








Safeguarding and Child Protection

We work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect, helped to thrive and to be safe from any abuse in whatever form. As part of our nursery ethos we aim to provide a happy, secure environment where children, parents, carers, and staff feel safe, welcomed and valued.

We support the children within our care, protect them from maltreatment and have robust procedures in place to prevent the impairment of children's health and development. Safeguarding is a much wider subject than the elements covered within this single policy, therefore this document should be used in conjunction with the nursery's other policies and procedures.





Every team member of Millennium Minis has a 'Duty of Care' in relation to health, development, safety and welfare of all children and vulnerable adults. We recognise that the community of the children and families to whom we provide a service is diverse in culture, racial background, religion and social class. Whilst individual family differences will be respected they will not be viewed as a valid explanation for clear harm to any child or adult. Our overall responsibility is towards the child as laid down in the 'keeping children safe in education, September 2016' guidance, although we will always work closely in partnership with parents wherever possible.

To safeguard children and promote their welfare we will

-  Create an environment to encourage children to develop a positive self-image
-  Provide positive role models
-  Encourage children to develop a sense of independence and autonomy in a way that is appropriate to their age and stage of development
-  Provide a safe and secure environment for all children
-  Always listen to children
-  Provide an environment where practitioners are confident to identify where children and families may need intervention and seek the help they need
-  Share information with other agencies as appropriate.

Our prime responsibility is the welfare and well-being of each child in our care. As such we believe we have a duty to the children, parents and staff to act quickly and responsibly in any instance that may come to our attention. This includes sharing information with any relevant agencies such as local authority services for children's social care, health professionals or the police. All staff will work with other agencies including as part of a multi-agency team, where needed, in the best interests of the child.

Safeguarding and promoting the welfare of children, in relation to this policy is defined as

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

The nursery aims to

- ✿ Keep the child at the centre of all we do
- ✿ Ensure staff are trained to understand the safeguarding policy and procedures, are alert to identify possible signs of abuse, understand what is meant by child protection and are aware of the different ways in which children can be harmed, including by other children through bullying or discriminatory behaviour
- ✿ Ensure that all staff feel confident and supported to act in the best interest of the child share information and seek the help that the child may need
- ✿ Ensure that all staff are familiar and updated regularly with child protection training and procedures and kept informed of changes to local/national procedures
- ✿ Make any referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the Local Safeguarding Children Board
- ✿ Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest
- ✿ Ensure that children are never placed at risk while in the charge of nursery staff
- ✿ Take any appropriate action relating to allegations of serious harm or abuse against any person working with children, or living or working on the nursery premises including reporting such allegations to Ofsted and other relevant authorities
- ✿ Ensure parents are fully aware of Safeguarding policies and procedures when they register with the nursery and are kept informed of all updates when they occur
- ✿ Regularly review and update this policy with staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by the Local Safeguarding Children Board.

Designated Safeguarding Lead and Essential Contacts:

Minis:

Millennium Minis Designated Safeguarding Lead: Lorraine Smith, Nursery Manager

Minis Designated Safeguarding Deputy: Julie Coackley, Childcare Director

Local Authority:

Greenwich Multiagency Safeguarding Hub (MASH): 020 8921 3172

Social Care and Safeguarding Emergency Duty Team: 020 8854 8888

Designated Officer (DO aka LADO) Manager: Winsome Collins; 020 8921 3930

Greenwich Safeguarding Children's Board: 020 89214477

NSPCC whistleblowing helpline: 0800 028 0285.

These contacts are displayed in each office, playroom and team room.

Procedures to follow if you are concerned a child is being abused

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by harming them, or by failing to act to prevent harm. Children may be abused within a family, institution, or community setting by those known to them or a stranger. This could be an adult or adults, another child or children.

If you feel a child is in immediate danger or risk of harm a referral should be made to children's social care and/or the police immediately. Anyone can make a referral. If you wish to make an immediate referral, please call the Royal Borough of Greenwich MASH (Multi-Agency Safeguarding Hub) team. Alternatively contact the NSPCC whistleblowing helpline.

The nursery is aware that abuse does occur in our society and we are vigilant in identifying signs of abuse and reporting concerns. Our practitioners have a duty to protect and promote the welfare of children. Due to the many hours of care we are providing, team may often be the first people to identify that there may be a problem. They may well be the first people in whom children confide information that may suggest abuse or to spot changes in a child's behaviour which may indicate abuse.

