



## **Orchard House Safeguarding Children and Child Protection Policy.**

We ensure that our policy is updated and within the guidance and procedures of our Safeguarding Partners (LSP)

It is the responsibility of every Practitioner to report any breaches of this policy to the designated safeguarding lead (DSL)

At Orchard house we are dedicated to the support, development and promotion of high-quality care and education for the benefit of our children, families, and community. Every practitioner is committed to safeguarding the children within our care and promoting their welfare.

All practitioners have a responsibility for safeguarding children, being vigilant and being able to identify and reporting any safeguarding concerns, this is in line with the supporting policies:

- Data protection and confidentiality
- CCTV policy
- Recruitment, selection, and suitability of staff policy
- Internet use policy
- Inclusion and Equality Policy
- Lock down policy.
- Lone working policy.
- Looked after children policy.
- Missing child from nursery
- Missing child from outings policy
- Mobile phone and electronic devices policy
- Nappy changing policy
- Respectful intimate care policy
- Online safety policy
- SEND
- Whistleblowing policy

- Supervision of children policy
- Supervision of staff policy.

At Orchard House we ensure that all our practitioners have the necessary knowledge and skills to carry out their duties and have sufficient understanding of our policies and procedures to support them in promoting and safeguarding the welfare of the children within our care.

We achieve this from our recruitment and induction process for new practitioners, by offering ongoing training and support to all practitioners and providing quizzes appropriate to their roles and responsibilities.

### **Our policy intention.**

Our safeguarding policy makes it clear that all practitioners have a responsibility to safeguard children and young people and to protect them from harm. It aims to raise awareness of how to safeguard and to promote the welfare of children and provides procedures should a child protection issue arise.

Our policy applies to all children up to the age of 18 years whether living with their families, in care or living independently (Working together to safeguard children 2018).

Safeguarding and promoting the welfare of children, in relation to our policy is defined as the following.

- Protecting children from maltreatment, whether this occurs inside or outside of the child's home including online.
- Preventing the impairment of children's health and development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework.
- Promoting the upbringing of children with their birth parents or within other members of the family network.
- Providing support and help as soon as possible once a problem emergency.

(Working together to safeguard children )

Child protection is an integral part of safeguarding children and promoting their overall welfare. Child protection means.

- The activity that is undertaken to protect specific children who are suffering, or are at risk of suffering, or likely to suffer significant harm.

This includes harm that occurs inside or outside the home including online abuse.

At Orchard house to safeguard children and promote their welfare we will

- Develop a safe environment where practitioners are confident to raise concerns about professional conduct.
- Ensure all practitioners are able to identify the signs and indicators of abuse, including the softer signs of abuse, and know what action to take.
- Share information with other agencies as appropriate.
- Understand and have considerations including sensitive factors such as economic and social factors , ethnicity relating to the family as these can have an impact on children's lives.

We promote the following.

- Always listening to children
- Positive images of children
- Children developing independence appropriate for their age and stage of development.
- Safe and secure environment for children
- Tolerance and acceptance of different beliefs, cultures, and communities
- British values
- Promoting intervention and help for children and families in need.

We have a duty to act quickly and responsibly in any instance that may come to our attention. If in any doubt about what constitutes to a safeguarding concern, refer to the Designated safeguarding lead (DSL). If there is a concern, never do nothing, always do something, including sharing information with the relevant agencies. **Safeguarding is everybody's responsibility.**

### **Our nursery aims to:**

- Keep the children at the centre of everything that we do, providing sensitive interactions that develop and build an awareness of how to keep themselves safe, healthy and develop positive relationships.
- Be aware of the increased vulnerability of children with Special Educational Needs and Disabilities (SEND), isolated families and vulnerabilities in families, including the impact of toxic trio on children and Adverse Childhood Experiences (ACES)
- Ensure that all practitioners feel confident and supported to act in the best interest of a child, maintaining professional curiosity around welfare of children, sharing information, and seeking help that a child may need at the earliest opportunity.
- Ensure that all practitioners are familiar and updated regularly with child protection training and procedures and kept informed of changes to local and/or national procedures including thorough annual safeguarding updates.
- Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the Greenwich Safeguarding Children Partnership. (MASH)
- Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest.
- Ensure that practitioners identify, minimise, and manage risks while caring for children.
- Take any appropriate action relating to allegations of serious harm or abuse against any person working with children including reporting such allegations to Ofsted and other relevant authorities (LADO)
- Ensure parents are fully aware of our safeguarding and child protection policies and procedures when they register with the nursery and are kept updated of all updates.
- Regularly review and update the policy with practitioners and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by **Greenwich Safeguarding Children Partnership.**

### **Designated Safeguarding Lead (DSL).**

The DSL has overall responsibility for the Safeguarding children and child protection policy and procedures. It is their role to ensure that the policy and procedures are implemented to safeguard and promote the welfare of

children. They are responsible for coordinating safeguarding and child protection training for Practitioners across the nursery.

There is always at least one Designated person on duty during the opening hours. The DSL has comprehensive training at least every two years and update their knowledge on the ongoing basis, but at least once a year.

