





# LEEDS CHILDREN'S SERVICES

# WELLINGTONS SAFEGUARDING & CHILD PROTECTION POLICY

# Academic Year 2025-26

This policy is the intellectual property of Leeds City Council and has been adopted by Wellingtons Nursery and Wellies at Whinmoor, hereby known as Wellingtons.





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This Safeguarding & Child Protection Policy is available on the nursery website and is reviewed and ratified annually by the company directors or as events, or legislation requires. Any deficiencies or weaknesses identified will be remedied without delay.

Part 1 of this policy is for all staff.

Part 2 of this policy document has a suite of model pro-formas to support in-house safeguarding arrangements and is principally for use by designated safeguarding staff and senior leadership team.

Acade mic year	Designated Safeguarding Lead	Designated Safeguarding Lead	Designated Safeguarding Lead
2025- 26	Jo Hickling	Fiona Webster	Kyla Callaghan

Policy reviewed	Policy review date	Date Shared with staff
30.07.25	30.07.26	01.09.25

# Wellingtons Nursery Child Protection and Safeguarding Advice Contact List – September 2025

Role / Agency	Name and role	Contact Details
Designated Safeguarding Lead (DSL)	Jo Hickling Managing Director	jhickling@wellingtonsnurseryleeds.co.uk
Designated Safeguarding Lead (DSL)	Fiona Webster Nursery Manager	fwebster@wellingtonsnurseryleeds.co.uk
	Kyla Callaghan Room Leader	Kcallaghan@wellingtonsnurseryleeds.co.uk
SENDCo	Kyla Callaghan	Kcallaghan@wellingtonsnurseryleeds.co.uk
SLT Administrator	Helen Fisher	send@wellingtonsnurseryleeds.co.uk
Online Safety Coordinator	Fiona Webster	fwebster@wellingtonsnurseryleeds.co.uk
CSWS Duty and Advice / Front Door Safeguarding Hub	Urgent Child Protection concerns / initial referral	Professionals – 0113 3760336 Members of the public – 0113 2223301
CSWS Emergency Duty Team (out of hours)	Urgent Child Protection concerns	0113 535 0600 childrensEDT@leeds.gov.uk
Education Safeguarding Team	Advice / Training / Safeguarding Audit	0113 3789685 estconsultation@leeds.gov.uk
Local Authority Designated Officer	Allegations against adults in the setting	0113 3789687 lado@leeds.gov.uk
NSPCC Whistleblowing Helpline	Allegations against adults in setting	0800 028 0285 help@nspcc.org.uk
PREVENT Team	Prevent training/advice	0113 535 0810 prevent@leeds.gov.uk

The setting is committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers, contractors and visitors to share this commitment.

**All staff** refers to all adults, volunteers or students on placement, working in any capacity in the setting or in activities organised by the setting which brings them in to contact with pupils.

**Child Protection** refers to the multi-agency arrangements to identify and protect children who are or may be at risk of or suffering significant harm. **Safeguarding** refers to the protection, safety and promotion of the welfare of all pupils including when in off-site activities and using ICT. This includes the building of resilience and awareness of risk through the EYFS curriculum. **Child** is any pupil under the age of 18.

# Glossary

- DSL Designated Safeguarding Lead
- DDSL Deputy Designated Safeguarding Lead
- SENDCo Special Education Needs and Disabilities Coordinator
- CSWS Childrens' Social Work Services

# Visitors to the setting

All visitors must sign in on arrival and collect a visitor's lanyard. Visitor lanyards must be worn at all times when in the setting. Staff must ensure that visitors are supervised as appropriate and the requisite pre-employment checks have been completed. All contractors must follow the settings signing in arrangements as set out in contractual commissioning agreements.

# Part One:

#### 1. Aims

- 1.1 The setting aims to ensure that:
  - Appropriate action is taken in a timely manner to safeguard and promote children's welfare
  - All staff are aware of their statutory responsibilities with respect to safeguarding, identifying children in need of early help, at risk of harm or those that have been harmed.
  - Staff are properly trained in recognising and reporting safeguarding issues
  - A culture of vigilance is created and maintained to ensure that we will also act in the best interests of children to protect them online and offline.
  - Systems for reporting abuse are well promoted, easily understood and easily accessible for children
- 1.2 Wellingtons staff encompassing Wellingtons Nursery and Wellies at Whinmoor (hereinafter referred to as "the setting") take as our first priority the responsibility to safeguard and promote the welfare of our pupils, to minimise risk and to work together with other agencies to ensure rigorous arrangements are in place within our setting to identify, assess and support those children who are suffering harm and to keep them safe and secure whilst in our care.
- 1.3 The responsibilities set out in this policy apply (as appropriate) to all members of the setting including pupils, staff, visitors, contractors, volunteers, supply staff, students on placement and trainees working within the setting. It is fully incorporated into the whole setting ethos and is underpinned throughout the delivery of the EYFS curriculum, and within the safety of the physical environment provided for the pupils.

# 2. Legislation and guidance

- 2.1 This policy is based on the Statutory Framework for the Early Years Foundation Statutory Framework (2025), Working Together to Safeguard Children (WTTSC 2023) and Keeping Children Safe in Education (KCSIE) 2025. We comply with this guidance and the procedures set out by the Leeds Safeguarding Children partnership (LSCP).
- 2.2 This policy is also based on the following legislation and guidance:

Section 175 of the <u>Education Act 2002</u>, which places a duty on schools and local authorities to safeguard and promote the welfare of pupils

<u>The Children Act 1989</u> (and <u>2004 amendment</u>), which provides a framework for the care and protection of children

Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the <u>Serious Crime Act 2015</u>

<u>Statutory guidance on FGM</u>, which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM

<u>The Rehabilitation of Offenders Act 1974</u>, which outlines when people with criminal convictions can work with children

Schedule 4 of the <u>Safeguarding Vulnerable Groups Act 2006</u>, which defines what 'regulated activity' is in relation to children

Statutory <u>Guidance on the Prevent duty</u>, which explains duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism

Guidance for safer working practice for those working with children and young people in education settings (GSWP) (Safer Recruitment Consortium Feb 2022) <a href="https://c-cluster-110.uploads.documents.cimpress.io/v1/uploads/d71d6fd8-b99e-4327-b8fd-1ac968b768a4~110/original?tenant=vbu-digital">https://c-cluster-110.uploads.documents.cimpress.io/v1/uploads/d71d6fd8-b99e-4327-b8fd-1ac968b768a4~110/original?tenant=vbu-digital</a>

Safeguarding and remote education during coronavirus (COVID-19) (DfE, 2021b)

This policy conforms to locally agreed inter-agency procedures <u>LSCP - Local protocols</u> <u>for Leeds practitioners (leedsscp.org.uk)</u> and has been ratified by the LSCP Education Reference Group.<u>https://www.gov.uk/government/publications/keeping-children-safe-in-education--2</u>

The <u>Childcare (Disqualification) Regulations 2018</u> and <u>Childcare Act 2006</u>, which set out who is disqualified from working with children

This policy should also be read in conjunction with all other policies set out by the setting.

#### **Definitions**

- 3.1 Safeguarding and promoting the welfare of children means:
  - Protecting children from maltreatment
  - Preventing impairment of children's mental or physical health or development
  - Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
  - Taking action to enable all children to have the best outcomes
- 3.2 **Child protection** is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.
- 3.3 Appendix 1 explains the different types and indicators of abuse.
- 3.4 Children includes everyone under the age of 18.