Minis 5-point plan to dealing with a safeguarding concern:

Stage one: Recognise

Stage two: Respond

Stage three: Report

➤ Injuries from home







Stage four: Record

Stage five: Review

Recognise a possible concern

The signs and indicators listed below may not necessarily indicate that a child has been abused, but will help us to recognise that something may be wrong, especially if a child shows a number of these symptoms or any of them to a marked degree.

Indicators of child abuse

-  Failure to thrive and meet developmental milestones
-  Fearful or withdrawn tendencies
-  Aggressive behaviour
-  Unexplained injuries to a child or conflicting reports from parents or staff
-  Repeated injuries
-  Unaddressed illnesses or injuries.

Respond appropriately

We will support children by offering reassurance, comfort and sensitive interactions. We will devise activities according to individual circumstances to enable children to develop confidence and self-esteem within their peer group.

Take time to listen to the child, allow them time to talk if disclosing, ask open questions and do not put words in their mouth.

Do not promise to keep it a secret, explain that they have done the right thing and that you will need to tell someone.

If you observe a mark on a child maintain the child's dignity and discreetly ask the room lead or manager to look at the mark of concern.

If an adult discloses a child protection concern ensure you give them time to talk, take the parent into the office or a private space to discuss their concerns. Support them with finding safety if needed.

Report or refer your concerns

As soon as possible after a disclosure or concern raised details must be logged accurately.

Team must report concerns to the Designated Safeguarding Lead (DSL) immediately, in their absence they should report to the Safeguarding Deputy.

It may be thought necessary that through discussion with all concerned the matter needs to be raised with the local authority children's social care team and Ofsted. The DSL and team maybe involved to supply details of any information/concerns they have with regard to a child, a referral to the Multi Agency safeguarding Hub (MASH) may be required and the nursery expects all members of staff to co-operate with the local authority children's social care, police, and Ofsted in any way necessary to ensure the safety of the children.

➤ Injuries from home











All signs of marks/injuries on a child, when they come into nursery will be recorded as soon as noticed by a staff member on an accident form, clearly labelled: INJURY FROM HOME

The incident will be discussed with the parent at the earliest opportunity and the parent will be asked to sign the completed accident form.

If there appear to be any queries regarding the injury, the frequency of injuries or concerns for the child's welfare the matter will be escalated as a safeguarding concern in line with this policy.

Record your observations, concerns and actions

Team should make an objective record of any observation or disclosure, supported by the Designated Safeguarding Lead, within 48 hours. This record should include:

-  Child's name
-  Child's address
-  Age of the child and date of birth
-  Date and time of the observation or the disclosure
-  Exact words spoken by the child
-  Exact position and type of any injuries or marks seen (use the body map on the accident form)
-  Exact observation of any incident including any other witnesses
-  Name of the person to whom any concern was reported, with date and time; and the names of any other person present at the time
-  Actions to be taken by the team member or DSL
-  Any discussion held with the parent(s) (where deemed appropriate).

These records should be signed by the person reporting this and the DSL, dated and kept in a separate confidential file.

Staff must not make any comments either publicly or in private about a parent or staffs supposed or actual behaviour.

Review and continue to monitor

All safeguarding concerns are reviewed at bimonthly managers meetings. Any follow up actions or enquiries are agreed and carried out by the DSL. In the case of a serious incident this monitoring would be more frequent.

Practitioners working directly with the children should continue to be vigilant for and further signs of abuse. Keyworkers should continue to work closely with parents and continue to build positive relationships.

When a case has been referred contact the MASH team or link social worker for regular updates.

Follow up may include attending Team Around the Child meetings, Child Protection Conference.

Types of abuse, physical and behavioural signs:

Physical Abuse	
Deliberately causing physical harm to a child. It can involve hitting, kicking, burning, shaking or throwing things. This also includes fabricated or induced illness and FGM.	
Physical Signs	Behavioural Signs
Unexplained injuries – bruises, cuts, welts, abrasions, burns or fractures. Broken bones (especially under 2 years old). Can't recall or unconvincing inconsistent reasons given for injuries. Injuries untreated or inadequately treated. Injuries on parts of the body where accidental injury is unlikely like cheeks, chest or thighs. Bruising that appears to be finger or hand prints. Cigarette burns or human bite marks Scalds, particularly upward splash marks on the body (caused from standing in scalding water).	Child wary of adults or a specific individual. Child appears frightened of parents or unnaturally compliant. Aggressive behaviour or severe outbursts. Extremely withdrawn. Changes in behaviour or mood. Shows fear of going home. Flinches when touched or approached. Cruel to animals or others. Aggressive play or acts out violent behaviour

Emotional Abuse	
The ongoing emotional mistreatment of a child. It is sometimes called psychological abuse and can seriously damage a child's emotional health and development. Emotional abuse can involve conveying they are worthless or unloved, deliberately trying to scare or humiliate a child or bullying, isolating or ignoring them. All abuse involves some level of emotional abuse, but it can occur alone.	
Physical Signs	Behavioural Signs
Failure to grow or thrive. Suddenly develops speech disorder. Delayed physical or emotional development and not attained significant developmental milestones.	Compulsive nervous behaviours like hair chewing, rocking. Excessive lack of confidence. Excessive fear of making mistakes. Unable to cope with praise.