In the unlikely event of the DSL or other DSL absence and to ensure immediate action can be taken, contact **Greenwich Safeguarding Children Partnership**.

### **The Role of the Designated Lead (DSL)**

- To monitor and update the safeguarding children and child protection policy and procedures in line with new legislation and to ensure that it is effective. This will be done by giving every practitioner a copy of the policy to ensure that everyone understands the correct procedures.
- To ensure that any updates and new legislation are reflected in our services as soon as known.
- Ensure that detailed, accurate, secure written records of concern and referrals.
- Act as a source of support, advice and expertise for all practitioners, children and parents who have child protection concerns.
- Provide signposting to other agencies.
- Review all safeguarding reports.
- Access information provided promptly, carefully and refer as appropriate to external agencies.
- Consult with statutory child protection agencies and regulatory bodies where required.
- Make referrals to child protection agencies or the police when required.
- Keep up to date with good practice and national requirements for safeguarding and child protection.
- Provide information on safeguarding and children protection for the setting.
- Raise awareness of any safeguarding and child protection training needs and implement where necessary.

- Retain up to date knowledge of the role of the local safeguarding partnership arrangements and local child protection procedures.

It is not the role of the DSL to investigate whether or not a child has been abused or investigate an allegation or disclosure.

### **Sharing low-level concerns.**

There may be occasions that inappropriate, problematic, and concerning behaviour by a practitioner is observed but does not meet the threshold for significant harm. This would be classed as “low-level” concern, but this is not always classed as insignificant.

How we would define low-level concern.

- Any concern, no matter how small, that a practitioner or other adult working with children may have acted in a way that is inconsistent with the practitioner’s behaviour policy, this also includes inappropriate behaviour outside of the nursery.
- A concern that may be a sense of unease or a “nagging doubt” and does not meet the threshold or is serious enough to refer to the LADO.

At Orchard house we encourage an ethos and culture of openness, trust, and transparency, with clear values and expected behaviour, monitored, and reinforced by all our practitioners. All concerns and allegations, however small will be shared and responded to. All concerns will be shared with the DSL, or other nominated personas in our reporting procedures.

At Orchard house we encourage concerns to be shared as soon as reasonably practicable and preferably within 24 hours of becoming aware of it.

It is not expected that practitioners will be able to determine whether the behaviour in question is a concern, complaint, or allegation before sharing any information. If the DSL is in any doubt as to whether the information meets the harm threshold, they will consult with the LADO.

There may be occasions where a practitioner may find themselves in a situation which could be misinterpreted or appear compromising to others. If this occurs the practitioner is encouraged to self-report to the DSL. We

encourage practitioners to be confident to self-refer and believe it reflects awareness of our standards of conduct and behaviour as define in our staff behaviour policy.

Once the DSL receives the information, they will need to determine whether the behaviour:

- Meets, or may meet, the harm threshold (contact LADO)
- Meets the harm threshold when combined with previous low-level concerns (contact LADO)
- Constitutes to low-level concern.
- Is appropriate and consistent with the law and our staff behaviour policy.

The DSL will make appropriate records of all information shared, including:

- The subject matter of concern.
- With the reporting person
- Any relevant witnesses where possible.
- Any external discussions such as with the LSP or LADO.
- Their decision about the nature of the concern.
- Their rationale for the decision
- Any actions that were taken.

We retain all records of low-level concerns in a separate low-level concerns file, with separate concerns regarding a single individual kept as a chronology.

These records are kept confidential and held securely in a locked filing cabinet, accessed only by those who have appropriate authority. Records will be retained at least until the individuals leave their employment.

If the low-level concern raises issues of misconduct, then appropriate actions will be taken following our Disciplinary procedures. Records will be kept in their personal file as well as the low-level concern file.

### **Monitoring children's attendance.**

As part of our requirements under the statutory framework (EYFS), we are required to monitor children's attendance patterns to ensure they are consistent and no cause for concern.

We ask parents to inform the nursery prior to their children taking holidays or days off, and all incidents of sickness absence should be reported to the

nursery the same day, so the management are able to account for the child's absence.

If a child does not arrive at nursery within one hour of their normal arrival, the Donna will contact the parents to ensure the child is safe and healthy through our Family app. If the parents are not contactable then the emergency contacts listed on their registration forms will be contacted to ensure all parties are safe.

If we are unable to make any contact with the parents and emergency contacts, then we would access if a home visit is required to establish the welfare of all parties. If contact is still not established, we would access if it would be appropriate to contact relevant authorities, including the police.

Where a child is part of a child protection plan, or during the process, any absences will immediately be reported to the Local Authority children's social team to ensure the child remains safe and well.

All absences, sicknesses, holidays, and destinations are recorded on our Family app.

### **Informing parents**

Parents are usually the first point of contact. If suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of the Local Authority children's social care team, police or LADO does not allow this to happen.

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

### **Supporting families**

At Orchard house we take every step to build up trusting and supportive relationships among families and practitioners. We will continue to welcome a child and their family whilst enquires are being made in relation to abuse in the home situation. Parents and families will be treated with respect in a non-judgemental manner whilst an external investigation is carried out in the best interest of the child.



