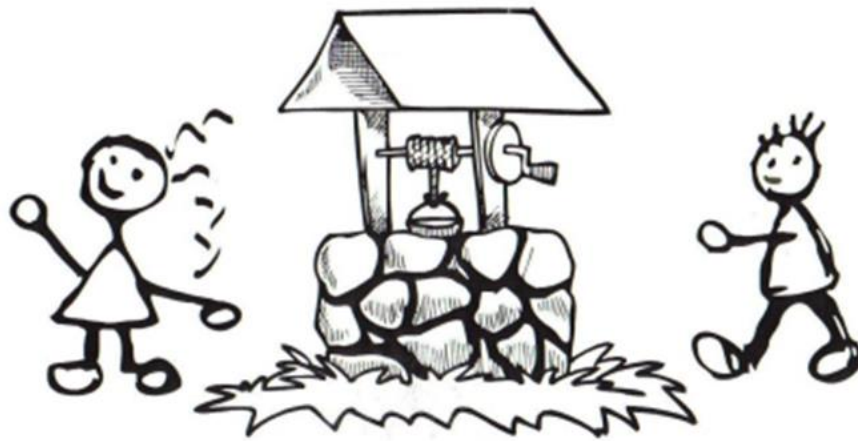


# 2025/26 Child Protection and Safeguarding Policy for Chasewell Playgroup

**Published August 2025, to be reviewed by August 2026**

The policy is reviewed and updated at least annually and/or following any updates to national and local guidance and procedure.

## Chasewell Playgroup



Date agreed and ratified by: September 2025, Louise Izzo, Manager

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## 1: Key contacts

| Key Personnel                                                                        | Name (s)                                                                                                              | Contact details                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Designated Safeguarding Lead (DSL)                                                   | Louise Izzo                                                                                                           | <a href="mailto:manager@chasewellplaygroup.me.uk">manager@chasewellplaygroup.me.uk</a><br>01295275363                                                                                                               |
| Deputy DSL(s)                                                                        | Jo Webber                                                                                                             | <a href="mailto:Jo.webber@chasewellplaygroup.me.uk">Jo.webber@chasewellplaygroup.me.uk</a><br>01295 275363                                                                                                          |
| Chair of committee                                                                   | Claire Badger                                                                                                         | <a href="mailto:Chair@chasewellplaygroup.me.uk">Chair@chasewellplaygroup.me.uk</a>                                                                                                                                  |
| Nominated Safeguarding Committee member                                              | Clare Booth                                                                                                           | <a href="mailto:Committee@chasewellplaygroup.me.uk">Committee@chasewellplaygroup.me.uk</a>                                                                                                                          |
| Local Authority Designated Officers (LADOs) and Education Safeguarding Advisory Team | <b>LADO Team</b><br>Jo Lloyd<br>Sandra Barratt<br>Amie Pilcher<br><br>Sophie Kendall (ESAT)<br>Becky Langstone (ESAT) | 01865 810603<br><br><a href="mailto:Lado.safeguardingchildren@oxfordshire.gov.uk">Lado.safeguardingchildren@oxfordshire.gov.uk</a>                                                                                  |
| Linked Locality Community Support Service (LCSS) worker                              | Cary Johnston                                                                                                         | Cary Johnston<br>01865 328450<br>07827947300<br>Tel: 0345 2412705<br>Email: <a href="mailto:LCSS@oxfordshire.gov.uk">LCSS@oxfordshire.gov.uk</a><br>Opening Hours: 8.30am – 5pm (Mon – Thurs)<br>8.30am – 4pm (Fri) |
| Multi Agency Safeguarding Hub (MASH)                                                 |                                                                                                                       | 0345 050 7666                                                                                                                                                                                                       |
| Out of hours Emergency Duty Team (EDT)                                               |                                                                                                                       | 0800 833 408                                                                                                                                                                                                        |
| Police                                                                               |                                                                                                                       | 101 or in emergencies 999                                                                                                                                                                                           |
| OSCP                                                                                 |                                                                                                                       | <a href="http://OCSP.oxfordshire.gov.uk">OCSP.oxfordshire.gov.uk</a>                                                                                                                                                |

## 2: Introduction

It is essential that everybody working in this early years setting understands their safeguarding responsibilities.

All staff have a full and active part to play in protecting our children from harm.

Children's welfare is our paramount concern.

All staff must be alert to any issues of concern in the child's life at home or elsewhere.

All staff should make sure that any decisions made are in the best interests of the child.

This policy has been developed in accordance with the principles established by the Children Act 1989, and in line with the following:

[Working Together to Safeguard Children](#)

[The Early Years Foundation Stage Statutory Framework](#)

[Keeping children safe in education - GOV.UK \(www.gov.uk\)](#)

[What to do if you are Worried a Child is being abused](#)

[Oxfordshire Safeguarding Children's Partnership Safeguarding Policies and Procedures](#)

[What to do if you think a child is at risk of abuse or neglect - Oxfordshire](#)

[Safeguarding Children Partnership \(OCSP.org.uk\)](#)

[Promoting the education of children with a social worker \(publishing.service.gov.uk\)](#)

This policy should be read in conjunction with these national and local policies and procedures.

At Chasewell Playgroup the provider takes seriously its responsibility under Section 11 of the Children Act and duties under "Working Together to safeguard Children", the Human Rights Act 1998, and the Equality Act 2010, (including the Public Sector Equality Duty), to safeguard and promote the welfare of children; to work together with other agencies to ensure adequate arrangements exist within our setting to identify and support those children who are suffering harm or are likely to suffer harm.

No single person can have a full picture of a child's needs and circumstances, and we are an important part of the wider safeguarding system for children. This system is described in the statutory guidance Working Together to Safeguard Children.

This policy applies to the provider, all our staff, and volunteers working in our setting and who will sign to confirm they have read and understood this policy.

### 3. Policy Statement

This policy provides all who work here with the framework they need to keep children safe and secure in our setting, and to inform parents and guardians how we will safeguard their children whilst they are in our care.

**Safeguarding and promoting the welfare of children** is defined for the purposes of this policy as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes

For more definitions used throughout this policy see Annex A.

For categories (including indicators) of abuse see Annex E.

### 4. Principles and Values

Our setting is committed to safeguarding children.

Our setting should provide a safe, caring, positive and stimulating environment that promotes the social, physical, intellectual and moral development of the individual child, free from discrimination or bullying, where children can learn and develop happily.

All children have a right to be protected from harm and to feel safe and secure. They cannot learn effectively unless they do so.

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all children.

We aim to create a culture of vigilance and maintain an attitude of 'it could happen here' where safeguarding is concerned.

We will always act in the best interests of the child and ensure that the safeguarding decisions we take are child centred and coordinated in approach.

All staff have an important role in prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a child is at risk of harm, either in the setting, the home or in the community.

We know that it is important to identify children who may benefit from early help which means providing support for them and their family as soon as a problem emerges at any point in a child's life.