<p>Bed-wetting or bed soiling that has no medical cause.</p> <p>Frequent psychosomatic symptoms - headaches, nausea, abdominal pains.</p> <p>Prolonged vomiting or diarrhoea.</p> <p>Dressed differently from other children in the family.</p> <p>Has deprived physical living conditions compared with other children in the family.</p>	<p>Symptoms of depression, anxiety, withdrawal or aggression.</p> <p>Self-harm.</p> <p>Overly compliant; too well-mannered; too neat and clean.</p> <p>Displays attention seeking behaviours or displays extreme inhibition in play.</p> <p>When at play, behaviour may model or copy negative behaviour and language used at home</p>
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Neglect	
<p>Is the ongoing failure to meet the needs of a child's basic physical and emotional needs, 'likely to result in the serious impairment of their health or development'. A child may be hungry or dirty, without adequate clothing, shelter, supervision, medical or health care. A child may be put in danger or not protected from physical or emotional harm.</p>	
Physical Signs	Behavioural Signs
<p>Failure to grow or thrive.</p> <p>Child is constantly hungry, losing weight or constantly underweight.</p> <p>Is often unkempt, dirty or smelly. Nappies are not changed.</p> <p>Is dressed inappropriately for the weather.</p> <p>Severe nappy rash or skin disorders due to lack of hygiene.</p> <p>Untreated medical conditions – no treatment for illness or injury.</p> <p>Child is frequently tired.</p> <p>Attendance is sporadic or always late.</p> <p>Not meeting developmental milestones.</p>	<p>Demonstrates a severe lack of attachment to adults.</p> <p>Poor social skills.</p> <p>Very demanding of affection and attention – may be very clingy.</p> <p>Compulsively steals or scavenges for food.</p> <p>No understanding of basic hygiene</p>

Sexual Abuse	
<p>Is forcing or persuading a child to take part in sexual activities, whether or not the child is aware of what is happening. This can include physical contact or non-contact activities, such as exposure to porn or sexual language.</p>	
Physical Signs	Behavioural Signs
<p>Torn, stained or bloody underclothing.</p> <p>Bruises, lacerations, redness, swelling or bleeding in genital, vaginal or anal area.</p> <p>Blood in urine or faeces.</p> <p>Sexually transmitted disease.</p> <p>Unusual or excessive itching or pain in the genital or anal area.</p> <p>Issues with toileting – wetting and soiling</p> <p>Uncomfortable when having nappy changed.</p>	<p>Sexualised behaviour and age-inappropriate sexual play with toys, self or others.</p> <p>Sophisticated or unusual sexual knowledge, language or drawings.</p> <p>Comments such as "I've got a secret".</p> <p>Sudden or unexplained changes in behaviour.</p> <p>Fear of certain places eg bedroom or bathroom.</p>

Other Types of Abuse
<p><u>Female genital mutilation (FGM)</u></p> <p>We work in conjunction with the Governments Policy on 'Multi-agency guidance on female genital mutilation' (FGM). This type of physical abuse is practised as a cultural ritual by certa</p>

ethnic groups and there is now more awareness of its prevalence in some communities in England including its effect on the child and any other siblings involved. Symptoms may include bleeding, painful areas, and acute urinary retention, urinary infection, wound infection, septicaemia, and incontinence, vaginal and pelvic infections with depression and post-traumatic stress disorder as physiological concerns. If you have concerns about a child in this area, you should contact children's social care team in the same way as other types of physical abuse.

Fabricated illness

This is also a type of physical abuse. This is where a child is presented with an illness that is fabricated by the adult carer. The carer may seek out unnecessary medical treatment or investigation. The signs may include a carer exaggerating a real illness or symptoms, complete fabrication of symptoms or inducing physical illness, e.g. through poisoning, starvation, inappropriate diet. This may also be presented through false allegations of abuse or encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.




