

# Safeguarding

Date of Review: September 2020

Date of Next Review: August 2021

Version: 6.0

Safeguarding is the legal responsibility of all. This Policy applies to all stakeholders and to anyone on the premises.

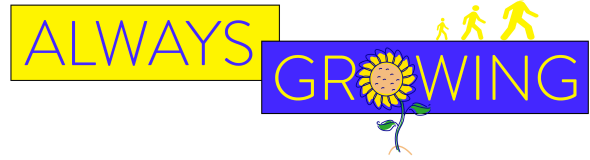
Directors Approval:

Lewis Fogarty

Ben Bausor

Key Documents:

- 'What to do if you're worried a child is being abused' (HMG 2015).
- [Working Together to Safeguard Children \(2018\)](#)
- Dealing with Allegations of Abuse (DfE 2012)
- Equality Act (HM Gov 2010)
- Disqualification Under the Childcare Act. (2006)
- [Keeping Children Safe in Education](#)
- General Data Protection Regulations (2018)
- [The Children Act 1989](#) (and [2004 amendment](#)), which provides a framework for the care and protection of children
- [Statutory guidance on FGM](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM
- [The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children
- Schedule 4 of the [Safeguarding Vulnerable Groups Act 2006](#), which defines what 'regulated activity' is in relation to children
- [Statutory guidance on the Prevent duty](#), which explains duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- [The Childcare \(Disqualification\) and Childcare \(Early Years Provision Free of Charge\) \(Extended Entitlement\) \(Amendment\) Regulations 2018](#) (referred to in this policy as the "2018 Childcare Disqualification Regulations") and [Childcare Act 2006](#), which set out who is disqualified from working with children
- This policy also meets requirements relating to safeguarding and welfare in the [statutory framework for the Early Years Foundation Stage](#).



Terms used in this policy:

- 'Always Growing' refers to either any provision run by Always Growing Ltd or Always Growing Together CIC Limited or either or both of the companies
- 'Children' refers to any registered child or young person attending Always Growing
- 'Staff' refers to all staff and volunteers
- 'Safeguarding team' refers to staff who have specific responsibilities for safeguarding
- 'Safeguarding' refers to the protecting children from maltreatment preventing impairment of children health and development, ensure the children have the provision of safe and effective care and taking action to enable all children to have the best outcomes.
- 'The Directors' refers to Lewis Fogarty and/or Ben Bausor or a nominated person who they have authorised to make decisions on their behalf.
- 'Parents' refers to parents, guardians, carers or anyone who has parental responsibility.

All policies are approved by the Directors of Always Growing Ltd and Directors of Always Growing Together CIC Limited, in line with the available guidance both Statutory and best practice. We envisage that these policies will apply to provision delivered by Always Growing Ltd or Always Growing Together CIC Limited. We review and update policies in a timely manner and endeavour to include statutory updates. In exceptional circumstances, for example a situation arising that is not covered by the policies below, the Directors will use their professional judgement to make the best possible decision in the circumstances. At all times, the Directors will keep in mind the needs and wishes of the child.

**Designated Safeguarding Lead:  
Ben Bausor (07917885553)**

**Deputy Designated Safeguarding Leads:  
Lewis Fogarty (07758225181)  
Sam Thompson (07887930768)  
Tara Vaughan (07962452264)**

**Designated Safeguarding Lead Crippenham:  
Kate Mounteney (07799115814)**

**Local Authority Designated Officer (LADO) Windsor and Maidenhead:**  
01628 683150 or 01628 683202 or 07774 332675  
Out of Hours Service: 01344 786543

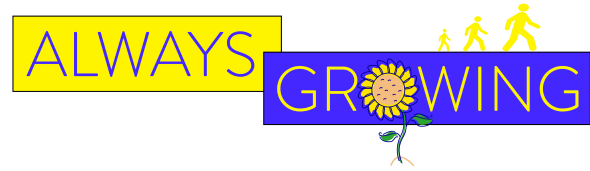
**Local Authority Designated Officer (LADO) Slough:**  
01753 474053 or 07885 828387

**Social Services (Windsor and Maidenhead)**  
01628 683150 - Out of Hours Service: 01344 786543

**Social Services (Slough)**  
01753 875362 -Out of Hours Service: 01344 786543

<b>Children’s Rights and Entitlements</b>	<b>5</b>
1. Introduction	5
2. Overall Aims	5
3. Definitions	6
<b>Safeguarding Children</b>	<b>7</b>
3. Rationale	7
4. Equality Statement	9
5. Roles and Responsibilities	9
All Staff	9
The Designated Safeguarding Lead:	11
6. Recognising Abuse and Taking Action	12
If a child is suffering or likely to suffer harm, or in immediate danger	13
If a child makes a disclosure to you	14
If you have concerns about a child (as opposed to believing a child is suffering or likely to suffer harm, or in immediate danger)	15
Early Help	15
If you discover that FGM has taken place or a child is at risk of FGM	16
If you have concerns about extremism or radicalisation	16
If you have a mental health concern	18
If you have a concern about a staff member, supply staff or volunteer	18
Responding to an Allegation Against a Member of Staff	19
Sexting	21
7. Confidentiality	23
8. Involving Parents/Carers	24
9. Working with External Agencies	25
10. Always Growing’s Role in Supporting Children	26
Children with Additional Needs	26
Children with Medical Needs	27
Looked After Children or Children Recently Looked After	27
11. Children in Specific Circumstances	28
Additional Safeguarding Policies	31

12. A Safer Culture - Safer Recruitment Policy	31
13. Whistle Blowing Policy	32
Introduction	32
Procedure	33
14. Physical Intervention Policy	33
15. Intimate Care Policy	34
Introduction	34
Procedure for Out of School Services	35
Intimate Care within our Nursery	35
16. Uncollected Child Policy	36
Introduction	36
Procedure	37
<b>17. Missing Child Policy</b>	<b>38</b>
Introduction	38
Response	38
Managing people	40
18. Use of Technology	41
Personal Mobile Phones	41
Cameras and videos	42
Use of ICT	43
<b>Appendices</b>	<b>45</b>
Appendix 1: Definitions and Indicators of Abuse	45
1. Neglect	45
2. Physical Abuse	46
3. Sexual Abuse	46
4. Emotional Abuse	47
5. Responses from Parents	48
6. Child Sexual Exploitation	49
Appendix 2 Logging a Concern:	50
Appendix 4: allegations of abuse made against staff	55



# Children's Rights and Entitlements

## 1. Introduction

- 1.1. At Always Growing we promote children's right to be strong, resilient and listened to by creating an environment in our setting that encourages children to develop a positive self-image, which includes their heritage arising from their colour and ethnicity, their languages spoken at home, their religious beliefs, cultural traditions and home background.
- 1.2. We help children to establish and sustain satisfying relationships within their families, with peers, and with other adults.
- 1.3. We work with parents to build their understanding of, and commitment to, the principles of safeguarding all our children.
- 1.4. Safeguarding and keeping children safe is an important and fundamental aspect of all that we do in Always Growing. We expect all stakeholders to share these values which should ensure that children are treated with respect and dignity, feel safe, and are listened to as part of the being able to, Play. Learn. Smile.
- 1.5. Safeguarding overlaps a number of Always Growing policies, and these policies should be considered in terms of how they relate to safeguarding.
- 1.6. All policies which address issues of power and potential harm, for example: critical incident, behaviour and equal opportunities, will all be linked to ensure a consistent approach to safeguarding, and are reviewed by the Directors to ensure consistency
- 1.7. Always Growing is aware of its responsibilities under the Equality Act 2010, and this may relate to Safeguarding, particularly in supporting vulnerable groups

## 2. Overall Aims

- 2.1. This policy will contribute to the prevention of abuse by:
  - 2.1.1. Clarifying standards of behaviour for staff and children



- 2.1.2. Introducing appropriate activities within the curriculum and scope of Always Growing that promote a varied and balance curriculum whilst also promoting safeguarding
- 2.1.3. Provide opportunities for children to develop skills, concepts, attitudes and knowledge to promote their safety and well-being.
- 2.1.4. Developing staff awareness of the causes of abuse and making prompt referrals when abuse is suspected
- 2.1.5. Addressing concerns at the earliest possible stage

2.2. This policy will contribute to the protection of children by:

- 2.2.1. Including appropriate activities within the curriculum and scope of Always Growing that promote a varied and balance curriculum whilst also promoting safeguarding
- 2.2.2. Implementing Safeguarding policies and procedures
- 2.2.3. Working in partnership with children; parents and external agencies.
- 2.2.4. Referring to relevant government guidance when directing concerns about children in specific circumstances (e.g. children at risk from child sexual exploitation or radicalisation)
- 2.2.5. Supporting the recruitment process to prevent unsuitable candidates being employed
- 2.2.6. Creating a safeguarding culture where Safeguarding is at the heart of what we do

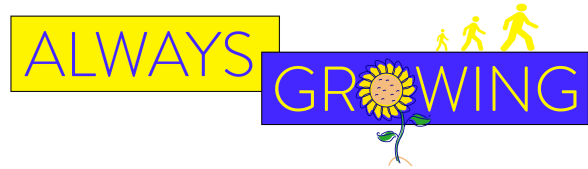
### 3. Definitions

3.1. Safeguarding and promoting the welfare of children means:

- 3.1.1. Protecting children from maltreatment
- 3.1.2. Preventing impairment of children's physical and mental health or development
- 3.1.3. Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- 3.1.4. Taking action to enable all children to have the best outcomes

3.2. **Child protection** is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.

3.3. **Abuse** is a form of maltreatment of a child, and may involve inflicting harm or failing to act to prevent harm. Appendix 1 explains the different types of abuse.



3.4. **Neglect** is a form of abuse and is 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. Appendix 1 defines neglect in more detail.

3.5. **Sexting** (also known as youth produced sexual imagery) is the sharing of sexual imagery (photos or videos) by children

3.6. **Children** includes everyone under the age of 18.

3.7. The following **3 safeguarding partners** are identified in Keeping Children Safe in Education (and defined in the Children Act 2004, as amended by chapter 2 of the Children and Social Work Act 2017). They will make arrangements to work together to safeguard and promote the welfare of local children, including identifying and responding to their needs:

1. The local authority (LA)
2. A clinical commissioning group for an area within the LA
3. The chief officer of police for a police area in the LA area

## Safeguarding Children

### 3. Rationale

3.1. All children have a right not to be abused and to be protected from harm regardless of their race, religion, ethnicity, gender or sexuality. Always Growing's policy is to safeguard and promote the welfare of children and young people in our care.

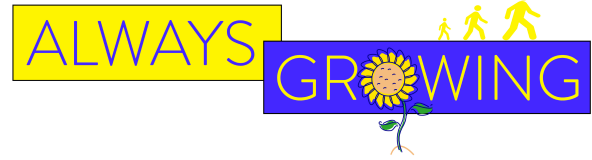
3.2. Our objectives are to help keep young people safe by:

3.2.1. Providing a safe environment for young people to learn and be successful where they are protected from maltreatment

3.2.2. Preventing impairment of children's health or development

3.2.3. Identifying young people who are suffering or likely to suffer significant harm

3.2.4. Taking appropriate action, in a timely manner with the aim of making sure that they are kept safe both at home and at Always Growing to enable all children to have the best outcomes



3.2.5.Preventing unsuitable people from working in our environment, through our safer recruitment strategies

3.2.6.Listening and responding to the children’s concerns in a timely way and making referrals for help as required

3.2.7.Working with external agencies to promote the safeguarding of children

3.2.8.Ensuring that staff are aware of their responsibilities to safeguard children, and receive appropriate training to do so

3.3.At Always Growing we place the safety and welfare of all children at the heart of our culture and ethos.

3.4.This will be promoted by:

3.4.1.establishing an ethos in which children feel safe and secure, their viewpoints are valued, they are encouraged to talk and are listened to

3.4.2.support and guidance for children which matches their individual needs and developmental stages. This includes ensuring that they have a range of appropriate adults who they can approach if they are in difficulties

3.4.3.to develop awareness in all staff of their responsibilities in identifying abuse, and taking a proactive role in the prevention of abuse. This includes recognising that safeguarding issues could arise at any point in the day, term or year on-site, off-site, in school or at home. Staff must be alert to these issues at all times.