We recognise the importance of sharing information and reporting concerns to help ensure children are protected.

We acknowledge that working in partnership with other agencies protects children and reduces risk and so we engage in partnership working to safeguard children.

Whilst the setting will work openly with parents as far as possible, it reserves the right to contact the Local Authority Children's Social Care (via MASH) or the police, without notifying parents if this is believed to be in the child's best interests.

We make every effort to provide a safe and welcoming environment underpinned by a culture of openness where both children and adults feel secure, able to talk, and believe that they are being listened to.

We understand the need to treat everyone equally/equitably, with fairness, dignity, and respect. Any discriminatory behaviours are challenged, and children are supported to understand how to treat others with respect. We have a statutory duty to report and record any discriminatory incidents.

The wellbeing of our staff is important so if this policy raises any issues for you, please speak to Louise Izzo, Manager or Claire Booth, DSL for the committee.

## 5. Leadership and management

The Management Team takes overall responsibility for safeguarding, ensuring the Designated Safeguarding Lead (DSL), and the DSL team, are fulfilling their role.

The Management Team recognise that staff anxiety around child protection can compromise good practice and so have established clear lines of accountability, training, and advice to support both the process and individual staff within that process.

In this setting any individual can contact the Designated Safeguarding Lead (DSL) [Louise Izzo](#), or the Deputy Designated Safeguarding Lead (DDSL) [Jo Webber](#), if they have concerns about a child or an adult.

There is a nominated safeguarding committee member, [Clare Booth](#), who will take leadership responsibility for safeguarding.

The Management Team ensures that all staff are aware of Oxfordshire's early help process and understand their role in it.

The Management Team ensures all staff should know what to do if a child tells them they are being abused, exploited, or neglected.

As an employer we follow safer recruitment guidance as set out in KCSIE 2025 and the EYFS.

Managers will ensure arrangements are in place for the supervision of staff who have contact with children and families. Effective supervision meetings provide support, coaching and training for the practitioner and promotes the interests of children. These are in the form of regular one - to - one meetings and should foster a culture of mutual support, teamwork and continuous improvement, which encourages the confidential discussion of sensitive issues.

Leaders and managers will ensure all requirements of the EYFS are in place to help keep children safe including requirements regarding safer eating, paediatric first aid training and promoting oral health.

## 6. Dealing with concerns, disclosures, reporting and record keeping

If a member of staff has a concern about a child or if a child tells them (a disclosure) they are being, or at risk of being, abused, exploited or neglected, staff will appropriately respond by listening and offering reassurance.

All staff must be aware that:

- they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing
- very young children including those with disabilities, special needs or with language delay may be more likely to communicate concerns with behaviours rather than words
- children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and /or they may not recognise their experiences as harmful.

Additionally, staff will question the cause of knocks and bumps in children who have limited mobility which will include children visiting the site as well as children registered with our setting.

(OSCP Information for parents and carers about bruising to pre-mobile babies and children [OSCP Pre-Mobile-Bruising-Leaflet-003.pdf](#))

If a member of staff suspects abuse, spots signs or indicators of abuse, has concerns about a child's mental health, or if a child tells them they are being, or at risk of being, abused, exploited or neglected they must make an initial record of the information (as soon as is practicable) and report it to the DSL/DDSL immediately.

The DSL will consider if there is a requirement for urgent medical intervention. However, urgent medical attention should not be delayed if the DSL is not immediately available.

Blank initial concern forms are kept on a clipboard in the lounge area, or alternatively one can be printed from the DSL or DDSL as needed.

Staff should make an accurate factual record as soon as possible including details of:

- Dates and times of their observations
- Dates and times of any discussions in which they were involved
- Any injuries

- Type of suspected abuse
- Explanations given by the child/adult
- Any actual words or phrases used by the child
- Any questions the staff member asked (remembering not to ask any leading questions)
- What action was taken

The records must be signed and dated (or equivalent on electronic based records) by the person completing the form. Once completed concern forms should be kept confidential and stored securely (see below).

Using the [Oxfordshire Threshold of Needs](#) the DSL will consider the options which include:

- managing any support for the child via the settings own support processes including contacting the child's social worker if they have one
- undertaking an early help assessment (Strengths and Needs),  
**or**
- If there are grounds to suspect a child is suffering, or is likely to suffer, **significant harm the DSL (or DDSL) must contact the Local Authority Children's Social Care via MASH immediately**, sharing:
  - ❖ the known facts
  - ❖ any suspicions or allegations
  - ❖ whether or not there has been any contact with the child's family.

If concerns are urgent and are a level 3 or 4 on the Threshold of Need  
call MASH on 0345 050 7666  
(Monday to Thursday 8.30am – 5pm, Friday 8.30am – 4pm)  
This call will be taken to the Customer Service Centre.

There is also an [online form](#) to make a referral to MASH.

Outside office hours call the Emergency Duty Team on **0800 833 408**

In the absence of the DSL or DDSL, staff will refer directly to MASH or the child's social worker (if applicable) and the police (if appropriate) if there is a significant concern.

If there is not considered to be a risk of significant harm, the DSL will either actively monitor the situation, and/or consider the Early Help process through completion of the Strengths and Needs form with the family.

Safeguarding records, including chronologies, are kept for individual children, and are maintained separately from all other records relating to the child in the setting.

Records include:

- a clear and comprehensive summary of the concern
- details of how the concern was followed up and resolved
- a note of any action taken, decisions reached and the outcome



## 7. Confidentiality and information sharing

We recognise that whilst matters relating to safeguarding are confidential, we have a professional responsibility to share information with other agencies to safeguard children.

**Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare of children.**

There is a lawful basis for child protection concerns to be shared with agencies who have a statutory duty for child protection.

Safeguarding records are kept in accordance with The Data Protection Act (DPA) UK General Data Protection Regulation (UK GDPR) which are reflected in our Data Protection policy.

DPA and UK GDPR do not prevent the sharing of information for the purposes of keeping children safe and promoting their welfare. If in any doubt about sharing information, staff should speak to the DSL (or a deputy).

DfE Guidance on Information Sharing (May 2024) provides further detail including the Seven Golden Rules of Information Sharing.

<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

<https://www.gov.uk/guidance/data-protection-in-schools>

Our prime concern at all stages must be the interests and safety of the child.

Where there is a conflict of interest between the child and an adult, the interests of the child must be paramount.

We will ensure that staff are confident about what they can and should do under the law, including how to obtain consent to share information and when information can be shared without consent. All staff will be given training to understand the purpose of information sharing in order to safeguard and promote children's welfare.

Staff should not assume a colleague, or another professional will take action and share information that might be critical in keeping children safe.

The Manager will be kept informed of any significant concerns by the DSL, (if they are not the DSL), and all other staff are informed on a need-to-know basis.

All safeguarding records will be transferred to the child's receiving school/setting as soon as possible, and within 5 days for an in-year transfer or within the first 5 days of the start of a new term. These will be given to the receiving setting/school and a receipt of delivery will be obtained.