#### 4 Equality statement

- 4.1 Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.
- 4.2 We give special consideration to children who:
  - Have special educational needs or disabilities or health conditions
  - Are young carers
  - May experience discrimination due to their race, ethnicity, disability, religion, gender identification, sex or sexual orientation.
  - Have English as an additional language
  - Are known to be living in difficult situations for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
  - Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
  - Are asylum seekers
  - Are at risk due to either their own or a family member's mental health needs
  - Are missing from education
  - Children who are in care, previously looked after or any children not growing up with their birth family (this covers private fostering and all kinship arrangements)

# 5 Roles and responsibilities

5.1 Safeguarding and child protection is **everyone's** responsibility. This policy applies to all staff (including those not directly employed by the nursery), volunteers, and contractors. All staff are expected to read this policy as part of their induction arrangements.

#### 5.2.1 All staff will be aware of:

- Our systems which support safeguarding, including reading and understanding their professional responsibilities as outlined in Guidance for Safer Working Practice (2022) understanding the role of the designated safeguarding lead (DSL), reading and understanding the positive behaviour policy and their safeguarding responses to children who go missing from nursery during the day or otherwise and reading and understanding the settings online safety policy.
- The early help process and their role in it, including being alert to emerging problems that may warrant Early Help intervention. All staff should be reporting emerging problems that may warrant early help intervention to the management team.
- That children's behaviours can be indicative of their emotional wellbeing and
  can be linked to mental health. They should be aware of behaviours that may
  communicate that poor wellbeing <u>can</u> be an indicator of factors such as abuse,
  neglect or exploitation. Staff should understand the children's experiences such
  of abuse, neglect, trauma and adverse childhood experiences can impact on
  children's mental health, behaviour & education.
- The process for making referrals to local authority children's social work service (CSWS) and for statutory assessments that may follow a referral, including the

role they might be expected to play. Fig 1: Summary of in-house procedures to follow where there are concerns about a child (Page 2) illustrates the procedure to follow if you have concerns about a child's welfare. Wherever possible, speak to the DSL, DDSL or member of the senior leadership team (SLT) team (in the absence of a DSL) first to agree a course of action. In the absence of a DSL or SLT being available, staff must not delay in directly contacting children's social work Duty and Advice team or the police if they believe a child is at immediate risk of significant harm.

- Our work in partnership with other agencies in the best interests of the children. Requests for service to CSWS will (wherever possible) be made by the Safeguarding Designated Staff, to the CSWS Duty and Advice team (0113 3760336). Where a child already has a child protection social worker, the setting will immediately contact the social worker involved or in their absence, the team manager of the child protection social worker.
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as Female Genital Mutilation (FGM), and how to maintain an appropriate level of confidentiality while liaising with relevant professionals.
- In house procedures for recording any cause for concerns and passing information on to DSLs in accordance with setting's recording systems.
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), child criminal exploitation (CCE) FGM, radicalisation, child-on-child sexual abuse and serious and violent crime. All staff to be aware safeguarding incidents/ behaviours can occur outside of the setting or be associated with outside factors CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity.
- Children may not feel ready or know how to tell someone that they are being abused, exploited, neglected, and/or they may not recognise their experiences as harmful.

Appendix 1 details different kinds of abuse.

Appendix 2 provides guidance to staff on how to respond to children who report abuse

#### 5.2 The designated safeguarding lead (DSL)

- 5.3.1 Our DSLs are Jo Hickling, Fiona Webster & Kyla Callaghan. The DSL takes lead responsibility for child protection and wider safeguarding.
- 5.3.2 The optimal scenario is to have a trained DSL available on site. Where this is not possible, a trained DSL will be available to be contacted via phone or online video for example when working from home.
- 5.3.3 During term time, the DSL will be available during setting hours for staff to discuss any safeguarding concerns. Where a trained DSL (or deputy) is not on site, in addition to the above, a senior nursery practitioner will assume responsibility for co-ordinating safeguarding on site.

If there are any concerns out of hours these can be reported to the DSL via text or email (text for urgent concerns).

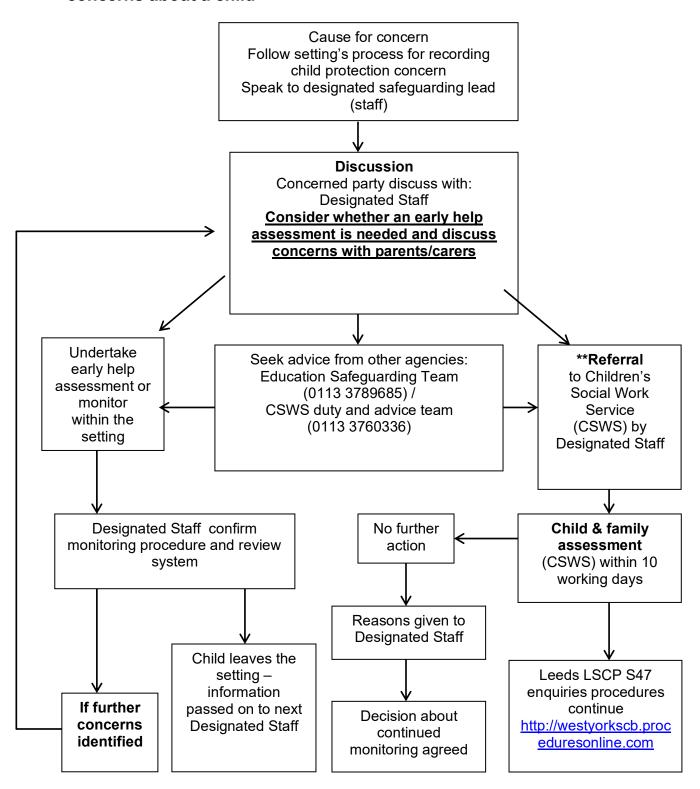
- 5.3.4 The DSL's will be given the time, training, resources and support to:
  - Provide advice and support to other staff on child welfare and child protection matters
  - Take part in strategy discussions and inter-agency meetings and/or support other staff to do so
  - Contribute to the assessment of children by providing as much information as
    possible as part of the referral process to help social care assessments
    consider contexts outside the home and enable a contextual approach to harm.
  - Refer suspected cases, as appropriate, to the relevant body (children's social care Duty and Advice team, Channel programme, Disclosure and Barring Service, Teaching Regulation Agency and/or police), and support staff who make such referrals directly. Provide support for staff to comply with their mandatory reporting duties in cases where FGM has been identified.
  - Jo Hickling will ensure that all staff involved in direct case work of vulnerable children, where there are child protection concerns/issues, have access to regular safeguarding supervision. (Ref: LCC Framework for Supervision (2021).).
  - The DSL will also keep directors informed of any issues and liaise with local authority officers and relevant professionals for child protection concerns as appropriate.
  - The DSL is responsible for responding to domestic abuse notifications from the local authority and providing support to children and their families as appropriate
  - The setting will ensure representation at appropriate inter-agency meetings such as Initial and Review Child Protection Conferences, and Planning and Core Group meetings, as well as Family Support Meetings.
  - Provide reports as required for meetings.
  - Where a child in setting is subject to an inter-agency child protection plan or any multi-agency risk management plan, the DSL will contribute to the preparation, implementation and review of the plan as appropriate.
  - The designated safeguarding lead and any deputies should liaise with the three safeguarding partners and work with other agencies in line with Working Together to Safeguard Children (2023). When to call the police (NPCC 2020) should help designated safeguarding leads understand when they should consider calling the police and what to expect when they do.
  - Promote the educational outcomes of children with a social worker and other
    pupils deemed vulnerable. It is essential therefore that the DSL works in close
    collaboration with the SENDCO as children who are in need of help and
    protection must also have their learning needs prioritised in planning to ensure
    education is a protective factor and not only by way of regular attendance at
    setting.

