



Ashley Down After School Club

Child Protection Policy and Procedure

This child protection policy and procedure forms part of Ashley Down After School club safeguarding children arrangements.

Aims

Our setting considers that the welfare of the child is paramount and it is the duty of members, staff and volunteers under HM Government's Working Together to Safeguard children 2018 to implement this policy, and to ensure that it has in place appropriate procedures to safeguard the well-being of children and young people and protect them from abuse

Implementation and Monitoring

- The Trustees will appoint a trustee as the child protection officer, at its **first meeting** following the Annual General Meeting. One role of the Child Protection Officer will be to identify and ensure there is a member of staff to take the lead responsibility for safeguarding children within the setting and liaising with local statutory children's services as appropriate.
- This person will be the Designated Safeguarding Lead (DSL) The DSL must attend an inter-agency child protection training course, which must be updated at least Children Board – BSCB); every 2 years (in Bristol this is run by the Bristol Safeguarding ***It is everyone's responsibility to safeguard children.*** However the Designated Safeguarding Lead will take the lead responsibility for safeguarding children within the setting.
- This Child Protection Officer will receive reports from the DSL of any occasions when there are concerns or issues of Child Protection.
- All staff and volunteers are to undertake child protection training, which must be updated every 3 years. There will also be an annual in-house update for all staff;
- The Child Protection policy must be part of the induction for all staff and volunteers.
- All staff and volunteers are aware of how to support children to understand and recognise risk;

- The setting will review this policy annually, to ensure it is up to date and is being implemented correctly;
- If the DSL is uncertain about concerns about a child, they should contact Families in Focus.

Trustee Child Protection officer Brunel site:	Julia Hodgson
Trustee Child protection officer Main site:	Kate Bruce
Designated Safeguarding Lead:	Rakel de Mena
Deputy Designated Safeguarding Lead Main site:	Maggie Buist
Deputy Designated Safeguarding Lead Brunel Field site:	Tammi Redman

Definitions of Abuse:

Child abuse is any action by another person – adult or child – that causes significant harm to a child.

The 1989 Children Act recognises four categories of abuse:

- **Physical Abuse** - actual or likely physical injury to a child, or failure to prevent physical injury. Physical harm may also be caused when a parent or carer fabricates the symptoms of or deliberately induces illness in a child.
- **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 the 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.
- **Emotional Abuse** – the persistent emotional maltreatment of a child as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only in so far 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 a child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing a child participating in normal social interaction. It may 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 of a child, though it may occur alone.

- **Neglect** - 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 of 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 treatmentIt may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Other recognised categories of abuse:

Historical Abuse

There may be occasions when a child will disclose abuse (either sexual, physical, emotional or neglect) which occurred in the past. This information needs to be treated in exactly the same way as a disclosure of current child abuse. The reason for this is that the abuser may still represent a risk to children now.

Domestic violence and abuse (DVA)

Staff may be working with children experiencing violence at home. Children experiencing this may demonstrate many of the symptoms listed in section A. Staff will need to treat them sensitively, record their concerns and consider informing First Response.

Female Genital Mutilation (FGM)

FGM has been a criminal offence in the UK since 1985. In 2003 it also became a criminal offence for UK nationals or permanent residents to take their child abroad to have female genital mutilation (Female Genital Mutilation Act 2003) Anyone found guilty of the offence faces a maximum penalty of 14 years in prison.

Section 73 of the Serious Crime Act 2015 amended the Female Genital Mutilation Act to include FGM protection orders (FGMPOs). An FGM protection order is a civil measure which can be applied for through a family court. The FGM protection order offers the means of protecting actual or potential victims from FGM under civil law.

It is helpful if you can have conversations at the earliest opportunity with parents and carers and provide information in leaflets and posters about FGM from the BAVA website <http://www.bava.org.uk/types-of-abuse/female-genital-mutilation/>

All agencies have a statutory responsibility to safeguard children in terms of preventing girls from FGM and identifying children who have already survived the procedure. It is important that staff are aware of what FGM is and the signs to look out for in girls at risk of the practice. For more information please go to the BSCB FGM Safeguarding Guidance: <https://bristolsafeguarding.org/children-ome/professionals/policies/#FGM>

Being able to identify girls who are at risk needs a sensitive approach.