We will ensure that when a pupil who is the subject of a Child Protection (CP) Plan leaves the setting, their information is transferred to the new setting/school within 5 school days and that the child's Social Worker is informed that the child has moved.

If we do not know where the child is moving to, we will endeavour to find out. We will retain the records and speak to LCSS or MASH if we have concerns.

## 8. Training

All staff in our setting are expected to be aware of the signs and symptoms of abuse and must be able to respond appropriately.

Our DSL and any members of our DSL team undergoes training every 2 years through the OSCP to provide them with the knowledge and skills required to carry out their role.

Safeguarding training is provided to all new staff on appointment as part of their induction process.

Training is also provided for all staff to a generalist level every 2 years by attending OSCP generalist training, in house or online, and safeguarding updates are shared with staff regularly.

Staff will be supported to put what they have learnt through safeguarding training into practice by keeping children safe everyday, through ongoing risk assessments, open communication, providing a safe and secure environment. Staff will know how to raise concerns and who to direct these too.

More information about safeguarding training can be found in Annex C of the EYFS and Annex L in this policy.

Staff are also provided with other training to support the ongoing welfare of children. *(Include training such as Paediatric First Aid, Oral Health, Restorative Practice, Attachment Theory, key person, Early Help Strengths and Needs, SEND, safer eating, anaphylaxis, difference between allergies and intolerances, toileting and intimate hygiene including privacy, safer sleep).*

Any update in national or local safeguarding guidance will be shared with all staff in briefings/meetings etc and the next whole setting training.

## 9. Safeguarding children with Special Educational Needs and/or disabilities

At **Chasewell Playgroup**, we acknowledge that children with special educational needs and/or disabilities (SEND) can face additional safeguarding challenges as they may have an impaired capacity to resist or avoid abuse.

We recognise that additional barriers can exist when recognising abuse and neglect of children with SEND.

We will ensure that children with SEND, specifically those with communication difficulties, will be supported to ensure that their voice is heard and acted upon.

Staff are encouraged to be aware that children with SEND can be disproportionately impacted by safeguarding concerns such as bullying.

All staff will be encouraged to appropriately explore possible indicators of abuse such as behaviour/mood change or injuries and not to assume that they are related to the child's additional needs or disability and be aware that children with SEND may not always outwardly display indicators of abuse.

## 10. Multi agency working

We recognise and are committed to working with other professionals and agencies in line with statutory guidance.

The setting is not the investigating agency when there are child protection concerns. We will, however, contribute to the investigation and assessment processes as required.

We recognise the importance of multi-agency working and the Management Team and DSL will work to establish strong and co-operative relationships with relevant professionals in other agencies.

We will support attendance at relevant safeguarding meetings, including Child Protection Conferences, Core Groups, Strategy Meetings, Child in Need meetings or other early help multi-agency meetings.

We will participate in Child Safeguarding Practice Reviews (CSPR's), other reviews and file audits as and when required to do so by OCSP.

We will ensure that we have a clear process for gathering the evidence required for reviews and audits and embed recommendations into practice and compile required actions within agreed timescales.

We will keep our contact details held by other agencies up to date e.g. with MASH and the Family Information Service.

## 11. Safer recruitment

We are committed to ensuring a safe culture where all steps are taken to recruit staff and volunteers who are safe to work with our children and staff.

The Provider/Management Team are responsible for ensuring that the setting follows safe recruitment processes. This includes not allowing anyone whose suitability has not been checked, including through a criminal records check, to have unsupervised contact with children being cared for.

An enhanced criminal records check is obtained for every person aged 16 and over (including for unsupervised volunteers, and supervised volunteers who provide personal care) who:

- Works directly with children.
- Lives on the premises on which the childcare is provided (unless there is no access to the part of the premises when and where children are cared for) and/or

- Works on the premises on which the childcare is provided (unless they do not work on the part of the premises where the childcare takes place, or do not work there at times when children are present).

The Provider/ Manager is responsible for ensuring that the setting maintains an accurate Central Record. This includes a record of information about staff qualifications and the identity checks, vetting processes and references that have been completed (including the criminal records check reference number, the date a check was obtained and details of who at the setting obtained it).

An additional criminal records check (or checks if more than one country) will also be made for anyone who has lived or worked abroad.

The Provider/Management team will ensure that there is at least one person involved in the whole recruitment process who has completed safer recruitment training.

Job adverts and job descriptions will explain about safeguarding.

References are obtained in-line with the statutory requirements of the EYFS.

The setting will also provide references upon request in a timely manner which confirms the applicant's suitability to work with children and provide the facts (not opinions) of any substantiated safeguarding concerns/allegations that meet the harm threshold, in line with the requirements of the EYFS.

The Provider is committed to supporting the statutory guidance from the Department for Education on the application of the Childcare (Disqualification) Regulations 2009 and related obligations under the Childcare Act 2006 in settings.

All staff should disclose any reason that may affect their suitability to work with children that could be a transferable risk to their role. This includes staff disclosing any convictions, cautions, court orders, reprimands and warnings that may affect their suitability to work with children (whether received before or during their employment at the setting).

Safeguarding requirements will be set out in any contracts between organisations and the setting. This will include the need for any DBS checks as appropriate. Any contractors, commissioned services or others working on site will be made aware of our Safeguarding Policy and procedures.

## 12. Managing allegations about staff, including agency staff, volunteers and contractors

Staff must report any concerns or allegations against a member of staff, or volunteer/contractor, to the manager as soon as possible.

If a child has been harmed, that there may be an immediate risk of harm to a child or if the situation is an emergency, I should contact the local authority children's social care (via MASH) and as appropriate the police immediately.

If an allegation has been received by the Manager/Provider/Chair they will contact the LADO **within one working day** of the concern/allegation being raised, and before carrying out any investigation into the allegation other than preliminary enquiries.

The LADO is Jo Lloyd, contactable by phone on 01865 810603 or by email at [lado.safeguardingchildren@oxfordshire.gov.uk](mailto:lado.safeguardingchildren@oxfordshire.gov.uk). She works with a number of assistant LADOs.

If an allegation is made against the manager, the concerns need to be raised with the Provider/Chairperson as soon as possible. If the Provider/Chairperson is not available, then the LADO should be contacted directly.

Allegations against the manager will be reported to ADDNAME and/or ROLE.

An Allegations and Consultation Referral Form must be completed by the manager (or other as appropriate) in full and forwarded to the LADO via email within one working day.

Referral to LADO includes all cases that meet the harms threshold where a person is alleged to have:

- behaved in a way that has harmed, or may have harmed a child
- possibly committed a criminal offence against, or related to, a child
- behaved towards a child or children in a way that indicates they may pose a risk of harm to children
- behaved or may have behaved in a way that indicates they may not be suitable to work with children. This includes behaviour that may have happened outside of the setting, that might make an individual unsuitable to work with children and is known as transferable risk. Where appropriate, an assessment of transferable risk to children with whom the person works should be undertaken.