## 5.3 The Managing Director/Manager

- 5.5.1 The Nursery & OOSC Manager is responsible for the implementation of this policy, including:
  - Making sure each child in the Early Years Foundation Stage is assigned a key person

- Ensuring the relevant staffing ratios are met
- Ensuring that staff (including temporary and supply staff) and volunteers are informed of this policy as part of their induction
- Communicating this policy to parents when their child joins the setting and via the setting website
- Ensuring that the DSL has appropriate time, training and resources, and that there is always adequate cover if the DSL is absent
- Ensuring that all staff undertake appropriate safeguarding and child protection training and update this every three years.
- Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff (including supply staff) or volunteer, where appropriate.
- Ensuring that all recommendations made by the Local Authority in relation to strengthening the setting's safeguarding arrangements are actioned in a timely fashion

Fig 1: Summary of in-house procedures to follow where there are concerns about a child



<sup>\*\*</sup> If unhappy about the outcome of the referral to Children's Services Social Care, please refer to: Leeds LSCP Local Protocol: <a href="http://www.leedslscb.org.uk/Practitioners/Local-protocols">http://www.leedslscb.org.uk/Practitioners/Local-protocols</a> Concerns Resolution.

## 6 Confidentiality and Information Sharing

- 6.1.1 Confidentiality is an issue that needs to be understood by all those working with children, particularly in the context of safeguarding.
- 6.1.2 Wellingtons recognises that the only purpose of confidentiality in this respect is to benefit the child. Staff/volunteers and visitors to setting should never promise a child that they will not tell anyone about an allegation/report of abuse, and must pass any cause for concerns immediately to a designated safeguarding lead.
- 6.1.3 Confidentiality is addressed throughout this policy with respect to recordkeeping (see section 18), dealing with reports of abuse (see Appendix 2), allegations of abuse against staff information sharing and working with parents
- 6.1.4 Timely information sharing is essential for effective safeguarding. This safeguarding will share safeguarding information as appropriate in keeping with the principles outlined in the government guidance document, <u>Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (DfE 2018)</u>. This guidance has been produced to support practitioners in the decisions they take to share information, which reduces the risk of harm to children and young people and promotes their well-being.
- 6.1.5 Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children.
- 6.1.6 All staff must have due regard for the relevant data protection principles which allow them to share (in the context of their role) and withhold personal information, as provided for the in the Data Protection Act 2018 and GDPR.
- 6.1.7 In order to promote positive outcomes for vulnerable children, including children with social workers information that can help to support positive outcomes being achieved will be shared with colleagues in the setting that are not DSLs or DDSLs as appropriate.
- 6.1.8 If staff are in any doubt about sharing information, they must speak to the designated staff.

## 6.2 Working with parents and other agencies to protect children

- 6.2.1 Parents/carers will be made aware of our in-house procedures in respect to taking any reasonable action to safeguard the welfare of its pupils. In cases where the setting has reason to be concerned that a child may be suffering significant harm, ill treatment, neglect or other forms of harm, staff will follow the procedures for responding to suspected cases of child abuse or neglect outlined in this policy document and contact CSWS Duty and Advice team to discuss their concerns.
- 6.2.2 In keeping with KCSIE, we will endeavour wherever possible to obtain at least two emergency contacts for every child in the setting in case of emergencies, and in case there are welfare concerns at the home.
- 6.2.3 In general, we will discuss concerns with parents/carers before approaching other agencies and will seek to inform parents/carers and receive their consent

when making a referral to another agency. Appropriate staff will approach parents/carers after consultation with the DSL. The exception to this rule will be in situations where a member of staff has reasonable cause to believe that informing parents/carers of a referral to another agency may increase the risk of significant harm to the child.

6.2.4 Parents/carers are informed about our Safeguarding & Child Protection policy through our prospectus, website, newsletters etc. A safeguarding & child protection statement is prominent reception area.

## 6.2 Multi-agency work

- 6.3.1 We will co-operate with CSWS in accordance with the requirements of the Children Act 1989 and allow access to child and child protection records for them to conduct section 17 or section 47 assessments.
- 6.3.2 In the best interests of our pupils, we will work with all relevant professionals and agencies as required to safeguard children and promote their welfare.

## 7 Opportunities to teach safeguarding – Preventative Curriculum

#### 7.1 Our role in the prevention of abuse

We will identify and provide opportunities for children to develop skills, concepts, attitudes and knowledge to promote their safety and well-being.

- 7.1.1 We will ensure that children are taught about safeguarding, including online safety, and recognise that a one size fits all approach may not be appropriate for all children, and a more personalised or contextualised approach for more vulnerable children, victims of abuse and some SEND children may be needed.
- 7.1.2 As part of providing a broad and balanced curriculum, relevant issues will be addressed through the EYFS curriculum for example at circle time.

#### 7.2 Other areas of work

- 7.2.1 All our policies that address issues of power and potential harm, e.g. Positive Behaviour, On-line Safety, Supporting Children with SEND will be linked to ensure a wholistic approach.
- 7.2.2 Our Safeguarding and Child Protection policy cannot be separated from the general ethos of the setting which is to ensure that children are treated with respect and dignity, feel safe, and are listened to.
- 7.2.3 The setting's online safety policy is reflective of the requirements set out in Early Years Foundation Stage (Section 3 Safeguarding and Welfare Requirements) in regards to content, contact, conduct and commerce. The setting's online safety policy is aligned to the setting's positive behaviour policy and reflects our approach to issues of online safety that empowers us to protect and educate children in their use of technology and establishes mechanisms to identify, intervene in, and escalate any incident where appropriate.

## 6 Our role in supporting children

We will offer appropriate support to individual children who have experienced abuse or who have abused others.

- 8.1 In cases where children have experienced abuse/abused others, the DSL will ensure that appropriate support is offered. An individual support plan will be devised, implemented and reviewed regularly should the pupil or others affected require additional support/intervention. This plan will detail areas of support, who will be involved (i.e. key worker) and the child's wishes and feelings. A copy of the individual support plan will be kept in the pupil's child protection record (see Appendix 5).
- 8.2 For children who have sexually harmed or may have sexually harmed peers, where appropriate an AIM Risk Assessment Management Plan (RAMP) will be completed that includes safety and support planning.

# 7 Children with special educational needs, disabilities, or health issues

- 9.1 We recognise that while all children have a right to be safe, some children may be more vulnerable to abuse e.g. those with a disability, special educational needs, mental health issues or those living with domestic violence or drug/alcohol abusing parents, parents mental health issues, learning disabilities, children who are in care or previously looked after, children having adverse childhood experiences etc.. Additional barriers can exist when recognising abuse and neglect in this group, including:
  - Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration
  - Pupils being more prone to peer group isolation or bullying (including prejudicebased bullying) than other pupils
  - The potential for pupils with SEN, disabilities or certain health conditions being disproportionally impacted by behaviours such as bullying, without outwardly showing any signs
  - Communication barriers and difficulties in managing or reporting these challenges
- 9.2 All staff have a role in preventing impairment of children's mental health/emotional wellbeing, including promoting positive mental health and identifying where students are struggling with their Mental Health.
- 9.3 Concerns regarding a student's mental health/emotional wellbeing should be reported to a member of the safeguarding team in keeping with the setting's safeguarding reporting arrangement so that pupils can be offered appropriate support, this may include local or national online services where appropriate. In addition the setting is able to make referrals to a wide range of external services to secure additional appropriate support for students.

#### 10 Children at risk of specific forms of abuse

10.1 This establishment follows the Leeds LSCP (<a href="www.leedsLSCP.org.uk">www.leedsLSCP.org.uk</a>) online locally agreed multi-agency procedures, in circumstances where children are at risk of or specific forms of abuse as outlined in the government's statutory guidance 'Working Together to Safeguard Children' and to the 'Prevent duty

guidance for England and Wales'18. We also refer to the government's 'Keeping Children Safe in Education's statutory guidance.

