a social worker and been victims of abuse and have that support in place for when the child arrives.

Raising Awareness

The designated safeguarding lead should:

- ensure each member of staff has access to, and understands, the setting's child protection policy and procedures, especially new and part-time staff;
- ensure the setting's child protection policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with the Registered Person/Body regarding this;
- ensure the child protection policy is available publicly and parents know referrals about suspected abuse or neglect may be made and the role of the setting in this;
- link with the safeguarding partner arrangements to make sure staff are aware of any training opportunities and the latest local policies, procedures and guidance and required audit processes from the Shropshire Safeguarding Community Partnership (SSCP).
- help promote educational outcomes by sharing the information about the welfare, safeguarding and child protection issues that children who have or have had a social worker are experiencing with appropriate staff.

Training, knowledge and skills

The designated safeguarding lead (and any deputies) should undergo training to provide them with the knowledge and skills required to carry out the role.

The designated safeguarding lead should undertake Prevent awareness training. Training should provide designated safeguarding leads with a good understanding of their own role, how to identify, understand and respond to specific needs that can increase the vulnerability of children, as well as specific harms that can put children at risk, and the processes, procedures and responsibilities of other agencies, particularly children's social care, so they:

- understand the assessment process for providing early help and statutory intervention, including local criteria for action and local authority children's social care referral arrangements;
- have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so;
- understand the importance of the role the designated safeguarding lead has in providing information and support to children social care in order to safeguard and promote the welfare of children;
- understand the lasting impact that adversity and trauma can have, including on children's behaviour, mental health and wellbeing, and what is needed in responding to this in promoting educational outcomes;
- are alert to the specific needs of children in need, those with special educational needs and disabilities (SEND), those with relevant health conditions and young carers;
- understand the importance of information sharing, both within the setting, and with the safeguarding partners, other agencies, organisations and practitioners;
- understand and support the setting with regards to the requirements of the Prevent duty and can provide advice and support to staff on protecting children from the risk of radicalisation;
- can understand the unique risks associated with online safety and be confident that they have the relevant knowledge and up to date capability required to keep children safe;
- can recognise the additional risks that children with special educational needs and disabilities (SEND) face online, for example, from online bullying, grooming and radicalisation and are confident they have the capability to support children with SEND to stay safe online;
- obtain access to resources and attend any relevant or refresher training courses; and,
- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the setting may put in place to protect them.

In addition to the formal training set out above, their knowledge and skills should be refreshed (this might be via e-bulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, and at least annually, to allow them to understand and keep up with any developments relevant to their role.

Providing support to staff

Training should support the designated safeguarding lead in developing expertise, so they can support and advise staff and help them feel confident on welfare, safeguarding and child protection matters. This includes specifically to:

- ensure that staff are supported during the referrals processes; and
- support staff to consider how safeguarding, welfare and educational outcomes are linked.

Listen to the voice of children and understand their views.

It is important that children feel heard and understood. Therefore, designated safeguarding leads should be supported in developing knowledge and skills to:

- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, and in any measures the setting may put in place to protect them; and
- understand the difficulties that children may have in approaching staff about their circumstances and consider how to build trusted relationships which facilitate communication

Holding and sharing information

The critical importance of recording, holding, using and sharing information effectively is set out in the Statutory Framework for the Early Years Foundation Stage (2021) Section 3 – The Safeguarding and Welfare Requirements 3.69 – 3.72 and the Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers 2018 and therefore the designated safeguarding lead should be equipped to:

- understand the importance of information sharing, both within the setting and with other setting's/school's on transfer, and with the safeguarding partners, other agencies, organisations and practitioners;
- understand relevant data protection legislation and regulations, especially the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR); and
- be able to keep detailed, accurate, secure written records of concerns and referrals and understand the purpose of this record-keeping

Appendix B

FILE TRANSFER RECORD AND RECEIPT

PART 1: To be completed by sending / transferring setting, school or college

NAME OF CHILD:	
DOB:	
NAME OF SCHOOL/SETTING SENDING CP FILE:	
ADDRESS OF SCHOOL/SETTING SENDING CP FILE:	
METHOD OF DELIVERY:	BY HAND SECURE POST ELECTRONICALLY
DATE FILE SENT:	
NAME OF DSL TRANSFERRING FILE:	
NAME OF PERSON TRANSFERRING TO:	
SIGNATURE:	

PART 2: To be completed by receiving setting, school or college

NAME OF SCHOOL/SETTING RECEIVING FILE:	
ADDRESS OF SCHOOL/SETTING RECEIVING FILE:	
DATE RECEIVED:	
NAME OF PERSON RECEIVING FILE:	
DATE CONFIRMATION OF RECEIPT SENT:	
SIGNATURE:	

Receiving School: Please complete Part 2 and return this form to the Designated Safeguarding Lead listed in Part 1 above. You are advised to keep a copy for your own reference.