There are two levels of allegation/concern:

- ❖ allegations that may meet the harms threshold (see paragraph above)
- ❖ allegation/concerns that do not meet the harms threshold – referred to in 2025 KCSIE guidance as ‘low level concerns’. These will be recorded and reviewed so that potential patterns of concern, inappropriate, problematic, or concerning behaviour can be identified.

If in doubt seek advice from the LADO.

A low-level concern is any concern – no matter how small, and even if no more than causing a sense of unease or a ‘nagging doubt’ - that an adult working in or on behalf of the setting may have acted in a way that is inconsistent with the staff code of conduct, including inappropriate conduct outside of work; and does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the LADO.

Examples of such behaviour could include, but are not limited to:

- being overfriendly with children

- having favourites
- taking photographs of children on their mobile phone
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- humiliating pupils

Such concerns must always be recorded and reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified.

If there are concerns that the owner/proprietor has acted in a way that meets the threshold for contacting the LADO, the person raising the concern should contact the LADO directly.

If the threshold for making a LADO referral has not been met, then the setting's Whistleblowing Policy should be followed.

Where settings are not the employer of agency staff, they should ensure allegations are dealt with properly. In no circumstances should a setting decide to cease to use an agency staff member due to safeguarding concerns, without finding out the facts and liaising with the LADO to determine a suitable outcome. Further information can be found in KCSIE 2025.

In liaison with the LADO, the setting will determine how to proceed and if necessary, a referral will be made to the MASH and/or the police. The LADO team will assess the information provided and advise on next steps, in line with KCSIE 2025 part 4, and Oxfordshire County Council's LADO local procedures. The setting will inform Ofsted.

The setting will also notify Ofsted, or the CMA with which a provider of Childcare on Domestic Premises is registered, of any significant event which is likely to affect the suitability of any person who is in regular contact with children on the premises where childcare is provided.

There may be situations when the Manager/DSL/Provider/Chair will want to involve the police immediately, if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

The setting is required to make a referral to the Disclosure and Barring Service if a member of staff is dismissed (or would have been, had they not left the setting first) because they have harmed a child or put a child at risk of harm.

The setting will also contact the LADO team for advice where they have concerns about an adult working or volunteering with children which does not meet the harms threshold as stated above.

### 13. Whistleblowing in a safeguarding context

Whistleblowing is a term that is used when staff want to report a concern within their organisation that involves their manager or a person senior to them in the organisation which may prevent them from following the normal reporting systems.



While the setting has a separate whistleblowing policy, this is a summary that outlines the process when there is a concern that safeguarding issues have not been reported or followed correctly. It does not replace the whistleblowing policy and should be read in conjunction with that policy.

There are a limited number of areas that can be called whistleblowing, and the policy protects staff from being punished for raising concerns.

Whistleblowing guidance: <https://www.gov.uk/whistleblowing>

Within this setting Louise Izzo is the senior manager and responsible for all staff. If you are concerned that any member of staff within the setting is not following safeguarding processes or behaving in a way that is placing children at risk, you should, in the first place, make the manager aware.

If your concern is about the manager, you should raise this with Claire Badger, Chair of the committee.

If you would prefer to raise your concerns outside of the setting, then you are able to contact the NSPCC whistleblowing line on 0800 028 0285 or email [help@nspcc.org.uk](mailto:help@nspcc.org.uk) for national organisations, or Ofsted provides guidance on how to make complaints about a provider: [Complaints procedure - Ofsted - GOV.UK](#)

If you believe that a member of the setting staff is harming a child (an allegation) and this has been reported to the manager and no / insufficient action has been taken, or the member of staff you have concerns about is the manager/provider, then you are able to contact the LADO (see section above) on 01865 810603 or email [lado.safeguardingchildren@oxfordshire.gov.uk](mailto:lado.safeguardingchildren@oxfordshire.gov.uk)

If you believe that a child is being abused by individuals outside the setting, you can make a referral to The Local Authority Children's Social Care by calling the MASH on **0345 050 7666** (office hours) or **0800 833 408** (outside of office hours).

Further guidance for staff can be accessed through:

[Child abuse concerns: guide for practitioners - GOV.UK \(www.gov.uk\)](#) and through the NSPCC website [What is Child Abuse & How to Keep Your Child Protected | NSPCC](#)

## 14. Preventing radicalisation

All our staff complete online Prevent Awareness training (<http://www.elearning.prevent.homeoffice.gov.uk>) to support staff in identifying radicalisation and understanding what steps they need to take to protect the staff, children and families in our setting.

This training provides an introduction to the Prevent duty, the first objective of which is to tackle the ideological causes of terrorism and explains how it aims to safeguard vulnerable people from being radicalised to supporting terrorism or becoming terrorists themselves.

Sharing information about Prevent should be treated in the same way as other safeguarding issues.

## 15. Risk assessment, site security and premises

All staff members have a responsibility to ensure our buildings and grounds are safe.

This includes ensuring the safety of any visitors into the setting and ensuring that children cannot get out of the grounds unaccompanied.

Regular and thorough risk assessments are carried out; hazards are reported and made safe and/or removed.

Our visitor policy is held in the tray at the entrance of the hall and all visitors are expected to sign in and out even if they regularly visit the setting and are well known to staff. They will have our safeguarding procedures explained to them.

The setting will not accept the behaviour of any individual, parent or anyone else, that threatens setting security or leads others, child or adult, to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse the person access to the setting site.

All staff will be made aware of this guidance [Protective security and preparedness for education settings - GOV.UK](#) to ensure they are able to identify security vulnerabilities, suspicious activity and how to respond when there is an incident.

When working alongside other providers or organisations on the same site, we will ensure they are fully informed of and compliant with all safeguarding measures to protect children while on site.

**Record here any information about CCTV or other security measures you have in place (as appropriate).**

Children's privacy is considered and balanced with safeguarding and support needs especially when changing nappies and toileting.

## 16. Mobile phones, cameras and other electronic devices with imaging and sharing capabilities

Mobile phones, cameras and other electronic devices with imaging and sharing capabilities can be potentially misused.

We recognise the specific risks that can be posed by mobile phones and cameras and have appropriate policies in place that are shared and understood by all members of the setting community.

Mobile phones are stored in a box in the office and staff are expected to leave them here for their time at work. We have an electronic device policy and this can be found in our policies and procedures folder, along with acceptable use of ICT policy and the staff code of conduct policy.



## 17. Child absences

This setting promotes good attendance with parents and carers and follows up on absences in a timely manner.

We have an attendance policy that is shared with parents and/or carers which includes expectations for reporting child absences and the actions we will take if a child is absent without notification or for a prolonged period of time, for example: implementing the setting's safeguarding procedures, following up with the parents and/or carers and contacting emergency contacts if parents and/or carers are not contactable.

We look at patterns and trends in a child's absences and their personal circumstances and use professional judgement when deciding if the child's absence should be considered as prolonged.