## **Confidentiality**

Confidentiality must not override the right of the child to be protected from harm. However, every effort will be made to ensure confidentiality is maintained for all the concerned if an allegation has been made and is being investigated.

If uncertain about whether sensitive information can be disclosed to a third party, contact the DSL or call the Information Commissioner's Office on **0303 123 1113**. They will provide advice about the particulars relating to each individual case, including information which cannot be shared.

Practitioners must not make any comments either publicly or in private about the supposed or actual behaviour of a parent, child, or practitioner.

## **Recording keeping and data protection.**

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

At Orchard house we keep appropriate records to support the early identification of children and families which would benefit from early help. Factual records are maintained in a chronological order with parental discussions. Records are reviewed regularly by the DSL to look holistically at identifying children's needs.

Our Data protection and confidentiality policy will be applied with regards to any information received from an individual. Only persons involved in the investigation should handle this information although any investigating body will have access to all information stored in order to support an investigation.

## **Definition of significant harm.**

The Children Act 1989 introduced the concept of significant harm as "the threshold that justifies compulsory intervention in a family life in the best

interests of children". It gives LAs a duty to make enquires to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.

Whilst there are no absolute criteria to rely on when judging what constitutes significant harm, consideration should be given to:

- The severity of the ill-treatment, including the degree of harm
- The extent and frequency of abuse and/or neglect
- The impact this is likely to have, or is having, on the child involved.

This could be a single traumatic event, such as a violent assault, suffocation, or poisoning, or it can be a combination of events that impairs the physical, intellectual, emotional, social or behavioural development of a child.

### **Definitions of abuse and neglect**

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.

Children may be abused within a family, institution or a community setting such as a church that is known to them or, more rarely, a stranger.

Perpetrators of abuse can be an adult, or adults, another child, or children.

(What to do if you're worried a child is being abused: Advice for practitioners 2015 and Working Together to safeguard children 2018)

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

### **Indicators of child abuse.**

- Failure to thrive and meet developmental milestones.
- Fearful or withdrawn.
- Repeated injuries
- Significant changes to behaviour patterns
- Unexplained injuries to a child or conflicting reports from the parents or practitioners
- Unaddressed illnesses or injuries

Softer signs of abuse as defined by National Institute for Health and Care Excellence (NICE) include:

**Emotional states:** fearful, withdrawn, low self-esteem.

**Behaviour:** Aggressive, habitual body rocking

**Interpersonal behaviours:**

- Over-friendliness to strangers including healthcare professionals.
- Excessive clinginess, persistently resorting to gaining attention.
- Indiscriminate contact or affection seeking
- Demonstrating excessively “good” behaviour to prevent parental disapproval.
- Failing to seek or accept appropriate comfort or affection from an appropriate person when significantly distressed.
- Coercive controlling behaviour towards parents
- Lack of ability to understand and recognise emotions.
- Very young children showing excessive comforting behaviours when witnessing parental or carer distress.

**Child on child abuse.**

Child on child abuse is known as a peer-on-peer abuse; children are included as potential abusers in our policies. Child on child abuse may take the form of bullying, physically hurting another child, emotional abuse, or sexual abuse. Reporting procedures in these instances remain in the same although additional support from relevant agencies may be required to support both the victim and the perpetrator. Children who develop harmful behaviours are also likely to be the victims of abuse or neglect.

If **Child-on-child abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

**Physical abuse.**

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating, or otherwise causing physical harm to a child.

If **Physical abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Fabricated or induced illness (FII)**

This abuse is when a parent fabricates the symptoms of, or deliberately induces, illness in a child. The parent may seek out unnecessary medical treatment or investigation. They may exaggerate a real illness and symptoms, or deliberately induce an illness through poisoning with medication or other substances, or they may interfere with medical treatments. This may also be presented through false allegations of abuse or encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.

**FII is a form of Physical abuse,** and any concerns must be reported in line with our safeguarding procedures.

### **Female Genital mutilation (FGM)**

**FGM** is a procedure where the female genital organs are injured or changed with no medical reason. The procedure may be carried out shortly after birth, during childhood or adolescence, just before marriage or during a woman's first pregnancy.

It is a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother, and/or death (definition taken from the multi-agency statutory guidance on female genital mutilation).

Other consequences include shock, bleeding, infections (tetanus, HIV, and hepatitis B and C) and organ damage.

**FGM is a form of physical abuse** and any concerns must be reported in line with our safeguarding procedures. In addition, there is a mandatory duty to report to police any case where an act of FGM appears to have carried out on a girl under the age of 18.

### **Breast ironing or breast flattening**

Breast ironing, also known as breast flattening, is a process where young girl's breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear or to delay the

development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction, and early forced marriage. These actions can cause serious health issues such as abscesses, cysts, itching, tissue damage, infection, discharge of milk, dissymmetry of the breasts and severe fever.

**Breast ironing/flattening is a form of physical abuse**, and any concerns must be reported in line with our safeguarding procedures.