Appendix C

Fundamental British Values in the Early Years

Democracy: making decisions together

As part of the focus on self-confidence and self-awareness as cited in Personal, Social and Emotional Development:

- Managers and staff can encourage children to see their role in the bigger picture, encouraging children to know their views count, value each other's views and values and talk about their feelings, for example when they do or do not need help. When appropriate demonstrate democracy in action, for example, children sharing views on what the theme of their role play area could be with a show of hands.
- Staff can support the decisions that children make and provide activities that involve turn taking, sharing and collaboration. Children should be given opportunities to develop enquiring minds in an atmosphere where questions are valued.

Rule of law: understanding rules matter as cited in Personal Social and Emotional development

As part of the focus on managing feelings and behaviour:

- Staff can ensure that children understand their own and others' behaviour and its consequences and learn to distinguish right from wrong.
- Staff can collaborate with children to create the rules and the codes of behaviour, for example, to agree the rules about tidying up and ensure that all children understand rules apply to everyone.

Individual liberty: freedom for all

As part of the focus on self-confidence & self-awareness and people & communities as cited in Personal Social and Emotional development and Understanding the World:

- Children should develop a positive sense of themselves. Staff can provide opportunities for children to develop their self-knowledge, self-esteem and increase their confidence in their own abilities, for example through allowing children to take risks on an obstacle course, mixing colours, talking about their experiences and learning.
- Staff should encourage a range of experiences that allow children to explore the language of feelings and responsibility, reflect on their differences and understand we are free to have different opinions, for example in a small group discuss what they feel about transferring into Reception Class.

Mutual respect and tolerance: treat others as you want to be treated

As part of the focus on people & communities, managing feelings & behaviour and making relationships as cited in Personal Social and Emotional development and Understanding the World:

- Managers and leaders should create an ethos of inclusivity and tolerance where views, faiths, cultures and races are valued, and children are engaged with the wider community.
- Children should acquire a tolerance and appreciation of and respect for their own and other cultures; know about similarities and differences between themselves and others and among families, faiths, communities, cultures and traditions and share and discuss practices, celebrations and experiences.

Staff should encourage and explain the importance of tolerant behaviours such as sharing and respecting other's opinions.

Staff should promote diverse attitudes and challenge stereotypes, for example, sharing stories that reflect and value the diversity of children's experiences and providing resources and activities that challenge gender, cultural and racial stereotyping.

A minimum approach, for example having notices on the walls or multi-faith books on the shelves will fall short of 'actively promoting'.

It is NOT acceptable to:

- actively promote intolerance of other faiths, cultures and races
- fail to challenge gender stereotypes and routinely segregate girls and boys
- isolate children from their wider community
- fail to challenge behaviours (whether of staff, children or parents) that are not in line with the fundamental British values of democracy, rule of law, individual liberty, mutual respect and tolerance for those with different faiths and beliefs

Appendix D

Serious injuries, accidents and illnesses

The setting must tell Ofsted about any of the following in relation to serious injuries, accidents and illnesses:

- the death of a child
- anything that requires resuscitation
- admittance to hospital for more than 24 hours
- a broken bone or fracture
- dislocation of any major joint, such as the shoulder, knee, hip or elbow
- any loss of consciousness
- severe breathing difficulties, including asphyxia
- anything leading to hypothermia or heat-induced illness
- any confirmed cases of coronavirus (COVID-19) in staff or children

Minor injuries

The setting does not need to tell Ofsted about minor injuries, even if treated at a hospital (for less than 24 hours). These include:

- animal and insect bites, such as a bee sting that doesn't cause an allergic reaction
- sprains, strains and bruising, for example if a child sprains their wrist tripping over their shoelaces
- cuts and grazes
- minor burns and scalds
- dislocation of minor joints, such as a finger or toe
- wound infections

Eyes

The setting must report to Ofsted if a child suffers any loss of sight, whether it is temporary or permanent. You must also tell us about any:

- penetrating injury to the child's eye
- chemical or hot metal burn to the child's eye

Substances and electricity

If a child in our care suffers any injury from, or requires medical treatment for, any of the following situations we must tell Ofsted:

- from absorption of any substance:
 - by inhalation
 - by ingestion
 - through the skin
- from an electric shock or electrical burn
- where there is reason to believe it resulted from exposure to:
 - a harmful substance
 - a biological agent
 - a toxin
 - an infected material

The setting must fulfil our legal requirements and submit the online report to Ofsted as soon as reasonably practicable, but no later than 14 days by completing the on-line reporting process at <https://www.gov.uk/guidance/report-a-serious-childcare-incident>