Consideration is given to the child's vulnerability, parent's and/or carer's vulnerability and their home life. Any safeguarding concerns must be referred to the DSL and passed onto children's social care services and/or the police to request a welfare check.

## 18. Safeguarding and the curriculum

In this setting we ensure the content of the curriculum includes personal, social and emotional aspects of learning. We use all opportunities to teach children about how they can keep themselves and others well and safe from harm, in an age-appropriate way.

## 19. Promoting educational outcomes

There is a culture of high aspirations for children where safeguarding and welfare has been an issue. Staff will understand their development needs, promote educational outcomes, progress and attainment, and identify the challenges that children in this group might face. Additional support and adjustments will be made to best support these children. Where a child has a Social Worker, staff will work closely with the Social Worker to ensure the child makes progress and reaches their full potential. Oxfordshire's Virtual School also has a role to play in promoting the educational achievements of children in kinship care. [The Role of the Virtual School](#)

## 20. Related safeguarding policies

This safeguarding and child protection policy should be read in conjunction with the policies as listed below:

Behaviour Management, linked to the Use of Physical Intervention  
Online Safety and social media  
Use of mobile phones and cameras (including wearable technology)  
Anti-Bullying  
Data Protection and Information Sharing  
Image Use

Personal and Intimate Care  
Health and Safety  
Attendance Policy –which includes expectations for reporting child absences and the actions that will be taken if a child is absent without notification or for a prolonged period of time.  
Risk Assessments (e.g. trips, Use of technology)  
First Aid and Accidents  
Administering Medicines  
Staff Behaviour Policy/ Code of conduct for staff  
Acceptable Use of Technology  
Code of conduct for parents/carers/visitors  
Safer Recruitment  
Whistleblowing  
Complaints  
Food Hygiene  
Emergency Evacuation and lockdown  
Missing child  
Uncollected child  
Visitor policy  
Animal/pet policy

## 21. Policy review

Systems are in place to monitor the implementation of, and compliance with, this policy and accompanying procedures.

The senior management team will ensure that action is taken to remedy any deficiencies and weaknesses identified in child protection arrangements without delay.

As a setting, we review this policy at least annually in line with DfE, OCSP and OCC requirements and other relevant statutory guidance.

Date approved by Management team: 24<sup>th</sup> September 2025

Date reviewed by Management team: September 2026

## Annex A: Definitions

**Abuse** could mean neglect, physical, emotional or sexual abuse or any combination of these. Parents, carers and other people can harm children either by direct acts and/or failure to provide proper care.

**Child** refers to all young people who have not yet reached their 18<sup>th</sup> birthday. On the whole, this will apply to all children in our setting; however, the policy will extend to visiting children and students from other establishments.

**Child protection** is an aspect of safeguarding but is focused on how we respond to children who have been significantly harmed or are at risk of significant harm.

**Chair** refers to the Chairperson of the management committee (if applicable)

**DSL** refers to Designated Safeguarding Lead.

**DDSL** refers to Deputy Designated Safeguarding Lead.

**Early Help** is support for children of all ages that improves a family's resilience and outcomes or reduces the chance of a problem getting worse. Providing early help is more effective in promoting the welfare of children rather than reacting later. It is particularly important that the DSL/DDSL know what the local early help process is and how and where to access support.

**EYFS** refers to the Early Years Foundation Stage Statutory Framework

**LADO** refers to the Local Authority Designated Officer (for Allegations)

**LCSS** refers to Locality Community Support Service

**MASH** refers to Multi Agency Safeguarding Hub

**OCSP** refers to Oxfordshire Safeguarding Children Partnership

**Parent** refers to birth parents and other adults in a parenting role for example adoptive parents, stepparents, guardians and foster carers.

**Provider** refers to an individual or an organisation who provides childcare. This may be in the private, voluntary or independent sector. It could cover sole traders, partnerships, committees, trustees.

**Safeguarding Partners** are under a duty to make arrangements to work together, and with other partners locally including education providers and childcare settings, to safeguard and promote the welfare of all children in their area. Local safeguarding arrangements are led by three statutory safeguarding partners:

The Local Authority; Integrated Care Boards (ICB) - commissioners of local health services; and The Chief Police Officer

In Oxfordshire the safeguarding partners have made arrangements to work with other relevant partners through the OCSP.

**Staff** applies to all those working for or on behalf of the setting, full time or part time, in either a paid or voluntary capacity. This may also include committee members and trustees. Staff are particularly important, as they are in a position to identify concerns early, provide help for children, promote children's welfare and prevent concerns from escalating.

## Annex B: Roles and responsibilities

**All staff** have a key role to play in identifying concerns early and in providing help for children.

They will:

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to.
- Ensure children know that there are adults in the setting who they can approach if they are worried or have concerns.
- Plan opportunities within the curriculum for children to develop the skills they need to recognise, assess and manage risk appropriately and keep themselves safe.
- Attend training to be aware of and alert to the signs of abuse.
- Maintain an attitude of “it could happen here” with regards to safeguarding.
- Record their concerns if they are worried that a child is being abused and report these to the DSL as soon as practical that day. If the DSL is not contactable immediately a DDSL should be informed.
- Be prepared to refer directly to the Local Authority Children’s Social Care (via MASH), and the police if appropriate, if there is a risk of significant harm and the DSL or DDSL is not available.
- Follow the allegations procedures, as set out in this policy and KCSIE 2025, if the disclosure is an allegation against a member of staff.
- Follow the procedures set out by OCSP and take account of guidance issued by the DfE.
- Support children in line with their child protection or Child in Need Plan.
- Treat information with confidentiality but never promising to ‘keep a secret’.
- Notify the DSL or DDSL of any child on a child protection plan or child in need plan who has unexplained absence.
- Have an understanding of early help and be prepared to identify and support children who may benefit from early help.
- Liaise and work together with other support services and those agencies involved in safeguarding children, including Early Help and preventative services as required in Working Together to Safeguarding Children 2025.
- Ensure they know who the DSL and DDSL are and know how to contact them.
- Have an awareness of the Child Protection Policy, the Staff Behaviour Policy (or Code of Conduct), procedures relating to the safeguarding response for children who are absent from education and the role of the DSL.
- Have an awareness of mental health problems and how in some cases it can be an indicator of the child being at risk of harm.

Senior Managers will:

- Contribute to inter-agency working in line with Working Together to Safeguard Children guidance.
- Provide a co-ordinated offer of early help when additional needs of children are identified.

- Ensure staff are alert to the various factors that can increase the need for early help as written in KCSIE 2025
- Work with the Local Authority Children's Social Care to support their assessment and planning processes including the setting's attendance at conference and core group meetings and the contribution of written reports for these meetings.
- Carry out tasks delegated by the Provider/Management team such as training of staff, safer recruitment and maintaining a central register.
- Provide support and advice on all matters pertaining to safeguarding and child protection to all staff, regardless of their position within the setting.
- Treat any information shared by staff or children with respect and follow agreed policies and procedures.
- Ensure that allegations or concerns against staff are dealt with in accordance with guidance from Department for Education (DfE) and the OCSF procedures.
- Ensure staff are supported to carry out their safeguarding and welfare duties inline with what they have learnt through safeguarding training.

