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Keyham, Plymouth, PL2-1QS

www.pelican-childcare.co.uk

Policy on safeguarding children and child protection

(Including managing allegations of abuse against a member of staff)

Policy Statement

Our setting will work with children, parents and the community to ensure the rights and safety of children and to give them the very best start in life. Our safeguarding policy is based on three key commitments;

Procedures

We carry out the following procedures to ensure we meet the three key commitments in the policy.

Key commitment 1

Pelican children's centre is committed to building a "culture of safety" in which children are protected from abuse and harm in all areas of its service delivery.

Our designated person who co-ordinated child protection issues is Gareth Short

Our designated officer who oversees this work is Nikki Montgomery

We ensure all staff and parents are made aware of our safeguarding policies and procedures

We provide adequate and appropriate staffing resources to meet the needs of the children.

Applicants for posts within the setting are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.

Candidates are informed of the need to carry out “enhanced” disclosure checks with the Disclosure and Barring Service before posts can be confirmed.

Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.

We abide by Ofsted requirements in respect of references and Data and Barring Service for staff and volunteers, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.

Volunteers do not work unsupervised.

We abide by the Protection of Venerable Groups Act requirements in respect of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern.

We have procedures for recording the details of visitors to the setting.

We take security steps to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.

Key commitment 2

Pelican Children’s Centre is committed to responding promptly and appropriately to all incidents or concerns of abuse that may occur and to work with statutory agencies in accordance with the procedures that are set down in “What to do if you’re worried a child is being abused 2015”. Staff follow the procedures set down in this guidance by being alert to the signs of abuse, question behaviours, ask for help then, if we feel a child is in need, a referral will be made.

Signs of emotional abuse may include:

- Constant worry about doing something wrong.
- Speech problems or delays in learning and emotional development.
- Depression and low self-esteem.
- Doing poorly in school.
- Extreme behaviour, such as being way too obedient or way too demanding.
- Headaches and stomach-aches with no clear cause.

Signs of physical abuse may include:

- Frequent injuries or unexplained bruises, welts, or cuts.
- Is always watchful and “on alert,” as if waiting for something bad to happen.

- Injuries appear to have a pattern such as marks from a hand or belt.
- Shies away from touch, flinches at sudden movements, or seems afraid to go home.

Signs of neglect may include:

- Malnutrition, begging, stealing or hoarding food.
- Poor hygiene, matted hair, dirty skin or body odour.
- Unattended physical or medical problems.
- Comments from a child that no one is home to provide care.
- Being constantly tired.
- Frequent lateness or absence from school.

Signs of sexual abuse may include:

- Acting out in an inappropriate sexual way with toys or objects
- Nightmares, sleeping problems
- Becoming withdrawn or very clingy
- Becoming unusually secretive
- Sudden unexplained personality changes, mood swings and seeming insecure
- Regressing to younger behaviours, e.g. bedwetting
- Unaccountable fear of particular places or people
- Outburst of anger
- Changes in eating habits
- New adult words for body parts and no obvious source
- Talk of a new, older friend and unexplained money or gifts
- Self-harm (cutting, burning or other harmful activities)
- Physical signs, such as, unexplained soreness or bruises around genitals or mouth, sexually transmitted diseases, pregnancy
- Running away
- Not wanting to be alone with a particular child or young person

Any one sign doesn't mean that a child was or is being sexually abused, but the presence of several warning signs suggests that you should begin to ask questions and consider seeking help.

“What should you do if you think a child is being abused?”

There are four key steps to follow to help you to identify and respond appropriately to possible abuse and/or

Neglect. It may not always be appropriate to go through all four stages sequentially.

If a child is in immediate danger or is at risk of harm, you should refer to children's social care and/or the police.

Before doing so, you should try to establish the basic facts. However, it will be the role of social workers and the police to investigate cases and make a judgement on whether there should be a statutory intervention and/or a criminal investigation. You should record, in writing, all concerns and discussions about a child's welfare, the decisions made and the reasons for those decisions.

Being alert to signs of abuse and neglect

The first step is to be alert to the signs of abuse and neglect, to have read this document and to understand the procedures set out in your local multi-agency safeguarding arrangements. You should also consider what training would support you in your role and what is available in your area.