3.4.4.ensuring that all staff are aware of the referral procedures within Always Growing

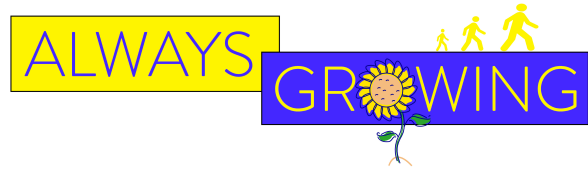
3.4.5.Ensuring that all staff are aware of the referral procedures external to Always Growing

3.4.6.monitor children who have been identified as ‘at risk’

3.4.7.ensuring that the appropriate outside agencies are involved

3.4.8.working with parents to build an understanding of Always Growing’s responsibility to ensure the welfare of all children





## 4. Equality Statement

4.1. Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

4.2. We give special consideration to children who:

4.2.1. Have special educational needs (SEN) or disabilities

4.2.2. Are young carers

4.2.3. May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality

4.2.4. Have English as an additional language

4.2.5. Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence

4.2.6. Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation

4.2.7. Are asylum seekers

4.2.8. Are at risk due to either their own or a family member's mental health needs

4.2.9. Are looked after or previously looked after

## 5. Roles and Responsibilities

### All Staff

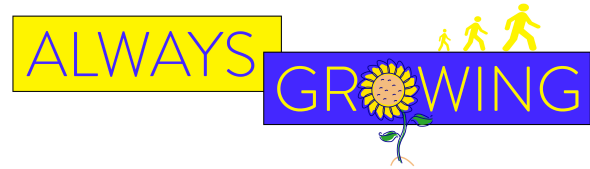
5.1. All staff have a duty of care towards children they work with. They should take every precaution to protect them from harm. This includes, but is not limited to, the following points:

5.1.1. Deal with any disclosures calmly and within the guidance set out in this policy

5.1.2. Make professional judgements about behaviour when there is no specific guidance, to ensure the best interests and welfare of children.

5.1.3. Be careful about what is said, their physical contact with children and their actions, which should always be within the professional remit of their role.

5.1.4. Report anything that makes them uncomfortable or concerned in any way. This includes concerns about any child or member of staff.



- 5.1.5. Understand the processes for making a referral when a safeguarding issue is identified
  - 5.1.6. Understand how to make a referral themselves to the LADO or Social Care team
  - 5.1.7. Understand the early help processes which includes identifying emerging problems, liaising with the DSL and sharing information when necessary
  - 5.1.8. Be discreet but never promising confidentiality, respecting a child's privacy. Staff will need to treat information in a confidential way, but ensure that information is shared in a timely way when required, to those who need to know
  - 5.1.9. Be subject to safer recruitment processes and checks whether they are new staff, supply staff, contractors, volunteers etc.
  - 5.1.10. Completing safeguarding training at least once a year and re-familiarise themselves with the policies and procedures before beginning work at Always Growing.
  - 5.1.11. Be alert to the signs of abuse (physical, sexual, emotional, neglect), mental health needs, self-harm, pregnancy, concerns about possible 'forced' marriages, female genital mutilation, children at risk of being influenced by extremism/ radicalisation and young carers at risk of socio-economic factors which may affect their development. Further information is contained in the Appendix
  - 5.1.12. Inform the Directors about any situations or factors that could affect their ability to work with children. All staff must declare any anything information or changes that a DBS check would be up.
- 5.2. All staff will read and understand part 1 and Annex A of the Department for Education's statutory Safeguarding Guidance, and will review this at least annually
- 5.3. The expectations laid out in this policy, this should be considered in addition to the Staff Code of Conduct policy and other relevant policies.
- 5.4. Always Growing recognises the stressful and traumatic nature of Safeguarding work and supports staff by providing an opportunity to talk through their anxieties with a member of the Safeguarding team and to seek further support as appropriate.
- 5.5. All concerns relating to safeguarding adults at Always Growing should be referred to the Safeguarding team. This can be wide ranging in scope, from concerns about their well-being, mental or physical health, behaviour conduct or specific Safeguarding concerns

## The Designated Safeguarding Lead:

5.6. The Designated Safeguarding Lead with lead responsibility, management and oversight is Ben Bausor. As Directors of Always Growing this responsibility also lies with, and is shared with Lewis Fogarty.

5.7. Key Responsibilities of the DSL:

- 5.7.1. Co-ordinate all safeguarding activity
- 5.7.2. Sign off on all reports before they are shared externally to Always Growing
- 5.7.3. Provide advice and support to staff on child welfare and child protection matters
- 5.7.4. Take part in strategy discussions and interagency meetings
- 5.7.5. Delegate attendance at strategy and other meetings to other staff
- 5.7.6. Contribute to the assessment of children
- 5.7.7. Refer suspected cases as appropriate to the relevant body and support staff who make a direct referral

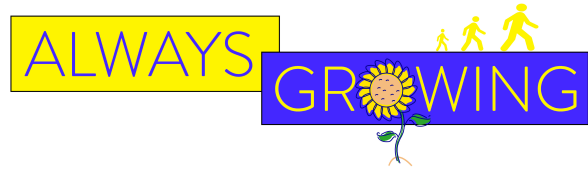
5.8. Where there is a concern about a child, the Designated Safeguarding Lead (DSL) will meet with the safeguarding team to decide on the appropriate course of action, if possible. If this isn't possible then the DSL will seek advice from the LADO directly or social services.

5.9. When a Designated Safeguarding Lead resigns their post or no longer has safeguarding responsibility, there should be a full face to face handover/exchange of information with the new post holder.

The Directors

5.10. The Directors will ensure that Always Growing:

- 5.10.1. Has a safeguarding policy written in accordance with the current government Safeguarding guidance, and ensure that there is a review of all safeguarding policies and procedures at least annually
- 5.10.2. Has a Designated Safeguarding Lead who is available to provide support and guidance on child protection matters, contribute to the assessment of children and make referrals to the relevant agency when required
- 5.10.3. Operates safer recruitment procedures and ensures appropriate checks are carried out on all new staff and relevant volunteers



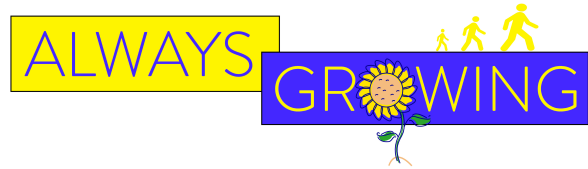
- 5.10.4. Ensures that the safeguarding team attends appropriate refresher training
- 5.10.5. Ensures that all staff who work with children undertake training at least at yearly intervals
- 5.10.6. Ensures that temporary staff, volunteers and visitors are made aware of the Always Growing's arrangements for safeguarding and their responsibilities.
- 5.10.7. Remedies any deficiencies or weaknesses brought to their attention without delay
- 5.10.8. Have procedures for dealing with allegations of abuse against staff/ volunteers
- 5.10.9. In the provision of extended facilities, directly under the supervision or management of Always Growing staff, the arrangements for safeguarding as written in this policy shall apply
- 5.10.10. Where services or activities are provided separately by another body, Always Growing will seek assurances that the body concerned has appropriate policies and procedures in place for safeguarding children and there are arrangements to liaise with Always Growing on these matters where appropriate.
- 5.10.11. Will communicate this policy and ensure it is displayed on the website
- 5.10.12. Manage the case in the event that an allegation of abuse is made against another member of staff or volunteer when appropriate
- 5.10.13. Ensure that relevant staffing ratios are met, where applicable to the EYFS
- 5.10.14. Ensure that children in the Early Years Foundation Stage is assigned a Key Person

## **6. Recognising Abuse and Taking Action**

### 6.1. Safeguarding Procedure checklist for staff.

If:

- a child discloses abuse either by an adult or another child
- a member of staff suspects a child may have been abused



- A member of staff is concerned about the behaviour of another staff member
- a third party expresses concern
- a staff member witnesses an abusive situation involving another staff member, adult or a child
- a child reports persistent bullying

the member of staff should: RECORD and REPORT

- R Respond without showing any signs of disquiet, anxiety or shock
- E Enquire casually about how an injury was sustained or why a child appears upset
- C Confidentiality must not be promised to children or adults in this situation
- O Observe carefully the demeanour or behaviour of the child
- R Record in detail what has been seen and heard. Make sure this is factual, in the child's own words and not your own opinion
- D Do not interrogate or enter into detailed investigations: rather encourage the child to say what they want until enough information is gained to decide whether or not a referral is appropriate.

Then REPORT to the Safeguarding Team without delay. A template for recording concerns is in the appendix

Members of staff should not

- investigate suspected/alleged abuse themselves
- evaluate the grounds for concern
- seek or wait for proof
- discuss the matter with anyone other than the Safeguarding Team

## **If a child is suffering or likely to suffer harm, or in immediate danger**

6.2. Tell the DSL as soon as possible so that an immediate referral can be made to Social Services and/or the police.

6.3. Any member of staff can make a referral, and they should follow up with the DSL if they do so.

6.4. When making a referral, staff should contact the relevant Social Services, based on where the child lives. The contact information and links to the referral form can be



found below. Staff should telephone the relevant social services before sending the form in to ask for advice and guidance:

For Slough:

Front Door Hub 01753 875362 (9 am - 5 pm). Out of hours: 01344 786543

Link to Multi Agency Referral Form (MARF):

<https://www.scstrust.co.uk/multi-agency-referral-form-v3-3/>

Email to:

[sloughchildren.referrals@scstrust.co.uk](mailto:sloughchildren.referrals@scstrust.co.uk)

For Windsor and Maidenhead:

Single Point of Access 01628 683150. Out of hours 01344 786543

Link to Multi Agency Referral Form:

[https://www3.rbwm.gov.uk/forms/form/405/en/multi\\_agency\\_safeguarding\\_hub\\_mash\\_referral](https://www3.rbwm.gov.uk/forms/form/405/en/multi_agency_safeguarding_hub_mash_referral)

## **If a child makes a disclosure to you**

6.5. All staff should be aware that a child may make a disclosure to them at any time. All disclosures of abuse should be dealt with in the same way whether it is against a staff member, another adult or a child.

6.6. If a child tells a member of staff about possible abuse their statements should not be dismissed or ignored. It should be made clear to the child that confidentiality cannot be guaranteed with respect to Safeguarding issues.

6.7. On hearing an allegation or complaint from a child the member of staff should:

6.7.1. Listen to and believe the child. Allow them to talk freely

6.7.2. Limit their questioning to the minimum necessary for clarification. Staff should ask for help if needed.

6.7.3. Avoid leading questions.

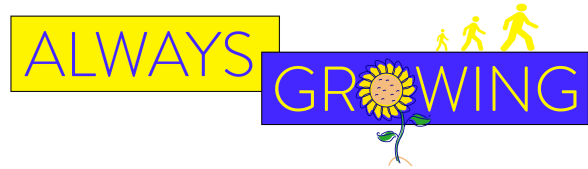
6.7.4. Use TED strategies. Tell me... Explain... Describe... to help manage the disclosure process.

6.7.5. Focus on that the child has done the right thing in telling you, rather than saying they should have said sooner

6.7.6. Explain that the information will need to be passed on to the DSL

6.7.7. A full record of conversations should be made, in the child's words. This should be factual and recorded on the form in the Appendix.

6.7.8. Pass the details of the disclosure onto the DSL. In the absence of the DSL, the Deputy DSL should be contacted



6.7.9.If none of these staff are available, and the staff member feels that the child is in immediate danger, then the staff member should contact the police

6.8.If a member of staff feels that a child is suffering, or likely to suffer from or in immediate danger, they must inform the DSL as soon as possible in order to make a referral

## **If you have concerns about a child (as opposed to believing a child is suffering or likely to suffer harm, or in immediate danger)**

6.9. Where possible, speak to the DSL first to agree a course of action. If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken.

6.10.Speak to a member of the senior leadership team and/or take advice from local authority children's social care. You can also seek advice at any time from the NSPCC helpline on 0808 800 5000.

6.11.Make a referral to local authority children's social care directly, if appropriate. Share any action taken with the DSL as soon as possible.

