Child Protection and Safeguarding Policies and Procedures

The Rocking Horse Day Nursery is committed to the safeguarding and protection of all children.

Safeguarding is everyone's responsibility

The Rocking Horse Day Nursery promotes the positive future outcomes of all children. The nursery complies with the legal requirements within the following:

The Children Act 2004 https://www.legislation.gov.uk/ukpga/2004/31/data.pdf
The Early Years Foundation Stage (2021) https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2,
Statutory framework and the Working Together to Safeguard Children (2018) https://www.gov.uk/government/publications/working-together-to-safeguard-children--2
This allows us to provide effective safeguarding policies and procedures to promote equality of opportunity and the welfare and safety of all children.

Safeguarding Children

In order to effectively safeguard all children, it is the responsibility of the Rocking Horse Day Nursery to provide effective procedures that 'ensure that the risks of harm to children's welfare are minimised'. If the nursery has a concern about the welfare of a child, all practitioners will work in partnership with parents and other agencies to ensure that the child's needs are supported and positive outcomes achieved.

The Rocking Horse Day Nursery ensures that the importance of effective safeguarding is embedded throughout the recruitment, induction process and on-going training for the duration that all practitioners work for the nursery. The Rocking Horse Day Nursery believes that its practitioners should fully understand why and how they need to effectively safeguard all children.

All nursery practitioners are guided through and provided with a copy of the safeguarding policy by the manager. Practitioners are responsible for reading the

policy and ensuring they understand their role and responsibility in effectively safeguarding all children, with support from the managers. Safeguarding is the responsibility of every practitioner within the setting regardless of the position that they hold. The named safeguarding leads are Jo Somerton and Nickisha.

Through updates and training it is ensured that all nursery practitioners remain aware of the signs of abuse whether it is through neglect, physical injury, sexual abuse, emotional abuse or through concerns relating to changes in behaviour and well-being and that they are aware of the safeguarding policy and understand the procedure to follow in the event of any concerns.

Safeguarding team at Rocking Horse Day Nursery

Designated Safeguarding lead



Jo Somerton

Deputy Safeguarding Lead



Nickisha Matthews

Safeguarding Procedure

Julia Davies (proprietor/manager) and Jo Somerton and Nickisha Matthews (safeguarding leads) are the named people who ensure that all adults working with and looking after children fully understand and can implement their role in ensuring the welfare and safety of all of the children. Julia Davies ensures that OFSTED and LADO are contacted immediately in the event of any allegation that a member of staff has harmed a child in the nursery or elsewhere. Julia Davies ensures that all practitioners are fully aware of the procedure to be followed if an allegation is

made about a member of staff. (See Allegations against staff policy and whistle-blowing policy).

Practitioners are aware that if there is a concern about a child's welfare whether internally or outside the setting then the following procedure will be followed:

- Report the concerns to the safeguarding lead Jo and Nickisha who will then inform Julia Davies. The First Response Team (Bristol) will be contacted for advice if needed (Contact details are on the office notice-board). If you are not convinced the matter is being dealt with appropriately you can report the concern to Access and Response for yourself.

- Record information and decisions made and ensure that they are documented and filed in a confidential way. Observations of the children need to be in context of your knowledge of the child and family. There may be other explanations for your concern. Keep a record of observations you make particularly in the cases of a build up of concern, noting date and time. Include any significant conversations you may have had with any parent or other significant person.

- If you see an injury, which you are suspicious about or you have concerns about a child's welfare, you should ask the parents for an explanation. If your concerns remain after an explanation is offered, tell the parents you are concerned and that the injuries to small children must be investigated and there is a procedure you must follow which protects children and gives help to parents.

- For advice and guidance refer to 'What to do if you're worried a child is being abused' (HM Government 2015) that is on the office notice-board.