Insert school logo

Appendix E

CONCERN REPORTING FORM

Logging a concern about a child's safety or welfare

Part 1 – For staff use

Child Name:			
Date of birth:		Year Group / class:	
Name of referrer:		Role of referrer:	
Details of concern:	<p><i>(Use body map if appropriate)</i></p> <p><i>What are you worried about? Who? What (if recording a verbal disclosure by a child use their words)? Where? When (date and time of incident)? Any witnesses?</i></p> <p><i>What is the pupil's account/perspective?</i></p>		
Reported to:		Role of person reported to:	
Signed:			
Date:			

Part 2: For DSL/Deputy DSL to complete

Action taken:		Advice sought: <i>(from whom and what was advice given)</i>	
Concern / referral discussed with parent / carer? If yes note discussion		If not, state reasons why	
Referral made: <i>Record names of individuals/agencies who have given information regarding outcome of any referral (if made).</i>		If not, state reasons why	
Feedback to referring member of staff:			By whom
Response to / action taken with pupil:			By whom
Other notes / information: <i>When making a referral about an acute specialist need/child protection follow up with a MARF</i> Any other action required:			
Signature of DSL		Date	

The Local Authority Designated Officer (LADO)

Duty to refer

In addition to informing Ofsted, the Case Manager (e.g., Registered Person, Designated Safeguarding Lead) has a duty to refer any concerns to the LADO where it is alleged that a person who works* with children has:

- behaved in a way that has harmed a child, or may have harmed a child and/or;
- possibly committed a criminal offence against or related to a child and/or;
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

Responsibility would also include reporting applications to work or volunteer with children and young people from adults who are barred from doing so as this poses a potential risk of significant harm to children and young people.

The LADO should be informed of ALL allegations that come to the Registered Persons/Designated Safeguarding Lead's (DSL) attention within 1 working day of the manager becoming aware of the allegation.

In cases where the nature of the allegation has not required immediate referral to the Compass or the Police, the Registered Person/DSL and the LADO will decide jointly as to whether such a referral is necessary and who will make it.

The LADO should also be informed of any allegations that are made directly to the police or Compass. **It is important that even apparently less serious allegations are seen to be followed up objectively by someone independent of the organisation concerned. Therefore, the LADO should be informed of ALL allegations that come to the employers' attention.**

The role of the Local Authority Designated Officer

The LADO will advise the employer of any action that may be necessary, whether an investigation will take place, and if so, what form the investigation will take. It is their role to provide on-going advice and liaison and to monitor the progress of cases. This may include:

- Advising the employer on next steps, such as the need to inform the child's parents; advice on dismissal or suspension of the member of staff accused; the decision as to whether the case will be investigated and by whom.
- Regularly monitoring the progress of cases to ensure that they are dealt with as quickly as possible consistent with a fair and thorough process.
- Liaising with the employer to provide advice and support when required/requested.
- Oversight and management of individual cases.

If an allegation is substantiated and the employer dismisses the person or ceases to use that person's services, the employer should consult with the LADO about whether a referral to the Disclosure and Barring Service is required.

Referral to the LADO should form part of your disciplinary and whistleblowing procedures.

The role of the setting's Designated Safeguarding Lead

The DSL or Registered Person making the referral will be expected to play a key role in the investigative process and follow the advice given by the LADO. This may involve:

- Gathering any additional information which may have a bearing on the allegation, for instance: previous concerns, care and control incidents and so on;
- Providing the subject of the allegation with information and advising them to inform their union or professional body;
- Attending Strategy Meetings where required;
- Liaising with the LADO;
- Ensuring that risk assessments are undertaken where and when required;
- Ensuring that effective reporting and recording systems are in place which allow for the tracking of allegations through to the outcome;
- Should the allegation be unfounded, considering a referral either to Compass or the police if the allegation is deemed to be deliberately malicious or invented.

Record keeping

It is important that employers keep a clear and comprehensive summary of any allegations made, details of how the allegation was followed up and resolved. This record should be placed on the person's confidential personnel file with a copy given to the individual.

The record should be kept at least until the person reaches retirement or for ten years if that would be longer.

The purpose of the record is to enable accurate information to be given in response to any future request for a reference.

Details of allegations that are found to be malicious should be removed from personnel records.

For further information see localised child protection procedures for West Midlands:

<https://westmidlands.procedures.org.uk/local-content/ygjN/localised-content-lado-managing-allegations/?b=Shropshire>

*The term 'works with children' refers to any individual employed to work with children or acting in a voluntary capacity.

Please note: Registered providers must inform Ofsted of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere). Registered providers must also notify Ofsted of the action taken in respect of the allegations. These notifications must be made **as soon as is reasonably practicable**, but at the latest within 14 days of the allegations being made. A registered provider who, without reasonable excuse, fails to comply with this requirement, commits an offence.