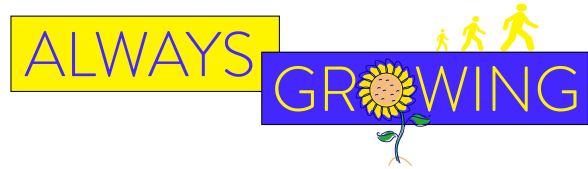
## **Early Help**

6.12.If early help is appropriate, the DSL will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner.

6.13.The DSL will keep the case under constant review and the school will consider a referral to local authority children's social care if the situation does not seem to be improving. Timelines of interventions will be monitored and reviewed.

6.14.If it is appropriate to refer the case to local authority children's social care or the police, the DSL will make the referral or support you to do so. If you make a referral directly, you must tell the DSL as soon as possible.

6.15.The local authority will make a decision within 1 working day of a referral about what course of action to take and will let the person who made the referral know the outcome. The DSL or person who made the referral must follow up with the



local authority if this information is not made available, and ensure outcomes are properly recorded.

6.16.If the child's situation does not seem to be improving after the referral, the DSL or person who made the referral must follow local escalation procedures to ensure their concerns have been addressed and that the child's situation improves.

## **If you discover that FGM has taken place or a child is at risk of FGM**

6.17.FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".

6.18.FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.

6.19.Possible indicators that a child has already been subjected to FGM, and factors that suggest a pupil may be at risk, are set out in the appendix.

6.20.Any member of staff who discovers that an act of FGM appears to have been carried out on a child under 18 must speak to the DSL and follow our local safeguarding procedures. Staff should not examine children.

6.21.Any member of staff who suspects a pupil is *at risk* of FGM or suspects that FGM has been carried out must speak to the DSL and follow our local safeguarding procedures.

## **If you have concerns about extremism or radicalisation**

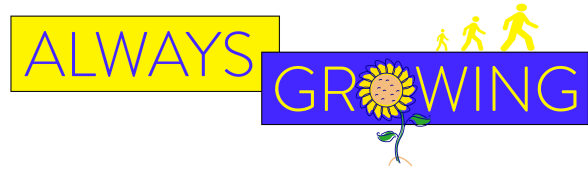
6.22.If a child is not suffering or likely to suffer from harm, or in immediate danger, where possible speak to the DSL first to agree a course of action.

6.23.If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken. Speak to a member of the senior leadership team and/or seek advice from local authority children's social care.

6.24.Make a referral to local authority children's social care directly, if appropriate

6.25.Where there is a concern, the DSL will consider the level of risk and decide which agency to make a referral to. This could include [Channel](#), the





government's programme for identifying and supporting individuals at risk of being drawn into terrorism, or the local authority children's social care team.

6.26. The Department for Education also has a dedicated telephone helpline, 020 7340 7264, which school staff and governors can call to raise concerns about extremism with respect to a pupil. You can also email [counter.extremism@education.gov.uk](mailto:counter.extremism@education.gov.uk). Note that this is not for use in emergency situations.

6.27. In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you:

6.27.1. Think someone is in immediate danger

6.27.2. Think someone may be planning to travel to join an extremist group

6.27.3. See or hear something that may be terrorist-related

6.28. Vulnerability indicators can be considered in three dimensions – engagement with the group, cause or ideology, intent to cause harm and capability to cause harm

6.29. Indicators of vulnerability across the three dimensions:

Engagement:

- Spending time with suspected extremists
- Changing appearance in line with group
- Day-to-day behaviour associated with extremist ideology
- Loss of interests and friends in activities not associated with extremist ideology
- Possession of material or symbols associated with an extremist cause
- Attempts to recruit others
- Communications with other that suggest identification with a group, cause or ideology

Intention:

- Identifying another group as threatening
- Blaming a group for causing all social or political ills
- Using insulting or derogatory names or labels for other groups
- Speaking about imminence of harm from other groups
- Expressing attitudes that justify offending on behalf of the group
- Condoning or supporting violence or harm towards others
- Plotting or conspiring with others

Capability:

- History of violence
- Criminally versatile
- Occupational skills or technical expertise

6.30. Always Growing recognises that not all of these examples may be applicable, but should be used in order to identify children who may be at risk of radicalisation. We also recognise that for younger children there is likely to be a lower risk of them directly being involved in radicalisation, but will be aware of the implications of other family members, such as parents/carers, family or extended family members becoming involved with radicalisation.

6.31. If a member of staff has concerns about a child or family and there may be a potential risk or radicalisation, this should be reported to the Safeguarding team

6.32. Racist incidents, either one-off or repeated may constitute a child-protection issue. All racist incidents are recorded and monitored.

## **If you have a mental health concern**

6.33. Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

6.34. Staff will be alert to behavioural signs that suggest a child may be experiencing a mental health problem or be at risk of developing one.

6.35. If you have a mental health concern about a child that is also a safeguarding concern, take immediate action by following the procedures.

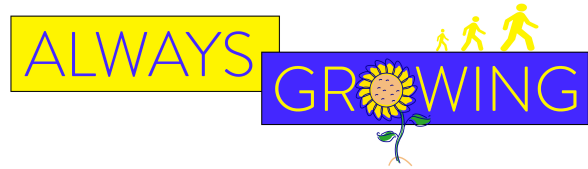
6.36. If you have a mental health concern that is **not** also a safeguarding concern, speak to the DSL to agree a course of action.

## **If you have a concern about a staff member, supply staff or volunteer**

6.37. Although it is an uncomfortable thought, it needs to be acknowledged that there is the potential for staff to abuse children.

6.38. All staff working within Always Growing must report any potential safeguarding concerns about an individual's behaviour towards children and young people immediately.

6.39. Whistle blowing, Allegations or concerns about colleagues and visitors, must be reported to the Directors unless the allegation or concern relates to one of the



Directors. This policy outlines the process for managing allegations against a member of staff

6.40.If the concern relates to one of the Directors, it should be reported to the other Director. Alternatively, it can be immediately reported to the Local Authority Designated Officer (LADO) in Children’s Social Care: 01628 683194.

6.41.The LADO has duties under section 11 of the Children Act (2004) to manage allegations against people who work with children in a paid or unpaid capacity. The LADO is involved from the initial phase of the allegation through to the conclusion of the case in line with section 18 of this policy document. The LADO is available to discuss any concerns and assist in deciding what action is needed to protect a child.

6.42.Always Growing will liaise with the LADO in managing allegations against staff. Communication with the LADO will be managed by the Directors, unless 15.5 applies

## **Responding to an Allegation Against a Member of Staff**

6.43.This procedures should be used in any case in which it is alleged that a member of staff, visiting professional or volunteer has:

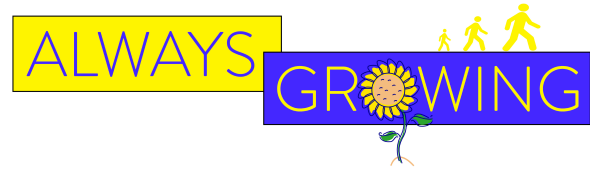
- 6.43.1.Behaved in a way that has harmed a child or may have harmed a child;
- 6.43.2.Possibly committed a criminal offence against or related to a child; or
- 6.43.3.Behaved in a way that indicates s/he is unsuitable to work with children.

6.44.The following action should be taken.

6.44.1.Ask the party making the complaint, disclosure or allegation to make a written statement outlining the complaint. This should make it clear exactly what the allegation is in as much detail as possible. It may be necessary to support the person to make a statement, for example, if the disclosure comes from a child.

6.44.2.Once the statement has been written and signed, the Directors should contact the LADO as soon as possible to establish the course of action. This should be prior to carrying out any investigation.

6.44.3.After contacting the LADO, the matter should be referred to OFSTED as soon as possible, but within 14 days



6.44.4. The Directors will follow advice from the LADO and OFSTED in managing the situation. There could be a number of possible outcomes, including no further action, a full investigation, a strategy meeting with relevant agencies to decide the next steps.

6.44.5. During an investigation it may be necessary to suspend an employee. Before doing so we will seek advice from the relevant agencies. When an employee is suspended, we will work with agencies to bring about speedy resolution to the matter and keep the employee informed in line with the agreement of the external agencies

6.44.6. At the end of the investigation, a summary report will be written and submitted to OFSTED

#### Allegations of abuse made against other pupils

6.45. Staff should be aware that abuse can also be peer-to-peer, and should not dismiss this as a part of growing up or 'banter'. We also recognise the gendered nature of peer-on-peer abuse (i.e. that it is more likely that girls will be victims and boys perpetrators). However, all peer-on-peer abuse is unacceptable and will be taken seriously.

6.46. Always Growing has an anti-bullying approach, which is separate to the safeguarding policy. However, incidents of bullying may be considered under safeguarding procedures. This includes all forms of bullying. Staff should be particularly aware of when peer-to-peer bullying could be constituted as abuse.

6.47. Most cases of children hurting other children will be dealt with under our behaviour policy, but this child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns.

6.48. This might include where the alleged behaviour:

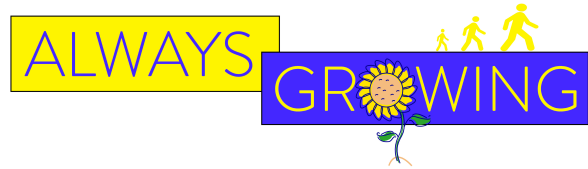
6.48.1. Is serious, and potentially a criminal offence

6.48.2. Could put children at risk

6.48.3. Is violent

6.48.4. Involves drugs or alcohol

6.48.5. Involves sexual exploitation, sexual abuse or sexual harassment, such as indecent exposure, sexual assault, upskirting or sexually inappropriate pictures or videos (including sexting)



6.49.If a child makes an allegation of abuse against another child:

6.49.1.You must record the allegation and tell the DSL, but do not investigate it

6.49.2.The DSL will contact the local authority children’s social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence

6.49.3.The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made and any others affected) with a named person they can talk to if needed

6.49.4.The DSL will contact the children and adolescent mental health services (CAMHS), if appropriate

6.50.We will minimise the risk of peer-on-peer abuse by implementing the following steps. We are aware that not all steps will be appropriate for all areas of our provision and will depend on the age and stage of children:

6.50.1.Challenging any form of derogatory or sexualised language or behaviour, including requesting or sending sexual images

6.50.2.Being vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female children, and initiation or hazing type violence with respect to boys

6.50.3.Ensuring we help to educate children about appropriate behaviour and consent where this is appropriate to their developmental stage

6.50.4.Ensuring children know they can talk to staff confidentially if needed

6.50.5.Ensuring staff are trained to understand that a child harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy

## Sexting

6.51.We are aware that sexting may not directly affect the children in our care, however, we consider this an important aspect for staff to be aware of to promote awareness of how this may impact in the wider family

6.52.If you are made aware of an incident involving sexting (also known as ‘youth produced sexual imagery’), you must report it to the DSL immediately.

6.53.You must **not**:



- 6.53.1. View, copy, print, share, store or save the imagery yourself, or ask a someone to share or download it (if you have already viewed the imagery by accident, you must report this to the DSL)
- 6.53.2. Delete the imagery or ask to delete it
- 6.53.3. Ask the whoever is involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)
- 6.53.4. Share information about the incident with other members of staff, the children it involves or their, or other, parents and/or carers
- 6.53.5. Say or do anything to blame or shame any young people involved

6.54. You should explain that you need to report the incident, and reassure the child that they will receive support and help from the DSL.

6.55. Following a report of an incident, the DSL will hold an initial review meeting and aim to determine:

- 6.55.1. Whether there is an immediate risk to the child
- 6.55.2. If a referral needs to be made to the police and/or children's social care
- 6.55.3. If it is necessary to view the image(s) in order to safeguard the young person (in most cases, images or videos should not be viewed)
- 6.55.4. What further information is required to decide on the best response
- 6.55.5. Whether the image(s) has been shared widely and via what services and/or platforms (this may be unknown)
- 6.55.6. Whether immediate action should be taken to delete or remove images or videos from devices or online services
- 6.55.7. Any relevant facts about the children involved which would influence risk assessment
- 6.55.8. If there is a need to contact another school, college, setting or individual
- 6.55.9. Whether to contact parents or carers of the children involved (in most cases parents/carers should be involved)

6.56. The DSL will make an immediate referral to police and/or children's social care if:

- 6.56.1. The incident involves an adult
- 6.56.2. There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example owing to special educational needs)
- 6.56.3. What the DSL knows about the images or videos suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent
- 6.56.4. The imagery involves sexual acts and any child in the images or videos is under 13



6.56.5. The DSL has reason to believe a child is at immediate risk of harm owing to the sharing of nudes and semi-nudes (for example, the young person is presenting as suicidal or self-harming)

6.57. If none of the above apply then the DSL, in consultation with other members of staff as appropriate, may decide to respond to the incident without involving the police or children's social care. The decision will be made and recorded in line with the procedures set out in this policy.