### **Emotional Abuse.**

Working Together to Safeguard Children 2018 defines emotional abuse as “the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development” Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur separately.

Examples of emotional abuse include:

- Conveying to a child that they are worthless or unloved, inadequate, or valued only if they meet the needs of another person.
- Not giving a child opportunity to express their views, deliberately silencing them or “making fun” of what they say or how they communicate.
- Age or developmentally inappropriate expectations being imposed, such as interactions that are beyond a child’s developmental capacity, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interactions.
- Serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.
- A child seeing or hearing the ill-treatment of another.

A child may experience emotional abuse through witnessing domestic abuse or alcohol and drug misuse by adults caring for them, In England, The Domestic Abuse Act 2021 recognises in law that children are victims of emotional abuse if they see, hear or otherwise experience the effects of domestic abuse.

Signs and indicators may include delay in physical, mental and/or emotional development, sudden speech disorders, overreaction to mistakes, extreme fear of any new situations, neurotic behaviour including rocking, hair twisting

and self-mutilation, extremes of passivity or aggression, appearing to lack confidence or self-assurance.

If **Emotional abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Sexual abuse.**

Sexual abuse involves forcing, or enticing, a child to take part in sexual activities. Sexual abuse does not necessarily involve a high level of violence and includes whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (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 a sexual inappropriate way, or grooming a child in preparation for abuse.

Sexual abuse can take place online. Adult males are not the only sole perpetrators of sexual abuse, women can also commit acts of sexual abuse, as do other children. Our policy applies to all children up to the age of 18 years.

Action must be taken if practitioners witness symptoms of sexual abuse including a child indicating sexual activity through words, play or drawing, having an excessive preoccupation with sexual matters or having an inappropriate knowledge of adult sexual behaviour, or language, for their developmental age. This may include acting out sexual activity on dolls or toys or in the role-play area with their peers, drawing pictures that are inappropriate for a child, talking about sexual activities or using sexual language or words.

Additional signs of emotional and physical symptoms are show below.

### **Emotionally.**

- Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age or stages of development.
- Personality changes for example becoming insecure and clingy.
- Regressing to younger behaviour patterns such as sucking their thumb.
- Sudden loss of appetite or overeating

- Being isolated or withdrawn
- Inability to concentrate.
- Lack of trust or fear of someone that is well known to them, not wanting to be left alone with them.
- Becoming worried about their clothing being removed.

### **Physically.**

- Bruises
- Bleeding or discharge, pain, and discomfort in their genital areas (vaginal or anal)
- Sexually transmitted infections
- Pregnancy.

**If sexual abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Neglect**

Working Together to Safeguard Children 2018, defines neglect as “the persistent failure to meet a child’s basic physical and/psychological needs likely to result in the serious impairment of the child’s health or development”.

Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve adults providing care and failing to:

- Provide adequate food, clothing, and shelter.
- Protect them from physical harm or danger.
- Ensure adequate supervision.
- Ensure access to appropriate medical care or treatment.
- Respond to their basic emotional needs.

An NSPCC Statistics briefing (July 2024) found neglect continues to be the most common form of abuse, with one in ten children in the UK having been neglected. Concerns around neglect have been identified for half of children who are subject to a child protection plan or on a child protection register in the UK. Younger children are more likely than older children to be subject to a child protection plan in England because of neglect, although research suggests that the neglect of older children is more likely to be overlooked.

Signs of neglect include a child persistently arriving at nursery unwashed or unkempt, wearing clothes that are too small (especially shoes that restrict growth or hurt them), arriving at nursery in the same nappy they went home in, or a child having an illness or identified special educational need or disability that is not being addressed. A child may be persistently hungry if a caregiver is withholding, or not providing enough food. A child who is not receiving the attention they need at home may crave it from other adults.

**If neglect** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Domestic abuse**

The definition of domestic abuse from the Domestic Abuse Act 2021 is:

Behaviour of a person (A) towards another person (B) is “domestic abuse” if

- A and B are each aged 16 or over and are personally connected to each other
- The behaviour is abusive.

Behaviour is “abusive” if it consists of any of the following:

- Physical or sexual abuse
- Violent or threatening behaviour
- Controlling or coercive behaviour
- Economic abuse
- Psychological, emotional, or other abuse

It does not matter whether the behaviour consists of a single incident or a course of conduct.

Domestic abuse can happen to anyone regardless of gender, age, social background, religion, sexuality or ethnicity and domestic abuse can happen at any stage in a relationship.



Signs and symptoms of domestic abuse include:

- Changes in behaviour, becoming very quiet, anxious, frightened, tearful, aggressive, distracted, or depressed.
- Visible bruising or single, or repeated injury with unlikely explanations
- Change in manner of dress, wearing clothes to hide injuries that do not suit the weather.
- Stalking, including excessive phone calls or messages.
- Partner or ex-partner exerting an unusual amount of control or demands over work schedule.
- Frequent lateness or absence from work.

All children can witness and be adversely affected by domestic abuse in the context of their home life. Exposure to domestic abuse and/or violence can have serious, long lasting emotional and psychological impact on children.