# 11 Remote Learning and Remote Welfare

- 11.1 If children are being asked to learn online at home, for example because of the coronavirus pandemic, we follow advice from the DfE on <u>safeguarding and remote education (DfE, 2021b)</u>. In addition to following the Guidance for Safer Working Practice (Safer Recruitment Consortium, 2022)
- 11.2 Where children are remote learning and the DSL has identified a child to be vulnerable, on the edge of social care support, or who would normally receive pastoral-type support, we ensure that a robust communication plan is in place for that child or young person. The communication plans can include remote contact, phone contact, door-step visits. Other individualised contact methods should be considered and recorded. Details of this plan must be recorded, as should a record of contact made.
- 11.3 We recognise that attending nursery is a protective factor for children and situations such as periods of national lockdown can affect the mental health of pupils and their parents/carers. Staff will be aware of these issues and have due regard for them in setting expectations of pupils' work where they are at home.

# 12 Female Genital Mutilation: The Mandatory Reporting Duty

- 12.1 The Department for Education's Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".
- 12.2 FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.
- 12.3 Any member of staff who discovers that an act of FGM appears to have been carried out on a pupil under 18 must speak to the DSL and follow our local safeguarding procedures.
- 12.4 The duty above does not apply in cases where a pupil is *at risk* of FGM or FGM is suspected but is not known to have been carried out. Staff must not examine pupils.
- 12.5 Any member of staff who suspects a pupil is *at risk* of FGM must speak to the DSL and follow our <u>local safeguarding children's partnership procedures.</u>

#### 13 Radicalisation and Terrorism

13.1 Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism. Terrorism is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

- 13.2 If staff are concerned about a change in the behaviour of an individual or see something that concerns them **(this could be a colleague too)** they must seek advice appropriately with the DSL who must contact the Education Safeguarding Team or the Leeds Prevent Team 0113 5350810 for further advice (see <a href="appendix9">appendix9</a>).
- 13.3 Professionals working with children are expected to assess the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. This means being able to demonstrate both a general understanding of the risks affecting children and young people in the area and a specific understanding of how to identify individual children who may be at risk of radicalisation and what to do to support them. The Education Safeguarding Team and the Prevent team can advise and identify local referral pathways.
- 13.4 Effective early help relies on all staff to be vigilant and aware of the nature of the risk for children and young people, and what support may be available. Our setting will ensure that as far as possible all front-line staff will undertake Prevent awareness training (e.g. Workshop to Raise Awareness of Prevent [WRAP]).

# 14 Channel

14.1 Channel is a voluntary, confidential support programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. Prevent referrals may be passed to a multi-agency Channel panel, which will discuss the individual referred to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support required.

## 15 Child on child abuse

- 15.1 We will ensure that EYFS guidance relating to 'behaviour management' is incorporated into relevant policy and procedures. We will be knowledgeable with, and apply the setting's procedures on Promoting Positive Behaviour
  - Most cases of pupils hurting other pupils will be dealt with under the setting's behaviour policy, but this child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns.
- 15.2 We recognise that sexual violence and/or sexual harassment can happen anywhere. Where concerns of sexual violence or sexual harassment are witnessed, disclosed or reported to the setting the concern will be taking seriously.
- 15.3 Children who may have/have sexually harmed others will be considered separately from the needs of those who have/may have been subject to sexual harm. Children who have/may have sexually harmed others will be responded to in a way that meets their needs as well as protecting others within the setting community through a multi-agency risk assessment management plan (RAMP). Where appropriate there must be a coordinated multi-agency approach to risk assessment which will include involvement of parent/carers, social care, health, police and youth justice (where appropriate). Further support and advice on AIM

- Checklists and/or undertaking a RAMP can be obtained from the Education Safeguarding Team.
- 15.4 We will ensure that all children who may have/has been sexually harmed will be taken seriously and that they will be supported and kept safe. Where appropriate support plans will be put in place for children subjected to sexual harm.
- 15.5 In cases where allegations of sexual violence and/or harassment are found to be unsubstantiated, unfounded, false or malicious, the DSL will consider whether the child or person who has made the allegation is in need of support or may have been abused by someone else. In cases where the report is found to be deliberately invented or malicious the setting will consider whether it is appropriate to take any disciplinary action in keeping.
- 15.6 Where child exploitation (ie; criminal, sexual, trafficking, modern day slavery etc), or the risk of it, is suspected, frontline practitioners must notify the designated member of staff for child protection, in line with the child protection policy reporting systems.
- 15.7 If the child /young person already has an allocated social worker, the DSL must contact them (or their team manager) to discuss any concerns about child exploitation.
- 15.8 A copy of the child exploitation risk identification tool for partners (see <a href="Appendix 7">Appendix 7</a>) can be obtained from the <a href="LSCP Website">LSCP Website</a>.
  <a href="https://www.leedsscp.org.uk/Practitioners/Local-protocols/CSE-protocols">LSCP Website</a>.
  <a href="https://www.leedsscp.org.uk/Practitioners/Local-protocols/CSE-protocols">https://www.leedsscp.org.uk/Practitioners/Local-protocols/CSE-protocols</a>
  - 15.9 We will ensure the setting works in partnership with parents / carers and other agencies as appropriate.

#### 16 Sharing Nudes and Semi Nudes

#### Staff responsibilities when responding to an incident

16.1 If any adult in setting is made aware of an incident involving the consensual or non-consensual sharing of nude or semi-nude images/videos (also known as 'sexting' or 'youth produced sexual imagery'), they must report it to the DSL immediately.

#### They must **not**:

- View, copy, print, share, store or save the imagery yourself, or ask a pupil to share or download it (if you have already viewed the imagery by accident, you must report this to the DSL)
- Delete the imagery or ask the pupil to delete it
- Ask the pupil(s) who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)
- Share information about the incident with other members of staff, the pupil(s) it involves or their, or other, parents and/or carers
- Say or do anything to blame or shame any young people involved

## 17 Children missing from education

17.1 A child going missing from the setting is a potential indicator of abuse or neglect. Where a child is reported to be missing the DSL will make every effort to contact the family. A first day phone call is required for all children to establish why a child is not attending nursery. This will be followed up with a home visit if necessary. If a child is moving to another setting, we will contact the setting to confirm this.

#### 18 A Safe Culture

The managing director/ manager will ensure that the following appropriate policies, and procedures are in place and shared with staff at the point of induction, in order for appropriate action to be taken in a timely manner to safeguard and promote children's welfare:

- Whistle Blowing/Confidential reporting policies (guidance to staff and volunteers on how they can raise concerns and receive appropriate feedback on action taken when staff have concerns about any adult's behaviour)
- Setting's procedures for managing children who are missing education
- Guidance on Safer Working Practices
- Safeguarding and Child Protection policy (including online safety).
- Positive behaviour policy
- The names, roles and responsibilities of the designated safeguarding lead and any deputies.

## 19 Safer Recruitment, selection and pre-employment vetting

- 19.1 The setting pays full regard and commitment to following the safer recruitment, selection and pre-employment vetting procedures.
- 19.2 The setting will maintain a single central record which demonstrates the relevant vetting checks required including: a barred list check, DBS check at the correct level, identity, qualifications, prohibition order and right to work in the UK.
- 19.3 All recruitment materials will include reference to the setting's commitment to safeguarding and promoting the wellbeing of pupils. (see <a href="Appendix 6">Appendix 6</a>)
- 19.4 The setting will ensure that all recruitment panels include at least one person that has undertaken safer recruitment training as recommended by the Local Authority/Leeds LSCP.
- 19.5 For individuals who have lived or worked outside the UK, in addition to the same checks as all other staff, the setting will complete any additional checks required to satisfy themselves that the individual is suitable to work with children. This may include obtaining a letter from the professional regulatory authority in the country (countries) in which the candidate has worked confirming that they have not imposed any sanctions or restrictions, and /or that they are aware of any reason why they are unsuitable to teach where possible.
- 19.6 The setting will ensure that written risk assessments are undertaken in situations where information provided on DBS certificates necessitates so. Written risk assessments must be undertaken for all volunteers **not** engaging in regulated

activity. Advice and support for carrying out risk assessments can be accessed through the Education Safeguarding Team.