6.58. If at the initial review stage a decision has been made not to refer to police and/or children's social care, the DSL will conduct a further review to establish the facts and assess the risks.

6.59. The DSL will inform parents at an early stage and keep them involved in the process, unless there is a good reason to believe that involving them would put the child at risk of harm.

6.60. All sexting incidents and the decisions made in responding to them will be recorded. The record-keeping arrangements set out in section 14 of this policy also apply to recording incidents of sexting.

## **7. Confidentiality**

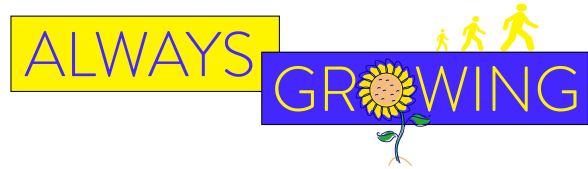
7.1. Safeguarding information will be dealt with in a confidential manner. Information will only be given out on a strictly need to know basis, and must be treated as restricted/confidential.

7.2. Staff will be informed of relevant details only when the staff responsible for Safeguarding feels their having knowledge of a situation will improve their ability to deal with an individual child and/or family.

7.3. Safeguarding records will be stored securely in a central place separate from other records. Individual files will be kept for each child; Always Growing will not keep family files. Files will be kept for at the least the period during which the child is attending Always Growing, and beyond that we would seek advice on how long to keep our records for, referring to our Information and Records Retention Policy

7.4. Access to these records by staff other than by the staff responsible for safeguarding will be restricted.

7.5. Parents will be aware of information held on their children and kept up to date regarding any concerns or developments by the appropriate members of staff.



Information will not be shared with parents if it is felt that this increases the risk of harm for children.

7.6.If required, safeguarding records will be forwarded on to the relevant organisation. If sending by post child/staff records will be sent by “special/recorded delivery” for audit purposes a note of all child/staff records transferred or received should be kept in either paper or electronic format. This will include the name, date of birth, where and to whom the records have been sent, the date send and/or received.

7.7.With regards to confidentiality, staff should be mindful of the following points:

7.7.1.Timely information sharing is essential to effective safeguarding

7.7.2.Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children

7.7.3.The Data Protection Act (DPA) 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe, and further guidance can be found within the GDPR policy

7.7.4.If staff need to share ‘special category personal data’, the DPA 2018 contains ‘safeguarding of children and individuals at risk’ as a processing condition that allows practitioners to share information without consent if it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk

7.7.5.Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the child’s best interests

7.7.6.The government’s [information sharing advice for safeguarding practitioners](#) includes 7 ‘golden rules’ for sharing information, and will support staff who have to make decisions about sharing information

7.7.7.If staff are in any doubt about sharing information, they should speak to the designated safeguarding lead (or deputy)

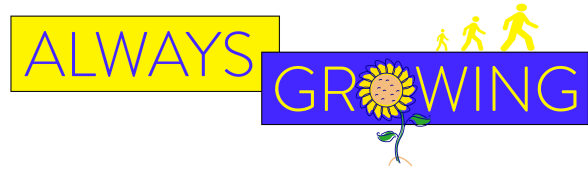
## 8. Involving Parents/Carers

8.1.Always Growing recognises and values the contribution parents and carers can make

8.2.In general, Always Growing will discuss concerns with parents/carers before approaching other agencies, and will seek their consent to making a referral to another agency.

8.3.Staff should only approach parents/carers after consultation with the Designated Safeguarding Lead or member of the safeguarding team. Staff should keep a record of the conversation, and discuss with a member of the safeguarding team.

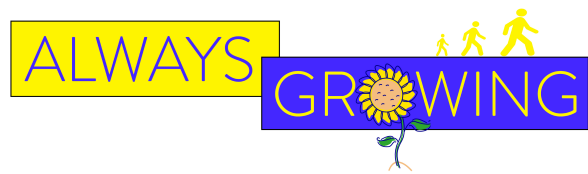




- 8.4.No disclosure must be made to a parent if this would put the child at risk of significant harm.
- 8.5.There may be occasions when Always Growing will contact another agency before informing parents/carers because it considers that contacting parents may increase the risk of significant harm to the child. Always Growing recognises that this can be distressing, however it is important to emphasise the overriding need to safeguard the child at all times.
- 8.6.Where allegations of abuse are made against other children, we will normally notify the parents of all children involved.
- 8.7.Always Growing’s safeguarding policy is available to parents/carers on request. A copy of the policy is on the website, and parents are encouraged to read the policy when registering. Information about the safeguarding team is made available to parents through the information board, and parents are encouraged to discuss any concerns they have with the team.

## **9. Working with External Agencies**

- 9.1.Always Growing will work cooperatively in partnership with a range of other agencies in the best interests of the children.
- 9.2.Always Growing will, where necessary, make referrals to Children’s Social Care. Referrals should usually only be made by a member of the Safeguarding team. Any staff member can make a referral to social care, however, it is anticipated that they will consult with the safeguarding team before doing so.
- 9.3.Staff also have a right to contact the LADO if they feel that a safeguarding incident has not been managed appropriately. Again, it is anticipated that they will liaise with the safeguarding team before doing this. Although all staff are all made aware the direct referral option is available to them.
- 9.4.A member of the Safeguarding team may also contact Children’s Social Care for advice about a specific case. Should Children’s Social Care require a referral based on the information provided, staff will cooperate fully with this request.
- 9.5.Where the child already has a social worker, the request for support should go immediately to the social worker involved, or in their absence to their practice supervisor or team manager.



9.6. Always Growing will follow up all requests made to social care, and will seek to refer the matter to more senior staff within Children's Social Care should the matter not be satisfactorily resolved.

9.7. Always Growing will co-operate with any Safeguarding enquiries conducted by Children's Social Care. This will follow the policies and procedures outlined by the local authority within their resolving professional disagreements about safeguarding children escalation policy. Always Growing will raise matters by following this policy when it is felt that a situation hasn't been handled well, or warrants further investigation

## **10. Always Growing's Role in Supporting Children**

10.1. Always Growing will offer appropriate support to individual children who have experienced abuse or who have abused others.

10.2. Children and young people who abuse others will be responded to in a way that meets their needs as well as protecting others within the Always Growing community through a multi-agency risk assessment.

10.3. Always Growing will ensure that the needs of children and young people who abuse others will be considered separately from the needs of their victims.

10.4. We will ensure that Always Growing works in partnership with parents/carers and other agencies as appropriate.

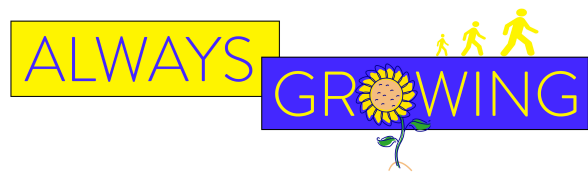
10.5. Always Growing will ensure that there are systems in place for children to express their views and feelings and give feedback.

### **Children with Additional Needs**

10.6. Always Growing recognises that while all children have a right to be safe, some children may be more vulnerable to abuse, for example those with a disability or special educational need, those living with domestic violence or drug/alcohol abusing parents, etc.

10.7. When supporting children where this applies, consideration will be given to extraneous factors which may mean the child needs additional support. This includes:

10.7.1. Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration



10.7.2.Children being more prone to peer group isolation than other pupils

10.7.3.The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs

10.7.4.Communication barriers and difficulties in overcoming these barriers

10.8.We offer extra support for children with SEN and Disabilities including personalised support plans when needed

## **Children with Medical Needs**

10.9.Always Growing has a separate policy on managing the health and medical needs of all children

10.10.Certain medical needs will mean that children are defined as being disabled, as defined by the Equality Act, 2010. In addition, a child's medical needs may also be considered as Special Educational Needs (SEN). Where this is the case, Always Growing will seek guidance from relevant professionals and will comply with statutory duties,

10.11.Always Growing will put in place support for each child on an individual basis, taking into account the individual needs and support as required. This will include supporting staff to manage these needs, such as appropriate training.

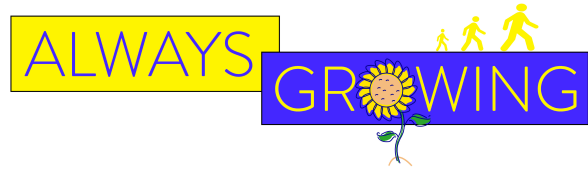
10.12.Children requiring First Aid will be given attention from trained staff. A written record of all first aid administered will be kept on an accident form. When there is any doubt about a child's welfare or if further medical intervention is required, parents will be contacted and an ambulance requested if necessary prior to that. If this is the case procedures laid out in the Health Policy will be followed.

10.13.Always Growing will dispense medicine in line with the Health policy.

## **Looked After Children or Children Recently Looked After**

10.14.Always Growing are committed to providing quality provision based on equality of opportunity for all children and their families. All staff in our provision are committed to doing all they can to enable looked after children in their care to achieve and reach their full potential.

10.15.Children become looked after if they have either been taken into care by the local authority, or have been accommodated by the local authority (a voluntary care arrangement). Most looked after children will be living in foster homes, but a smaller

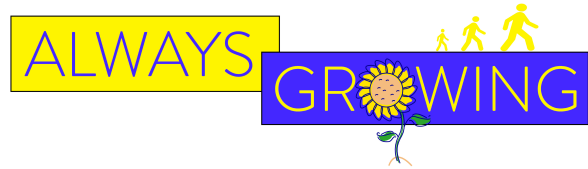


number may be in a children's home, living with a relative or even placed back home with their natural parent(s).

- 10.16. We recognise that children who are being looked after have often experienced traumatic situations; physical, emotional or sexual abuse or neglect. However, we also recognise that not all looked after children have experienced abuse and that there are a range of reasons for children to be taken in to the care of the local authority.
- 10.17. The term looked after child denotes a child's current legal status; this term is never used to categorise a child as standing out from others.
- 10.18. Where a child who normally attends our setting is taken into care and is cared for by a local foster carer, we will continue to offer the placement and further support for the child.
- 10.19. The designated person for looked after children is the Designated Safeguarding Lead. They have the following responsibilities:
- 10.19.1. Ensure that relevant staff have the information, support and training necessary to meet the looked after child's needs.
  - 10.19.2. Liaises with agencies, professionals and practitioners involved with the child and his or her family and ensure that appropriate information is gained and shared.
- 10.20. Always Growing recognises the role of the local authority children's social care department as the child's corporate parent and the key agency in determining what takes place with the child. Nothing changes, especially with regard to the birth parents or foster carer's role in relation to the setting, without prior discussion and agreement with the child's social worker.
- 10.21. Concerns about the child will be noted in the child's file and discussed with the foster carer.
- 10.22. If the concerns are about the foster carer's treatment of the child, or if abuse is suspected, these are recorded in the child's file and reported to the child's social care worker according to the setting's safeguarding children procedure.

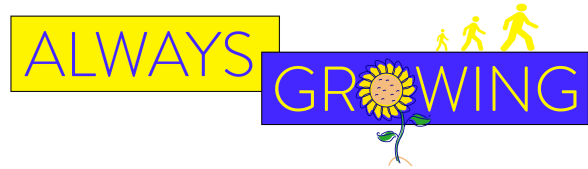
## **11. Children in Specific Circumstances**

- 11.1. Always Growing will follow the government guidance contained in the documents below when dealing with children in specific circumstances.