Where incidents of domestic abuse are shared by our own practitioners, we will respect confidentiality at all times and not share information without their permission. However, we will share this information, without permission, in cases of child protection or where we believe there is an immediate risk to serious harm to the person involved.

**If domestic abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Contextual safeguarding**

as young people grow and develop, they may be vulnerable to abuse or exploitation from outside their family. These extra-familial treats might arise at school and other educational establishments from within peer groups, or more widely from within the wider community and/or online.

As part of our safeguarding procedures, we will work in partnership with parents and other agencies to work together to safeguard children and provide the support around contextual safeguarding concerns.

### **Child sexual exploitation (CSE) and Child criminal exploitation (CCE)**

Both CSE and CCE are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a

child into taking part in sexual or criminal activities, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation (Keeping children safe in education 2022).

### **Child sexual exploitation (CSE)**

CSE is where an individual or group take advantage of an imbalance of power to coerce, manipulate or deceive a child into **sexual** activity. The victim may have been sexually exploited even if the sexual activity seems consensual. CSE does not always involve physical contact; it can also occur through the use of technology and may be without the child's immediate knowledge such as through others copying videos or images they have created and posted on social media.

Signs and symptoms include:

- Physical injuries such as bruises and bleeding.
- Having money or gifts they are unable to explain.
- Sudden changes in their appearance.
- Becoming involved in drugs or alcohol, particularly if it is suspected they are being supplied by older men or women.
- Becoming emotionally volatile having mood swings are common in young people, but more severe changes could indicate that something is wrong.
- Using sexual language beyond that expected for their age or stage of development.
- Engaging less with their usual friends.
- Appearing controlled by their phone.
- Switching to a new screen when you come near the computer or tablet.
- Nightmares or sleeping problems.
- Running away, staying out overnight, missing school.
- Changes in eating habits.
- Talk to a new, older friend, boyfriend, or girlfriend.
- Losing contact with family and friends being secretive.
- Contracting sexually transmitted diseases.

**If involvement with County lines is suspected, then any concerns must be reported in line with our safeguarding procedures.**

## **Child criminal exploitation (CCE)**

CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any **criminal** activity. The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.

Other examples include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country forced to shoplift or pickpocket, or to threaten other young people.

Signs and symptoms of CCE are very similar to those of CSE.

**If CSE or CCE** are suspected, then any concerns must be reported in line with our safeguarding procedures.

## **County lines.**

The National Crime Agency (NCA) defines county lines as gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of “deal line”. Customers live in a different area to the dealer, so drug runners are needed to transport the drugs and collect payment.

Perpetrators often use coercion, intimidation, violence, sexual violence, and weapons to ensure compliance of victims. A child targeted and recruited into county lines through schools, further and high education institutes, pupil referral units and special educational needs schools, also care homes.

Signs and symptoms include:

- Changes in dress style.
- Unexplained, unaffordable new things such as clothes, jewellery even cars etc.
- Missing from home or school and/ or significant decline in performance

- New friends with those who don't share any mutual friendships with the victim, gang, association or isolation from peers and social networks.
- Increase in anti-social behaviour in the community including weapons.
- Receiving more texts and calls than normal.
- Unexplained injuries.
- Significant changes in emotional well-being.
- Being seen in different cars or taxis driven by unknown adults.
- A child being unfamiliar with where they are.

### **Cuckooing**

Cuckooing is a form of county lines crime. In this instance, the drug dealers take over the home of a vulnerable person in order to criminally exploit them by using their home as a base for drug dealing, often in multi-occupancy or social housing properties.

Signs and symptoms include:

- An increase in people, particularly unknown people, entering or leaving a home or taking up residence.
- An increase in cars or bikes outside then home
- A neighbour who hasn't been seen for an extended period.
- Windows covered or curtains closed for long periods of time.
- Change in resident's mood and/or demeanour they may become withdrawn or secretive.
- Substance misuse and/or drug paraphernalia.
- Increased anti-social behaviour.

**If cuckooing** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Child trafficking and modern slavery.**

Child trafficking and modern slavery is when a children are recruited, moved, transported, and then exploited, forced to work or are sold.

For a child to have been a victim of trafficking there must have been:

- Action: recruitment, transportation, transfer, harbouring, or receipt of a child for the purpose of exploitation.
- Purpose: sexual exploitation, forced labour or domestic servitude, slavery, financial exploitation, illegal adoption, removal of organs.

Modern slavery includes slavery, servitude and forced or compulsory labour and child trafficking. Victims of modern slavery are also likely to be subject to other types of abuse such as physical, sexual, and emotional abuse.

Signs and symptoms include:

- Being under control or reluctant to interact with others.
- Having few personal belongings, wearing the same clothes every day, or wearing unsuitable clothes.
- Being unable to move money around freely.
- Appearing frightened, withdrawn, or showing signs of physical or emotional abuse.

**If child trafficking or modern slavery** is suspected, then any concerns should be reported in line with our safeguarding procedures.