Questioning behaviours

The signs of child abuse might not always be obvious and a child might not tell anyone what is happening to them. You should therefore question behaviours if something seems unusual and try to speak to the child, alone, if appropriate, to seek further information. If a child reports, following a conversation you have initiated or otherwise, that they are being abused and neglected, you should listen to them, take their allegation seriously, and reassure them that you will take action to keep them safe. You will need to decide the most appropriate action to take, depending on the circumstances of the case, the seriousness of the child's allegation and the local multi-agency safeguarding

Arrangements in place. You might refer directly to children's social care and/or the police, or discuss your concerns with others and ask for help. At all times, you should explain to the child the action that you are taking. It is important to maintain

confidentiality, but you should not promise that you won't tell anyone, as you may need to do so in order to protect the child.

Asking for help

Concerns about a child's welfare can vary greatly in terms of their nature and seriousness, how they have been identified and over what duration they have arisen. If you have concerns about a child, you should ask for help.

You should discuss your concerns with your manager, a named or designated professional or a designated member of staff. For example:

For schools 'staff (both teaching and non-teaching), concerns should be reported via the schools' or colleges' designated safeguarding lead. The safeguarding lead will usually decide whether to make a referral to children's social care;

For early year's practitioners, the Early Years Foundation Stage sets out those providers should ensure that they have a practitioner who is designated to take a lead responsibility for safeguarding children who should liaise with local statutory children's services agencies.

Childminders should take that responsibility themselves and should notify children's care (in emergencies, the police) if they have concerns about the safety or welfare of a child;

For health practitioners, all providers of NHS funded health services should identify a named doctor and a named nurse (and a named midwife if the organisation provides maternity services) for safeguarding. GP practices should have a lead and deputy lead for safeguarding, who should work closely with named GPs. Named practitioners should promote good practice within their organisation, provide advice and expertise for fellow practitioners, and ensure safeguarding training is in place; and for the police, all forces have child abuse investigation units or teams, which normally take responsibility for investigating child abuse cases. If you are a police officer with concerns about a child or young person, you can speak to your child abuse investigation unit or team for advice.

You can also seek advice at any time from the NSPCC helpline –help@nspcc.org.uk or 0808 800 5000. Next steps might involve undertaking an early help assessment or making a referral directly to children's social care/the police.

If you have concerns about the safety or welfare of a child and feel they are not being acted upon by your

Manager or named/designated safeguarding lead, it is your responsibility to take action.

Early help assessment

Early help means providing support as soon as a problem emerges. As part of your area's local multi-agency safeguarding arrangements there will be processes in place around the assessment of children who may benefit from early help.

An early help assessment should be undertaken by a lead professional who should provide support to the child and family, act as an advocate on their behalf and coordinate the delivery of support services. Any frontline practitioner from any agency working with children, young people and families, including the voluntary and community sector, can undertake an early help assessment.

You might, therefore, act as the lead professional for an early help assessment, or be asked to participate in

Such an assessment. Whatever the case, you will need to work closely with other practitioners to decide whether the child and family would benefit from coordinated support from more than one agency.

Referring to children's social care

If, at any time, you believe that a child may be a child in need, or that a child is being harmed or is likely to be,

You should refer immediately to local authority children's social care. This referral can be made by any practitioner. If you see further signs of potential abuse and neglect, report and refer again.

When referring a child to children's social care, you should consider and include any information you have on the child's development needs and their parents'/carers' ability to respond to these needs within the context of their wider family and environment

Response to suspicions of abuse

We acknowledge that abuse of children can take different forms-physical, emotional, and sexual, as well as neglect.

When children are suffering from physical, sexual or emotional abuse, or may be experiencing neglect, this may be demonstrated through the things they say (direct or indirect disclosure) or through changes in their appearance, their behaviour, or their play.

Where such evidence is apparent, the child's key person makes a dated record of the details of the concern and discusses what to do with the setting Child Protection Officer who is the "designated person". The information is stored on the child's personal file in the Child Protection lockable cabinet.

We refer concerns to the local authority children's social care department and co-operate fully in any subsequent investigation.

NB In some cases this may mean the police or another agency identified by the Local safeguarding Children's Board.

We take care not to influence the outcome either through the way we speak to children or by asking questions of children.

We use the detailed procedures and reporting format contained in the guidelines set by the local authority when making referral to children, Young People and families Services or other appropriate agencies.

Recording suspicions of abuse and disclosures

Where a child makes comments to a member of staff that gives cause for concern (disclosure), observes signs or signals that gives cause for concerns, such as significant changes in behaviour, deterioration in general well-being, unexplained bruising, marks or signs of possible abuse or neglect that member of staff

Stop, listen and be attentive, stay calm, don't make promises, take the child seriously, Ask, open-ended questions, Tell the child what you are going to do, record the child's words.