- 11.2. Where no guidance exists, the Safeguarding team will use their professional judgement to take reasonable action. We recognise that the scope of this documentation is very wide ranging and is not always directly applicable to the age of children who attend Always Growing. However, we consider it important to recognise the impact on the child of other family members behaving in an abusive way, and the need to protect all children from harm.
- 11.3. **Bullying Including Cyberbullying: Preventing bullying (DfE, 2012)** our approach to bullying is outline in our Acceptable Behaviour Policy.
- 11.4. **Drugs: Drugs: advice for schools (DfE, 2012)** with the nature of the children who attend Always Growing it is unlikely they will be using drugs. However, staff will be vigilant to drug use of children which would be considered as an indicator of safeguarding concerns. Staff will aware of the effect of parental drug abuse and how that might give rise to a safeguarding concern. Staff will be vigilant of parent/ carer behaviour at drop off and pick up and report any concerns to the Designated Safeguarding Lead.
- 11.5. **Fabricated or Induced Illness: Safeguarding children in whom illness is fabricated or induced (Department of Health, 2008).** We recognise that fabricated or induced illness is physical abuse and it will be dealt with according to our safeguarding policy.
- 11.6. **Faith Abuse: Child abuse linked to faith or belief: national action plan (DfE, 2012)** In line with the Equality Act (2010) we don't discriminate based on faith and encourage and promote diversity. We are aware of our duties to prevent radicalisation and understand that faith abuse may need to be considered alongside this.
- 11.7. **Forced Marriage: Forced marriage (FCO, 2014)** We acknowledge that forced marriage is an abuse of human rights and we also acknowledge that children should be protected against all forms of sexual exploitation including unlawful activity. We will have an awareness of children who are risk of forced marriage or act if they report their siblings or other family members to be at risk.
- 11.8. **Gangs and Youth Violence: Addressing youth violence and gangs (Home Office)** The nature of the children attending the Academy means they are unlikely to be directly involved with gangs. However, staff will be mindful that children may report other family members as being part of gangs and we will act accordingly in lines with guidance in order to reduce the risk of significant harm.

- 11.9. **Gender-Based Violence/violence against women and girls (VAWG): Ending violence against women and girls in the UK against women and girls in the UK (Home Office, 2014).** Always Growing doesn't tolerate violence against any individual. However, we recognised that women and girls are at particular risk and we will take reasonable actions as laid out in our policies to protect them from harm, and actively promote equality and inclusion.
- 11.10. **Mental Health: The mental health strategy for England (Department for Health, 2011) Mental Health and behaviour in schools (DfE, 2014).** Mental health can affect children directly and also the mental health of parents and carers can affect the well-being of a child.
- 11.11. **Private Fostering: Children Act 1989: private fostering (DfE, 2005)** We recognise that children in these circumstances may need additional support to help them cope with their situation. We will support families in this situation and help children understand that modern families can be made up of different combinations of people, family members and none-relatives
- 11.12. **Radicalisation: Channel guidance (Home Office, 2012)** further guidance contained in this policy
- 11.13. **Sexting: CEOP – National Crime Agency.** To reduce the risk of sexting, children are not allowed the use of their phones whilst at Always Growing. However, we encourage children to share any concerns they have about things they have seen online with us. Staff are aware of the effect of the wider context of these issues
- 11.14. **Teenage Relationship Abuse: 'This is abuse' campaign (Home Office, 2013)** At Always Growing we promote diversity and healthy relationships. Staff are aware of indicators of sexual exploitation which are relevant in this context.
- 11.15. **Trafficking: Safeguarding children who may have been trafficked (DfE, 2011)** Where we are concerned a child may have been or will be trafficked we will refer to guidance in this document for further advice.
- 11.16. **Child Sexual Exploitation (CSE): What to do if you suspect a child is being sexually exploited (DfE, 2012).** Specific reference is made to CSE. This can take place in many different forms, but the significant difference in CSE is the imbalance of power, with the perpetrator holding power over the victim. Staff will be aware of the signs of CSE, whilst bearing in mind that the child may not show any external signs of abuse
- 11.17. **Female Genital Mutilation (FGM): Female genital mutilation: guidelines to protect children and women (DfE, 2014).** Specific reference is made to FGM.



Staff are aware potential indicators of abuse and are aware of how to identify situations that may occur in the wider family and the appropriate actions to take

11.18. **Domestic Violence: Domestic violence and abuse (Home Office, 2013).** Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. Domestic violence may mean that a child is placed at risk of significant harm.

## Additional Safeguarding Policies

### 12. A Safer Culture - Safer Recruitment Policy

12.1. We pay full regard to Safer Recruitment, selection and pre-employment vetting as laid out in the statutory guidance.

12.2. Always Growing has a separate recruitment policy, which should also be referred to

12.3. Always Growing is compliant with the Disqualification under the Childcare Act 2006

12.4. The criteria for disqualification is as below:

12.4.1. Inclusion on the DBS Children's Barred List

12.4.2. Being found to have committed certain violent and sexual criminal offences against children or adults (Schedule 2 and 3 offences)

12.4.3. Being found to have committed a Schedule 1 offence

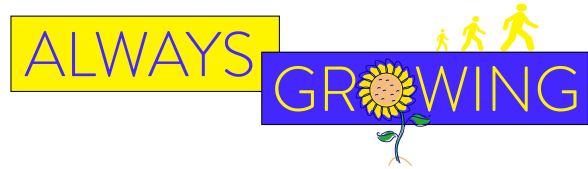
12.4.4. Refusal or cancellation of registration relating to childcare, children homes or being prohibited from private fostering

12.4.5. Living in the same household where another person who is disqualified lives or is employed. This is disqualification by association.

12.4.6. Committing an offence overseas which would constitute a disqualification offence in the UK

12.4.7. Been subject to any orders or other determinations related to childcare, such as having children who are subsequently taken into care. These are orders that are made in relation to the care of children

12.5. Staff employed by Always Growing would be in a role that is covered by the Rehabilitation of Offenders Act 1974 (exemptions) and will therefore be required to declare all criminal convictions and cautions, including those that are spent. Staff are not required to declare protected cautions or convictions.



12.6.If a family member, or someone who lives at this address has a relevant offence, this would mean that the member of staff would be disqualified by association. This does not include protected cautions or convictions.

12.7.During the recruitment process safer recruitment interviews allows Always Growing to take reasonable steps to investigate this requirement. Always Growing is aware that staff may be eligible to apply for a waiver from OFSTED, which would allow them to continue to work at Always Growing. This information must be presented to the Directors when this is the case.

12.8.Staff will be required to disclose to the Directors if either themselves or a family member is arrested, charged or convicted with any offence. Staff are made aware that this would not necessarily mean that an individual cannot continue working for Always Growing, however, failure to provide information may result in disciplinary procedures, including liaison with the local authority, OFSTED and police if required.

12.9.The Directors may need to refer cases to the LADO, OFSTED, relevant local authority employees and/or the police. Whist this is happening, it may be necessary to suspend staff whilst investigations are carried out.

## **13. Whistle Blowing Policy**

### **Introduction**

13.1.All staff have a statutory duty in relation to safeguarding, this includes whistle blowing, which is about raising a concern about malpractice within an organisation in confidence and without fear.

13.2.Always Growing is an organisation committed to delivering high quality care and education, promoting organisational accountability and maintaining public confidence.

13.3.The policy is underpinned by the Public Interest Disclosure Act 1998, which encourages people to raise concerns about misconduct or malpractice in the workplace, in order to promote good governance and accountability in the public interest.

13.4.The Act covers behaviour, which amounts to:

13.4.1.A criminal offence including abuse or suspected abuse of a child



- 13.4.2. Failure to comply with any legal obligation
- 13.4.3. A miscarriage of justice
- 13.4.4. Danger to health and safety of an individual and/or environment
- 13.4.5. Deliberate concealment of information about any of the above.

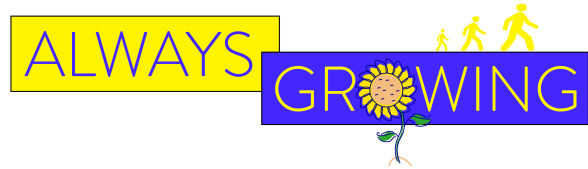
13.5. This policy is designed to nurture a culture of openness and transparency within the organisation, which makes it safe and acceptable for employees and volunteers to raise, in good faith, a concern they may have about misconduct or malpractice.

## Procedure

- 13.6. An employee or volunteer who, acting in good faith, wishes to raise such a concern should report the matter to the Directors, who will advise the employee or volunteer of the action that will be taken in response to the concerns expressed.
- 13.7. Concerns should be shared with the Local Authority and Ofsted as soon as possible. A disclosure in good faith to the Directors will be protected. If an employee or volunteer feels the matter cannot be discussed with the Directors, he or she should contact the Local Authority, LADO, for advice on what steps to follow.
- 13.8. Confidentiality will be maintained wherever possible and the employee or volunteer will not suffer any personal detriment as a result of raising any genuine concern about misconduct or malpractice within the organisation.
- 13.9. Should a complaint, disclosure or allegation be made about a member of staff, the Directors should attend to manage the situation, if possible. If this is not possible, the most senior member of staff should follow the action plan as outlined above.

## 14. Physical Intervention Policy

- 14.1. Always Growing recognises that staff only need to intervene physically as a last resort. The Directors do not expect staff to put themselves at physical risk.
- 14.2. Due to the nature of children attending our nursery, a degree of physical intervention will be necessary as part of their developmental age and stage. This policy is more for when older children may require physical intervention
- 14.3. Physical intervention will be used when an individual poses an immediate risk to themselves, others or Always Growing property and only after having exhausted all other behaviour management procedures as outlined in the behaviour



management policy. If possible, staff should seek support from more senior staff before using physical intervention.

14.4. Staff may intervene using reasonable force. At all times physical intervention must use the minimum amount of force for the minimum amount of time necessary to prevent injury or damage to property. This force needs to be in proportion to the severity of the situation.

14.5. Physical intervention that causes injury or distress to a child may be considered under safeguarding or disciplinary procedures. Therefore staff must ensure that force is in proportion to the severity of the situation.

14.6. Physical intervention may be required when carrying out a search for articles which may be reasonably suspected to cause harm to the individual or others. When carrying out a search, the statutory advice will be adhered to.

14.7. Only the Directors can authorise a search without consent of the child

14.8. Physical intervention should not be used as part of behaviour management or as a form of punishment. Children should not be barred physically from leaving a room or situation, unless this would constitute a very serious threat to themselves or others

## **15. Intimate Care Policy**

### **Introduction**

15.1. At Always Growing we stress children should be able to use the toilet independently before attending our Out of School Provisions. However sometimes accidents are unavoidable and therefore we have procedure for dealing with the situations if they do arise.

15.2. Staff are made aware that even well-intentioned contact might be mis-construed by the child or an observer. Staff must be prepared to justify actions and accept that all physical contact is open to scrutiny.