Forms 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 then 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:
  a. Provide adequate food, clothing and shelter (including exclusion form home or abandonment)
  b. Protect a child from physical and emotional harm or danger
  c. Ensure adequate supervision (including the use of inadequate care-givers)
  d. Ensure access to appropriate medical care or treatment
  It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

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.

Staff should be equally vigilant regarding signs relating to disabled children and not automatically assume that any of the above relates to their impairment.

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.

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.

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 protections 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.

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

Non-Mobile Babies

Injuries in non-mobile babies are rare and must be further investigated by a paediatrician, even if an explanation seems plausible. Early Years Settings and Childminders working with non-mobile babies need to follow the Bristol Safeguarding Children Board "*Addendum to the Multi Agency Guidance for Injuries in Non- Mobile babies".*

If settings need to use the procedure, it is important that as well as arranging for the baby to be examined by the Community Paediatrician, settings contact Social Care / First Response to request checks are made on the family. This information will be made available to the Community Paediatrician to help in any risk assessment of the injury. This is not the same as making a referral and parents should be reassured that this is the case, but it is important that they check to see if the baby is already known to Social Care.

Missing Child / Unauthorised Absence

Children going missing from the setting, particularly if this is 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.

Although the children are not in compulsory education, we believe that 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.

When a child is expected and the parents/carers have not explained the reason for absence within an hour of the child's set start time, then staff will inform the manager of the setting. The manager will then call the parent/s of the child.

If the manager is not able to get hold of the parent/carers, they will:

- Call the emergency contact/s for the child.
- Consider whether or not to visit the family home.

The Designated Safeguarding Lead will decide the best course of action based on their knowledge of the family and child – for example, if it is known that the family is experiencing challenges; there is domestic violence; is a looked after child or if the child has SEND the setting may act more swiftly than the 48 hours listed below.

If no explanation is given the manager enters this as an unknown absence on the setting records.

If the manager is unable to contact the parents within 48 hours and there is no explanation for the absence from emergency contacts, the manager will contact Families in Focus/First Response for advice and may also contact the police.

Records will be made of contact and attempted contact with parents and/or emergency contacts and other agencies. Records will also be made of known and unknown absences. Monitoring of absence records will take place regularly and letters and/or meetings will be sent/arranged by the setting, including a referral to Families in Focus, where necessary.

Additional safeguarding categories

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/policies-and-guidance/
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 disclosures 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 e.g. from an early years setting to another early years setting or to a school.

- 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.

Parents/carers will be made aware when registering their child with us, we have a duty to share/pass on child protection/safeguarding information to the next education provider.

Protecting Children and Young People – Threshold guidance
Please refer to BSCB Bristol Multi Agency Threshold Guidance, to help you identify the response needed.

Safeguarding Children: Practitioners Training

All of the nursery team receives regular updates in safeguarding training. The training is provided during the Induction procedure, staff meetings and during training courses provided by the local children's services. A safeguarding lead is responsible for liaison with proprietor and local statutory children's services agencies and with local safeguarding boards

Our local board is the Bristol Safeguarding Children Board found at
https://bristolsafeguarding.org/children/
This is part of a bigger organisation *SWCPP*
http://www.proceduresonline.com/swcpp/

The safeguarding lead provides support, advice and guidance to staff.

A copy of Safeguarding Children, Child Protection- Policies and Procedures (2012) South Gloucestershire Council is in the office on the notice board and is available for all staff to read.

A copy of 'Guidance for safer working practice for those working with children and young people in education settings' (2015) is kept on the office notice-board. It is available for all staff to refer to when needed.

Staff have been made aware of the categories of abuse including particular forms of abuse as previously detailed. Staff are aware of the PREVENT duty and have completed CHANNEL awareness online training. The safeguarding leads, Jo and Kisha are responsible for updating the staff team and organising any further training needed.

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 told you, for another worker or committee 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. 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.
    - Record all actions and outcomes, including a timeline of events.

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 you should telephone the police on 999. In all other circumstances, you need to refer the matter to First Response.

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.

Safeguarding Children: Sharing Information with Parents

Parents are given information regarding emergency procedures and complaints policies in the nursery 'child care agreement'. This document is shared with parents when children start at nursery and signed. The 'Parents Information' is given to parents to keep at the start of the child's settling in process. The information contains summaries of the policies regarding safety and welfare, working in partnership with parents and OFSTED and nursery complaints procedures and contact numbers.

The policies and procedures book is offered to parents to read when their child is visiting. This has full details of all policies and procedures.
The nursery ensures that practitioners work in partnership with parents in order to share information holistically and therefore support and enhance the positive outcomes of every child. Information is shared with parents regarding the welfare, learning and development of their child during each nursery session, a settling in meeting and review meetings twice yearly.

Safeguarding Children: Sharing Information with other agencies and Professionals
Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers July 2018

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

Safeguarding Children: Receiving information from parents
Parents complete a 'personal details' form when their child starts at the nursery and this provides practitioners with the information needed in order to ensure well-being and safety of all children. The 'personal details form' informs the nursery about who has legal guardianship, parental contact details, consent and details relating to other people who may collect the child in the event that parents are unable to. The form also includes information and parental consent from the parents for the nursery to contact a third person if the parents cannot be contacted immediately in the event of an emergency. The form also contains information about their child's dietary, medical and developmental requirements.

Safeguarding Children: Technology and Data Collection/Storage
Please see ICT and documentation, camera use policies.

Safeguarding: Premises and security
The Rocking Horse Day Nursery ensures that the nursery is safe and secure at all times. The children are only collected by the parents or by named others who the parents have given consent. Visitors entering the nursery record their details in

the 'visitors' book. Visitors are supervised at all times and never left unattended. All staff and children are signed in and out on a daily basis in the signing in book and on daily registers kept in the groups. Children are supervised by nursery practitioners.

Jo ensures that practitioners are qualified with a paediatric first aid qualification. If a child has an accident it is assessed by two members of staff, one being a senior, dealt with appropriately and recorded in the accident book. In the event of any serious illness, accident or injury of a child the most senior member of staff on the premises, usually a manager, ensures that Ofsted are contacted. The parents are contacted either by phone immediately or when they come to collect their child at the end of the session, depending on the severity of the accident. Parents are asked to notify staff if their child has had an accident at home, when they come into nursery and this is recorded on a 'home accident record' (see Health and safety, accident, sickness and emergency policies in section 3).

Safeguarding: Outings

Parental consent is obtained before a child is able to go off the premises. The required staffing ratio which we have set as 1:2 for 2 years and under and 1:4 for over 2 years and this is adhered to at all times. Each outing has a minimum of two staff, one of which is a senior and a first aid kit and mobile telephone is carried at all times. Children's medication e.g inhalers for asthma will also be carried in case they should be required.

For short walks a ratio is dependent on the childs age is adhered to and a minimum of two staff, one of which is a group leader/senior. If the apprentice or a level 3 student is accompanying the trip they will hold the hand of one child if deemed competent to do so. They will be walking between the staff in the middle of the group so are supervised.

Safeguarding Children: Failure to collect a child

Should a parent fail to collect a child, they are more than 15 minutes late and the setting has not received a phone call, then the following procedure should be followed:

- Telephone the parent.

- Two members of staff to remain with the child if the nursery has closed.
- If you are unable to contact the parents then ring the third contact number.
- If you are still unable to contact anyone inform the manager and owner, Julia Davies.
- After an hour of waiting for the parent, if there is still no contact and on the managers' approval contact the First Point service.
- Follow the instructions given by the department.
- Complete a written report. A copy must be sent to OFSTED and one kept on file.

It is important to alleviate any anxiety and not to discuss the parents in front of the child.

Safeguarding Policy- Allegations made against a member of staff

All practitioners are given a copy of the nursery 'Safeguarding Policy' and 'Safeguarding- Allegations made against a member of staff policy'

Procedure Guidelines issued by Bristol City Council, Safeguarding Children, Child Protection states that the designated lead on safeguarding must be informed and the incident recorded. If the safeguarding lead is involved in the incident then another nominated officer should lead. They are responsible for informing the Bristol City Council Local Authority Designated Officer (LADO) by telephoning 0117 903 7795.

The LADO ensures that all allegations or concerns about professionals or adults working or volunteering with children are recorded appropriately, monitored and progressed in a timely and confidential way. The LADO is involved from the initial phase of the allegation through to the conclusion of the case. OFSTED should be informed of the incident and steps taken. Full details of the processes and procedures can be found at

https://bristolsafeguarding.org/children/lado-concerns-about-professionals/

The Rocking Horse procedure is as follows:

If an allegation is made against a member of staff relating to a child being abused then the following procedure must be followed:

- The safeguarding lead is to be informed, unless directly involved in the incident in which case the next most senior staff member will take the lead (and so on). They will immediately contact the LADO within 1 working day in the case of a member of staff being accused of child abuse.
- The LADO (number above) and Ofsted must be contacted immediately.
- If, after your Initial Discussion with the LADO, it is agreed that the allegation meets the criteria, a multi-agency meeting may be convened and you will be invited. This might result in a criminal investigation, a social care investigation and/or an investigation to inform whether disciplinary action is required. If it is agreed that the allegation does not meet the criteria, the LADO will record the initial discussion. Any further action will be taken within your setting if necessary.
- The safeguarding procedure must be followed in accordance with the booklet 'child protection procedure for people working with children' and the booklet 'what to do if you are worried a child is being abused'.
- Julia Davies and the safeguarding lead (or nominated officer) must obtain a written signed statement from the accuser.

- A written signed statement must be taken from the accused, along with a witness of choice and the safeguarding lead (or nominated officer).
- Suspension will be implemented if;

  A member of staff or volunteer has behaved in a way that 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 s/he may pose a risk of harm to children

- Please be aware of employment law, as not all staff allegations are substantial, the risk involved will need to be looked at.
- Every effort should be made to maintain confidentiality at all times.

- Parents of the child/ren concerned will be kept informed of progress and told of the outcomes.
- Julia Davies will keep the member of staff informed and arrange support whilst an investigation is on-going.

OFSTED complaints line
0300 123 1231

Police Child Abuse Investigation Team
0117 945 4320

- Safeguarding Concerns about Children and Advice. In the event of a concern about the welfare and safety of a child or for advice please contact:
- **First Response Team Tel**
  0117 9036444 or out of hours 01454 615165
  www.bristol.gov.uk/firstresponse

Whistleblowing
We have a separate Whistleblowing Procedure so serious concerns about senior staff or management may be reported to more senior staff/management or to an appropriate external organisation if necessary..

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

"Multi Agency Guidance for Injuries in Non- Mobile babies"
https://bristolsafeguarding.org/media/32252/non-mobile-baby-injury-policy-update-march-2019-bristol-approved.pdf

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://digital.bristol.gov.uk/social-care-health/first-response-referral

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_services.pdf

BSCB "Guidance on the transfer of a child protection safeguarding file to another educational setting"
https://bristolsafeguarding.org/media/myopzmfj/transfer-of-cp-and-safeguarding-file-reviewed-may-2020.pdf

Prevent Duty Guidance for England and Wales
https://www.gov.uk/government/publications/prevent-duty-guidance/revised-prevent-duty-guidance-for-england-and-wales

BSCB Threshold Guidance-2018
https://bristolsafeguarding.org/media/27281/bscb-multi-agency-threshold-guidance.pdf

Keeping children Safe in Education 2023
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1161273/Keeping_children_safe_in_education_2023_-_statutory_guidance_for_schools_and_colleges.pdf