# 20 Managing allegations or safeguarding concerns against a member of staff or person in setting.

- 20.1 These procedures must be followed in any case in which it is alleged that a member of staff (including supply staff) visiting professional or volunteer has met the harm test, this includes where an adult has:
  - a) behaved in a way that has harmed a child or may have harmed a child
  - b) possibly committed a criminal offence against or related to a child
  - c) behaved towards a child or children in a way that indicates s/he may pose a risk of harm to children
  - d) behaved or may have behaved in a way that indicates they may not be suitable to work with children. (This includes any behaviour that may have happened outside of the setting that might make the individual unsuitable to work with children. This is known as transferable risk.)
- 20.2 All adults working in the setting have duty to disclose to the managing director/ manager where their relationships and associations both within and outside of the workplace (including online) may have implications for safeguarding children in the setting.
- 20.3 Examples of behaviours that would warrant an allegation or safeguarding concern by a member of staff could include:
  - Physical, for example intentional use of force as a punishment, slapping, use of objects to hit with, throwing objects or rough physical handling.
  - Emotional, for example intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, and attitudes which discriminate on the grounds of race, gender, sex, disability or sexuality.
  - Sexual, for example sexualised behaviour towards pupils, grooming, sexual harassment, sexual assault and rape, sending inappropriate messages through social media and other technologies.
  - Neglect which may include failing to act to protect a child or children, failing to seek medical attention or failure to carry out appropriate/proper risk assessment etc.
- 20.3.1 A safeguarding complaint that meets the above criteria must be reported to the managing director/ manager immediately. If the complaint involves the managing director then the next most senior member of staff must be informed and the. In our setting the named case manager is Jo Hickling or Fiona Webster. They will follow the processes outlined in this section.
- 20.4 Where the managing director/ manager determines that a safeguarding allegation does not meet the harm threshold in line with the criteria above they will refer the matter to be managed in line with paragraphs 20.8 20.9 (inc.) by a designated manager with appropriate safeguarding training. It is important to carefully consider who in setting is best placed to manage concerns that do not

meet the harm threshold and ensure appropriate action is taken given the sensitive and confidential nature of the information relating to staff over time.

- 20.5 All staff must fully understand that any adult behaviours that deviate from the Guidance for Safer Working Practice, including inappropriate conduct outside of work are a concern, even if they are low-level. Low-level concerns are concerns that do not meet the harm test/allegations threshold. Examples of such behaviour include:
  - Being over familiar with children
  - Having favourites
  - Taking photographs of children on their mobile phone
  - Engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or
  - Humiliating pupils
- 20.6 The case manager should ensure that the child is not at risk and where appropriate ensure that the child is referred to the local authority Duty and Advice team.
- 20.7 The case manager should gather as much information about the alleged incident as necessary in order to establish whether there is substance to the allegation. In situations where the case manager determines that the harm test has not been met the case manager must ensure that there is a clear record of the incident, include any actions taken to address the concern raised. This record must be kept confidential, stored securely and comply with the Data Protection Act 2018 and the UK GDPR (2018). Records of low-level concerns will be reviewed so that any patterns of recurring low level concerns can be identified and responded to appropriately, this may include a referral to the LADO where repeated behaviours indicate an individual may not be suitable to work with children.
- 20.8 All low level concern records will be kept for the duration of a member of staff's employment at the setting.
- 20.9 In situations where the case manager has sufficient information to suggest that the harm test/allegations threshold has been met, the case manager must use the local authority designated officer (LADO) notification form (see <a href="Appendix 12">Appendix 12</a>) in order to assess the level of concern, **prior to contacting the LADO**. As part of this initial consideration, in the case of a supply member of staff the supply agency safeguarding lead/senior manager. The completed LADO notification form must be sent to <a href="lado@leeds.gov.uk">lado@leeds.gov.uk</a> within one working day of the allegation being made. This will assist the case manager in consultation with the LADO to decide on the most appropriate course of action. This includes when to inform the member of staff of the concerns raised. Parents or carers of the child or children involved should be told about the allegation as soon as possible if they do not already know of it.
- 20.10 The case manager must not carry out an investigation or directly interview any child/ witness/ or the individual whom the concern relates too, until the above process has been duly completed and relevant partners have been consulted. However, statements of any alleged incidents of harm should be obtained as

appropriate at the earliest opportunity in order to establish facts from relevant individuals.

- 20.11 A multi-agency allegations management meeting may be arranged to look at the complaint in its widest context. The case manager must attend this meeting, which will be arranged by the LADO. All issues must be recorded and the outcome reached must be noted to ensure closure.
- 20.12 In many cases it may be appropriate to provide further training and support to staff/volunteers and ensure that they are clear about the expectations for their conduct.
- 20.13 In more serious cases, allegations may be investigated under the formal disciplinary procedures and, where allegations are upheld, formal warnings issued as well as specific training and support. In cases where children/young people may be at further risk and/or evidence/witnesses may be compromised and/or the allegations and so serious that they may, if upheld, constitute gross misconduct, suspension of the member of staff/volunteer may be appropriate and should be considered in line with the setting's Disciplinary Policy.
- 20.16 Any staff/volunteers who are dismissed by the setting for gross misconduct or cumulative misconduct relating to safeguarding of children/young people will be referred to the DBS for consideration of barring. Similarly, where the setting has a reasonable belief that the member of staff/volunteer would have been dismissed by the setting had they been employed at the time of the conclusion of investigations, they will be referred to the DBS. The setting will keep written records of all of the above.
  - LADO Contacts: Claire Ford, or Jo Peake Tel: 0113 3789687
  - Advice can also be sought from Deborah Jobson Team Manager Education Safeguarding Team 0113 3789475
- 20.17 Where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, staff can contact any of the professionals named in the above paragraph, in addition to other whistleblowing channels which may be open to them.
- 20.18 The setting's whistleblowing policy states that concerns can be raised by the following methods:
  - Whistleblowing hotline 0113 3788008 (dedicated hotline answered by a member of the Internal Audit team or an answerphone).
    - E-mail concerns@leeds.gov.uk
    - In writing Internal Audit, 3rd Floor West, Civic Hall, Leeds, LS1 1JF
    - The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00am to 8:00pm, Monday to Friday and Email: <a href="help@nspcc.org.uk">help@nspcc.org.uk</a>

#### 21 Training and Support

All staff members will be made aware of systems within our setting that support safeguarding, and these will be explained to them as part of our staff induction. This includes: the safeguarding/child protection policy; the setting's positive behaviour policy and the whistleblowing procedures, this must be done as part of their induction and reviewed annually.

- 21.1 We recognise the stressful and traumatic nature of child protection work. Support is available for any member of staff from any member of the SLT. Access to regular and timely supervision is an essential form of support for all designated safeguarding staff.
- 21.2 Designated Safeguarding staff must have attended the Advanced Safeguarding for DSL's training course. They will attend refresher training at least every two years.
- 21.3 The setting will ensure all staff including temporary and volunteers receive induction and updated training appropriate to their roles and responsibilities, especially staff new to the setting. All staff will access basic child protection training including online safety as part of the setting's induction arrangements and refresher training at least every three years. All staff should have regular safeguarding, child protection training and online safety updates (for example, via email, e-bulletins, staff meetings), as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. Access to training can be via the Children's Services Early Years Safeguarding Team and the LSCP.
- 21.4 The managing director and manager will attend appropriate 1 day safeguarding training at least every three years.
- 21.5 Any training accessed through third party/independent providers must reflect the LSCP protocols and the LSCP minimum standards checklist. This training will be recorded by the setting on a separate database.