### 3) Provider/Management Team will:

- Ensure that an open and positive culture around safeguarding which puts the children first is created.
- Ensure they facilitate a whole setting approach to safeguarding. This means ensuring safeguarding and child protection are at the forefront and underpin all relevant aspects of process and policy development. Ultimately, all systems, processes and policies should operate with the best interests of the child at their heart.
- Ensure the setting has effective safeguarding policies and procedures including a Child Protection Policy, a Staff Behaviour Policy or Code of Conduct, and procedures to follow up on absences.
- Ensure Local Authority is informed in line with local requirements about the discharge of duties via the Annual Safeguarding Early Years Self-Assessment which should be completed and returned to the Early Years & Childcare Quality Improvement Team when requested without delay (see Early Education Funding Terms and Conditions).
- Ensure recruitment, selection and induction follows safer recruitment practice including all appropriate checks.
- Ensure allegations against staff are dealt with by the Manager. Allegations against the Manager are dealt with by the Chair/ Provider and that all staff are aware of the whistleblowing policy.
- Ensure a member of the Senior Leadership Team is appointed as Designated Safeguarding Lead and has this recorded in their job description.
- Ensure staff have been trained appropriately and this is updated in line with guidance.
- Ensure that all staff are aware of the setting's policy on IT and understand the expectations, applicable roles and responsibilities in relation to filtering and monitoring.
- Ensure any safeguarding deficiencies or weaknesses are remedied without delay.

- Ensure a nominated committee member for safeguarding is identified.
- Ensure that children are taught about safeguarding, including online safety, in an age-appropriate way.
- Ensure Filtering and Monitoring systems of IT systems are in place that children may have access to, and these are regularly reviewed to ensure their effectiveness in line with national expectations. Staff must be informed of expectations and roles and responsibilities regarding filtering and monitoring at induction.
- Ensure contractors are aware of safeguarding requirements and appropriate checks are carried out.
- Ensure that, as part of the requirement for staff to undergo regular updated safeguarding training, including online safety and the requirement to ensure children are taught about safeguarding, is integrated, aligned, and considered as part of the whole setting safeguarding approach and wider staff training and curriculum planning.
- Ensure where governing bodies or providers hire or rent out setting facilities/premises to organisations or individuals (for example to community groups, sports associations, and service providers to run community or extra-curricular activities) they should ensure that appropriate arrangements are in place to keep children safe.

#### 4) DSL responsibilities *(to be read in conjunction with DSL role description in KCSIE)*

In addition to the role of all staff and the senior management team, the DSL will:

- Refer cases to MASH, and the police where appropriate, in a timely manner avoiding any delay that could place the child at more risk.
- Refer to the Oxfordshire Threshold of needs to assist with decision making [Oxfordshire-Threshold-of-Needs-2021.pdf \(OCSP.org.uk\)](https://www.oxfordshire.gov.uk/media/1234567890/Oxfordshire-Threshold-of-Needs-2021.pdf)
- Assist the Provider/Management team in fulfilling its safeguarding responsibilities set out in legislation and statutory guidance.
- Attend appropriate training and demonstrate evidence of continuing professional development to carry out the role.
- Ensure every member of staff knows who the DSL and the DDSL are, have an awareness of the DSL role and know how to contact them. Be available during working hours to respond quickly to safeguarding referrals and offer advice or have made it clear to all staff who is covering the DSL role during any absence
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns about a child to the DSL and concerns about an adult to the Manager.
- Be alert to children's poor or unusual patterns of attendance and follow up with families in a timely manner e.g. first day calls to the family, referring to Local Authority Children's social care or the police if concerns are urgent.
- Ensure whole setting training occurs regularly, with at least annual updates so that staff and volunteers can fulfil their responsibilities knowledgeably.
- Ensure any members of staff joining the setting outside the agreed training schedule receive induction prior to commencement of their duties.



- Keep records of child protection concerns securely and separately from the main child file and use these records to assess the likelihood of risk.
- Keep detailed, accurate, secure written (or online) records of all safeguarding and welfare concerns, discussions and decisions made including the rationale for those decisions. This should include instances where referrals were or were not made to another agency such as Local Authority Children's Social Care or the Prevent program etc.
- Ensure chronologies of concerns are maintained and decisions/actions taken are recorded.
- Ensure that safeguarding records are transferred accordingly (separate from child files) and in a timely fashion when a child transfers setting.
- Ensure that, where a child transfers setting and is on a Child Protection Plan or is a Child We Care For, their information is passed to the new setting immediately and that the child's social worker is informed. Consideration is given to a transition meeting prior to moving if the case is complex or on-going.
- Be aware of the training opportunities and information provided by OSCP to ensure staff are aware of the latest local guidance on safeguarding.
- Develop, implement and review procedures in the setting that enable the identification and reporting of all cases, or suspected cases, of abuse.
- Meet any other expectations set out for DSLs in KCSIE 2025.
- Help promote educational outcomes, understand their academic progress and attainment, and maintain a culture of high aspirations for these children where safeguarding and welfare has been an issue; supporting teaching staff to identify the challenges that children in this group might face and the additional academic support and adjustments that they could make to best support these children.
- Work alongside and liaise with other agencies and the Three Safeguarding Partners in line with Working together to Safeguard Children.
- Complete, along with the Management Team, the Annual Oxfordshire Safeguarding Self-Assessment Audit and return it to the Local Authority without delay.

## Annex C: Dealing with disclosures

A member of staff who is approached by a child should listen attentively, positively and try to reassure them. They cannot promise complete confidentiality and should explain, in an age-appropriate way, that they may need to pass information on to other professionals, to help keep the child or other children safe. The degree of confidentiality should always be governed by the need to protect the child. Additional consideration needs to be given to children with communication difficulties and for those whose preferred language is not English. It is important to communicate with them in a way that is appropriate to their age, understanding and preference.

All staff should know who the DSL is and who to approach if the DSL is unavailable. Ultimately, all staff have the right to make a referral to the police or Local Authority Children's social care directly via MASH and should do this if, for whatever reason, there are difficulties following the agreed protocol.



## Guiding principles to dealing with disclosures - the seven R's

**Receive** - Listen to what is said, without displaying shock or disbelief.

Accept what is said and take it seriously. Make a note of what has been said as soon as practicable.

**Reassure** - Reassure the child, but only so far as is honest and reliable.

Don't make promises you may not be able to keep e.g. 'I'll stay with you' or 'everything will be alright now' or 'I'll keep this confidential/not tell anyone'.

Do reassure e.g. you could say: 'I believe you', 'I am glad you came to me', 'I am sorry this has happened', 'We are going to do something together to get help'.

**Respond** - Respond to the child only as far as is necessary for you to establish whether you need to refer this matter, but do not interrogate for full details.