Use the words, Tell me, Explain, Describe and Where, what, when, Who and how.

Does not question the child

Makes a written record that forms an objective record of the observation or disclosure that includes

The date and time of the observation or the disclosure

The exact words spoken by the child as far as possible

The name of the person to whom the concern was reported, with date and time, and

The names of any other person present at the time.

These records are signed and dated and kept in the child's personal Child Protection file which is kept securely and confidentially.

Making a referral to the Local Authority social care team

Our safeguarding officer will contact the Children Young People and Families services based on guidelines set by the Local Safeguarding board as well as recording the concern before making a referral. This is based on “What to do if you are worried a child is being abused 2015”

Step 1 Practitioner discusses concerns with CPO. (child protection officer).

Step 2 CPO considers which service the family would benefit from and most appropriate agency to refer to.

Step 3 CPO makes a referral to Plymouth Childrens Gateway Service.

Step 4 CPO follows up referral in writing within 48 hours.

Step 5 CPO contributes to initial core assessments as required and continues to work with the family as guided.

We keep a copy of this document and follow the detailed guidelines given.

All members of staff are familiar with Policy and follow the procedures for recording and reporting.

Informing Parents

We are obliged to share confidential information without authorisation from the person who provided it or to whom it relates where there is evidence and reasonable cause to believe that a child may be suffering or at risk of suffering significant harm. Please refer to our Policy on information sharing.

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 Local Safeguarding Children’s Board does not allow this.

This will usually be the case where the parents is the likely abuser. In these cases the investigating officers will inform parents/carers.

Liaison with other agencies

The Plymouth Assessment framework and Threshold Guidance for Safeguarding Children, Young People and their Families 2016 is used by all agencies. It will allow clarity and shared understanding of all the roles and responsibilities and will illuminate current procedures, as a tool for effective multi-agency working for child

protection. It sets out the assessment framework, levels of need, threshold guidance, threshold indicators, universal services, guidance on categories of child abuse and how to use the children's gateway service for support.

The gateway provides a direct point of contact for professionals and families requiring advice or guidance about how to support a child or young person who may be experiencing some developmental difficulties, parental difficulties or environmental difficulties. This is a level 1-3 service (but is also the referral route for children with level 4 complex disabilities) and consent should always endeavour to be sought. Gateway has access to Plymouth Referral and Assessment Service information and will escalate a concern to level 4 if necessary. Plymouth Referral and Assessment service including the hub is used if a practitioner has a level 4 safeguarding concern regarding a child and considers that a child is in need of specialist support from the Children's Social Care they should contact gateway within the Plymouth referral and Assessment team on 01752 668000.

Escalating procedures for child protection concerns will be followed when disputes cannot be resolved through discussion and negotiation between professionals at front line level. It does not include procedures when there is a disagreement regarding the need to convene at Initial Child Protection Conference or the implementation of the Child Protection Plan. For further information please see Escalation Policy.

We work within the Local Safeguarding Board guidelines.

We have a copy of "What to do if you're worried a child is being abused 2015" for parents and staff and all staff are familiar with that to do if they have concerns.

We have procedures for contacting the local authority on child protection issues, including maintaining a list of names, addresses and telephone numbers of social workers, to ensure that it is easy, in any emergency, for the setting and social services to work well together.

We notify the registration authority (Ofsted) of any incident or accident and any changes in our arrangements which may affect the wellbeing of children.

Contact details for the local National Society for the Prevention of Cruelty (NSPCC) are also kept.

If a referral is to be made to the local authority social care department, we act within the area's Safeguarding children and child protection guidance in deciding whether we must inform the child's parents at the same time.

Early help, known as a C.A.F.(Common Assessment Framework) meeting might be held to discuss the child's needs. Early help encourages practitioners to consider the needs of the child of young person and decide whether further support is needed for the child and family. Please see SENCO policy for procedures.

Working together to safeguard Children 2015 sets out how organizations and individuals should work together to safeguard and promote the welfare of children and young people in accordance with the children Act 1989 and the Children Act 2004. It is important that all practitioners working to safeguard children and young people understand fully their responsibilities and duties as set out in primary legislation and associated regulations and guidance.

Allegations against staff

We ensure that all parents know how to complain about the behaviour or actions of staff or volunteers within the setting, or anyone living or working on the premises occupied by the setting, which may include an allegation of abuse.