The Bristol Safeguarding Children Board has created an FGM referral risk assessment for professionals to consider the risks of girls from FGM. <https://bristolsafeguarding.org/media/27269/fgm-referral-risk-assessment-2018.pdf> if used, a record of the outcome must be kept.

Consider whether any other indicators exist that suggest FGM may take place or has already taken place, for example:

- The child has changed in behaviour after a prolonged absence from the setting;
- The child has health problems, particularly bladder or menstrual problems;
- The child has difficulty walking, sitting or standing and may appear to be uncomfortable.

If a girl is at immediate risk of FGM taking place, it is a significant child protection issue and must be reported to the police and/or First Response.

You have a statutory duty to report if a girl under 18 informs you they have had FGM or if you see it. If FGM has taken place it is a significant child protection issue and must be documented and reported to First Response and/or the police.

When FGM has taken place, the Children's social care team will liaise with the health services so that a statutory safeguarding assessment takes place and to look at how the girl and family will be supported to access appropriate health care if needed. Legal action may be considered.

At any time you may seek advice from BAND, Families in Focus or First Response

For more information on this topic, see the online South West Child Protection Procedures, NSPCC or, locally, BAVA. Contact details are in the appendix.

The Prevent Duty/Radicalisation

It is essential that staff members are able to identify children who may be vulnerable to radicalisation and to know what to do when they are identified. Staff will be trained to recognise possible signs. In line with our E-Safety Policy, appropriate controls for digital content will be in place.

Our setting can also build pupils' resilience to radicalisation by promoting fundamental British values of: democracy; the rule of law; individual liberty; mutual respect for and tolerance of those with different faiths and beliefs and for those without faith or by discussing human rights so enabling children to challenge extremist views.

There is no single way of identifying an individual who is likely to be susceptible to a terrorist or extremist ideology. As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. It is important to take action if staff observe behaviour of concern. The Police Prevent Team can give advice, contact 01278 647466 or ring 101 and ask for the Prevent team, explaining you are calling about extremism or radicalisation.

Any concerns about a child will be referred through First Response or the police. The concern may then be dealt with through usual safeguarding procedures or referred to the Channel process. For information regarding the Channel process, an email address is in the appendix, along with other contacts.

In addition if you think a child is at risk of extremism, you must contact the Counter Extremism Group via email: counter.extremism@education.gsi.gov.uk or Tel: 020 7340 7264

Missing Child / Unauthorised Absence

Children going missing from the setting (through not attending when expected), particularly if this repeated, or if a child is unexpectedly removed from a setting, can act as a vital sign for a range of safeguarding possibilities. This may include abuse and neglect, FGM, mental health problems, family crisis or other issues that could affect the health and well-being of a child.

We have a responsibility to follow up on unauthorised absences to ensure that the child and family are safe and well, which forming part of our safeguarding commitment. Particular care will be taken where there are known vulnerabilities and also when the family might otherwise be isolated (e.g.: summer holidays).

In addition safeguarding action may be needed to protect children against:

- **Bullying, including online bullying and prejudice-based bullying**
- **Racist, disability and homophobic or transphobic abuse**
- **Gender-based violence/violence against women and girls**
- **Peer on Peer Abuse**
- **Child Sexual Exploitation and trafficking**
- **Child Criminal Exploitation and County Lines**
- **Impact of technology on sexual behaviour e.g.: “sexting” and accessing pornography**
- **Teenage relationship abuse**
- **Substance abuse**
- **Gang activity or youth violence**
- **Forced marriage**
- **Homelessness**
- **So-called “honour-based” violence**

Information on these topics can be found at:

<https://bristolsafeguarding.org/children-home/professionals/policies/>

<http://www.proceduresonline.com/swcpp/bristol/contents.html>

Confidentiality and Appropriate Disclosure of Information

- Confidentiality is crucial to all our relationships, but the welfare of the child is paramount. The law does not allow anyone to keep concerns relating to abuse to themselves. Therefore, confidentiality may not be maintained if the withholding of information will prejudice the welfare of the child.
- All information that has been collected on any child will be kept locked and secure and access will be limited to the appropriate staff, management and relevant agencies.
- In the event of an investigation it is essential that no information on child protection concerns relating to a child are disclosed inappropriately. Any such leaks could have serious consequences for both the child concerned and any investigation.
- If uncertain about what information may be shared, take advice or refer to HM Government's Information Sharing, Advice for practitioners. (Please see Further Information section for a link.)
- Whilst parents / carers have the right to see any records kept on their child, this might not always be appropriate and should not put the child or yourself at risk;
- It is very important that only those who need to know, actually know, to avoid any rumour and gossip that could affect the child, parent / carer and the group.

Transfer of a Child Protection Safeguarding File from one education setting to another

- The DSL must inform the receiving setting that the child has a child protection file and that this is going to be transferred to them;
- The DSL should pass the original copy of the child protection/ safeguarding file to the receiving setting. This should be delivered separately to the child's main file and be delivered either by hand or by recorded delivery. The parents/carers of the child must never be used to transfer the child protection file. The transfer must happen within five school days from notification and the setting should record that the transfer has been made;
- The setting should ensure that confidentiality is maintained and the transfer process is as safe as possible;
- When a new child starts that has previously been attending another setting, the previous setting will be asked if the child has a Child Protection/ Safeguarding File;
- If so, once the transfer of the file has been made, the setting should record that the file has been received (receipt) and keep this record for 6 years.
- Settings transferring the file, should keep a copy of the transferred file themselves. This should be for a minimum of 6 years and/or until the child reaches their 25th birthday.

Please refer to the BSCB document “**Guidance on the Transfer of a Child Protection Safeguarding File to Another Education Setting**”, for full details of what should be in a file, how to transfer it and what records should be retained.

In the event of a child protection/safeguarding file, parents/carers of the child will be made aware that we have a duty to share/pass on child protection/safeguarding information to the next education/after-school provider.

Protecting Children and Young People

Please refer to BSCB Bristol Multi Agency Threshold Guidance, to help you identify the response needed.

Recognising Abuse

Recognising abuse is one of the first steps in protecting children and young people and there could be signs or behaviour that make you feel concerned. All staff should be alert to the following situations and types of behaviour in children:

- Becoming excessively aggressive, withdrawn or clingy;
- Seeming to be keeping a secret;
- Significant changes in children’s behaviour;
- Deterioration in children’s well-being;
- Unexplained bruising, marks or signs of possible abuse or neglect;
- Any bruising or marks on a non-mobile baby;
- Unreasonable fear of certain people or places;
- Acting out in an inappropriate way, perhaps with adults, other children, toys or objects;
- Children’s comments which give cause for concern, e.g.: inconsistent explanations of bruising, injuries or burns;
- Self-harm;
- Sexually explicit language or actions;
- Being upset, withdrawn or angry after using the internet or texting;
- Children who go missing, particularly on repeat occasions.

Vulnerability section. As part of prevention, identifying children in your setting who may be more vulnerable to abuse for a variety of reasons.

Not all concerns about children or young people relate to abuse, there may well be other explanations. It is important to keep an open mind and consider what you know about the child and their circumstances.

Staff should be equally-vigilant regarding signs relating to children who may be more vulnerable to abuse for variety reasons. SEND (Special Educational Needs children) with behaviour issues, looked after children/children in care, homelessness, children with allocated social worker or family support worker, young carers, mental Health, children isolated and not automatically assume that any of the above relates to their impairment.

If you are worried, it is not your responsibility to investigate and decide if it is abuse. It is your responsibility to act on your concerns and do something about it.

What to do if Abuse is Disclosed

The setting is committed to ensuring that it meets its responsibilities in respect of child protection by treating any allegation seriously and sensitively.

- Stay calm;
- Listen to what the child / young person is actually saying;
- Reassure them that they have done the right thing by telling you;
- Ask Open questions, e.g.: Can you tell me why you are upset? Can you tell me what is frightening you? Can you tell me why you don't want to go home today? Open questions enable you to gain information and clarification;
- Don't ask leading questions. This could lead a child to say something or agree with you wrongly. A closed question is: Are you afraid to go home because your Mum will hit you?;
- Do not ask the child / young person to repeat what they have they told you, for another worker or trustee member. If the matter is to be investigated further, this will be done by trained professionals;
- Do not promise the child that this information can be kept secret, as subsequent disclosure could then lead to the child feeling betrayed;
- If appropriate, explain to the child who you are going to tell and why. If the child asks what might happen next, it is ok to say that you don't know, but that you can be there to support them if they want;
- Make a note of any conversations with the child, trying to make these as detailed as possible, including when and where the conversations took place. Use a body map or draw a diagram, if appropriate, to show the position of any bruises or marks the child or young person shows you, trying to indicate the size, shape and colour;

- Record this as soon as possible on the setting's Disclosure Form and use the **actual words used by the child**;
- Keep all records factual. Be aware of not making assumptions or interpretations of what the child / young person is telling you.
- Store all records securely;
- Discuss your concerns with the DSL. If the disclosure involves a member of staff, follow the Staff Allegation section;
- If appropriate, inform parents / carers that you are going to report your suspicions / concerns. This might not always be possible and should not put the child or yourself at risk. When you report an incident, the First Response/duty officer will ask you if the parent / carer has been informed. If they haven't, they will want to know the reasons why;
- The DSL must report the disclosure to the appropriate agency. In most cases this will be First Response, who will triage the call (see Appendix A). You can contact First Response by phone or if it is at the Families in Focus (previously called Early Help) level, by using the online Request for Help form (see link in 'further information');
- First Response will assess the call and pass you onto an appropriate agency. This will be Social Care (Level 3 Statutory Response) if it is a Child Protection issue or Families in Focus (Level 2 Escalating, Targeted support/Escalating Needs) if the concern is at a lower level but a multiagency response is needed. First Response may also signpost to other services or even ask you to plan to support the child. (Level 1 Plus Additional Support Universal Services);
- Once the referral has been made and if appropriate, you can tell the child what is going to happen and what to expect.

What to do if Abuse is Suspected

- If any signs or symptoms lead you to feel concerned that a child may be being abused or neglected, it is important that you record these using the setting's Concerns Form (recording what, when & where) and share these concerns with the DSL;

With the DSL, decide on a plan of action:

- Ongoing observation of the child, noting any further concerns;
 - Discussion with other staff to gain any further information they may have;
 - Discussion with parents/carers to establish if there might be reasons for the child's behaviour /actions;
 - Work with the child and parents/carers to reduce risk, this may be by offering a service through your setting or by referring to additional support externally.
- If you or the DSL are uncertain about whether the concern is reportable, call the Families in Focus Team for advice;

- If you are still concerned about the welfare of the child / young person, this information must be passed on to First Response. Parents / carers should be informed unless you think this could put the child or yourself at risk;
- First Response will assess your call and pass you onto an appropriate agency. This will be Social Care (Level 3 Statutory Response) if it is a Child Protection issue or Families in Focus (Level 2 Escalating, Targeted support/Escalating Needs) if the concern is at a lower level but a multiagency response is needed. First Response may also signpost to other services or even ask you to plan to support the child. (Level 1 Plus Additional support Universal Services);
- If First Response has been contacted and they pass you to Children's Social Care, they should let you know that they are responding to what you have told them. If you have not heard from the Social Care team, it may be appropriate to contact them to ensure that the details you gave them have been taken into consideration and acted upon;

What to do if it is an Emergency

If you think a child is in immediate danger or a criminal act has taken place you should telephone the police on 999.

In all other circumstances, you need to refer the matter to First Response and follow the procedure described in section 1 above;

In a medical emergency, your first action may need to be one of the following:

- Telephone for an ambulance, or;
- Ask the parent to take the child to the hospital at once, or;
- Take the child yourself.

The child is the legal responsibility of the parent/carer and they must be involved as soon as practical, unless to do so would put the child at immediate risk of harm. Having taken the necessary emergency action it is important that you make immediate contact with First Response. If it is out of office hours, contact the Emergency duty team.

Working with Children and Young People

Recognising Inappropriate Behaviour in Staff, Volunteers and Other Adults.

There is no guaranteed way to identify a person who will harm children. However, there are possible warning signs. These may include:

- Paying an excessive amount of attention to a child or groups of children, providing presents, money or having favourites;
- Seeking out vulnerable children, e.g. disabled children;
- Trying to spend time alone with a particular child or group of children on a regular basis;
- Making inappropriate sexual comments;
- Sharing inappropriate images;

- Being vague about where they have worked or when they have been employed;
- Encouraging secretiveness.

There may be other sources of concern; this is not a conclusive list. If you are concerned about another staff member or volunteer's behaviour you need to pass this on to the DSL.

If a Staff Allegation is made, or you suspect a member of staff or volunteer of abuse or inappropriate behaviour:

- ◁ behaved or may have behaved in a way that indicates they may not be suitable to work with children

The LADO MUST be involved and consulted on ALL staff allegation incidents before an investigation of any type occurs.

If it appears or has been reported (eg by a parent/carer or another child) that a staff member or volunteer has:

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

then these procedures **MUST** be followed:

- Record the concerns and report them to the DSL;
- The DSL should take steps to ensure that during the remainder of the working day that particular member of staff is not left in sole charge of any child or children;
- At the earliest opportunity, the DSL must contact the setting's Child Protection Officer
- It may be clear in some cases, where a child has been injured and/or there is clear evidence of significant harm or risk of significant harm, an immediate referral must be made to the police, First Response or emergency services. In addition:
- Either the DSL or the Child Protection Officer must then contact the Local Authority Designated Officer (LADO) **WITHIN 1 WORKING DAY** of receiving the report of an allegation.

Local Authority Designated Officer (LADO)

Telephone: 0117 903 7795 or Work Mobile: 07795 091020

- The setting must follow the LADO's advice on how to deal with allegations against staff. **Note:** Do not start any investigation into the allegation until the LADO has been contacted;
- If the allegation hasn't been made by the parent/carer, the setting should take advice from the LADO on how and when to inform them;

- The setting is required to inform OFSTED of any allegations of abuse against a member of staff, student or volunteer, or any abuse that is alleged to have taken place on the premises or during a visit or outing within 14 days. (See Appendix A); If the concern is regarding the DSL, the above procedure will be followed but the report will be made to the Deputy DSL/Child Protection Officer.

Support to Staff and Volunteers

Trustees of the CIO will fully support all members of staff in following this procedure. Following an allegation or investigation:

- Staff and volunteers can talk to the child protection officer from Trustees of the CIO and any of the appropriate agencies listed in Appendix A.

The Club is committed to ensuring that it meets its responsibilities in respect of child protection through the provision of support and training to staff. Therefore, the Club will ensure that:

- All staff, students and volunteers are carefully recruited, have verified references and have full and up to date Disclosure and Barring Service (DBS) checks.
- All staff and volunteers are given a copy of the Child Protection policy during their induction, and have its implications explained to them.
- All staff and volunteers receive regular training and supervision in child protection issues and are provided with any relevant information and guidance.
- All staff are provided with supervision and management support commensurate with their responsibilities in relation to child protection, and their requirement to maintain caring and safe relationships with children.
- All staff are aware of the main indicators of child abuse.
- All staff are aware of their statutory requirements in respect of the disclosure or discovery of child abuse and the procedure for doing so.
- All students and volunteers are instructed to report the disclosure or discovery of abuse to the Manager.
- The Club will take appropriate action in relation to the findings of any investigation into allegations of abuse, consistent with its duties to protect the safety of children and uphold fair processes for staff, students and volunteers.
- Any member of staff, a student or volunteer under investigation for the alleged abuse of a child, will be subject to the provisions of the Staff Disciplinary Policy.
- Staff and volunteers may also experience abuse outside of the work setting. They can talk to the setting's DSL or line manager to seek support. E.g. Domestic Abuse.

Safeguarding

All staff understand the Club's child protection procedures and have had appropriate training and guidance in the principles of safe caring. To this end:

- Every effort will be made to avoid or minimise time when members of staff, students or volunteers are left alone with a child. If staff are alone with a child, the door of the room should be kept open and another member of staff should be informed.
- If a child makes inappropriate physical contact with a member of staff, students or volunteer, this will be recorded fully in the Incident Record Book.
- Staff will never carry out a personal task for children that they can do for themselves. Where this is essential, staff will help a child whilst being accompanied by a colleague. Unless a child has a particular need, staff should not accompany children into the toilet. Staff are aware that this and other similar activities could be misconstrued.
- Staff will be mindful of how and where they touch children, given their age and emotional understanding. Unnecessary or potentially inappropriate physical contact will be avoided at all times.
- All allegations made by a child against a member of staff will be fully recorded, including any actions taken, in the Incident Record Book. In the event of there being a witness to an incident, they should sign the records to confirm this.
- Staff and volunteers are required to keep their mobile phones switched off whilst at work at the club (Photography, Video, Mobile Phone and E- Safety Policy and Procedures)The club will provide mobile phones for use for club business.
- Staff will give good quality care which will help to give the children confidence and encourage them to feel able to speak.

Code of Conduct

All staff, volunteers and trustees within the setting recognise that they need to conduct themselves in an appropriate, open and transparent way to ensure a safer environment for all. One of the ways of ensuring this is by following the setting's policies and procedures, including:

- Child protection policy and procedure
- Safeguarding children overview
- Photography, video, mobile phone and e-safety policy and procedure
- Recruitment and selection policy and procedure
- Whistle-blowing policy and procedure
- Training policy

- Health and Safety policy and procedures
- First Aid policy and procedure
- Fire Safety
- Risk assessments
- Secure premises (in H&S)
- Behaviour Management policy and procedure
- Child registration form information
- Arrival & Departure policy and procedures
- Deployment of staff (in H&S)
- Offsite and Trips policy and procedures
- Working with Disabled children
- Complaints policy and procedures
- Keeping Ofsted up to date with any changes to the registration

In addition staff will use “Guidance for Safer Working Practice for Adults who work with Children and Young People” as a tool to develop setting specific guidance for staff and volunteers.

Recruitment of Staff and Volunteers

We acknowledge that paedophiles and those that pose a threat to children may be attracted to employment that allows them access to children and young people. As part of this policy we will ensure that people working with the children are safe to do so.

- All staff (including the setting’s play facilitator) and volunteers will be checked by the Disclosure and Barring Service on joining the scheme, to be renewed every 3 years.
- All people connected with the setting must declare all convictions/cautions incurred since DBS disclosure which may affect their suitability to work with children.
- All people connected with the setting must declare their disqualification status and that of other persons living or working in their household.
- Two references will be taken up prior to appointment for new staff and volunteers and a medical reference may also be required.
- The selection and interview procedure of the setting will be adhered to. This must include a full employment history, qualifications, interview and identity checks.
- Providers must also meet their responsibilities under the Safeguarding Vulnerable Groups Act 2006 which includes a duty to make a referral to the Disclosure and Barring Service where a member of staff is dismissed (or would have been had the person not left the setting first) because they have harmed a child or put a child at risk of harm.

Use of Mobile Phones, Cameras and E safety

We are aware of the risks associated with the use of mobile phones and cameras in the setting. To manage this appropriately we have a separate policy regarding the use of these devices. In addition we will ensure that all internet compatible devices used in the setting will have appropriate filters and controls.

Staff Behaviour

All staff, volunteers and management members within the setting recognise that they need to conduct themselves in an appropriate, open and transparent way to ensure a safer environment for all.

In addition we will use “**Guidance for safer working practice for those working with children and young people in education settings,**” as a tool to develop setting specific guidance on behaviour for staff and volunteers.

Whistleblowing

We have a separate Whistleblowing Procedure so serious and or systemic concerns about senior staff or management may be reported to more senior staff/management or to an appropriate external organisation if necessary. Allegations about specific staff members should be dealt with in line with the Staff Allegation section earlier in this document.

Further Information

South West Child Protection Procedures – provide detailed online information on all aspects of child protection, e.g : Staff allegations – www.swcpp.org.uk

“Addendum to the Multi Agency Guidance for Injuries in Non- Mobile babies”
<http://bandltd.org.uk/development-support/safeguarding-non-mobile-babies-addendum-early-years-settings-childminders>

Working Together to Safeguard Children 2018
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/722305/Working_Together_to_Safeguard_Children_-_Guide.pdf

First Response online Request for Help form- (Please note you cannot print off a copy of this form, so keep a record of the information sent) Do not send any child or family details by unsecured email.
https://www.bristol.gov.uk/en_US/social-c-health/report-concern-about-child-for-professionals

Guidance for safer working practice for those working with children and young people in education settings
<http://www.safeguardingschools.co.uk/wp-content/uploads/2015/10/Guidance-for-Safer-Working-Practices-2015-final1.pdf>

Information sharing. Advice for practitioners providing safeguarding services to children, young people, parents and carers. 2018

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_service_s.pdf

BSCB "Guidance on the transfer of a child protection safeguarding file to another educational setting"
<https://bristolsafeguarding.org/media/1162/guidance-on-transfer-info-in-education.pdf>

Prevent Duty Guidance for England and Wales
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/439598/prevent-duty-departmental-advice-v6.pdf

BSCB Threshold Guidance-2018

<https://bscb.procedures.org.uk/assets/clients/5/Documents/Thresholds%20Guidance.pdf>

Keeping Bristol Safe Partnership:
kbsp.training@bristol.gov.uk

Refuge National Domestic Abuse Helpline: T: 0808 2000 247

Next Link (domestic abuse Bristol): T: 0800 470 0280 / 0117 925 0680

Employers Initiative on Domestic Abuse: W: <https://www.eida.org.uk/>

EYFS Safeguarding and Welfare Requirements – Child Protection

Inspecting safeguarding in early years, education and skills 2019

Keeping children safe in education 2020

KBSP Protocol: Children who Display Harmful Sexual Behaviour

Appendix – Useful contacts

1. Committee Members/Registered Person responsible for Child Protection (Child Protection Officer)
Name/s: Julia Hodgson Kate Bruce
2. Staff Designated Safeguarding Lead and Deputy Designated Safeguarding Lead
Names: Raket De Mena //Tammi Redman

3. Referral Agencies

First Response – 0117 9036444 (all Bristol)

The place to call if you are concerned about a child or young person or think they need some help. Calls to First Response may result in direct referral to a Social Work Team or to families in focus and/or advice and guidance being given about services to help families.

Families in Focus: North 0117 352 1499; East / Central 0117 3576460 ; South 0117 903 7770

- Disabled Children Team (all Bristol) - Tel: 0117 9038250
- Emergency Duty Team /Out of Office Hours Tel: 01454 615 165
- Police: Non emergency – Tel: 101 Emergency – Tel: 999
- On-Call Consultant Paediatrician (via BRI Switchboard) 0117 923 0000 – non-mobile babies

4. For Staff Allegations Contact:

- Local Area Designated Officer (LADO) - Telephone 0117 903 7795, Work mobile: 07795 091020
- Registered providers must inform Ofsted of any allegations of serious harm or abuse as soon as reasonably practicable, but at the latest within 14 days of the allegations being made.
- Ofsted Compliance and Investigation Team (For reporting any Child Protection concerns).-Tel: 0300 123 1231
- Ofsted Whistleblowing hotline – 0300 123 3155

5. Support and advice

- South West Child Protection Procedures (online guidance) www.swcpp.org.uk
- Childline -Tel: 0800 1111 (open 24 hours)
- National Association for the Prevention of Cruelty to Children (NSPCC) -Tel: 0800 800 500
- NSPCC Whistleblowing hotline – 0800 0280 285
- NSPCC FGM helpline: 0800 028 3550 or email fgmhelp@nspcc.org.uk.
- Bristol Against Violence and Abuse (BAVA) email bava@bristol.gov.uk or www.bava.org.uk
- Bristol Safeguarding Children Board (training) -Tel: 0117 3532505
- Police Prevent Team: 01278 647466
- Channel info: channelsw@avonandsomerset.pnn.police.uk
- BAND Development and Support Worker –Tel:

DOCUMENT HISTORY

Reference	Author	Summary of changes	Issued
Issue 1		Original Version	
Issue 2	Raquel de Mena/ Alison Watson	Updated in light of changes in local arrangements	May 2010
Issue 3	Emma Hallett	Formatting and check and correct contact details	29 June 2011
Issue 4	Emma Hallett	Update of LADO contact details and additional of mobile phone practice	

Issue 5	Raquel de Mena	Update of new regulations of EYFS	19 Sept 2012
Issue 6	Raquel de Mena	Reviewed to reflect Muller Road and Brunel Field ASC sites	20 November 2013
Issue 7	Sheila Gould/Raquel de Mena	Reviewed and Updated to reflect FGM and contact details	5 February 2014
Issue 8		Reviewed to reflect changes in new Chair	3 March 2015
Issue 9	Ana Escudero/Katie Goldsmith	Reviewed to reflect the addition of radicalisation, prevent duty	19 January 2016
Issue 10	Rakel de Mena	Reviewed to reflect the Implementation and Monitoring, extended definition of type of abuse, added the indicators that suggest FGM may have or has already taken place and report agencies	October 2016
Issue 11	Lisa Evans	Updated new regulations to include transfer of child protection file and Families in Focus Team phone number Final draft	April 2019
Issue 12	Rakel de Mena	Review yearly policy and add Tammi Redman DSL	June 2020
Issue 13	Rakel de Mena	Review yearly policy and removed Aimee Bowden DSL and added Main site instead of Muller road	February 2021

Date Approved: 1/6/21

Signed:

Position: Trustee

Name: J.Hodgson

Date for review: Feb 2022