#### 22 Child Protection Records

- 22.1 The responsibility to maintain, process, share, transfer and store child protection and safeguarding records in accordance with the Data Protection Act 2018 and the GDPR principles is the responsibility of the DSL and any safeguarding deputies. Child protection information will be held securely, with access being restricted to the DSL and their deputies, and in cases of Early Help, the nominated lead professional, if this is not a designated safeguarding lead/officer. For further information please see <a href="Early Help">Early Help</a>. The following information must be kept securely with restricted access, whether paper or electronic:
  - Chronology (summary of significant events and the actions and involvement of the setting)
  - 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 completed child protection cause for concern records

- Any child protection information received from the child's previous setting.
- Records of discussions, telephone calls and meetings with colleagues and other agencies or services
- Professional consultations
- Letters and emails sent and received relating to child protection matters
- Referral forms sent to CSWS, other external agencies or education-based services
- Minutes or notes of meetings, e.g. child protection conferences, core group meetings, etc., copied to the file of each child in the family, as appropriate.
- Formal plans for, or linked to, the child e.g. child protection plans, Early Help (previously known as CAF's), risk assessments etc
- A copy of any support plan for the pupil concerned
- 22.2 Where a pupil leaves their existing provision, we will ensure that the child protection file is transferred securely and separately from the main pupil file to the receiving setting/seducational establishment (where this is known) as soon as possible and within 5 working days.
- 22.3 Where there is an existing risk management plan/assessment in place for behaviours that are deemed potentially harmful to the pupil (e.g. self-harming or harmful sexualised behaviour), this information must be shared with the destination provision prior to the pupil starting so that appropriate care and control measures can be put in place to mitigate the potential of any risk of further harm occurring. The DSL will also consider if it would be appropriate to share any information with the new setting in advance of a child leaving, for example prior to a transfer programme.
- 22.4 Where a child leaves a setting the child protection file must be transferred to the new setting. There is no need to keep written or electronic copies of the child protection records, therefore these will be deleted from electronic systems once the successful transfer has been confirmed. The exception to this rule will be in any of the following instances:
  - Where the destination setting is not known (the original records will be retained)
  - Where the child has not attended the nominated setting (the original records will be retained)
  - There is any on-going legal action (the original file will be retained)
  - Where a child moves outside of the Leeds authority a copy of the child protection record will be retained for reference.
- 22.5 Pupil records will be transferred in a secure manner, for example, through secure electronic file transfer or by hand. When hand-delivering pupil records, a list of the names of those pupils whose records are being transferred and the name of the setting they are being transferred to must be made and a signature obtained from the receiving setting as proof of receipt. When sending records through secure electronic file transfer, a delivery and read receipt of the must be retained for audit purposes.
- 22.6 If a pupil moves from our setting, child protection records will be forwarded onto the named DSL at the new setting, with due regard to their confidential nature. Good practice suggests that this will always be done with a face-to-face handover between designated staff or a verbal conversation is had over the telephone if a face to face handover is not possible. A signed receipt of file transfer or electronic

- delivery and read receipt must be obtained for audit purposes by the delivering setting.
- 22.7 If sending by post, children records will be sent "Special Delivery". A note of the special delivery number will also be made to enable the records to be tracked and traced via Royal Mail.
- 22.8 For audit purposes a note of all pupil records transferred or received will be kept in either paper or electronic format. This will include the child's name, date of birth, where and to whom the records have been sent, and the date sent and/or received. A copy of the child protection chronology will also be retained for audit purposes and kept securely.
- 22.9 When a DSL member of staff resigns their post or no longer has child protection responsibility, there will be a full face to face handover/exchange of information with the new post holder.
- 22.10 In exceptional circumstances when a face-to-face handover is unfeasible, it is the responsibility of the SLT to ensure that the new post holder is fully conversant with all procedures and case files.
- 22.11 All DSLs receiving current (live) files or closed files must keep all contents enclosed and not remove any material.
- 22.12 All receipts confirming file transfer must be kept in accordance with the recommended retention periods. For further information refer to the archiving section.

#### 23 Children's and parents' access to child protection files

- 23.1 Under Data Protection legislation (General Data Protection Regulation & Data Protection Act 2018) a pupil or their nominated representative have a number of legal rights in respect of information relating to them. These rights include the right to access and the right to rectification of inaccurate data. Therefore all information will be accurately recorded, objective in nature and expressed in a professional manner.
- 23.2 Any child who has a child protection file has a right to request access to it. However, neither the child nor the parent has an automatic right to see all the information held in child protection records. Information can be withheld if disclosure:
  - could cause serious harm or is likely to cause serious harm to the physical or mental health or condition of the child or another person; or
  - could reveal that the child or another person has been a subject of or may be at risk of child abuse, and the disclosure is not in the best interests of the child; or
  - is likely to prejudice an on-going criminal investigation; or
  - information about the child also relates to another person who could be identified from it or the information has been given by another person who could be identified as the source, unless the person has consented to the

- disclosure or the person providing the information is an employee of the establishment or the Local Authority.
- 23.3 It is best practice to make reports available to the child or their parents unless the exceptions described above apply.
- 23.4 The establishment's report to the child protection conference will (wherever possible) be shared with the child, if old enough, and parent at least two days before the conference.

## 24 Archiving

- 24.1 The setting that the pupil attended until statutory school leaving age (or where the pupil completed sixth form studies) is responsible for retaining any child protection records they may hold. The recommended retention period is 35 years from closure when there has been a referral to CSWS. If no referral has been made to CSWS, the child protection record will be retained until the child's 25th birthday, after which point the file will be deleted from our electronic system. The decision of how and where to store child protection files will be made by the managing director. Due to sensitivity of the information, the records will continue to be held in a secure area with limited access e.g. designated officer. The DSL is responsible for ensuring that all CP files are archived in accordance with the timescales referenced above. The DSL is responsible for ensuring that the appropriate timeframes for archiving and destroying child protection records referenced above are set on electronic systems accordingly for each pupil.
- 24.2 Safeguarding records which contain information about allegations of sexual abuse will be retained for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry.

# 25 Safe Destruction of the pupil record

25.1 Where records have been identified for destruction, they will be disposed of securely at the end of the academic year (or as soon as practical before that time). Records which have been identified for destruction will be confidentially destroyed. This is because they will either contain personal or sensitive information, which is subject to the requirements of Data Protection legislation or they will contain information which is confidential to setting or the Local Education Authority. Information will be shredded (or deleted as appropriate) prior to disposal or confidential disposal can be arranged through private contractors. For audit purposes the setting will maintain a list of records which have been destroyed and who authorised their destruction. This can be kept securely in either paper or an electronic format.

#### 26 Photography / visual records:

26.1 Photographs of people including children may be considered personal data, as defined by the Data Protection Act (2018) if an individual can be identified from the photograph or image.

- 26.2 Photographs must not be displayed in a public place without the specific consent of their parent or carer. This also includes displays created by members of staff, departmental publicity or marketing material, social media platforms or material created by any external organisation.
- 26.3 Where staff suspect someone might be taking photographs or images for other purposes, they should challenge the individual concerned and ask them to stop or to leave the event.
- 26.4 Permission must be sought from parents and or carers for any photographs or images to be taken of children in line with the settings photograph/video policy.

#### Appendix 1: Definitions and indicators of abuse

Reference: Working Together to Safeguard Children (DfE 2018). See also KCSiE Part one and Annex B.

