

Blackhall Nursery

Child Protection and Safeguarding Policy

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Blackhall Nursery

Child Protection and Safeguarding Policy

Section 1

Blackhall Nursery and its staff follow the Scottish Social Services Council Code of Practice for Employers of Social Service Workers, the Code of Practice for Social Service Workers and the Health and Social Care Standards in its implementation of this **Child Protection Policy**

Statement of purpose:

Blackhall Nursery actively promotes the welfare and wellbeing of its employees and of all children whom staff come into contact with during any form of engagement. In particular, as an organisation we are committed to ensuring:

- children's and young people's rights to care and protection from harm in any form are firmly upheld as outlined within United Nations Convention on the Rights of the Child (UNCRC);
- learners' personal interests, dignity and care, protection from harm are safeguarded;
- we fulfil our legislative duties related to safeguarding, including child protection;
- the interests of all Blackhall Nursery staff are safeguarded as they go about their work and engage with learners; and
- all staff are suitably trained in how to respond to safeguarding matters.

Definitions:

This policy provides the framework within which Blackhall Nursery staff, individually and collectively, can understand their responsibilities in relation to safeguarding, child protection and promoting the welfare of children. Differing legal definitions of the age of a 'child' can be confusing. The priority is to ensure that a vulnerable young person who is or may be at risk of harm is offered support and protection. References within this policy to children are intended to refer to children and young people up to the age of 18 years.

What do we mean by Child Protection and Safeguarding?

Child Protection - The processes involved in consideration, assessment and planning of required action, together with the actions themselves, where there are concerns that a child may be at risk of harm from abuse, neglect or exploitation. Child protection guidance provides overall direction for agencies and professional disciplines where there are concerns that a child may be at risk of harm.

Safeguarding - This is a much wider concept than child protection and refers to promoting the welfare of children, young people and protected adults. It encompasses protecting from maltreatment, preventing impairment of their health or development, ensuring that they are growing up in circumstances consistent with the provision of safe and effective care, and taking action to enable all children, young people and protected adults to have the best outcomes. Child protection is part of this definition and refers to activities undertaken to prevent children suffering, or likely to suffer, significant harm. We have a distinctive approach to safeguarding in Scotland linked to Getting It Right for Every Child (GIRFEC) which promotes action to improve the wellbeing of every child and young person. Safeguarding is a golden thread that runs through the curriculum. The aim is to support the development of learner's knowledge, skills and resilience to keep themselves safe and protected, and to develop an understanding of the world

so that they can respond to a range of issues and potential risky situations arising throughout their lives. As such, it permeates many features of the nursery experience including leadership, values, vision, the curriculum, learning and teaching, positive relationships, building learner resilience and suchlike. In all Blackhall Nursery's work, the needs, interests and wellbeing of children must be put above the needs and interests of all others. Hence, this Policy and the guidance contained within it must have priority over all other policies and advice.

Blackhall Nursery will enable children to be safe, nurtured, achieving, healthy, active, included, respected and responsible and to become successful learners, confident individuals, responsible citizens and effective contributors.

We will do this by:

- always putting the needs of, and desired outcomes for, children at the forefront;
- promoting high quality equitable outcomes for all learners by eliminating inequity that exists amongst learners from different backgrounds and particular vulnerable groups. In carrying this out, Blackhall Nursery staff recognise their professional and legal obligations to protect children, particularly those at risk.
- Blackhall Nursery will promote safe practice to protect children from harm, abuse and exploitation.

This policy links to others that ensure that:

- Blackhall Nursery operates a robust and safe selection and appointment process which requires all employees who have opportunities to engage regularly with children in the course of their normal duties be members of the Protecting Vulnerable Groups (PVG) Scheme, to comply with the Scottish Social Services Codes of Conduct and with the Health and Social Care Standards and to participate in relevant professional learning;
- during all forms of engagement, we create a safe environment for children and the adults who work with them;
- Blackhall Nursery staff are equipped with the information, knowledge, support and guidance to keep children safe and protected; and
- we take account of local inter-agency child protection guidelines and the local authority's legal obligation to safeguard and protect any group at risk, including children and protected adults.

Principles of this Policy:

- The welfare and rights of all children is always the primary concern;
- Protecting children is everyone's responsibility;
- Every child should be treated as an individual and has a right to a positive sense of identity - UNCRC Article 8 (right to preserve identity);
- All children have the right to be protected from all forms of abuse, neglect and exploitation - UNCRC Article 19 (protection from all forms of abuse or neglect);
- All children have the right to express their views on matters affecting them - UNCRC Article 12 (right to have views taken into account on all matters that affect them).