Prevent

From 1 July 2015 all schools, registered early years childcare providers and registered later years childcare providers (referred to in this advice as 'childcare providers') are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism". This duty is known as the Prevent duty. It applies to a wide range of public-facing bodies.

See Prevent Policy

Children with SEND

We recognise children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. We would look out for the following indicators:

-  assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
-  children with SEN and disabilities can be disproportionately impacted by things like bullying- without outwardly showing any signs; and
-  communication barriers and difficulties in overcoming these barriers.

Confidentiality

All suspicions, enquiries and external investigations are kept confidential and shared only with those who need to know. Any information is shared in line with guidance from the LSCB. See Confidentiality Policy.

Informing parents

Parents are normally the first point of contact. If a suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of the LSCB/ local authority children's social care team/Police does not allow this. This will usually be the case

where the parent or family member is the likely abuser, or where a child may be endangered by this disclosure. In these cases, the investigating officers will inform parents.

Working in Partnership with parents and families

The nursery staff team will inform parents of their child protection duties from when the time a parent takes up a place within the nursery. We will also encourage parents to talk about any concerns they might have for either their own child or other children. The nursery takes every step in its power to build up trusting and supportive relations among families, staff, students and volunteers within the nursery.

The nursery continues to welcome the child and the family whilst enquiries are being made in relation to abuse in the home situation. Parents and families will be treated with respect in a non-judgmental manner whilst any external investigations are carried out in the best interests of the child.

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child, only if appropriate in line with guidance of the LSCB with the proviso that the care and safety of the child is paramount. We will do all in our power to support and work with the child's family.




Staffing and volunteering

We are vigilant in our recruitment procedures aiming to ensure all people working with children are suitable to do so. We are committed to ensuring the well-being and safety of all children is paramount. It is important that we have robust safer recruitment systems in place to safeguard and protect all children and team members. At Minis we follow this safer recruitment procedures each and every time we recruit a new member to join our team, including volunteers. See Safer Recruitment Policy.

Allegations against employees, students or volunteers of the nursery or any other person working on the premises



If an allegation is made against a member of staff, student or volunteer or any other person who works on the nursery premises regardless of whether the allegation relates to the nursery premises or elsewhere, we will follow the procedure below.

An allegation should not be confused with a complaint, is defined as a person working with children who 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 toward a child or children in a way that indicates they pose a risk of harm to children.

The allegation should be reported to the DSL. If this person is the subject of the allegation, then this should be reported to the Childcare Director or Owner.

The Local Authority Designated Officer (LADO), Ofsted (if the allegation grants OFSTED being made aware) and the LSCB will then be informed immediately in order for this to be investigated by the appropriate bodies promptly:

-  The LADO will be informed immediately for advice and guidance
-  A full investigation will be carried out by the appropriate professionals (LADO, Ofsted, LSCB) to determine how this will be handled

🌸 The nursery will follow all instructions from the LADO, Ofsted, LSCB and ask all staff members to do the same and co-operate where required

🌸 Support will be provided to all those involved in an allegation throughout the external investigation in line with LADO support and advice

🌸 The nursery reserves the right to suspend any member of staff during an investigation

🌸 All enquiries/external investigations/interviews will be documented and kept in a locked file for access by the relevant authorities

🌸 Unfounded allegations will result in all rights being re-instated

🌸 Founded allegations will be passed on to the relevant organisations including the local authority children's social care team and where an offence is believed to have been committed, the police, and will result in the termination of employment. Ofsted will be notified immediately of this decision. The nursery will also notify the Disclosure and Barring Service (DBS) to ensure their records are updated

🌸 All records will be kept until the person reaches normal retirement age or for 10 years if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary re-investigation

🌸 The nursery retains the right to dismiss any member of staff in connection with founded allegations following an inquiry

🌸 Counselling will be available for any member of the nursery who is affected by an allegation, their colleagues in the nursery and the parents.

Our nursery has a clear commitment to protecting children and promoting welfare. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of the DSL or owner at the earliest opportunity.

Legal framework

National Policies and Acts

🌸 What to do if you're worried a child is being abused – March 2015

🌸 Disqualification under the Childcare Act 2006 – August 2018

🌸 Keeping children safe in education – September 2018

🌸 Statutory Framework for the Early Years Foundation Stage (EYFS) – February 2018

🌸 Information sharing: Advice for practitioners providing safeguarding services – July 2018

🌸 Working together to safeguard children – February 2019

🌸 Protecting Children from Radicalisation: The Prevent Duty – August 2015

🌸 Prevent Duty Guidance – March 2016

🌸 Children Act 1989

🌸 Children Act 2004