**Neglect:** Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers)
- Ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Examples which may indicate neglect (it is not designed to be used as a checklist):

- Hunger
- Tiredness or listlessness
- Child dirty or unkempt
- Poorly or inappropriately clad for the weather
- Poor attendance or often late for nursery
- Poor concentration
- Affection or attention seeking behaviour
- Untreated illnesses/injuries
- Pallid complexion
- Stealing or scavenging compulsively
- Failure to achieve developmental milestones, for example growth, weight
- Failure to develop intellectually or socially
- Neurotic behaviour

**Physical abuse:** Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Examples which may indicate physical abuse (not to be used as a checklist):

- Patterns of bruising; inconsistent account of how bruising or injuries occurred
- Finger, hand or nail marks, black eyes
- Bite marks
- Round burn marks, burns and scalds
- Lacerations, wealds
- Fractures
- Bald patches
- Symptoms of drug or alcohol intoxication or poisoning
- Unaccountable covering of limbs, even in hot weather
- Fear of going home or parents being contacted
- Fear of medical help
- Fear of changing for PE
- Inexplicable fear of adults or over-compliance
- Violence or aggression towards others including bullying

Isolation from peers

**Sexual abuse**: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Examples which may indicate sexual abuse (it is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge
- Anal or vaginal discharge, soreness or scratching
- Reluctance to go home
- Inability to concentrate, tiredness
- Refusal to communicate.
- Thrush, Persistent complaints of stomach disorders or pains
- Eating disorders, for example anorexia nervosa and bulimia
- Attention seeking behaviour, self-mutilation, substance abuse
- Aggressive behaviour including sexual harassment or molestation
- Unusually compliant
- Regressive behaviour, Enuresis, soiling
- Frequent or open masturbation, touching others inappropriately
- Depression, withdrawal, isolation from peer group
- Reluctance to undress for PE or swimming
- Bruises, scratches in genital area

**Emotional abuse**: Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child in participating in normal social interaction. It may also involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment

Examples which may indicate emotional abuse (it is not designed to be used as a checklist):

- Over-reaction to mistakes, continual self-deprecation
- Delayed physical, mental, emotional development
- Sudden speech or sensory disorders
- Inappropriate emotional responses, fantasies
- Neurotic behaviour: rocking, banging head, regression, tics and twitches

- Self-harming, drug or solvent abuse
- Fear of parents being contacted
- Running away / Going missing
- Compulsive stealing
- Masturbation, Appetite disorders anorexia nervosa, bulimia
- Soiling, smearing faeces, enuresis

N.B.: Some situations where children stop communication suddenly (known as "traumatic mutism") may indicate maltreatment.

Child Sexual Exploitation: Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Reference: Child Sexual Exploitation. *Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation* (DfE 2017)

All staff should ensure they are aware of and respond to wider safeguarding issues outlined in KCSiE 2021 Annex B, this includes further information on:

- Child abduction and community safety incidents
- Children and the court system
- Children missing from education
- Children with family members in prison
- Child Criminal Exploitation (CCE) and Child Sexual Exploitation (CSE)
- County lines
- Modern Slavery and the National Referral Mechanism
- Cybercrime
- Domestic abuse
- Homelessness
- So-called 'honour-based' abuse (including Female Genital Mutilation and Forced Marriage)
- Preventing radicalisation (including the Prevent duty and Channel)
- Peer on peer/ child on child abuse

# **Responses from parents**

Research and experience indicate that the following responses from parents may suggest a cause for concern across all four categories:

- An unexpected delay in seeking treatment that is obviously needed
- An unawareness or denial of any injury, pain or loss of function (for example, a fractured limb)
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development
- Reluctance to give information or failure to mention other known relevant injuries

- Frequent presentation of minor injuries
- Unrealistic expectations or constant complaints about the child
- Alcohol misuse or other drug/substance misuse
- Parents request removal of the child from home
- Violence between adults in the household

# Children with special educational needs and disabilities

When working with children with special educational needs and disabilities, practitioners need to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as
  the shin, might be of concern on a non-mobile child. The LSCP have a multiagency protocol to support professionals in making informed judgements for
  bruising in non-independently mobile children.
  <a href="https://www.leedsscp.org.uk/LSCB/media/Images/pdfs/Multi-agency-Bruising-Protocol-for-Children-Not-Independently-Mobile-V4.pdf">https://www.leedsscp.org.uk/LSCB/media/Images/pdfs/Multi-agency-Bruising-Protocol-for-Children-Not-Independently-Mobile-V4.pdf</a>
- Not getting enough help with feeding leading to malnourishment
- Poor toileting arrangements
- Lack of stimulation
- Unjustified and/or excessive use of restraint
- Rough handling, extreme behaviour modification e.g. deprivation of liquid medication, food or clothing, disabling wheelchair batteries
- Unwillingness to try to learn a child's means of communication
- Ill-fitting equipment e.g. callipers, sleep boards, inappropriate splinting;
- Misappropriation of a child's finances
- Invasive procedures

## Appendix 2 Responding to children who report abuse.

When a child tells me about abuse s/he has suffered, what must I remember?

- Stay calm
- Do not transmit shock, anger or embarrassment.
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you.
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he
  may have tried to tell others and not been heard or believed.
- Tell the child that it is not her/his fault.
- Encourage the child to talk but do not ask "leading questions" or press for information.
- Listen and remember.
- Check that you have understood correctly what the child is trying to tell you.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Do not tell the child that what s/he experienced is dirty, naughty or bad.
- Do not take photographs or make videos of any injuries reported by a child.
- It is inappropriate to make any comments about the alleged offender.
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

NB It is not staff's role to investigate reports of abuse. Their role is to observe that something may be wrong, ask about it, listen, be available and respond appropriately.

# Immediately afterwards

You must not deal with this yourself. All reports of abuse must be recorded and responded to in keeping with the professional roles and responsibilities outlined in Fig 1: Summary of in-house procedures to follow where there are concerns about a child (Page 12)





# Appendix 3 Chronology of key events

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Guidance Notes:	Briefly summarise decisions reached, the services offered
and/or provided to	the child(ren) and family, and other action taken.

Name of child	Key worker

Event – CFC/Meeting/Telephone	Names of family	Outcome/Follow
	member/professional	up action
Call/Email/Review	involved.	·
	Call/Email/Review	Call/Email/Review involved.

# Appendix 4 Cause for Concern Form





Page 1 of 2

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Note: Please do not interpret what is seen or heard; simply record the facts. After completing the form, pass it immediately to the Designated Safeguarding Officer.
Name of child
Name of staff member completing form
Day Date Time Place
Nature of incident / concern including relevant background (Record child's word verbatim and any wishes and feelings expressed)
Signed:
Action/passed to



# Page 2 of 2

For: Designated Safeguarding Lead Officer Use

Name:	 Time

Action Taken	By whom	Outcome
Discuss with staff reporting		
Ensure the child's wishes and feelings are ascertained where appropriate and fully recorded.		
Monitoring sheet		
Check behaviour database, for recent incidents, that might be significant to inform assessment		
Contact parents Please tick		
Telephone Call Meeting: Email :		
Refer as appropriate (i.e CSWS, cluster, family support etc)		
Other (Please specify)		





# Appendix 5 SMART Plan

Example: Overview of Pupil Support/SMART Plan

Child Protection Pupil Support Plan Information	Name of Pupil:		
Current Care/living arrangements			
Support needs identified			
	Support/Intervention		
Type of support/intervention	Provider	Start Date	End Date
	Agencies Involved		
Name of professional	Agency	Email	Telephone

# Part Two:

The following Appendices reflect our LSCP referral pathways and procedures for responding to specific circumstances, which must be read and followed by all staff as appropriate when responding to individual concerns and circumstances and pre-appointment checks...