To promote these principles we will:

- treat everyone with respect and encourage children to respect others;
- promote the rights, including privacy and dignity, of children as defined by the United Nations Convention on the Rights of the Child (UNCRC);

- respect confidentiality and only share information and concerns about children with those who need to know;
- take action to stop any inappropriate verbal or physical behaviour and emotional abuse, including bullying;
- treat all concerns and allegations seriously and respond appropriately, operating within our agreed policy, procedures and guidance; and
- refer our concerns, not investigate.

Everyone has a responsibility to protect children. Every child at all times, has a right to feel safe and protected from any situation or practice which may result in harm. Above all, the welfare of children is the paramount consideration and we must all work together to ensure they are protected.

Blackhall Nursery's Designated Member of Staff for Child Protection and Safeguarding (DMSCP) is Manager, Gillian Santangeli, or in her absence, the designated Person in Charge. The Nursery Manager and any designated Person-in-Charge will have received Level 4 Child Protection training. The DMSCP is responsible for ensuring that all relevant procedures are followed when a Child Protection issue arises.

All staff have a role in relation to Child Protection and it is imperative that the appropriate procedures are followed in relation to Reporting, Recording and External Agency Recording. Staff need to understand their own role and the roles of other services when responding to concerns about a child. The Getting It Right For Every Child (GIRFEC) framework provides a procedure which staff should follow when responding to concerns about a child and when these concerns should be shared with partner agencies (e.g. the Health Visitor as Named Person, Social Care Direct).

Types of Abuse

Abuse and neglect are forms of maltreatment. Abuse or neglect may involve inflicting harm or failing to act to prevent harm. Children may be maltreated at home; within a family or peer network; in care placements; institutions or community settings; and in the online and digital environment. Those responsible may be previously unknown or familiar, or in positions of trust. They may be family members. Children may be harmed pre-birth, for instance by domestic abuse of a mother or through parental alcohol and drug use

We recognise that there are several forms that abuse of children might take. These can include:

- **Physical Abuse and Indecent Assault:** Physical abuse is the causing of physical harm to a child or young person. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.
- There may be some variation in family, community or cultural attitudes to parenting, for example, in relation to reasonable discipline. Cultural sensitivity must not deflect practitioners from a focus on a child's essential needs for care and protection from harm, or a focus on the need of a family for support to reduce stress and associated risk. The Children (Equal Protection from Assault) (Scotland) Act 2019 (commonly known as a 'smacking ban') means that any physical punishment is now illegal.

- Emotional Abuse: when a child is persistently exposed to a lack of love and affection or when a child is continually criticised whatever they try to do or achieve. It is also when a child is subject to threats, rejection or ridicule.
- Sexual Abuse: Child sexual abuse (CSA) is an act that involves a child under 16 years of age in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at or in the production of indecent images, in watching sexual activities, using sexual language towards a child, or encouraging children to behave in sexually inappropriate ways.

Child sexual exploitation (CSE) is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a person under 18 into sexual activity in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact. It can also occur through the use of technology. Children who are trafficked across borders or within the UK may be at particular risk of sexual abuse.

- Criminal exploitation: Criminal exploitation refers to the action of an individual or group using an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity in exchange for something the victim needs or wants, or for the financial or other advantage of the perpetrator or facilitator. Violence or the threat of violence may feature. The victim may have been criminally exploited, even if the activity appears consensual. Child criminal exploitation may involve physical contact and may also occur through the use of technology. It may involve gangs and organised criminal networks. Sale of illegal drugs may be a feature. Children and vulnerable adults may be exploited to move and store drugs and money. Coercion, intimidation, violence (including sexual violence) and weapons may be involved.
- Child trafficking: Child trafficking involves the recruitment, transportation, transfer, harbouring or receipt, exchange or transfer of control of a child under the age of 18 years for the purposes of exploitation. Transfer or movement can be within an area and does not have to be across borders. Examples of and reasons for trafficking can include sexual, criminal and financial exploitation, forced labour, removal of organs, illegal adoption, and forced or illegal marriage.
- Neglect: Neglect consists in persistent failure to meet a child's basic physical and/or psychological needs, which is likely to result in the serious impairment of the child's health or development. There can also be single instances of neglectful behaviour that cause significant harm. Neglect can arise in the context of systemic stresses such as poverty, and is an indicator of both support and protection needs. National Guidance for Child Protection in Scotland 2021 Part 1: The context for child protection 14 Version 1.0 September 2021 1.44 'Persistent' means there is a pattern which may be continuous or intermittent which has caused, or is likely to cause significant harm. However, single instances of neglectful behaviour by a person in a position of responsibility can be significantly harmful. Early signs of neglect indicate the need for support to prevent harm. 1.45 The GIRFEC SHANARRI indicators set out the essential wellbeing needs. Neglect of any or all of these can impact on healthy development. 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); to protect a child from physical and emotional harm or danger; to ensure adequate supervision (including the use of inadequate caregivers); to seek consistent access to appropriate medical care or treatment; to ensure the child receives education; or to respond to a child's essential emotional needs. 1.46 Faltering growth refers to an inability to reach normal weight and growth or development milestones in the absence of medically discernible physical and genetic reasons. This condition requires further assessment and may be associated with chronic neglect. 1.47 Malnutrition, lack of nurturing and lack of stimulation can lead to serious long-term effects such as greater susceptibility to serious childhood illnesses and reduction in potential stature. For very young children the impact could quickly become life-threatening. Chronic physical and emotional neglect may also have a significant impact on teenagers.

- Female genital mutilation: This extreme form of physical, sexual and emotional assault upon girls and women involves partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. Such procedures are usually conducted on children and are a criminal offence in Scotland. FGM can be fatal and is associated with long-term physical and emotional harm.
- Further to this, staff are expected to understand the impact that problematic substance misuse has on unborn children and that a referral to Social Care Direct is required if they suspect a parent is pregnant and is, or is suspected of being, engaged in problem substance misuse.
- Staff should be aware of Adverse Childhood Experiences (ACEs) and the lifelong impact that these can have and recognise that preventative and protective work may be needed at the same time. Preventative, restorative, supportive, collaborative and therapeutic approaches do not stop because compulsory measures or urgent protective legal steps are taken. A tailored blend of care and professional authority may be needed whether a child at risk is at home with family or accommodated, or when the child is to transition between placements or to be reunified with birth family after a placement away from home
- Domestic abuse is seen as a Child Protection issue and Nursery staff must refer the case to Social Care Direct, even if there is no particular evidence, but perhaps staff have seen bruises etc. on the adult. Nursery staff will have to advise the adult that child protection procedures must be followed.

Protecting children involves preventing harm and/or the risk of harm from abuse or neglect. Child protection investigation is triggered when the impact of harm is deemed to be significant. Where there are reasonable grounds for a member of staff suspecting any of these forms of child abuse or any of these forms are disclosed by a child to a member of staff, Blackhall Nursery recognises that it has a duty

- to ensure that, where a child is suspected to be at risk or has been abused, basic information is collected. This should be collected using a GIRFEC **Wellbeing Concern Form**.
- to make a referral by telephone to Social Care Direct where a child is suspected to be at risk of harm or has been abused

- to listen to a child when they tell staff of a potentially abusive situation and to record this immediately on a **Wellbeing Concern Form** or **Child Protection Report Form** depending on the circumstances and either GIRFEC or child protection procedures followed as appropriate.

In addition, Blackhall Nursery has a support and monitoring duty within the context of safeguarding in relation to Prevent, Section 26 of the Counter-terrorism and Security Act, 2015, which places a duty on central bodies to have 'due regard to the need to prevent people being drawn into terrorism'

<https://www.gov.uk/government/publications/prevent-duty-guidance>

Reporting & Recording and Sharing Information with other Agencies

Confidentiality will be protected but where there is reasonable cause to believe that a child may be at risk of harm, relevant information will be shared with key partner agencies. At all times, information shared should be relevant, necessary and proportionate to the circumstances of the child, and limited to those who need to know. When information is shared, a record should be made of when it was shared, with whom, for what purpose, in what form and whether it was disclosed with or without informed consent. Similarly, any decision not to share information and the rationale should also be recorded.

It is important to record all information about children and their families within the **Chronology** of Wellbeing Concern (see appendix 2). This will ensure a record of all facts and procedures that have been followed as well as agencies that have been spoken to or consulted with as appropriate. When completing the **Child Protection Report Form** (see appendix 3) only facts have to be recorded, including what has actually been said by a child or another person. The actual words used must be recorded as well as details of the time and place and any other relevant information.

When a member of staff has any concerns about risk to a child's wellbeing, then s/he will use a **Wellbeing Concern Form** * to record their notes about what the child has said. The **Wellbeing Concern Form** will be signed, dated and counter-signed by the DMSCP and **shared with the child's Named Person as soon as possible**. Nursery staff should remember to **Listen, Respond, Report and Record**. (Further information on the role of the Named Person can be found in the glossary section of the National Guidance for Child Protection in Scotland 2014 (p186) and within The Children and Young People (Scotland) Act 2014.)

This **does not** replace the need for referral by telephone to Social Care Direct or Police Scotland if Nursery staff suspect a child is at risk of significant harm or if they have a child protection concern. Normal child protection procedures should be followed in such circumstances. All concerns should be shared without delay.

Staff must report any concerns they have about a child to the DMSCP within the setting. Information can be disclosed in a number of ways including:

- A child indicates or discloses harm
- A third party discloses the possibility of harm
- Staff are concerned that a child is or may be being harmed
- Staff have witnessed or heard something that causes concern about a child's safety.

* To be downloaded from CEC's website for each use.

A staff member will not be asked or need to investigate any concerns of potential harm whether they are reported by another person or are identified and raised by the staff member personally. If a staff member has child protection concerns about a child these should be discussed with the DMSCP. All relevant information must be reported without delay and the DMSCP will decide subsequent action.

Initial information should be gathered and basic facts established that relate to that concern: what, where, when and by whom. This will include suspicions or indicators of significant harm (see appendix 1) and/or direct information of concern for a child. All information must be recorded on the **Chronology of Wellbeing Concern Form** (see appendix 2). The **Child Protection Report Form** (see appendix 3) may be completed depending on the circumstances and may be held in house or sent to external agencies as deemed appropriate. Further information on sharing concerns and initial information gathering can be found on p88 of the guidance.

External Agency Reporting

The DMSCP or in her absence, the designated Person in Charge, will make the decision as to when to report to external agencies with regard to reported concerns relating to the safety of a child and child protection. Staff may be required to cooperate and work with multi agency colleagues in responding to and supporting children and families who may be subject to ongoing child protection procedures and responses.

The process of responding to child protection concerns in diagrammatic form can be found on p85 of the guidance.

Staff Recruitment and Volunteers

Staff recruitment and volunteer policies and practices shall be adhered to. A Self-Declaration form will be included in the Recruitment paperwork.

Staff Contact with Children & Adult Contact with Children in the Care of the Nursery

Blackhall Nursery is committed to ensuring all staff and helpers with regular contact with children are checked through Disclosure Scotland and are registered with the PVG scheme which is managed and delivered by Disclosure Scotland. However, common-sense precautions and vigilance are required all the time.

We have a **Volunteer/Trainee Policy** and a **Whistle-blowing Procedure** which support the Protection of Children from abuse in our care.

A range of common-sense procedures are undertaken by staff. Staff are never locked into a room alone with a child. Staff do not accompany children into toilet cubicles unless the children need help and support and ask for it. However, children are always encouraged to manage for themselves unless they are distressed. On outings, staff accompany children to toilet facilities, but not into cubicles (except as above). Staff encourage children to manage, and take pride in, independent dressing and personal management and hygiene. Nappy changing should never take place in the toilet used by staff, this should occur in the toilet where the changing table is situated.

Staff do not lead physical contact with children; they respond, if appropriate, to children when they seek reassurance. They do so, wherever possible, in the company of other members of staff. Staff respect children's sense of personal space and do not pressure children into physical contact (e.g. hand holding) unless the child's safety, or the safety of other children, is at risk. If a

child evidently becomes disproportionately attached to a member of staff, the child should be supported and encouraged in forming positive relationships with other members of staff. This will give the child confidence in forming a variety of different adult/child relationships. Staff should follow the principles outlined in the Code of Conduct for professional practice extracted from the City of Edinburgh Council's "Child Protection Guidance for Partner Provider Centres" (see Section 2 of this policy).

Concerns about a Member of Staff

Any concerns raised about the conduct of a member of staff should be passed on **immediately** to the Nursery Manager or the **Chair of the Nursery Board** (the latter if the concern involves the former, or vice versa). Where the concern is about the Nursery Manager, it should also be reported to the **Care Inspectorate**, to the **City of Edinburgh Council Quality Improvement Education Officer** and to the **Scottish Social Services Council (SSSC)**.

The terms and actions of the **Disciplinary Policy** shall be followed, and the steps described in this **Child Protection Policy** shall also be followed. The member of staff may be suspended from work whilst investigations are completed as such conduct, if proven, would be gross misconduct. Confidentiality and an early assessment of the facts are essential.

All allegations against staff of abuse of, or harm to a child will be taken seriously and responded to promptly. Equally all considerations need to be balanced to ensure that children are protected, but employees are treated fairly, transparently and with due process. The management of information must be dealt with considerable sensitivity. The procedure for allegations against a staff member will be as follows:

- Should an allegation of abuse be made against a member of staff, the Designated Member of Staff for Child Protection (DMSCP) has a responsibility to make an initial assessment of the allegation which should include discussion with the Chair of the Nursery Board and may include some initial enquiries to establish the broad nature of the allegation. These enquiries, however, should not go beyond trying to establish the basic details of the allegation being made and the staff member will not be interviewed concerning the matter prior to a decision being made by Social Care Direct as to whether the matter warrants a child protection investigation. Details of the person making the allegation should be recorded by the DMSCP and they should be advised that child protection procedures will be followed.
- Once the basic details of the allegation against a staff member have been established and recorded on the **Child Protection Report Form** (see Appendix 3) it is essential that the DMSCP telephones Social Care Direct.
- Unless advised by Social Care Direct not to do so, the DMSCP and Chair of the Nursery Board will notify the member of staff about the allegation made against her/him as soon as possible.
- The DMSCP will follow the directions of Social Care Direct as to what procedures should occur thereafter. Consideration will be given at an early stage whether the employee should be suspended from duty pending any investigation, or whether some other measure (e.g. temporary redeployment) is required. At all times, the paramount consideration will be the protection of children and young people.
- It is important that the member of staff is treated fairly and that their rights are respected during the investigative process.

- Consideration will be given to the control and management of information to service users and other staff.
- The DMSCP should make a referral to the Scottish Social Services Council where the behaviour or actions of a member of staff raises concern about their fitness to practise or when a member of staff has:
 - been suspended, dismissed or demoted
 - resigned during a disciplinary investigation where the Nursery Board would have considered dismissal
 The DMSCP should complete the **SSSC Employer Referral Form**.

The Protection of Vulnerable Groups (Scotland) Act 2007

The PVG Scheme provides a system governing those who have regular contact with children and protected adults through paid and unpaid work, ensuring that they do not have a known history of harmful behaviour. Blackhall Nursery recognises and accepts its responsibilities under the terms of the above Act. We understand that we have a legal duty to forward a referral to the Scottish Ministers of any individual in a childcare position who:

- harms a child or young person
 - places a child or young person at risk of harm
- and**
- is dismissed as a result (**or**, would have been dismissed but left before they could be **or**, was transferred permanently away from work with children or protected adults).

We understand that the referral may lead to a possible inclusion in **the PVG children's list** which means that the person referred will be barred from carrying out 'regulated work' with children. A referral should be made using **Disclosure Scotland's Referral Form for organisations that offer regulated work (paid or unpaid)** which is available at <https://www.mygov.scot/pvg-referrals/>. Once completed this should be sent to Disclosure Scotland PVG Referrals, PO Box 7412, Glasgow, G51 9DX.

Any referral made to Disclosure Scotland will also prompt a referral to the Scottish Social Services Council. A referral should be made using **SSSC Employer Referral Form** which is available at <http://www.sssc.uk.com/about-the-sssc/multimedia-library/publications/fitness-to-practise-documents/referral-guidance-and-forms/employers-referral-form>

Monitoring of this Policy

It will be the responsibility of the DMSCP, Gillian Santangeli, or in her absence, the designated Person in Charge to ensure that all staff, including new or temporary staff, are familiar with this policy and to monitor that it is being implemented. This will be achieved through both formal and informal observation of staff practice, regular review of our Child Protection practices, procedures and paperwork and annual Child Protection training for all staff as a team.

Essential Reference Documents and Contacts

- National Guidance for Child Protection in Scotland 2021

<https://www.gov.scot/publications/national-guidance-child-protection-scotland-2021-consultation-report/documents/>

- The Edinburgh and the Lothians Inter-agency Child Protection Procedures 2015 (available at <http://www.edinburgh.gov.uk/info/20046/protect-someone-from-harm/603/child-protection-for-professionals>)

- Child Protection Guidance for Partner Provider Centred (2013) (available in Nursery or at <https://blogs.glowscotland.org.uk/ce/EarlyYears/files/2014/07/Child-Protection-Guidance.pdf>)

- Getting it Right for Children & Families affected by parental problem alcohol & drug use – Guidelines for agencies in Edinburgh and the Lothians (2013) available at: www.edinburgh.gov.uk/downloads/file/11072/capsm-guidelines-parental-alcohol-and-drug-abuse

Child Protection Referrals

Social Care Direct 0131 200 2327 (Mon-Thurs: 08.30 – 17.00)
(Fri: 08.30 – 15.55)

or

Emergency Social Work Service 0800 731 6969 At all other times

Police Scotland 0131 311 3131
Care Inspectorate 0131 653 4100

CEC QIEO 0131 469 3030

Chair of Blackhall Nursery Board 07776 683517
(or designated board member)

Child Protection Forms

Chronology of Wellbeing Concern Form * (to record observations and discussions)

Wellbeing Concern Form (recording and reporting)

Child Protection Report Form to be sent to Social Care Direct (to record referral)

Self-Declaration Form (in Recruitment Pack)

***to be downloaded from the CEC website for each use to ensure most up-to-date version is Used**

This policy links to:	Curricular Area(s)	HWB
	Quality Indicator(s)	2.1, 3.1 (HGIOELC)
	Care Standard(s)	1.4, 3.20, 3.21, 3.22, 4.18
	UNCRC Articles	3, 6, 7, 8, 19, 32, 33, 34, 35, 36

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Child Protection Policy - Appendix 1

Indicators of Abuse

(This list of indicators is not exhaustive and is not mutually exclusive.)

Neglect

- constant hunger
- poor personal hygiene
- a constant tiredness
- inappropriate/inadequate clothing
- unkempt and general waif-like look
- untreated illnesses
- exposure to danger; lack of supervision
- destructive tendencies
- low self-esteem
- poor social relationships
- compulsive stealing or scavenging

Physical abuse

- unexplained injuries or burns - particularly if recurrent
- inconsistent and/or improbable excuses given to explain injuries; untreated injuries
- reports of punishment which seem excessive
- bald patches
- withdrawal from physical contact; over reaction to sudden movement of adults
- arms and legs covered in hot weather
- fear of returning home
- fear of medical help
- self-destructive tendencies
- aggression towards others
- site of bruise not normally associated with play
- failure to thrive
- untreated injuries

Sexual abuse

- itching in the genital area
- soreness in the genital area
- unexplained rashes or marks in the genital area
- pain on urination
- difficulty in walking or sitting
- stained or bloody underclothes
- recurrent tummy pains or headaches
- bruises on inner thigh or buttocks
- frequent masturbation (many young children masturbate occasionally for comfort/experimentation)
- inappropriate language for a pre-school child
- inappropriate sexual knowledge for a pre-school child
- making sexual advances to adults or other children
- wariness of being approached by anyone, possibly combined with a dazed look
- regression to younger behaviour

- distrust of a familiar adult; anxiety about being left with adults
- sexually explicit play with toys and other children

Emotional abuse

Emotional neglect is often difficult to detect and can occur by itself, or in conjunction with physical abuse. It may occur when a child is physically well cared for.

- overly withdrawn child
- overly aggressive child
- constant wetting or soiling
- frequent vomiting
- persistent rocking movement
- very poor language development
- inability to relate to peers or adults
- fear of new situations
- parental attitude to child

Other possible signs are:

Significant lack of growth

Weight loss

Hair loss

Poor skin and muscle tone

Circulatory disorders

Lethargy

It is important to recognise that some of the signs and symptoms could arise from other causes. Ask for explanations of any injury. Consider the explanation in conjunction with the developmental age of the child. In addition to recording information about a child's actions, it is also useful to take notes of anything a child says which is indicative of neglect or harm.

BLACKHALL NURSERY

CHRONOLOGY of WELLBEING CONCERN

Child's Name:

D.O.B.:

Parent/Carer's Name:

Date Chronology started:

Child's key person:

Signature/Date

Observations and Discussions

**Agreed actions/persons spoken to/
Information shared with/without informed
consent?**

Child Protection Report Form

BLACKHALL NURSERY

Please indicate what you are reporting:

- I have concerns that abuse may be occurring
- I was involved with an incident with a child
- I was witness to an incident with a child
- I have received an allegation of abuse
- A child has told me that they are being abused

Important Information:

Your name:

Your contact details:

Name of child concerned:

Capacity in which child is known to you:

Information relating to the child:

Date of birth:

Home address:

Carer:

Tel No:

Is the child already known by Social Work?

(If yes, enter name and contact details of Social Worker)

Is the main carer aware of this referral?

(If no, please explain why)

Nature of concern or incident:

(include all the information obtained, e.g. time, date, location of any incident)

Signed: Date:

Print Name:

Designation:

Action taken:

Please indicate which of the following actions have been taken:

- Concern/incident recorded in the child's Chronology of Wellbeing Concern Form
- Child Protection Report Form completed
- Child Protection Report Form kept on file – no referral made (please give reasons for decision)
- Child Protection Report Form passed to external agencies (please specify which agencies). *(Record name and designation of the member of staff or police officer to whom concerns have been passed, together with the time and date of call).*

Signed:(DMSCP) Date:

Signed:(Manager) Date:

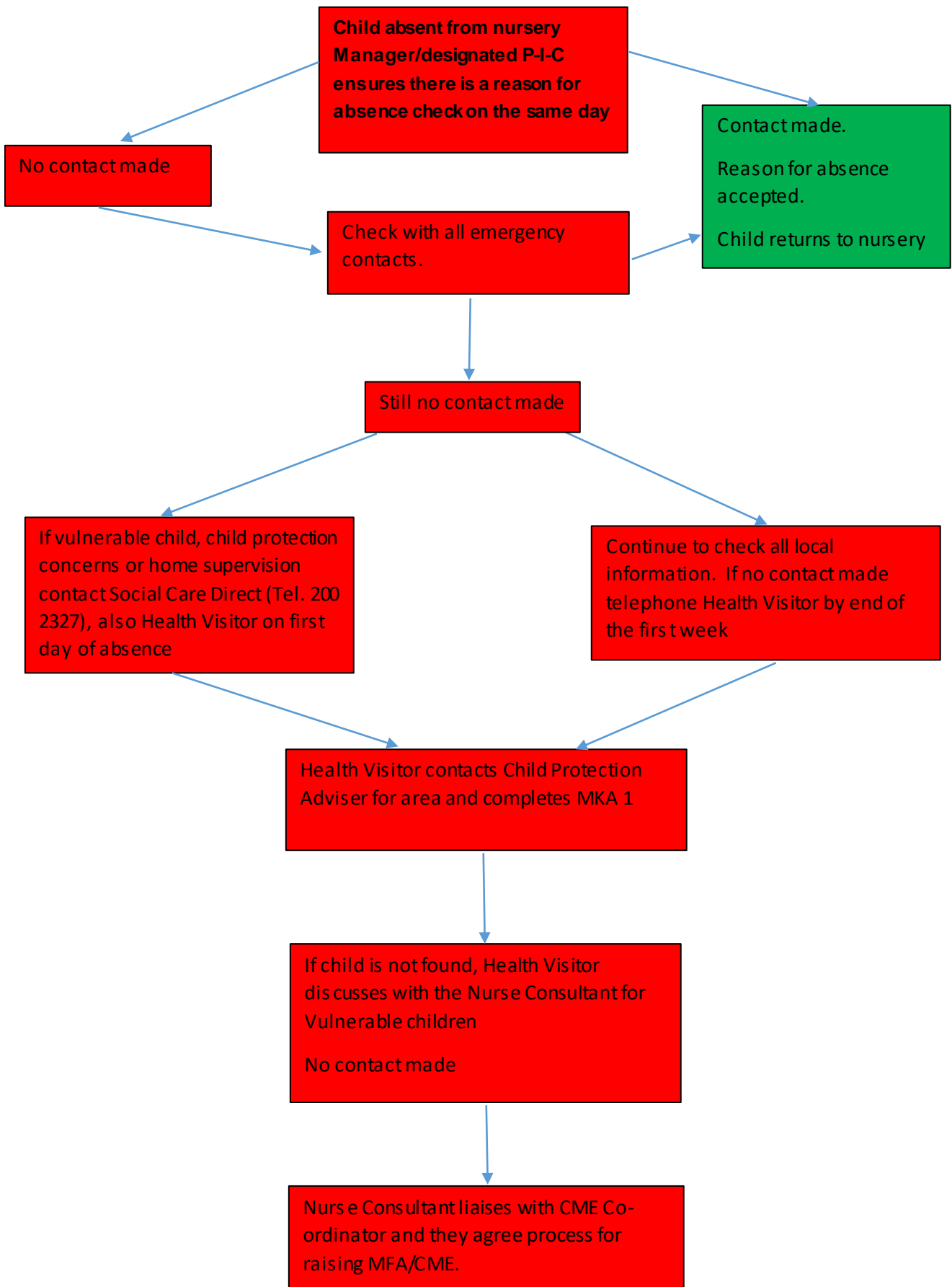
SECTION 2

PRACTICE GUIDANCE

FOR

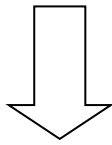
NURSERY STAFF

Child Absent from Nursery Flowchart



Staff Guidance: When a child abuse allegation is made to you: Remember to Listen, Respond, Report and Record

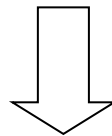
Child Tells You About Possible Abuse



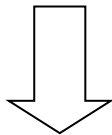
Listen to What is Said

*(Listen carefully, allowing the child to tell you what happened in his/her own words; do not prompt or suggest or ask leading questions; diagrams or pictures may help the child explain what has happened. If you need to clarify any points, keep questions to the absolute minimum to ensure a clear and accurate understanding of what has been said. Use open-ended, non-leading questions, e.g. **what happened; where did it happen; when did it happen; who did it?** Reassure the child that what has happened is not the child's fault and that you are sorry. Do not show disbelief, as children seldom lie about sexual abuse. Do not give the child a guarantee of confidentiality regarding the disclosure. Take the disclosure seriously. Affirm the child's feelings.*

Avoid being judgmental. Move on to the next step.)