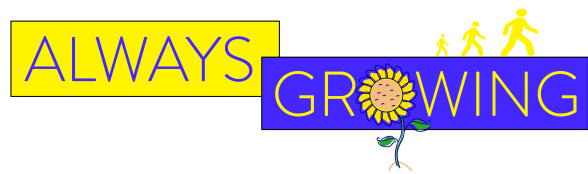
15.3. Where physical contact with a child is needed, it will be for the least amount of time necessary, appropriate given their age, stage of development and background and in response to the child's needs at that time. The expectation is that children will be as independent as possible

## Procedure for Out of School Services

- 15.4. The person who is first to discover a child has an accident reassures the child that everything is fine and promptly alert a member of staff to gather the child's spare clothes.
- 15.5. All members of staff are allowed to accompany children to the toilet and wait by the door after having informed another member of staff of their intention.
- 15.6. Due to the older age of children in our care, no member of staff should need to enter the toilets when a child needs to go.
- 15.7. If a member of staff does need to enter the toilet, they should inform another member of staff so they can be present to support. Both members of staff should be able to see each other at all times, and the child may have to wait a few moments for another member of staff to arrive before they go into the toilet. One of these members of staff must have completed their 'get to know' period, and both staff must have a valid DBS. (10 shift probationary period)
- 15.8. When intimate care is needed, the primary care giver should be an experienced play worker or above and a second member of staff should be present to offer support if needed. If one member of staff needs to leave for whatever reason, unless another member of staff is able to attend, both members of staff should leave the toilet.
- 15.9. No member of staff should be in the toilet alone with a child for any length of time, unless there is a genuine emergency that if not dealt with immediately would compromise the child's safety. If this situation arises, the Directors must be informed immediately and written record of this event made
- 15.10. The child is then again reassured that everything is ok and have a brief conversation why the child may not have gone to the toilet and report anything concerning through the usual channels.
- 15.11. Breach of this policy may constitute the requirement to initiate a safeguarding investigation

## Intimate Care within our Nursery

- 15.12. We do not exclude children from our nursery setting who are not yet toilet trained and support families and parents with the process at the relevant time

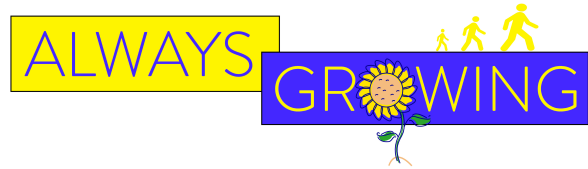


- 15.13. We provide nappy changing facilities in both rooms, and use good hygiene practices. We view toilet training as a self-care skill that children have the opportunity to learn with the support and non-judgement of adults
- 15.14. Due to the younger age of children attending, they will require a greater level of adult support when toileting as they may not yet be able to toilet independently. Staff are permitted to go into the toilet area unaccompanied as they have a greater level of experience and training compared to our Out of School staff. Staff should let another member of the team know when entering the toilet area and remain in earshot of other staff who they can call on for support when needed
- 15.15. Staff are aware of the children in their care who are in nappies or 'pull-ups'. We have changing stations in both of our rooms which children can access when they need to be changed. We collect each child's bag before changing so their nappies pull-ups and changing wipes are to hand
- 15.16. Our staff wear gloves to change the children and before changing starts the areas are prepared. New gloves are used for each child
- 15.17. We are gentle and positive when changing children. We ensure that it is a relaxed time and an opportunity to promote independence in young children
- 15.18. We encourage children to take an interest in using the toilet. We encourage children to wash their hands
- 15.19. We dispose of nappies and pull ups hygienically. We have a clinical waste bin on site and all nappies, used wipes and gloves are disposed of in this bin

## **16. Uncollected Child Policy**

### **Introduction**

- 16.1. In the event that a child is not collected by an authorised adult at the end of a session/day, Always Growing puts into practice agreed procedures. These ensure the child is cared for safely. The child will receive a high standard of care in order to cause as little distress as possible. We inform parents/carers of our procedures so that, if they are unavoidably delayed, they will be reassured that their children will be properly cared for.
- 16.2. Parents of children starting at the setting are asked to provide the following specific information, which is recorded on our Registration Form:



16.2.1.Home address and telephone number - if the parents do not have a telephone, an alternative number must be given, perhaps a neighbour or close relative.

16.2.2.Mobile telephone number (if applicable).

16.2.3.Names, addresses and telephone numbers of adults who are authorised by the parents to collect their child from the setting, for example a child-minder or grandparent.

16.2.4.Who has parental responsibility for the child

16.3.On occasions when parents are aware that they will not be at home or in their usual place of work, they inform us in writing of how they can be contacted

16.4.On occasions when parents, or the persons normally authorised to collect the child, are not able to collect the child, they provide us with written details of the name and telephone number of the person who will be collecting their child. We agree with parents how to verify the identity of the person who is to collect their child, this will normal be through the use of a password as well as the collector bringing a form of ID.

16.5.Parents are informed that if they are not able to collect the child as planned, they must inform us as soon as possible so that decisions can be made about how best to deal with the situation.

16.6.We provide parents with the onsite contact telephone number.

## **Procedure**

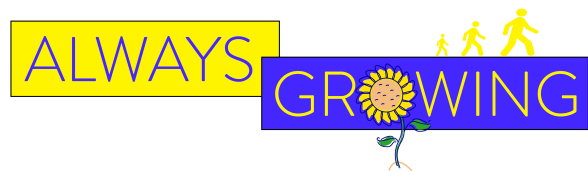
16.7.If a child is not collected at the end of the session/day, we follow the procedures below:

16.7.1.The child's file is checked for any information about changes to the normal collection routines.

16.7.2.If no information is available, parents/carers are contacted at home or at work.

16.7.3.If this is unsuccessful, the adults who are authorised by the parents to collect their child from the setting - and whose telephone numbers are recorded on the Registration Form - are contacted.

16.7.4.All reasonable attempts are made to contact the parents or nominated carers.



16.7.5. The child does not leave the premises with anyone other than those named on the Registration Form or in their file or previously agreed with the parents and manager.

16.8. If no-one collects the child after the setting has closed and there is no-one who can be contacted to collect the child, we apply the procedures for uncollected children.

16.8.1. We contact our local authority children's social care referral and assessment team: 01628 683150 or Out of hours emergency duty team: 01344 786543

16.8.2. The child stays at the setting in the care of Always Growing until the child is safely collected either by the parents or by a social care worker.

16.8.3. Social care will aim to find the parent or relative. If they are unable to do so, the child will become looked after by the local authority.

16.8.4. Under no circumstances will staff go to look for the parent, nor do they take the child home with them. A full written report of the incident is recorded in the child's file.

16.8.5. Depending on circumstances, we reserve the right to charge parents for the additional hours worked by our staff.

## 17. Missing Child Policy

### Introduction

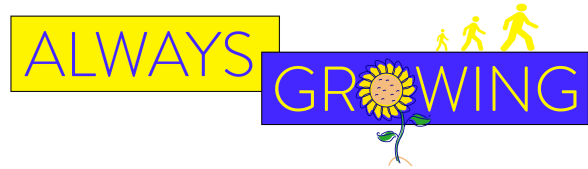
17.1. At Always Growing children's safety is our highest priority, both on and off the premises. Every attempt is made, through carrying out the outings procedure and the exit/entrance procedure, to ensure the security of children is maintained at all times. In the unlikely event of a child going missing, our missing child procedure is followed.

### Response

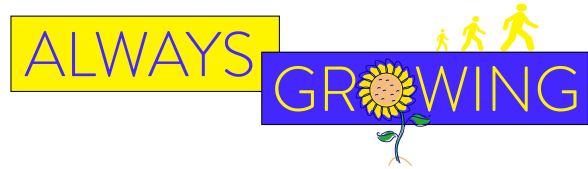
17.2. As soon as it is noticed that a child is missing on the premises, the staff members alerts the manager

17.3. The manager talks to the staff to find out when and where the child was last seen.

17.4. The manager will carry out a thorough search of the building and garden with the support of as many staff a possible whilst ensuring the safety of all children is maintained.



- 17.5. The register is checked to make sure that the child has not been collected or no other child is missing.
- 17.6. Doors and gates are checked to see if there has been a breach of security whereby a child could wander out.
- 17.7. If at this point the child is not found, the remaining children will be gathered in a way that doesn't cause distress, enabling a full head count to be carried out and a sweep of the school site by several members of staff.
- 17.8. If the child is still missing, the manager calls the police and reports the child as missing and then calls the parent.
- 17.9. A missing child could constitute a critical incident and will be recorded with actions taken in line with this policy.
- 17.10. Staff will inform Directors as soon as possible after following the above procedure
- 17.11. Staff keep calm and do not let the other children become anxious or worried.
- 17.12. The manager speaks with the parent(s).
- 17.13. The manager carries out a full investigation taking written statements from all the staff in the room
- 17.14. The staff member writes an incident report detailing:
- 17.14.1. The date and time of the report.
  - 17.14.2. What staff/children were in the group/outing and the name of the staff designated responsible for the missing child.
  - 17.14.3. When the child was last seen in the group/outing.
  - 17.14.4. What has taken place in the group or outing since the child went missing.
  - 17.14.5. The time it is estimated that the child went missing.
- 17.15. A conclusion is drawn as to how the breach of security happened
- 17.16. If the incident warrants a police investigation, all staff co-operate fully. In this case, the police will handle all aspects of the investigation, including interviewing staff. Children's social care may be involved if it seems likely that there is a Safeguarding issue to address.



17.17.The incident is reported under RIDDOR arrangements (see the Reporting of Accidents and Incidents policy); the local authority Health and Safety Officer may want to investigate and will decide if there is a case for prosecution.

17.18.In the event of disciplinary action needing to be taken, Ofsted is informed.

17.19.The insurance provider may need to be informed.

## **Managing people**

17.20.Missing child incidents are very worrying for all concerned. Part of managing the incident is to try to keep everyone as calm as possible.

17.21.The staff will feel worried about the child, especially the key person or the designated carer responsible for the safety of that child for the outing. They may blame themselves and their feelings of anxiety and distress will rise as the length of time the child is missing increases.

17.22.Staff may be the understandable target of parental anger and they may be afraid. The manager needs to ensure that staff under investigation are not only fairly treated but receive support while feeling vulnerable.

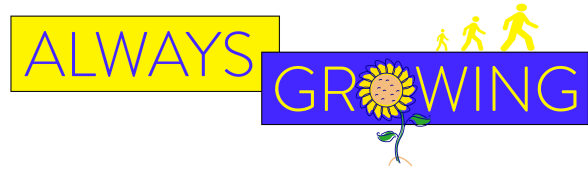
17.23.If possible, Directors will be on hand to help manage this situation.

17.24.The parents may feel angry and fraught. They may want to blame staff and may single out one staff member over others; they may direct their anger at the manager. When dealing with a distraught and angry parent, there should always be two members of staff, one of whom is the manager and the other should be a senior member of staff. No matter how understandable the parent's anger may be, aggression or threats against staff are not tolerated, and the police should be called. The Aggressive Parent policy should be followed.

17.25.The other children are also sensitive to what is going on around them. They too may be worried. The remaining staff caring for them need to be focused on their needs and must not discuss the incident in front of them. They should answer children's questions as honestly as possible but in a sensitive and reassuring way.

17.26.In accordance with the severity of the final outcome, staff may need counselling and support. If a child is not found, injured, or dead, this will be a very difficult time. The Directors will use their discretion to decide what action to take.





17.27. Staff must not discuss any missing child incident with the press under any circumstances. The Media and Critical Incidents Policies should be followed.

## **18. Use of Technology**

18.1. At Always Growing we take steps to ensure that there are effective procedures in place to protect children, young people, and vulnerable adults from the unacceptable use of mobile phones and cameras in the setting.

### **Personal Mobile Phones**

18.2. Personal mobile phones belonging to members of staff are stored securely and not used on the premises during working hours.

18.3. At the beginning of each individual's shift, personal mobile phones must be stored in a locked cabinet/box/drawer. Staff must sign their phone in and out each day.

18.4. Staff can sign their phone out for lunch breaks, however phones must only be used in the designated staff areas.

18.5. Failure of staff to follow this procedure will result in disciplinary action and must be reported to the Directors.

18.6. The only staff members who are authorised to carry an Always Growing owned mobile phone whilst at Always Growing are the Directors and the provision managers.

18.7. Staff should not establish social contact with children or their families, or give out personal details to children or their families, unless this has been agreed by the Directors.

18.8. Phone calls relating to Always Growing Business should only be made on an Always Growing phone, one of the Director's phones (which are owned by Always Growing) or by other authorised personnel, (those who have been authorised by the Directors).

18.9. Staff should be aware of the potential safeguarding risks of using their mobile phone and social media. Staff should be aware of Always Growing's Media and Confidentiality policies.

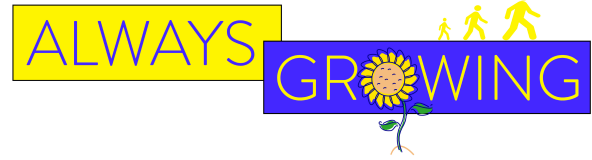
18.10. Members of staff should ensure that the telephone number of the setting is known to immediate family and other people who need to contact them in an emergency.



- 18.11. Staff should only use Always Growing mobile phones to communicate whilst on Always Growing business.
- 18.12. When going off site on Always Growing business, for example to collect a child from school, staff must take a mobile phone with them, so that they can contact Always Growing or be contacted in an emergency situation.
- 18.13. Staff must ensure that they use their phone only for Always Growing business and in line with the safeguarding training that they have received
- 18.14. Members of staff will not use their personal mobile phones for taking photographs of children; Always Growing owned phones will be used for this purpose
- 18.15. Parents and visitors are requested not to use their mobile phones whilst on the premises. Staff must be vigilant in monitoring mobile phone use by others, and challenge unauthorised phone use.

## **Cameras and videos**

- 18.16. Members of staff must not bring their own cameras or video recorders into the setting.
- 18.17. Photographs and recordings of children are only taken for valid reasons, i.e. to record their learning and development, or for displays within the setting. Photographs or recordings of children are only taken on equipment belonging to Always Growing.
- 18.18. Camera and video use is monitored by the Directors.
- 18.19. Where parents request permission to photograph or record their own children at special events, permission will first be gained from all parents for their children to be included.
- 18.20. Photographs and recordings of children are only taken and used for promotion if there is permission to do so. This permission is obtained in the registration process, and parents may withdraw their permission at any time
- 18.21. All photographs taken are stored on the company password protected laptop or password protected phone. No photographs taken can be stored on a USB or other memory device, unless it is encrypted and authorised by the Directors
- 18.22. All photographs must be downloaded onto the company password protected laptop and deleted from the camera.



18.23.All staff taking photographs must ensure that they protect themselves by ensuring another staff member is present.

18.24.Cameras and other photographic media (such as mobile phones) must not be taken into the bathroom or changing areas.

## **Use of ICT**

18.25.At Always Growing we take steps to ensure that there are effective procedures in place to protect children, young people, and vulnerable adults from the unacceptable use ICT in the setting. The policy defines and describes the acceptable use of ICT (Information and Communications Technology) for our employees.

18.26. Its purpose is to minimise the risk to the children of inappropriate contact from staff, to protect employees and Always Growing Ltd from litigation and to minimise the risk to ICT systems. This policy deals with the use of ICT facilities in early years settings applies to all setting-based employees and other authorised users.

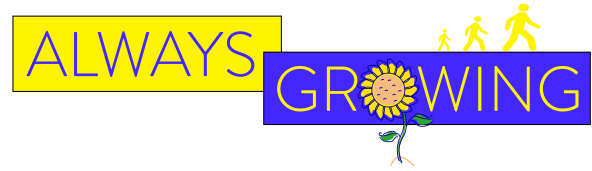
18.27.All staff must act in a lawful manner, making appropriate use of site technologies for approved purposes only.

18.28.User Responsibilities: Staff found to be in breach of this policy may be disciplined in accordance with the disciplinary procedure. In certain circumstances, breach of this policy may be considered gross misconduct resulting in termination of employment. Users must report all suspected breaches of this policy to the most senior member of staff on site.

18.29.All users are expected to act in a responsible, ethical and lawful manner with the understanding that site electronic and manual information may be accessible to the public under the Freedom of Information Act 2000. Users should uphold privacy and confidentiality in accordance with the Data Protection Act 2018 and the GDPR regulations.

18.30.Users must not load or download software on any device without the authorisation of the Directors. Periodic audits of software held on ICT equipment will be undertaken.

18.31.Users must take care to store sensitive information, e.g. child data safely and to keep it password protected, on all systems, including Office computers. Personal information must only be stored on encrypted systems.



18.32. Inappropriate or illegal content should not be created or accessed on ICT equipment at any time.

18.33. In the course of normal operations, ICT resources are to be used for business purposes only.

## Appendices

### Appendix 1: Definitions and Indicators of Abuse

#### 1. Neglect

1.1 Neglect is 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.

1.2 Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers)
- Ensure access to appropriate medical care or treatment

1.3 It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

1.4 The following may be indicators of neglect (this is not designed to be used as a checklist):

- Constant hunger
- Stealing, scavenging and/or hoarding food;
- Frequent tiredness or listlessness
- Frequently dirty or unkempt,
- Often poorly or inappropriately clad for the weather
- Poor school attendance or often late for school
- Poor concentration
- Affection or attention seeking behaviour
- Illnesses or injuries that are left untreated
- Failure to achieve developmental milestones, for example growth, weight
- Failure to develop intellectually or socially
- Responsibility for activity that is not age appropriate such as cooking, ironing, caring for siblings;
- The child is regularly not collected or received from the Academy
- The child is left at home alone or with inappropriate carers

## 2. Physical Abuse

2.1 Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.

2.2 Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

2.3 The following may be indicators of physical abuse (this is not designed to be used as a checklist):

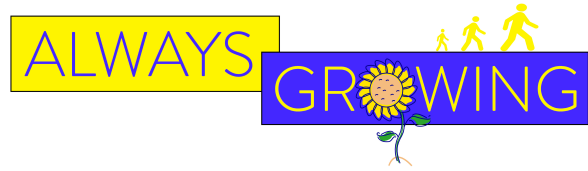
- Multiple bruises in clusters, or of uniform shape
- Bruises that carry an imprint, for example of a hand, a cord or an implement.
- Bite marks
- Round burn marks
- Multiple burn marks and burns on unusual areas of the body such as the back, shoulders or buttocks.
- An injury that is not consistent with the account given.
- Changing or different accounts of how an injury occurred.
- Bald patches.
- Symptoms of drug or alcohol intoxication or poisoning.
- Unaccountable covering of limbs, even in hot weather.
- Fear of going home or parents being contacted.
- Fear of medical help.
- Fear of changing for PE.
- Inexplicable fear of adults or over-compliance.
- Violence or aggression towards others including bullying.
- Isolation from peers.

## 3. Sexual Abuse

3.1 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.

3.2 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 outside of clothing.

3.3 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 (including via the internet).

3.4 Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse as can other children

3.5 The following may be indicators of sexual abuse (this is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge
- Anal or vaginal discharge, soreness or scratching
- Reluctance to go home
- Inability to concentrate, tiredness
- Refusal to communicate.
- Thrush, persistent complaints of stomach disorders or pains
- Eating disorders, for example anorexia nervosa and bulimia
- Attention seeking behaviour, self mutilation, substance abuse
- Aggressive behaviour including sexual harassment or molestation
- Unusually compliant
- Regressive behaviour, enuresis, soiling
- Frequent or open masturbation, touching others inappropriately
- Depression, withdrawal, isolation from peer group
- Reluctance to undress for PE or swimming
- Bruises, scratches in genital area

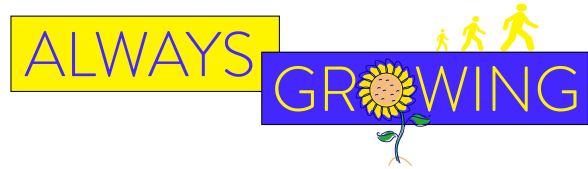
## 4. Emotional Abuse

4.1 Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

4.2 It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

4.3 It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

4.4 It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interaction.



4.5 It may also 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.

4.6 The following may be indicators of emotional abuse (this is not designed to be used as a checklist):

- The child consistently describes him/herself in very negative ways – as stupid, naughty, hopeless, ugly.
- Over-reaction to mistakes
- Delayed physical, mental, emotional development
- Sudden speech or sensory disorders
- Inappropriate emotional responses, fantasies
- Neurotic behaviour: rocking, banging head, regression, tics and twitches
- Self-harming, drug or solvent abuse
- Fear of parents being contacted
- Running away
- Compulsive stealing
- Appetite disorders - anorexia nervosa, bulimia
- Soiling, smearing faeces, enuresis

N.B.: Some situations where children stop communication suddenly (known as “traumatic mutism”) can indicate maltreatment.

## 5. Responses from Parents

5.1 Research and experience indicates that the following responses from parents may suggest a cause for concern across all four categories:

- Delay in seeking treatment that is obviously needed
- Unawareness or denial of any injury, pain or loss of function (for example, a fractured limb)
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development
- Reluctance to give information or failure to mention other known relevant injuries
- Frequent presentation of minor injuries
- A persistently negative attitude towards the child
- Unrealistic expectations or constant complaints about the child
- Alcohol misuse or other drug/substance misuse
- Parents request removal of the child from home



- Violence between adults in the household

## 6. Child Sexual Exploitation

6.1 The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- having unaffordable new things (clothes, mobile) or expensive habits alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.



## Appendix 2 Logging a Concern:

Child's Name:

Date of Birth:

Date:

Time (of writing this record):

Name: TO BE COMPLETED BY THE PERSON RAISING THE CONCERN

Print

Signature

Job Title:

Note the reason(s) for recording the incident.

Record the following factually: Who? What (If recording a verbal disclosure by a child use their words)? Where? When (date & time of incident)? Any witnesses?

Professional opinion where relevant (how and why might this have happened?)

Note actions, including names of anyone to whom your information was passed.

Any other relevant information (Factual)



**PART 2: (for use by Designated Safeguarding Lead)**

**Time & date information received by Designated Safeguarding Lead, and from whom**

**Any advice sought by DP (date, time, name, role, organisation & advice given)**

**Action taken (referral to children's services/ monitoring advice given to appropriate staff/ CAF etc) If decision not to refer, justify reason.**

**Note time, date, names, who information shared with and when etc.**

**Parent's informed**

**Yes/ no**

**and reasons**

**Outcome**

**Record names of individuals/agencies who have given you information regarding outcome of any referral (if made)**

**Where can additional information regarding child/ incident be found? (e.g. pupil file, serious incident book)**

**Signed**

**Printed Name**

**Date**

## Appendix 3: safer recruitment and DBS checks – policy and procedures

We will record all information on the checks carried out in the school's single central record (SCR). Copies of these checks, where appropriate, will be held in individuals' personnel files. We follow requirements and best practice in retaining copies of these checks, as set out below.

### New staff

When appointing new staff, we will:

- Verify their identity
- Obtain (via the applicant) an enhanced Disclosure and Barring Service (DBS) certificate, including barred list information for those who will be engaging in regulated activity (see definition below).
- Obtain a separate barred list check if they will start work in regulated activity before the DBS certificate is available
- Verify their mental and physical fitness to carry out their work responsibilities
- Verify their right to work in the UK.
- Verify their professional qualifications, as appropriate
- Carry out further additional checks, as appropriate, on candidates who have lived or worked outside of the UK, including (where relevant) any teacher sanctions or restrictions imposed by a European Economic Area professional regulating authority, and criminal records checks or their equivalent

We will ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006. Where we take a decision that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment on the individual's personnel file. This will include our evaluation of any risks and control measures put in place, and any advice sought.

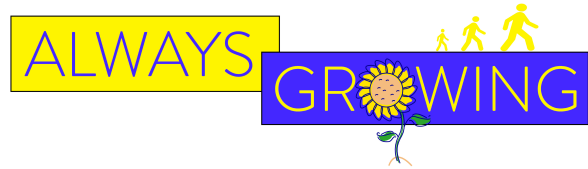
We will ask for written information about previous employment history and check that information is not contradictory or incomplete.

We will seek references on all short-listed candidates, including internal candidates, before interview. We will scrutinise these and resolve any concerns before confirming appointments. The references requested will ask specific questions about the suitability of the applicant to work with children.

**Regulated activity** means a person who will be:

- Responsible, on a regular basis in a school or college, for teaching, training, instructing, caring for or supervising children; or
- Carrying out paid, or unsupervised unpaid, work regularly in a school or college where that work provides an opportunity for contact with children; or
- Engaging in intimate or personal care or overnight activity, even if this happens only once and regardless of whether they are supervised or not

### Existing staff



If we have concerns about an existing member of staff's suitability to work with children, we will carry out all the relevant checks as if the individual was a new member of staff. We will also do this if an individual moves from a post that is not regulated activity to one that is.

We will refer to the DBS anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult where:

- We believe the individual has engaged in [relevant conduct](#); or
- The individual has received a caution or conviction for a relevant offence, or there is reason to believe the individual has committed a listed relevant offence, under the [Safeguarding Vulnerable Groups Act 2006 \(Prescribed Criteria and Miscellaneous Provisions\) Regulations 2009](#); or
- The 'harm test' is satisfied in respect of the individual (i.e. they may harm a child or vulnerable adult or put them at risk of harm); and
- The individual has been removed from working in regulated activity (paid or unpaid) or would have been removed if they had not left

### **Agency and third-party staff**

We will obtain written notification from any agency or third-party organisation that it has carried out the necessary safer recruitment checks that we would otherwise perform. We will also check that the person presenting themselves for work is the same person on whom the checks have been made.

### **Contractors**

We will ensure that any contractor, or any employee of the contractor, who is to work at Always Growing has had the appropriate level of DBS check (this includes contractors who are provided through a PFI or similar contract). This will be:

- An enhanced DBS check with barred list information for contractors engaging in regulated activity
- An enhanced DBS check, not including barred list information, for all other contractors who are not in regulated activity but whose work provides them with an opportunity for regular contact with children

We will obtain the DBS check for self-employed contractors.

We will not keep copies of such checks for longer than 6 months.

Contractors who have not had any checks will not be allowed to work unsupervised or engage in regulated activity under any circumstances.

We will check the identity of all contractors and their staff on arrival at the school.

For self-employed contractors such as music teachers or sports coaches, we will ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006. Where we decide that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment. This will include our evaluation of any risks and control measures put in place, and any advice sought.

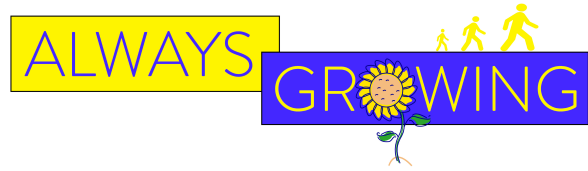
### **Volunteers**

We will:

- Never leave an unchecked volunteer unsupervised or allow them to work in regulated activity



- Obtain an enhanced DBS check with barred list information for all volunteers who are new to working in regulated activity
- Carry out a risk assessment when deciding whether to seek an enhanced DBS check without barred list information for any volunteers not engaging in regulated activity. We will retain a record of this risk assessment
- Ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the 2018 Childcare Disqualification Regulations and Childcare Act 2006. Where we decide that an individual falls outside of the scope of these regulations and we do not carry out such checks, we will retain a record of our assessment. This will include our evaluation of any risks and control measures



## Appendix 4: allegations of abuse made against staff

This section of this policy applies to all cases in which it is alleged that a current member of staff, including a supply 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 he or she may pose a risk of harm to children, or
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children

It applies regardless of whether the alleged abuse took place in the school. Allegations against a teacher who is no longer teaching and historical allegations of abuse will be referred to the police.

We will deal with any allegation of abuse against a member of staff or volunteer very quickly, in a fair and consistent way that provides effective child protection while also supporting the individual who is the subject of the allegation.

Our procedures for dealing with allegations will be applied with common sense and judgement.

### Suspension of the accused until the case is resolved

Suspension will not be the default position, and will only be considered in cases where there is reason to suspect that a child or other children is/are at risk of harm, or the case is so serious that it might be grounds for dismissal. In such cases, we will only suspend an individual if we have considered all other options available and there is no reasonable alternative.

Based on an assessment of risk, we will consider alternatives such as:

Redeployment so that the individual does not have direct contact with the child or children concerned

Providing an assistant to be present when the individual has contact with children

Redeploying the individual to alternative work so that they do not have unsupervised access to children

Moving the child or children so they will not come into contact with the individual, making it clear that this is not a punishment and parents have been consulted

Temporarily redeploying the individual to another role in a different location

### Definitions for outcomes of allegation investigations

**Substantiated:** there is sufficient evidence to prove the allegation

**Malicious:** there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive

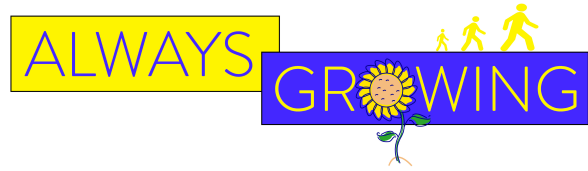
**False:** there is sufficient evidence to disprove the allegation

**Unsubstantiated:** there is insufficient evidence to either prove or disprove the allegation (this does not imply guilt or innocence)

**Unfounded:** to reflect cases where there is no evidence or proper basis which supports the allegation being made

### Procedure for dealing with allegations

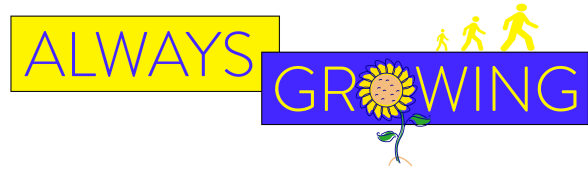
In the event of an allegation that meets the criteria above, the Directors will take the following steps:



- Immediately discuss the allegation with the designated officer at the local authority. This is to consider the nature, content and context of the allegation and agree a course of action, including whether further enquiries are necessary to enable a decision on how to proceed, and whether it is necessary to involve the police and/or children's social care services. (The case manager may, on occasion, consider it necessary to involve the police *before* consulting the designated officer – for example, if the accused individual is deemed to be an immediate risk to children or there is evidence of a possible criminal offence. In such cases, the case manager will notify the designated officer as soon as practicably possible after contacting the police)
- Inform the accused individual of the concerns or allegations and likely course of action as soon as possible after speaking to the designated officer (and the police or children's social care services, where necessary). Where the police and/or children's social care services are involved, the case manager will only share such information with the individual as has been agreed with those agencies
- Where appropriate (in the circumstances described above), carefully consider whether suspension of the individual from contact with children at the school is justified or whether alternative arrangements such as those outlined above can be put in place. Advice will be sought from the designated officer, police and/or children's social care services, as appropriate
- **If immediate suspension is considered necessary**, agree and record the rationale for this with the designated officer. The record will include information about the alternatives to suspension that have been considered, and why they were rejected. Written confirmation of the suspension will be provided to the individual facing the allegation or concern within 1 working day, and the individual will be given a named contact and their contact details
- **If it is decided that no further action is to be taken** in regard to the subject of the allegation or concern, record this decision and the justification for it and agree with the designated officer what information should be put in writing to the individual and by whom, as well as what action should follow both in respect of the individual and those who made the initial allegation
- **If it is decided that further action is needed**, take steps as agreed with the designated officer to initiate the appropriate action and/or liaise with the police and/or children's social care services as appropriate
- Provide effective support for the individual facing the allegation or concern, including appointing a named representative to keep them informed of the progress of the case and considering what other support is appropriate.
- Inform the parents or carers of the child/children involved about the allegation as soon as possible if they do not already know (following agreement with children's social care services and/or the police, if applicable). The case manager will also inform the parents or carers of the requirement to maintain confidentiality about any allegations made while investigations are ongoing. Any parent or carer who wishes to have the confidentiality restrictions removed will be advised to seek legal advice
- Keep the parents or carers of the child/children involved informed of the progress of the case and the outcome, where there is not a criminal prosecution, including the outcome of any disciplinary process (in confidence)
- Make a referral to the DBS where it is thought that the individual facing the allegation or concern has engaged in conduct that harmed or is likely to harm a child, or if the individual otherwise poses a risk of harm to a child

We will inform Ofsted of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere), and any action taken in respect of the allegations. This notification will be made as soon as reasonably possible and always within 14 days of the allegations being made.





Where the police are involved, wherever possible the Directors will ask the police at the start of the investigation to obtain consent from the individuals involved to share their statements and evidence for use in the disciplinary process, should this be required at a later point.

#### Additional considerations for supply staff

If there are concerns or an allegation is made against someone not directly employed by Always Growing, such as supply staff provided by an agency, we will take the actions below in addition to our standard procedures.

We will not decide to stop using supply staff due to safeguarding concerns without finding out the facts and liaising with our local authority designated officer to determine a suitable outcome

The Directors will discuss with the agency whether it is appropriate to suspend the supply staff, or redeploy them while the investigation takes place

We will involve the agency fully, but we will take the lead in collecting the necessary information and providing it to the local authority designated officer as required

We will address issues such as information sharing, to ensure any previous concerns or allegations known to the agency are taken into account (we will do this, for example, as part of the allegations management meeting or by liaising directly with the agency where necessary)

When using an agency, we will inform them of our process for managing allegations, and keep them updated about our policies as necessary, and will invite the agency's HR manager or equivalent to meetings as appropriate.

#### **Timescales**

- Any cases where it is clear immediately that the allegation is unsubstantiated or malicious will be resolved within 1 week
- If the nature of an allegation does not require formal disciplinary action, we will institute appropriate action within 3 working days
- If a disciplinary hearing is required and can be held without further investigation, we will hold this within 15 working days

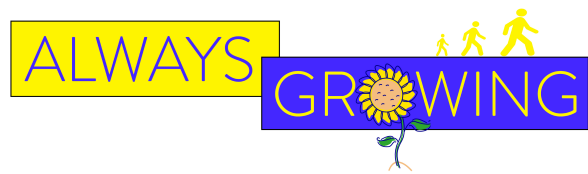
#### **Specific actions**

##### **Action following a criminal investigation or prosecution**

The case manager will discuss with the local authority's designated officer whether any further action, including disciplinary action, is appropriate and, if so, how to proceed, taking into account information provided by the police and/or children's social care services.

##### **Conclusion of a case where the allegation is substantiated**

If the allegation is substantiated and the individual is dismissed or the school ceases to use their services, or the individual resigns or otherwise ceases to provide their services, the Directors will discuss with the designated officer whether to make a referral to the DBS for consideration of whether inclusion on the



barred lists is required. If they think that the individual has engaged in conduct that has harmed (or is likely to harm) a child, or if they think the person otherwise poses a risk of harm to a child, they must make a referral to the DBS.

### **Individuals returning to work after suspension**

If it is decided on the conclusion of a case that an individual who has been suspended can return to work, the Directors will consider how best to facilitate this.

The Directors will also consider how best to manage the individual's contact with the child or children who made the allegation, if they are still attending the setting.

### **Unsubstantiated or malicious allegations**

If an allegation is shown to be deliberately invented, or malicious, the Directors will consider whether any disciplinary action is appropriate against the person who made it, or whether the police should be asked to consider whether action against those who made the allegation might be appropriate, even if they are not a child.

### **Confidentiality**

Always Growing will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

The Directors will take advice from the local authority's designated officer, police and children's social care services, as appropriate, to agree:

- Who needs to know about the allegation and what information can be shared
- How to manage speculation, leaks and gossip, including how to make parents or carers of a child/children involved aware of their obligations with respect to confidentiality
- What, if any, information can be reasonably given to the wider community to reduce speculation
- How to manage press interest if, and when, it arises

### **Record-keeping**

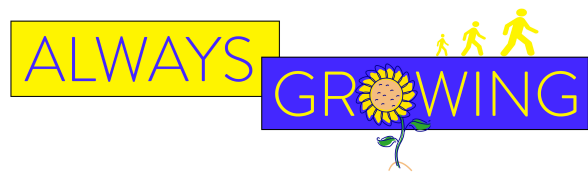
The case manager will maintain clear records about any case where the allegation or concern meets the criteria above and store them on the individual's confidential personnel file for the duration of the case.

Such records will include:

- A clear and comprehensive summary of the allegation
- Details of how the allegation was followed up and resolved
- Notes of any action taken and decisions reached (and justification for these, as stated above)

If an allegation or concern is not found to have been malicious, the school will retain the records of the case on the individual's confidential personnel file, and provide a copy to the individual.

Where records contain information about allegations of sexual abuse, we will preserve these for the Independent Inquiry into Child Sexual Abuse (IICSA), for the term of the inquiry. We will retain all other



records at least until the individual has reached normal pension age, or for 10 years from the date of the allegation if that is longer.

The records of any allegation that is found to be malicious will be deleted from the individual's personnel file.

### **References**

When providing employer references, we will not refer to any allegation that has been proven to be false, unsubstantiated or malicious, or any history of allegations where all such allegations have been proven to be false, unsubstantiated or malicious.

### **Learning lessons**

After any cases where the allegations are *substantiated*, we will review the circumstances of the case with the local authority's designated officer to determine whether there are any improvements that we can make to our procedures or practice to help prevent similar events in the future.

This will include consideration of (as applicable):

- Issues arising from the decision to suspend the member of staff
- The duration of the suspension
- Whether or not the suspension was justified
- The use of suspension when the individual is subsequently reinstated. We will consider how future investigations of a similar nature could be carried out without suspending the individual