We follow the guidance of the local safeguarding children board when responding to any complaint that a member of staff or volunteer within the setting, or Anyone living or working on the premises. Occupied by the setting, has abused a child.

We respond to any disclosure by children or staff that abuse by a member of staff or volunteer within the setting or anyone living or working on the premises occupied by the setting, may have taken, or is taking place, by first recording the details of any such alleged incident.

We refer any such complaint immediately to the local authority's designated person who is Simon White, he can be contacted on, 01752 307144/simon.n.white@plymouth.gov.uk to investigate. We also report any such alleged incident to Ofsted and Plymouth Early Years Safeguarding and Welfare Department, describing what measures we have taken. We are aware that it is an offence not to do this.

We co-operate entirely with any investigation carried out by children's Young people and Families services, in conjunction with the police.

Where the management committee and children's social care agree it is appropriate in the circumstances, the chairperson will suspend the member of staff on full pay or the volunteer, for the duration of the investigation. 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 through the process.

Disciplinary action

Where a member of staff or volunteer has been dismissed due to engaging in activities that caused concern for the safeguarding of children or vulnerable adults, we will notify the Data Barring Service (DBS) of relevant information so that

individuals who pose a threat to children (and vulnerable groups), can be identified and barred from working with these groups.

Key commitment 3

Pelican Children's Centre is committed to promoting awareness of child abuse issues throughout its training and learning programmes for adults. It is also committed to empowering young children, through its early childhood curriculum, promoting their right to be strong, resilient and listened to.

Training

We seek out training opportunities for all adults involved in the setting to ensure that they are able to recognise the signs and signals of possible physical abuse, emotional abuse, sexual abuse and neglect and that they are aware of the local authority guidelines for making referrals.

We ensure that all staff know the procedures for reporting and recording their concerns in the setting.

Planning

The layout of the rooms allows for constant supervision. No child is left alone with staff or volunteers in a one-to-one situation without being visible to others. CCTV cameras are in place in all rooms.

Curriculum

We introduce key elements of keeping children safe into our programme to promote the personal, social and emotional development of all children, so that they may grow to be strong, resilient and listened to and that they develop an understanding of why and how to keep safe.

We create within the setting a culture of value and respect for the individual, having positive regard for children's heritage arising from their colour, ethnicity, languages spoken at home, cultural and social background.

We ensure that this is carried out in a way that is developmentally appropriate for the children.

Confidentiality

All suspicions and investigations are kept confidential and shared only with those who need to know. Any information is shared under the guidance of the local safeguarding children board.

Support to families

We believe in building trusting and supportive relationships with families, staff and volunteers in the group.

We make clear to parents our role and responsibilities in relation to child protection, such as for the reporting of concerns, providing information, monitoring of the child, and liaising at all times with the local children's, Young People and Families services.

We will continue to welcome the child and the family whilst investigations are being made in relation to any alleged abuse.

We follow the child protection plan as set by the child's social care worker in relation to the settings designated role and tasks in supporting that child and their family, subsequent to any investigation.

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child in accordance with the confidentiality and client access to records procedure and only if appropriate under the guidance of the local safeguarding children's board.

The Prevent Duty (section 26 of the Counter-terrorism and security Act 2015)

Early year providers must have due regard to the need to prevent people from being drawn into terrorism. We are already responsible under the EYFS for keeping children safe, including the risks of extremism and radicalisation, and for promoting the welfare of children in our care. The Prevent duty simply reinforces these existing duties and highlights the need to consider the risks of extremism and radicalisation when considering the vulnerabilities of a child or family. Furthermore early years providers already focus on children's personal, social and emotional development. The EYFS supports early year providers to do this in an age appropriate way, through ensuring children learn right from wrong, mix and share with other children and value other's views, and challenge negative attitudes and stereotypes.

This means that early year providers will be meeting the requirement of the Prevent duty through their everyday practice.

To protect our children from the risk of radicalisation, our Child Protection Officer has attended the WRAP training (Workshop to Raise Awareness of Prevent) and is able to provide advice and support other members of staff on protecting children from the risk of radicalisation.

FGM: The facts

Female Genital Mutilation (FGM), also known as female circumcision or female genital cutting, is defined by the World Health Organization (WHO) as the partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.