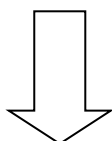


- (i) Report the matter to the DMSCP**
- (ii) Use the Wellbeing Concern Form to record your notes about what the child has told you**
- (iii) Sign and date it, and**
- (iv) Have it counter-signed by the DMSCP**

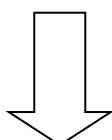


If the Designated Member of Staff for Child Protection (Manager Gillian Santangeli, or in her absence, the designated Person in Charge) assesses that it is reasonable to suspect that the child is at risk of harm or has been abused, s/he should make the referral to Social Care Direct immediately by phoning 200 2327 and complete the Child Protection Report Form, also recording the name and designation of the member of staff or the police officer to whom the concerns were passed, together with the time and date of the call The DMSCP should send a copy of the Child Protection Report Form to Social Care Direct, and record the incident for Care Inspectorate purposes. The DMSCP should follow up with relevant professionals (e.g. Care Inspectorate, Children & Families Department) after the referral to find out any action the Nursery should be taking.

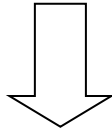
Put a note in the diary for 2 weeks hence to ensure we have received a return phone-call from Social Care Direct.



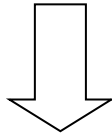
The Designated Member of Staff for Child Protection (Nursery Manager) will advise Chair of Nursery Board (or designated board member) within 24 hours that a referral has been made



Social Work/Police & Health discuss what next step will be (e.g. investigation, interviews, medicals)



Decisions will be made by Social Work, Health and Police about when and how to involve the parents



Follow-up with Relevant Professionals about Possible Case Conference

Blackhall Nursery is committed to being involved at whatever level is required, in the interests of the child as an individual and in the context of his/her family.

Code of Conduct

Centres should provide an environment in which there are caring and safe relationships between staff and children. For such relationships to develop, informed common sense and sound professional practice are required.

The key principles are:

Do

- Treat all children equally, with respect and dignity
- Respect diversity and different cultures and values
- Help children to feel confident to let you know if someone is doing something to them that they do not like
- Make sure that you understand the issues of boundaries and safety when working with children
- Build balanced relationships based on mutual trust that empower children to share in the decision-making process
- Involve parents and carers wherever possible
- Respect confidentiality and explain clearly to parents and carers your policy as to when it cannot be guaranteed
- Inform appropriate manager of any personal difficulties that might affect your ability to do your job competently and safely
- Share with your line manager any concerns about a member of staff behaving in a way you think is inappropriate. **You must not ignore this.**
- Keep up to date with the child protection policy and procedures in your centre
- Make time in staff meetings to discuss child protection issues and how to keep children safe
- Give enthusiastic and constructive feedback rather than negative criticism
- Work in an open environment where possible, avoiding private or unobserved situations
- When helping children to the toilet or changing young children, be careful to respect their privacy as much as possible
- Only restrain a child if he/she is at imminent risk of causing damage to her/himself, other children or staff. Use the minimum force to prevent the harm. Do not hold a child on any joints or for any longer than absolutely necessary. Be sure to record the incident on the day. Get help from another member of staff when you are faced with this kind of situation.

Practice to be avoided

- Having 'favourites' – this could lead to resentment and jealousy by other children
- Spending excessive time alone with children away from others
- Taking children to your home
- Taking responsibility for tasks for which you are not appropriately trained

Do not

- Invite children to your home or have children to stay overnight
- Take children on car journeys alone, however short, unless in an emergency; if this is necessary, where possible, the consent of parents and the line manager should have been obtained
- Have the door locked when you need to be alone with a child
- Allow or engage in 'horse play' such as tickling or wrestling
- Allow or engage in any form of inappropriate touching
- Allow allegations made by a child to go unchallenged, unrecorded or not acted upon

- Jump to conclusions about others without first checking all the facts
- Rely on just your good name to protect you
- Do things of a personal nature for children that they can do for themselves

Important note: it may sometimes be necessary for staff to do things of a personal nature for children, particularly, for example, if they soil themselves and/or are very young or have a disability.

Reporting

It is very important if any of the following incidents occur, that they are reported immediately to another colleague and a written note of the incident is made. Parents should also be informed of the incident.

Report, note and inform if the following occur:

- If you accidentally hurt a child
- If a child seems unduly distressed
- If a child misunderstands or misinterprets something you have done

Ways in which inappropriate behaviour may be manifested

This list is presented to show some of the ways in which inappropriate behaviour may be manifested. It is important to recognise that this list is neither definitive nor exhaustive. It is not meant to suggest that all the actions below are abusive; they must be seen in the context of the interaction with the child and the intention of the staff. They are meant to aid and advise staff in minimising risk and to encourage good practice. Staff must always exercise professional judgement in each circumstance.

Physical	<ul style="list-style-type: none"> hitting/tapping pushing/jabbing throwing things at children shaking a child 'pulling' a child by a limb
Emotional	<ul style="list-style-type: none"> isolating a child, e.g. in locked room threatening a child consistently ignoring a child consistently intimidating a child scapegoating a child
Sexual	<ul style="list-style-type: none"> inappropriate touching/comforting using sexual language with children indecent materials