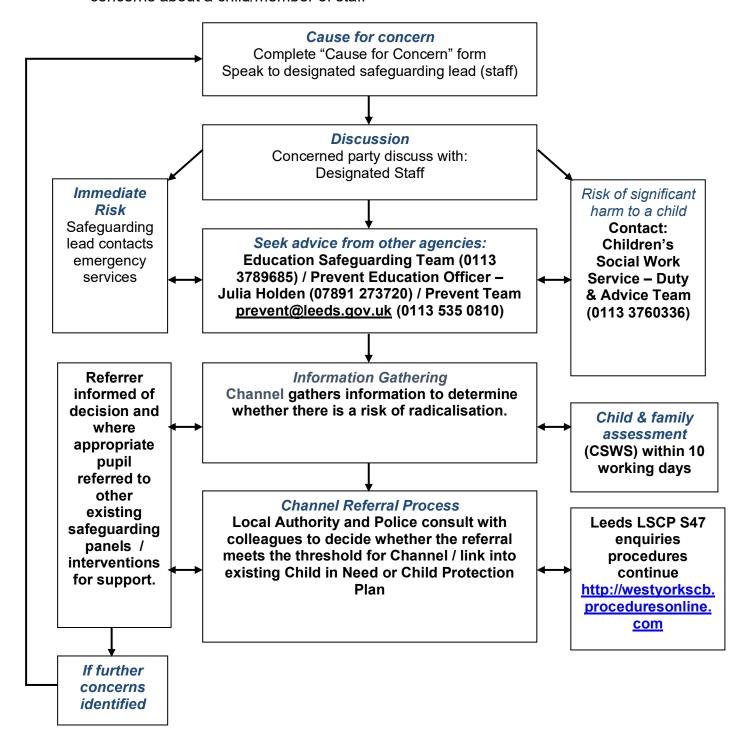
Post			
Date			

Recruitment and selection checklist	Initials	Date
Pre-interview:		
Planning - Timetable decided: job specification and		
description and other documents to be provided to		
applicants, reviewed and updated as necessary.		
Application form seeks all relevant information and		
includes relevant statements about references etc		
Vacancy advertised (where appropriate)		
Advertisement includes reference to safeguarding		
policy, that is, statement of commitment to		
safeguarding and promoting welfare of children and		
need for successful applicant to be DBS checked		
Applications on receipt - Scrutinised – any		
discrepancies/anomalies/gaps in employment noted		
to explore if candidate considered for short-listing		
Short-list prepared		
References – seeking		
Sought directly from referee on short-listed		
candidates; ask recommended specific questions;		
include statement about liability for accuracy		
References – on receipt		
Checked against information on application;		
scrutinised; any discrepancy/issue of concern noted		
to take up with referee and/or applicant (at interview		
if possible)		
(If received by email – accompanying email to		
verify authenticity. If not from professional email		
address, follow up to ensure authenticity)		
Invitation to interview - Includes all relevant		
information and instructions and the <b>self-disclosure</b>		
form.		
Interview arrangements - At least two interviewers;		
panel members have authority to appoint; have met		
and agreed issues and questions/assessment		
criteria/standards		
Online checks – Exploring any content publicly		
available online that might compromise their		
professional role so this can be discussed with		
candidates at interview		
Self-Disclosure – Completed self-disclosure is		
submitted and seen by the member of the panel who		
is safer recruitment trained.		
Interview - Explores applicants' suitability for work		
with children as well as for the post		
Note: identity and qualifications of successful		
applicant verified on day of interview by scrutiny of		
appropriate original documents; copies of		
documents taken and placed on file; where		
appropriate applicant completed application for DBS		
disclosure		

	1
Conditional offer of appointment: pre appointment	
checks. Offer of appointment is made conditional on	
satisfactory completion of the following pre-	
appointment checks and, for non-teaching posts, a	
probationary period	
References before confirmation of appointment:	
(if not obtained and scrutinised previously)	
(If received by email – accompanying email to	
verify authenticity. If not from professional email	
address, follow up to ensure authenticity)	
<b>Identity</b> (if that could not be verified at interview)	
,	
Qualifications (if not verified on the day of	
interview)	
<b>B</b> • • • • • • • • • • • • • • • • • • •	
Permission to work in UK, if required	
Sight of DBS certificate - where appropriate	
satisfactory DBS certificate.	
Satisfactory DDS certificate.	
DBS Barred list check – applicant is not barred	
from working with Children (this must be	
completed before the applicant commences	
work)	
Childcare (Disqualification) Regulations 2009	
Letter – for any staff who work in childcare provision	
or who are directly concerned with the management	
of such provision as defined in the statutory	
guidance.	
Health – the candidate is medically fit	
Medical Pre Employment Questionnaire	
Medical Fre Employment Questionnaire	
Overseas Checks – for individuals who have lived	
or worked abroad in the last 5 years. (For those	
carrying out teaching work within the EEA area	
this will include an EEA prohibition order check	
through Employer Access until Jan 21, after this	
date it will include a reference from any	
education employer overseas in the same	
period)	
Induction Completed	
•	
Risk Assessment – for Volunteers a written Risk	
assessment in relation to undertaking an Enhanced	
DBS	

# **Appendix 7 Radicalisation Response Checklist**

Summary of in-house procedures to follow where there are potential radicalisation concerns about a child/member of staff



Further information and relevant guidance documents are available from the Prevent Team or directly upon request from education.training@leeds.gov.uk



# Children's Services Integrated Safeguarding Unit Notification to Local Authority Designated Officer (Managing Allegations)

# ALLEGATIONS OR CONCERN ABOUT A PERSON WORKING WITH CHILDREN

This form has been designed to help all agencies working with children record and refer information when it has been alleged that a person who works with children has:

Behaved in a way that has harmed a child, or may have harmed a child; Possibly committed a criminal offence against or related to a child; or Behaved towards a child or children in a way that indicates she or he may pose a risk of harm to children.

## PLEASE PROVIDE AS MUCH INFORMATION AS YOU CAN AND SEND TO LADO@leeds.gov.uk WITHIN ONE WORKING DAY

	LADO	<u>viceus.</u> g	WITTIN ON	- ***	MINO DAT		
Date of Notification							
Date of Alleged Inci	dent:						
Name of Referrer:							
Agency:							
<b>Contact Details:</b>							
Professional's Deta	ils :						
Name :	D.O.B:		Employment Sector:	Occi	upation:	Employer:	
Home Address :							
Child/ren's Details (	if applica	ible):					
			1011				
Name :	D.O.E	B:	Legal Status i.e Looked after ch (S.31,S.20,LAS	nild	Social Wo Case Wor		Independent Reviewing Officer:
Address :							
Detail of Allegation			<b>ails</b> (to include name s) involved)	of ref	errer, date,	time, detail o	f allegation and

	Has the young person's views been sought: Yes/No (to include: when, by whom and detail of interview) If not please specify reason and date when young person will been seen)
Child or young person's view	
	Has the parent/carer been notified and their views sought: Yes/No (to include: when, by whom and detail of interview) If not please specify reason)
Parent or carer's view	
Have you discussed th your organisation?	is concern with the appropriate Line Manager and Human Resources within
What is their view	
Does the professiona	al have children of their own? if known please give names & ages

Previous concerns of a safeguarding nature:	Please identify (in chronological order) any previous/historical concerns of a safeguarding nature by the professional concerned.
Does the professiona	al work with children in any other capacity?
Please consult with HF	acknowledge the concern? R if advice is required about talking to the member of staff
What is their view	
	he individual concerned poses a current risk of significant harm to children n your organisation?
Please explain your ratio	nale for both a Yes or No response.
In your professional op allegation or concern?	pinion what action should be taken in regard to the individual facing the

your organisation (i.e. an agency worker). Have you discussed this concern with the appropriate Line Manager for the organisation concerned? (If not, please contact the employer and complete the section below, prior to submitting this notification)
What is their view
Name of employer:
Contact details:
LADO Discussion
Please provide relevant details

Form Completed by: