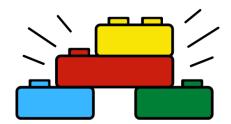
BRIGHT **BLOCKS**PRESCHOOL



SAFEGUARDING CHILDREN AND CHILD PROTECTION POLICY

At Bright Blocks Preschool, we believe that every child deserves the best possible start in life and the support that enables them to fulfil their potential. Our staff, volunteers, church community, parents and carers and anyone involved in our preschool community have an essential role to play in making it safe and secure. Our setting aims to create the safest environment within which every child has the opportunity to achieve their full potential and we take seriously our responsibility to promote the welfare of and safeguard all the children entrusted to our care.

This is a core policy that forms part of the induction for all staff. It is a requirement that all members of staff have access to this policy and sign to say they have read <u>and</u> understood its contents.

Date written: February, 2022

Date of last update: November, 2023

Date agreed and ratified by Bright Blocks Preschool Directors: November, 2023

Date of next full review: November, 2024

This policy will be reviewed <u>at least</u> annually and/or following any updates to national and local guidance and procedures.

Key Contacts

	Name	Contact information
Designated Safeguarding Lead (DSL)	Elaine Nwokolo	07593 019 237 brightblockspreschool@gmail.com
Deputy Designated Safeguarding Lead	Hamilton Nwokolo	07957 742 448 brightblockspreschool@gmail.com
Manager	Elaine Nwokolo	07593 019 237 brightblockspreschool@gmail.com
Parish Safeguarding Officer	Sally Shaw	0789 984 351

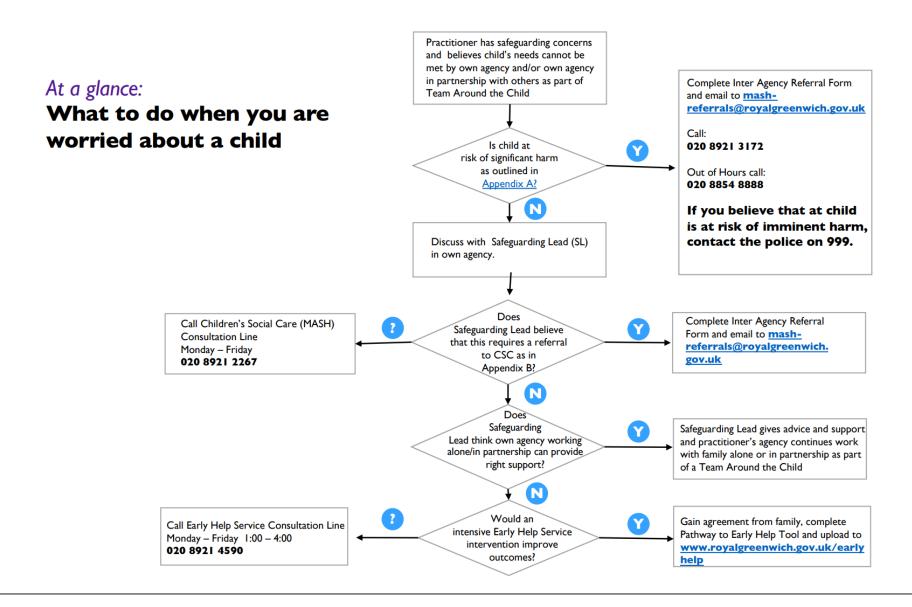
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1. What to do if you have a welfare concern in Bright Blocks Preschool?



2. The Guidance in context

Bright Blocks Preschool works in accordance with 'Keeping Children Safe in Education (KCSIE) 2021' and 'Working together to safeguard children' 2018.

All children and young people have the right to be cared for and protected from harm and abuse and grow up in a safe environment in which their rights are respected and their needs met. Children and young people should get the help they need, when they need it, and their safety is always paramount.

Child protection must be seen in the context of the wider Working Together to Safeguard Children approach, a guide to inter-agency working to safeguard and promote the welfare of children. Whilst it is parents/carers who have primary care for their children, local authorities, working with partner organisations/agencies, have specific duties to safeguard and promote the welfare of all children in their area. - Working Together to Safeguard Children (2018).

3. Recognition of Child Abuse

It is not in the remit of members of staff at Bright Blocks Preschool to identify the specific category of abuse that a child may be experiencing but rather to highlight any causes for concern to the appropriate person and organisations.

The following list although not exhaustive may be indicative of some of the signs and symptoms of child abuse, it should be noted that some children may display some of these signs in times of stress; it does not necessarily mean that they are being abused.

a. Indicators of Abuse

- Injuries to the child that are not consistent with the normal play activities of a child, either in position or type.
- Inconsistent or unreasonable explanation of an injury by a child, parent or carer
- Inconsistent or inappropriate behaviour such as sexually explicit remarks or actions, mood swings, uncharacteristically quiet/aggressive, severe tantrums.
- Becoming isolated socially
- Overeating, loss of appetite, weight loss, weight gain.
- Inappropriately dressed or ill-kept and/or dirty
- Self-inflicting injury
- Open distrust of, or discomfort with, parent or carer
- Delayed social development, poor language, and speech
- Excessively nervous behaviour, such as rocking or hair twisting
- Low self esteem

b. General indicators of abuse, though often typical of sexual abuse / grooming / child sex tourism

- Recurring Abdominal Pain
- Reluctance to go home
- Flinching when approached or touched
- Recurring headaches
- Child having a mobile phone
- Infections UTI's or STI's
- Scaring / bleeding / bruising
- Attending nursery with more luxurious items
- Different carers collecting

4. Recording and Reporting of an Incident – Suspicions of Abuse

All staff should be aware that any incidents must be recorded. It is also very important for staff to communicate about matters of this kind.

If a member of staff suspects that a child is under threat, there are several steps that must be taken.

- Inform the Designated Safeguarding Lead (Elaine Nwokolo) / Manager / Senior Team
 Member as the named persons responsible for Child Protection in the setting, if they are
 not available staff should refer to the local authority child protection guidelines for
 details of their local social work area office or the out of hours telephone number.
- Report the specific concerns that you have to the DSL / Manager / Senior Supervisor / Owners as persons responsible for child protection for the setting
- Record your suspicions and give them to the Designated Safeguarding Lead (Elaine Nwokolo) / Manager / Senior Team Member
- 4. Records of suspicions must include the following information:
 - The nature of the suspicion
 - Details of any injury
 - Times, dates, and any other relevant information
 - Dates, times, and names of other adults involved with the child who may substantiate the suspicion
 - The Manager or Senior Supervisor or Owners in charge will then determine the situation and refer the case to Social Work Children and Families or the Police

5. Disclosure of Abuse

If a child discloses to you that they have been abused, the member of staff should:

- Inform the child that to help them you must tell your Manager / Senior Supervisor /
 Owners; the member of staff should tell the child who this person is and reassure the
 child that they can trust them and that they have done the right thing in telling you
 what has been going on.
- Listen to the child and note down what they say to you **in their own words**. It is important at this stage that you do not interrupt the child and you do not ask questions.

Report the disclosure to **Designated Safeguarding Lead (Elaine Nwokolo)** / **Manager** / **Senior Team Member** as persons responsible for child protection in the setting. The Manager / Senior Supervisor / Owners will then contact the relevant agency or the police who will investigate the disclosure. If the manager or member of staff or owner dealing with the situation at the time thinks that the case is serious enough to involve Social Work Children and Families immediately, then please contact the relevant social work children and family's office for the area or contact social work out of hours service. If it is felt that the child is in immediate danger, then the manager or member of staff should contact the police.

It should be noted that if a member of staff is named in the disclosure the member of staff should be as discrete as possible and inform the Manager / Senior Supervisor / Owners as soon as possible. In addition to this if a member of staff observes another member of staff harming a child, they should report this to the Manager / Senior Supervisor / Owners who will act according to the DfE Keeping Children Safe in Education 2021 (KCSIE).

In addition to this if the Manager / Senior Supervisor / Owners is named in the disclosure the member of staff should be discrete and contact one of the other persons responsible for child protection in the setting. The Nursery Manager / Senior Supervisor / Owners or any authorities detailed below:

Contact Local Authority Designated Officer LADO

by calling 020 8921 3930 or emailing childrens-LADO@royalgreenwich.gov.uk

Bright Blocks Preschool recognises that it can be a traumatic experience for a member of staff to be witness to a child's disclosure of abuse; therefore, all staff will be offered information on counselling services to help them through this time.

6. Managing allegations against adults working with children

The LADO

Every Local Authority has a statutory responsibility to have a (Local Authority) Designated Officer LADO who is responsible for co-ordinating the response to concerns that an adult who works with children may have caused them harm.

In Greenwich we work to the London Child Protection Procedures which can be found at www.londonscb.gov.uk/procedures.

The LADO's key role is to:

- Provide advice/guidance to employers or voluntary organisations;
- Liaise with police and other agencies including Ofsted and professional bodies such as the General Medical Council or General Teaching Council;
- Oversee the progress of the LADO process to ensure matters are dealt with
- as quickly as possible, consistent with a thorough and fair process;
- Collect strategic data and maintain a confidential database in relation to allegations;
- Disseminate learning from LADO enquiries throughout the children's workforce.

The LADO will advise you on:

- Next steps (i.e. referral to Children's Social Care, police, internal investigation);
- How to manage talking about the concerns with the adult who may have
- harmed the child;
- How to inform child's parents/carers;
- Their view regarding suspension, although the decision rests with the employer;
- What they expect of you and other agencies involved

LADO contact details:

Telephone: 020 8921 3930

Email: childrens-Lado@royalgreenwich.gov.uk / childrens-Lado@royalgreenwich.gov.uk.cjsm.net

For more information on the LADO role and agencies' responsibility to report concerns visit the London Child Protection website - http://www.londoncp.co.uk/chapters/alleg.staff.html

For safeguarding concerns relating to children call CSC MASH on 020 8921 3172

If an allegation is made against an adult working with children it should be reported to the agency/organisation's designated safeguarding lead.



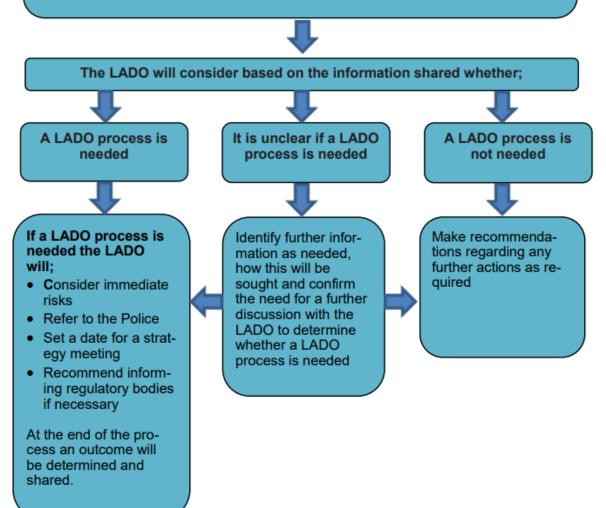
Designated safeguarding lead or manager contacts the Local Authority Designated Officer LADO by calling 020 8921 3930 or emailing

childrens-LADO@royalgreenwich.gov.uk



The LADO will consider whether the adult may have:

- 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 in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children



7. Responding to a Child who confides in you

- Stay Calm
- Do not make promises you cannot keep
- Offer reassurance and support
- Immediately tell your line manager
- Record the facts and discussion in the child's own words and give a copy to your Manager / Senior Supervisor / Owners
- Do not take control of the situation yourself
- Maintain confidentiality
- Keep records
- Talk to the right people

All parents should be aware that members of staff attend regular child protection training in order that we keep your children safe from harm.

The Preschool has a duty to report any suspicions of abuse and neglect to any of the contacts below who have a duty to investigate such matters:

Appendix A

Indicators that a child is at risk of significant harm and the threshold for compulsory intervention by Children's Social Care is met.

When you MUST refer to Children's Social Care

- Any allegation of abuse or neglect or any suspicious injury in a pre-mobile or nonverbal child
- Allegations or suspicions about a serious injury or sexual abuse to a child.
- Repeated minor injuries in pre-mobile or non-verbal or severely disabled child with inconsistent or no explanation.
- Non-organic failure to thrive in under-fives.
- Acute or chronic pre-birth concerns presenting significant risk of harm to unborn baby: parental mental ill health, substance misuse, domestic abuse, parental history of previous children being removed or seriously harmed.
- Inconsistent explanations or an admission about a clear non-accidental injury.

 Repeated allegations or reasonable suspicions of non-accidental injury.
- Any suspicious injury or allegation involving a child subject of a current child protection plan or looked after by a local authority
- A child being traumatised, injured or neglected as a result of domestic abuse or violence. See Barnardo's Domestic Violence Risk Assessment Matrix – Level 4
- Allegations or reasonable suspicions of serious, chronic neglect leading to risk of significant harm, including: persistent insufficient supervision; on-going poor hygiene, clothing or nutrition; repeated failure to seek/attend treatment or appointments, particularly with young children.
- Direct allegation of sexual abuse made by child or abuser's confession to such abuse.
- Pregnancy, evidence of sexual activity or sexually transmitted infection in child under
 13.
- Suspicions of sexual abuse (e.g. harmful sexual behaviour, medical concerns or referral by concerned relative, neighbour, carer) where there is a significant family history of concern regarding sexual abuse. See Harmful Behaviours Traffic Light Tool
- Organised and complex abuse involving a parent or child
- No available parent and child vulnerable to significant harm.
- Reasonable suspicion that child has suffered or is at risk of significant harm due to fabricated or induced illness.
- Child/ren subject to serious parental or carer mental ill-health or belief systems whereby there is a concern these will result in significant harm.

- A child at significant risk of sexual exploitation, trafficking or ICT based forms of abuse.
 See CSE Risk Assessment Tool
- Indications that a child has experienced significant harm, having been subject to abuse or grooming on line.
- Specific circumstances presenting imminent risk of significant harm: radicalisation, honour based violence, female genital mutilation See Guidance on FGM
- Registered sex offender or convicted violent offender subject to MAPPA moving into a household with under 18 year olds, or individuals in the household who are suspects of Police investigation regarding a criminal offence against a child, including online.
- Severe and ongoing parental substance misuse resulting in significant harm to a child.
- Significant self-harm alongside other safeguarding concerns.

Appendix B

Indicators that a child may be in need of help and support under Section 17 of the Children Act. A referral to Children's Social Care should be made but the threshold for compulsory intervention may not be met.

When you should refer to Children's Social Care

- Allegation of physical assault with minor or no visible injury (other than to a pre-or non-mobile child).
- Any injury or incident triggering concern (e.g. a series of apparently accidental injuries or a minor non-accidental incident).
- Repeated minor injuries in young children (including disabled children) with inconsistent or no explanation.
- Pre-birth concerns suggesting risk to a child or unborn baby's health or development linked to factors including parental mental ill-health, substance misuse, domestic abuse and/or homelessness.
- Repeatedly expressed concerns from one or more source suggesting a significant risk to a child's health or development
- Child exposed to emerging pattern of domestic abuse or a single significant incident of domestic abuse.
- Allegations of periodic neglect including: insufficient supervision; poor hygiene, clothing or nutrition; failure to seek/attend treatment or appointments; young carers.
- Suspicions of sexual abuse (e.g. harmful sexual behaviour, medical concerns or referral by concerned relative, neighbour, carer) See Harmful Sexual Behaviours 'Traffic Light' Tool
- Significant risk of breakdown of living arrangements with parent or carer
- Children living in care of parent or carer with mental ill-health or belief systems which
 impact on their health or development.
- Emerging concerns that a child may be vulnerable to Child Sexual Exploitation See
 CSE Risk Assessment Tool
- Concerns that a child might be at risk of ICT based forms of abuse.
- Emerging concerns suggesting risk of FGM, honour based violence, radicalisation etc
- An individual (adult or child) posing a known risk to children is found to be in contact with the family.
- Concerns emerging about parental substance misuse affecting a child's health and development.
- Self-harm resulting in impairment of well-being & development.