### **Forced marriage.**

A forced marriage is defined as “a marriage in which one, or both spouses, do not consent to the marriage but have been coerced into it”. Duress can include physical, psychological, financial, sexual, and emotional pressure.

Where incidents of forced marriage are shared by our own practitioners, we will respect confidentiality at all times and not share information without their permission. However, we will share this information without permission in cases of child protection, or where we believe there is an immediate risk of serious harm to the person involved.

If it is suspected that a **forced marriage** is being planned, then any concerns should be reported in line with our safeguarding procedures.

### **Honour based abuse (HBA)**

HBA is described as “incidents of crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM) forced marriage, and practices such as breast ironing”. (Keeping children safe in education 2022). Such abuse can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their “honour” code. It is violation of human rights and may be domestic, emotional and/or sexual abuse such as being held against their will, threats of violence or actual assault. It often involves wider

family networks or community pressure and so can include multiple perpetrators.

Signs and symptoms include:

- Changes in how the child dresses or acts, such as not “western” clothing or make up.
- Visible injuries, or repeated injury, with unlikely explanations.
- Signs of depression, anxiety, or self-harm.
- Frequent absences.
- Restrictions on friends or attending events.

Where incidents of HBA are shared by our own practitioners we will respect confidentiality at all times and not share information without their permission. However, we will share information without permission in cases of child protection. Or where we believe there is an immediate risk of serious harm to the person involved.

**If honour-based abuse** is suspected then any concerns must be reported in line with our safeguarding procedures.

### **Child abuse linked to faith or belief CALFB)**

Child abuse linked to faith or belief (CALFB) can happen in families when there is a concept of belief in:

- Witchcraft and spirit possession, demons or the devil acting through children or leading them astray mainly seen in Christian beliefs.
- The evil eye or djinns this is traditionally known in some Islamic faiths and dakini in Hindu context.
- Ritual or multi-murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies.
- Use of belief is magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation.
- Children’s actions are believed to have brought bad fortune to the family or community.

The Prevent Duty website.

**If CALFB** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Extremism and radicalisation**

Under the Counter-Terrorism and Security Act 2015, there is a duty to safeguard vulnerable and at risk children by preventing them from being drawn into terrorism. This is known as the Prevent Duty.

Children can be exposed to different views and receive information from various sources and some of these views may be considered radical or extreme. Radicalisation is the way a person comes to support or be involved in extremism and terrorism: usually it's a gradual process so those who are affected may not realise what's happening. Radicalisation is a form of harm.

The process may involve the following.

- Being groomed online or in person.
- Exploitation, including sexual exploitation
- Psychological manipulation.
- Exposure to violent material and other inappropriate information.
- The risk of physical harm.

**If radicalisation or extremism** is suspected, then any concerns must be reported in line with our safeguarding procedures. This also includes reporting concerns to the police.

### **Online safety.**

While the growth of internet and mobile devices bring many advantages, the use of technology has become a significant component of many safeguarding issues such as child sexual exploitation and radicalisation.

There are four main areas of risk associated with online safety:

- Content: being exposed to illegal, inappropriate, or harmful material such as pornography, fake news, racist or radical and extremist views.
- Contact: being subjected to harmful online interaction with other users such as commercial advertising or adults posing as children or young adults.

- Conduct: personal online behaviour that increases the likelihood of. Or causes harm, such as making, sending, and receiving explicit images and online bullying.
- Commerce: risks such as online gambling, inappropriate advertising, phishing and or financial scams.

**Report online safety concerns to the DSL and to the Child Exploitation and Online Centre (CEOP) [www.ceop.police.uk/safety-centre](http://www.ceop.police.uk/safety-centre)**

**<https://www.iwf.org.uk/en/uk-report/>**

**Inappropriate content received by email must be reported to the DSL and to the Internet Watch Foundation (IWF)[www.iwf.org.uk](http://www.iwf.org.uk)**

### **Up skirting/down blousing.**

Up skirting and down blousing are criminal offences. They involve taking pictures of someone's genitals, buttocks, or other intimate images under their clothing without them knowing, either for sexual gratification or in order to humiliate, or distress the person.

**If up skirting or down blousing** is suspected, then the concerns must be reported in line with our safeguarding procedures.

### **Reporting Procedures**

#### **Public interest disclosure (whistleblowing)**

Whistleblowing is the term used when a practitioner passes on information concerning wrongdoing. All safeguarding allegations, internal or external, current, or historical, must be passed on to the DSL. We will cooperate fully with the other authorities/agencies involved and follow any guidance given.

We believe keeping children safe is the highest priority at Orchard House and if, for whatever reason, concerns cannot be reported to the DSL or Deputy DSL, concerns can be reported anonymously to the NSPCC, the police or social services safeguarding children team.



## **Allegations against practitioner's**

An allegation against one of our practitioners may relate to one of the following:

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

We will make every effort to maintain the confidentiality of all parties while an allegation or concern is being investigated. Dealing with an allegation can be very stressful experience and. To support the practitioner, a named person (DSL or deputy DSL) to liaise with will be offered to them. The timeframes for an investigation will follow the guidelines of other involved agencies.