It is practiced by ethnic groups in 28 African countries and some in the Middle East and Asia. UK communities that are most at risk of FGM include Kenyan, Somali, Sudanese, Sierra Leonean, Egyptian, Nigerian and Eritrean. It is illegal in this country. UK nationals who are found guilty of carrying out the practice or of aiding FGM could face up to 14 years in prison and/or a fine. FGM is usually performed on young girls between infancy and the age of 15, using a blade or razor, with or without anaesthetic. There are four main types of FGM. FGM is carried out for cultural, religious and social reasons. Some communities believe it prepares a girl for adulthood and marriage, while others believe it will reduce a women's libido and discourage sexual activity before marriage.

Girls/women that are subjected to the practice can suffer several health problems including recurrent infections, chronic pain, cysts, infertility, complications during childbirth and fatal bleeding.

UNICEF has estimated that more than 125 million girls and women globally have undergone FGM and that three million girls in Africa are at risk each year.

A Home Office report, published in July, suggests that from 1996-2010, 144,000 girls were born in England and Wales to mothers from FGM-practicing countries. It is thought that 60,000 of these girls aged 0-14 in 2011 were born to mothers who had undergone FGM.

Any suspicions of FGM will be reported and acted on immediately to the safeguarding officer.

Further information

- NHS, www.nhs.uk/conditions/female-genital-mutilation/pages/introduction.aspx

- The NSPCC runs a free 24/7 FGM helpline. If you are worried that a child is at risk of FGM or would like advice, information or support you can call 0800 028 3550 or email fgmhelp@nspcc.org.uk.
- WHO factsheet, www.who.int/mediacentre/factsheets/fs241/en

Safeguarding children with additional needs and disabilities

Working Together to Safeguard Children (2006) sets out procedures to be followed when responding to an allegation of abuse, leading up to and including section 47 enquiries. These procedures should be adhered to when an enquiry concerns a disabled child. However, there are likely to be additional resources required for such enquiries where a disabled child is concerned, but it is important that there is no delay in completing these enquiries within the time scales set out in Working Together.

C.A.R.A.

C.A.R.A. has been running in schools for some time, and has now been extended to include early years settings. The project (C.A.R.A.) has been designed to provide early reporting of any domestic abuse which would affect a child or young person's well-being, behaviour or performance during the day. The school/setting is notified through a phone call or email following an incident.

Mobile and Camera reference

The aim of the mobile phone, Camera and image use policy is to protect children and young people from harm and ensure safer and appropriate use of mobile phones and cameras within the setting. Please see policy and procedures used within the setting in the safeguarding folder.

Early Help Assessment Tool (EHAT)

The EHAT is a simple tool for gathering information to help identify the needs of children and families and make a plan to meet those needs. It is a shared tool which can be used by all agencies in Liverpool who are delivering early help. Its purpose is to provide a co-ordinated response so nobody misses out on the support they need.

Providing early help is a key part of delivering frontline services that are integrated and focused around the needs of children and young people. It is a standardised approach to conducting an assessment with the involvement of families.

How to use the early help process

When is an EHAT needed?

To begin with, you need to identify if the child or young person needs extra support. An EHAT might be needed when:

- there is a significant change or worrying feature in a child's appearance, demeanour or behaviour.
- a significant event in a child's life has occurred, or where there are worries about the parents, carers or home.
- the parent or someone in the wider family or social network is experiencing issues (for example substance abuse/misuse, violence or physical or mental health problems, crime) that might impact on the child.
- a child is regularly missing medical appointments, immunisations etc.
- the child is experiencing other disadvantages for reasons such as race, gender, sexuality, religious belief or disability.
- a child or family are coming out of social care.

Legal Framework

Primary Legislation

- Children's Act (1989 s47)
- Protection of Children's Act (1999)
- Data Protection Act (1998)
- The Children Act (Every Child Matters) (2004)
- Safeguarding Vulnerable Groups Act (2006)

Secondary Legislation

- Sexual Offences Act (2003)
- Criminal Justice and Court Services Act (2000)
- Human Rights Act (1999)
- Race Relations Act (Amendment) Act (2000)

- Race Relations Act (Amendment) Act (1976) Regulations
- Equalities Act (2006)
- Data Protection Act (1998) Non Statuary Guidance

Further guidance

- Working together to safeguard children (2018)
- The Plymouth Assessment Framework and Threshold Guidance for Safeguarding Children, Young People and their Families (2016)
- Statuary guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the children’s Act 2004 (HMG 2006)
- Information Sharing Practitioners Guide (HMG 2015)
- What to do if you are worried a child is being abused (2015)
- SWCPP.or.uk
- Data Barring Service

This policy was adopted at a meeting at Pelican Children’s Centre

Held
on.....

Date to be
reviewed.....

Signed on behalf of the
committee.....