If a child is at immediate risk call the POLICE	**POLICE** 999
To make an URGENT referral, i.e. a child is likely to suffer or is suffering significant harm, call children's social care.	**FIRST RESPONSE** - 0117 9036444
Out of Hours Referrals	**EMERGENCY DUTY TEAM** - 01454 615 165
Mental Health Crisis (24 hours, 7 days a week)	**Bristol Mental Health** - 0300 555 0334
To make a NON-URGENT referral, contact FIRST RESPONSE using the online form	**FIRST RESPONSE Online form** https://www.bristol.gov.uk/social-care-health/make-a-referral-to-first-response
To raise concerns and ask for advice about radicalisation (also contact First Response).	**PREVENT DUTY** - 01278 647466 PreventSW@avonandsomerset.police.uk
To liaise with the specialist Safeguarding Police unit	**Lighthouse Safeguarding Unit** (Avon and Somerset police) 01278 649228 LighthouseBristol@avonandsomerset.police.uk
For advice and guidance about whether to make a referral	**Families in Focus (Targeted Support)-**

South	East Central	North
0117 9037770	0117 3576460	0117 3521499

If you have concerns about a professional working with a child…

To raise concerns and ask for guidance in relation to the conduct of someone who works with children	**Local Authority Designated Officer - (LADO)** T: 0117 9037795 KBSP LADO notification form

For information, advice and guidance in relation to safeguarding policy and procedures.

Safeguarding in Education Team

T: **0117 9222532**
E: Safeguardingineducationteam@bristol.gov.uk

South Advisor	East Central Advisor	North Advisor
Helen Macdonald helen.macdonald@bristol.gov.uk	Jess Curtis jessica.curtis@bristol.gov.uk	Elisabeth Clark elisabeth.clark@bristol.gov.uk

0117 9222533	0117 9222710	0117 9222534
Child sexual exploitation & child criminal exploitation	**Operation Topaz (Avon and Somerset Police)** **https://www.avonandsomerset.police.uk/forms/vul**	
Safer Options Team - Education inclusion managers		
South Ingrid.Hooper@bristol.gov.uk	**East Central** Calum.Paton@bristol.gov.uk	**North** Ross.Moody@bristol.gov.uk
Report a Child Missing from Education	**Bristol City Council – Education Welfare** https://www.bristol.gov.uk/schools-learning-early-years/children-missing-education-cme	
Children affected by Forced Marriage	**Forced Marriage Unit** T: (0) 20 7008 0151 E: fmu@fco.gov.uk	
Online Safety Advice	**Professional Online Safeguarding Helpline** T: 0344 381 4772 E: helpline@saferinternet.org.uk	
Reporting online abuse and grooming	**Child Exploitation and Online Protection command** https://www.ceop.police.uk/ceop-reporting/	
FGM advice	**NSPCC FGM Helpline** T: 0800 028 3550 E: fgmhelp@nspcc.org.uk	
Domestic Abuse support (Bristol)	**Directorate of local and national services** **https://www.bristol.gov.uk/crime-emergencies/abuse-violence**	
Young Carers – advice and support.	**Carers Support Centre** T: 0117 958 9980 W:https://www.carerssupportcentre.org.uk/young-carers/contact-young-carers/	
Whistleblowing professional policy	**NSPCC Whistleblowing hotline** T: 0800 028 0285 E: help@nspcc.org.uk	
Child and Adolescent Mental health (CAMHS) **Primary Mental Health Specialists (advice) Child and Adolescent Mental Health**		
South 0117 3408121	**East Central** 0117 3408600	**North** 0117 3546800

Avon and Wiltshire Mental Health Partnership NHS Trust 24/7 crisis line: 0800 953 1919	
Advice around harmful sexualised behaviour.	**Be Safe** 0117 3408700 W: https://www.awp.nhs.uk/camhs/camhs-services/HSB-services/be-safe
	Brook Traffic Light Tool CPD: Brook Sexual Behaviours Traffic Light Tool (RSE) Course

Signed: Julia Davies
Date: October 2025