We reserve the right to suspend a practitioner until the investigation is concluded. Further action will be determined by the outcome of the investigation.

**Founded allegations** are considered gross misconduct, in accordance with our disciplinary procedures, and may result in the termination of employment. DBS will be informed to ensure their records are up to date and Ofsted will be informed. We retain the right to dismiss any practitioner in connection with the founded allegations following an inquiry.

All safeguarding records are kept until the person reaches normal retirement age or for 22 years if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids unnecessary reinvestigations.

**Unfounded allegations** will result in all rights being reinstated. A return-to-work plan will be put in place for the practitioner returning to work after an allegation has been deemed unfounded. Individual support will be offered to meet the needs of the practitioner and the nature of the incident such as more frequent supervisions meetings, coaching, buddy, or external support services.

If the practitioner resigns during the investigation, we will inform DBS, Ofsted and the police, where appropriate.

## **Support for practitioners during safeguarding incidents**

The DSL will support practitioners throughout any of the processes listed above and will organise appropriate counselling should this be required.

Any practitioner who has concerns about the content of this policy and its procedures, should speak to the DSL as soon as possible. If any practitioner wishes to talk confidentially about any safeguarding circumstances, it is important to do this as soon as possible.

### **Reporting procedure**

We will always act on behalf of the child and will do everything possible to ensure the safety and welfare of any child and so we will take all allegations of potential abuse seriously. All concerns reported to practitioners will be pursued, regardless of the nature of the concern and to whom the allegation relates too.

All practitioners have a responsibility to report safeguarding and child protection concerns and suspicions of abuse. These concerns will be discussed with the DSL as soon as possible, as follows:

### **Practitioners' role on receiving information that causes a safeguarding concern.**

#### **Step 1**

- Contact the DSL immediately. This must be a verbal conversation to ensure the concern is clearly understood and action is taken.
- If the DSL is unavailable, contact the deputy DSL, Local safeguarding partnership (LSP), NSPCC, social services, or police until you are able to have a verbal conversation.
- For children who arrive at nursery with an existing injury, an "incident outside of the nursery" form will be completed. If there are queries or concerns regarding the injury or information given, follow these procedures.

### **Role of the DSL on receiving information that causes a safeguarding concern**

#### **Step 1.**

- If it is believed a child is in immediate danger, contact the police.
- For children who arrive at nursery with an existing injury, an "incident outside nursery" a form will be completed. If there are queries or concerns regarding the injury or information given, follow these procedures.

## **Role of practitioner.**

### **Step 2**

- Write an objective report which it includes:
- Child's name and address
- Age and date of birth
- Date, time, location of the observation or disclosure
- Exact words spoken by the child (a close as word-for-word as possible) and non-verbal communication.
- Outline of the concern
- Exact position and type of injuries or marks seen.
- Exact observation of any incident or concern reported and the names of any other person present at the time.
- Any known confidentiality issues.
- Signature and date person making the report and the DSL or nominated individual receiving the report.

## **DSL role**

### **Step 2**

- Sign and date report received from practitioner.
- Securely store the information according to the nursery procedure.
- If the safeguarding concern relates to a child, contact the Local Authority Children's social care team, report concerns and seek advice immediately or as soon as practical to do so.
- If the safeguarding concern relates to an allegation against an adult working with the children contact the Local Authority Designated Officer (LADO) and request a confirmation email of the report, then report the concern to Ofsted.
- A full investigation into any allegation will be carried out by the appropriate professionals to determine how this will be handled.
- Note any actions requested by LADO/Ofsted and follow the instructions received.

## **Practitioners' role**

### **Step 3**

- If you feel the report is not being taken seriously or are worried about an allegation getting back to the person in question, then it is your duty to inform the Local Authority Childrens social care team directly yourself.

- Follow all instructions from the Local Authority Childrens social care team and/or Ofsted, co-operating where required.

### **DSL role**

#### **Step 3**

- If appropriate, discuss the concerns or incidents with parent(s), unless it is believed that this would place the child at greater risk of harm.
- Record all discussions (remember parents will have access to these records on request in line with GDPR and data protection.
- Follow all instructions from the Local Authority children's social care team and/ or Ofsted, co-operating where required.
- Record information and actions taken.

### **DSL role**

#### **Step 4**

- If the DSL is not the owner/ manager and there is an allegation against a practitioner, then the owner/manager must be informed as they have a duty of care for their employees.

### **DSL role**

#### **Step 5**

- If the Local Authority children's social care team have not been in contact within the timeframe set out in Working Together to Safeguard Children (2018), it must be followed up.  
Never assume that action has been taken.

#### **Step 6**

- Safeguarding procedures will be reviewed to ensure the process has been applied in line with the policy.

If a concern is raised anonymously and we have no contact details, we will treat the concern as valid and follow the procedures as above. If a malicious call is suspected, the procedures will still be followed: a child may be in danger. The Information Commissioners Office (ICO) will be contacted to ensure permitted data sharing.

## **Recruitment, selection, induction and training.**

### **Recruitment and selection.**

Through the implementation of our Safer recruitment of staff policy, we endeavour to prevent unsuitable people from becoming employed in our nursery. Procedures include relevant checks, such as requesting 2 references, establishing the identity of the applicant and conducting criminal record disclosures. Where required, practitioners DBS checks. Clear person specification criteria and processes during the recruitment and selection process enable us to determine a candidate's suitability for the role.

We have specific responsibilities, as outlined in this policy, for practitioners, apprentices and learners under the age of 18 whether living with their families, in state care or living independently.

### **Induction and probation for practitioners.**

As part of our induction process, all new workers will receive basic training on this safeguarding children and child protection policy, so they have the necessary knowledge and skills to safeguard and promote the welfare of children. Each practitioner receives a copy of the policy.

It is the manager's responsibility to ensure that all new practitioners understand the policy and follow it. All safeguarding must be completed by the end of the probation period.

All practitioners are expected to keep their safeguarding knowledge and skills up-to-date and report any concerns they may have. We maintain records to ensure all practitioners have received the training that they require and need.

### **Learners and placements or in employment.**

We hold responsibility for ensuring that learners on placement or in employment are familiar with and sign up to this policy and agree to work within this framework. Learners will receive basic child protection training prior to starting their placement with us.

Learners and students under the age of 18 will be protected as children. Risk assessments will be completed to ensure their safety and well-being are protected and supported during their employment or training period. If

situations arise during employment or placement which identifies those aged 18 or under are at risk from abuse or neglect, we will contact the appropriate bodies to ensure the individual is safeguarded at all times.

### **Responding to and recording disclosures**

Practitioners, students or volunteers may receive a safeguarding disclosure. What to do if you are responding to and reporting a disclosure of abuse:

#### **Responding to a child's disclosure of abuse- what to do and say.**

- Stay calm and listen carefully.
- Try not to look shocked and reassure them that it is not their fault.
- Find an appropriate opportunity to say that the information will need to be shared and do not promise to keep the information a shared secret.
- Allow the child to continue at their own pace.
- Only ask questions for clarification and avoid asking any questions that may suggest a particular answer.
- Reassure the child that they have done the right thing, let them know what you will do next and with whom the information will be shared with.
- Record the disclosure in writing using the child's own words as soon as possible, but not while the child is talking.
- Includes the date, time, any names mentioned and to whom the information was given.
- Sign and date the record, store it securely and refer the disclosure to the nurseries DSL and/or manager.

#### **Recording a case of disclosure of suspicion of abuse in the community**

If you observe a concern or receive a disclosure, make an objective record.

Where possible include:

- Child's name and address
- Age of the child and date of birth.
- Setting name and address.
- Date and time of the observation or disclosure.
- Details of the concern using factual information, including the exact words, if relevant.
- Accurate details of the observation, including actions of the child or adult involved.
- Accurate details of any injury or wound seen, including position and size.

- The names of any other person present at the time.
- Name of the person completing the report.
- Name of the person to whom the concern was shared, with date and time.

Discuss the record with the DSL or manager following the procedures. We expect all practitioners and stakeholders to co-operate with relevant agencies to ensure the safety of all children.

### **Legal framework.**

We adhere to all current legislation as seen below:

- Children and Social Work Act 2017
- Criminal Justice and Court Services 2000
- Female Genital Mutilation Act 2003 (as amended by the Serious Crime Act 2015)
- Freedom of Information Act 2012.
- Keeping children Safe in Education 2022.
- Safeguarding Vulnerable Groups Act 2006
- The Childcare Act 2006
- The Children Act 2004
- The Children Act 1989
- The Counter-Terrorism and Security Act 2015
- The Data Protection Acts 1984,1998, and 2018.
- The Domestic Abuse Act 2021
- The Human Rights Act 1998
- The Police Act 1997
- The Sexual Offences Act 2003
- Working Together to Safeguard Children 2018
- The equality Act 2010

Relevant non-statutory guidance includes:

- Child sexual exploitation, DfE 2017
- Information Sharing, DfE 2024
- What to do if you're worried a child is being abused, DfE 2015.

### **Useful contacts**

**DSL Donna Bachelor 0208 305 2014/07940587164**

**Deputy DSL Sarah Day 0208 305 2014**

**Third DSL Hannah Brant 0208 305 2014**

**LADO 0208 921 3930**

**Local Authority Safeguarding Children Partnership 0208 921 4477**

**Ofsted 0300 123 1231**

**Police 999**

**Non-emergency police 101**

**Child exploitation and online protection (online only)**

**Dfe counter-extremism helpline 0207 340 7264**

**NSPCC child protection helpline 0808 800 500**

**Childline 0800 1111**

**Kidscape 0207 823 5430**

**National Domestic Abuse helpline 0808 2000 247**

**Modern Slavery helpline 08000 121 700**

**Crimestoppers 0800 555 111**

**Internet Watch Foundation (IWF) 01223 20 30 30**

**Information Commissioners Office (ICO) 0303 123 1113.**

**Anti-terrorist hotline 0800 789 321**

Policy created 23<sup>rd</sup> August 2024 by Donna Bachelor

Review date August 2025