Do not ask 'leading' questions i.e. 'did he touch your private parts?' or 'did she hurt you?'. Such questions may invalidate your evidence (and the child's) in any later prosecution in court.

Do not ask the child why something has happened.

Do not criticise the alleged perpetrator; the child may care about him/her, and reconciliation may be possible.

Do not ask the child to repeat it all for another member of staff.

Explain what you have to do next and whom you have to talk to.

Reassure the child that it will be a senior member of staff.

**Report** - Share concerns with the DSL as soon as possible.

If you are not able to contact your DSL or the DDSL, and the child is at risk of immediate harm, contact MASH directly.

**Record** - If possible, make some very brief notes at the time, and record them as soon as possible (amend to reflect your recording process, electronic, paper etc).

Keep your original notes on file. Record the date, time, place, persons present and noticeable nonverbal behaviour, and the words used by the child. If the child uses sexual 'pet' words, record the actual words used, rather than translating them into 'proper' words.

Complete a body map to indicate the position of any noticeable bruising.

Record facts and observable things, rather than your 'interpretations' or 'assumptions'.

**Remember** - Support the child: listen, reassure, and be available.

Share your knowledge only with appropriate professional colleagues.

Try to get some support for yourself if you need it.

**Review** processes (led by DSL)

Has the action taken provided good outcomes for the child?

Did the procedure work?

Were any deficiencies or weaknesses identified in the procedure? Have these been remedied?

Is further training required?

## Annex D: Vulnerable children

Any child may benefit from [early help](#) but all staff should be particularly alert to the potential need for early help for a child who:

- is disabled or has certain health conditions and has specific additional needs.

- has special educational needs (including whether they have a statutory Education, Health and Care Plan)
- has a mental health need
- is a young carer
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines
- is frequently missing/goes missing from education, care or from home
- is at risk of modern slavery, trafficking, sexual and/or exploitation
- is at risk of being radicalised or exploited
- has a parent or carer in custody or is affected by parental offending
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse;  
<https://www.gov.uk/government/collections/domestic-abuse-bill>
- is misusing drugs or alcohol themselves
- is at risk of so-called 'honour'-based abuse such as Female Genital Mutilation or Forced Marriage
- is a privately fostered child

## Annex E: Indicators and categories of abuse and neglect

Please refer to What to do if you're worried a child is being abused Advice for practitioners for further information on indicators of abuse and neglect

[https://assets.publishing.service.gov.uk/media/5a80597640f0b62302692fa1/What\\_to\\_do\\_if\\_you\\_re\\_worried\\_a\\_child\\_is\\_being\\_abused.pdf](https://assets.publishing.service.gov.uk/media/5a80597640f0b62302692fa1/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

**All** staff should be aware that abuse, neglect and safeguarding issues are rarely stand-alone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

**Abuse:** a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear or experience its effects. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

**Physical abuse:** a form of abuse that may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

**Emotional abuse:** the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only

insofar as they meet the needs of another person. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

It may include:

- not giving the child opportunities to express their views
- deliberately silencing them or 'making fun' of what they say or how they communicate

It may feature:

- age or developmentally inappropriate expectations being imposed on children
- interactions that are beyond a child's developmental capability
- overprotection and limitation of exploration and learning
- preventing the child from participating in normal social interaction.

- seeing or hearing the ill-treatment of another

- serious bullying (including cyberbullying)

- causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

**Sexual abuse:** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education and all staff should be aware of it and of their setting's policy and procedures for dealing with it.

**Neglect:** the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, 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 caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

<https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/neglect/>

[Neglect - Oxfordshire Safeguarding Children Partnership \(OCSP.org.uk\)](https://www.oxfordshire.gov.uk/oxfordshire-safeguarding-children-partnership/)

## Annex F: Specific forms of abuse and safeguarding issues

This information is taken from KCSIE and whilst it may not always be relevant for early years children it is important to have an understanding of wider safeguarding issues that may affect families and communities.

### **Child abduction and community safety incidents**

Child abduction is the unauthorised removal or retention of a minor from a parent or anyone with legal responsibility for the child. Child abduction can be committed by parents or other family members; by people known but not related to the victim (such as neighbours, friends and acquaintances); and by strangers. Other community safety incidents in the vicinity of a setting can raise concerns amongst children and parents, for example, people loitering nearby or unknown adults engaging children in conversation. As children get older and are granted more independence (for example, as they start walking to school on their own) it is important they are given practical advice on how to keep themselves safe. It is important that lessons focus on building children's confidence and abilities rather than simply warning them about all strangers. Further information is available at: [www.actionagainstabduction.org/](http://www.actionagainstabduction.org/) and [www.clevernevergoes.org/](http://www.clevernevergoes.org/).

### **Child criminal exploitation (CCE) and child sexual exploitation (CSE)**

We know that different forms of harm often overlap, and that perpetrators may subject children and young people to multiple forms of abuse, such as criminal exploitation (including county lines) and sexual exploitation. In some cases, the exploitation or abuse will be in exchange for something the victim needs or wants (for example, money, gifts or affection), and/or will be to the financial benefit or other advantage, such as increased status, of the perpetrator or facilitator. Children can be exploited by adult males or females, as individuals or groups. They may also be exploited by other children, who themselves may be experiencing exploitation – where this is the case, it is important that the child perpetrator is also recognised as a victim. Whilst the age of the child may be a contributing factor for an imbalance of power, there are a range of other factors that could make a child more vulnerable to exploitation, including, sexual identity, cognitive ability, learning difficulties, communication ability, physical strength, status, and access to economic or other resources. Some of the following can be indicators of both child criminal and sexual exploitation where children:

- appear with unexplained gifts, money or new possessions
- associate with other children involved in exploitation
- suffer from changes in emotional well-being
- misuse alcohol and other drugs
- go missing for periods of time or regularly come home late, and • regularly miss school or education or do not take part in education. Children who have been exploited will need additional support to help keep them in education. Child Sexual Exploitation (CSE) can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse. It can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence. Some additional specific indicators that may be present in CSE are children who:
  - have older boyfriends or girlfriends; and
  - suffer from sexually transmitted infections, display sexual behaviours beyond expected sexual development or become pregnant.

Further information on signs of a child's involvement in sexual exploitation is available in Home Office guidance:

[Child sexual exploitation: guide for practitioners](#)

A full list of indicators can be found here: [Child Sexual Exploitation - Oxfordshire Safeguarding Children Partnership \(OCSP.org.uk\)](#)

## **County lines**

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs using dedicated mobile phone lines or other form of "deal line". This activity can happen locally as well as across the UK - no specified distance of travel is required. Children and vulnerable adults are exploited to move, store and sell drugs and money. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. Children can be targeted and recruited into county lines in a number of locations including any type of schools (including special schools), further and higher educational institutions, pupil referral units, children's homes and care homes. Children are also increasingly being targeted and recruited online using social media. Children can easily become trapped by this type of exploitation as county lines gangs can manufacture drug debts which need to be worked off or threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network. A number of the indicators for CCE and CSE as detailed above may be applicable to where children are involved in county lines. Some additional specific indicators that may be present where a child is criminally exploited through involvement in county lines are children who:

- go missing (from school or home) and are subsequently found in areas away from their home
- have been the victim, perpetrator or alleged perpetrator of serious violence (e.g. knife crime)
- are involved in receiving requests for drugs via a phone line, moving drugs, handing over and collecting money for drugs
- are exposed to techniques such as 'plugging', where drugs are concealed internally to avoid detection
- are found in accommodation that they have no connection with, often called a 'trap house or cuckooing' or hotel room where there is drug activity
- owe a 'debt bond' to their exploiters
- have their bank accounts used to facilitate drug dealing. Further information on the signs of a child's involvement in county lines is available in guidance published by the Home Office and The Children's Society [County Lines Toolkit For Professionals](#).

## **Children and the court system**

Children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. There are two age appropriate guides to support children [5-11-year olds](#) and [12-17 year olds](#). The guides explain each step of the process, support and special measures that are available. There are diagrams illustrating the courtroom structure and the use of video links is explained. [Making child arrangements](#) via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. The Ministry of Justice has launched an online child arrangements information tool with clear and concise information on the dispute resolution service. This may be useful for some parents and carers.

## Consent

Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs.

Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice.

- a child under the age of 13 can never consent to any sexual activity
- the age of consent is 16
- sexual intercourse without consent is rape Further information about consent can be found here: <https://rapecrisis.org.uk/get-informed/about-sexual-violence/sexual-consent/>

## Children who are absent from education

Good attendance promotes good outcomes for children. In a small minority of cases, good attendance practice may also lead to the earlier identification of more serious concerns for a child or family and may have a vital part to play in keeping a child or other family members safe from harm.

All children, regardless of their circumstances and the setting they are in, are entitled to an education which is suitable to their age, ability, aptitude, and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are absent from education in their area.

Children being absent from education for prolonged periods and/or on repeat occasions can act as a vital warning sign to a range of safeguarding issues including neglect, child sexual and child criminal exploitation - particularly county lines. It may also be a sign in very young children of parental mental health issues.

Schools and settings should put in place appropriate safeguarding policies, procedures and responses for children who are absent from education, particularly on repeat occasions. It is essential that all staff are alert to signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns such as travelling to conflict zones, FGM and forced marriage.

[whygoodattendanceisimportant.pdf \(oxfordshire.gov.uk\)](#)

[Poster Layout 1 \(oxfordshire.gov.uk\)](#)

## For Schools

All schools must inform their local authority of any pupil who is going to be deleted from the admission register where they:

- have been taken out of school by their parents and are being educated outside the school system e.g. home education,
- have ceased to attend school and no longer live within reasonable distance of the school at which they are registered
- have been certified by an appropriate medical practitioner as unlikely to be in a fit state of health to attend school before ceasing to be of compulsory school age, and neither he/she nor his/her parent has indicated the intention to continue to attend the school after ceasing to be of compulsory school age



- are in custody for a period of more than four months due to a final court order and the provider does not reasonably believe they will be returning to the school at the end of the period have been permanently excluded

The local authority must be notified when a school is to delete a pupil from its register under the above circumstances. Schools should contact the Admissions Team: Tel: 01865 815175. This should be done as soon as the grounds for deletion are met, but no later than deleting the pupil's name from the register. It is essential that schools comply with this duty, so that local authorities can, as part of their duty to identify children of compulsory school age who are missing education, follow up with any child who might be in danger of not receiving an education and who might be at risk of abuse or neglect.

All schools must inform the local authority of any pupil who fails to attend school regularly or has been absent without the school's permission for a continuous period of 10 school days or more, at such intervals as are agreed between the school and the local authority (or in default of such agreement, at intervals determined by the Secretary of State).

Settings who care for children who are not yet statutory school age need to be alert to children who have poor attendance or who have not started at the Early Years setting without explanation. If you have concerns about poor or unexplained attendance discuss with the family and, with the family's consent, complete a Strengths and Needs Form and contact your LCSS locality worker, or in urgent cases MASH.

### **Children with family members in prison**

Approximately 200,000 children in England and Wales have a parent sent to prison each year. These children are at risk of poor outcomes including poverty, stigma, isolation, and poor mental health. The National Information Centre on children of offenders [NICCO](#) provides information designed to support professionals working with offenders and their children to help mitigate negative consequences for these children. [Home - Children Heard and Seen](#) support children, young people and their families who are impacted by parental imprisonment.

**Domestic abuse** The Domestic Abuse Act 2021 received Royal Assent on 29 April 2021. The Act introduced the first ever statutory definition of domestic abuse and recognises the impact of domestic abuse on children, as victims in their own right, if they see, hear or experience the effects of abuse. The statutory definition of domestic abuse ensures that different types of relationships are captured, including ex-partners and family members. The definition captures a range of different abusive behaviours, including physical, emotional and economic abuse and coercive and controlling behaviour. Under the statutory definition, both the person who is carrying out the behaviour and the person to whom the behaviour is directed towards must be aged 16 or over and they must be "personally connected" (as defined in section 2 of the 2021 Act).

Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and child to parent abuse. Anyone can be a victim of domestic abuse, regardless of sexual identity, age, ethnicity, socio-



economic status, sexuality or background and domestic abuse can take place inside or outside of the home.

All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Experiencing domestic abuse can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Young people can also experience domestic abuse within their own intimate relationships. This form of child-on-child abuse is sometimes referred to as 'teenage relationship abuse'. Depending on the age of the young people, this may not be recognised in law under the statutory definition of 'domestic abuse' (if one or both parties are under 16). However, as with any child under 18, where there are concerns about safety or welfare, child safeguarding procedures should be followed and both young victims and young perpetrators should be offered support.

Refuge runs the National Domestic Abuse Helpline, which can be called free of charge and in confidence, 24 hours a day on 0808 2000 247.

Its website provides guidance and support for potential victims, as well as those who are worried about friends and loved ones. It also has a form through which a safe time from the team for a call can be booked.

<https://refuge.org.uk/what-is-domestic-abuse/>

Additional advice on identifying children who are affected by domestic abuse and how they can be helped is available at:

- <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/domestic-abuse/>

- [Safe Young Lives: Young people and domestic abuse | Safelives](#)

- Domestic abuse: specialist sources of support (includes information for adult victims, young people facing abuse in their own relationships and parents experiencing child to parent violence/abuse)

<https://www.gov.uk/government/publications/domestic-abuse-get-help-for-specific-needs-or-situations/domestic-abuse-specialist-sources-of-support>

- Operation Encompass (includes information on the impact of domestic abuse on children) <https://www.operationencompass.org/>

## **Drugs and Alcohol**

Children can be at risk of drugs and alcohol directly and indirectly. They may be at direct risk of having access to these substances (e.g. through gangs) or indirectly because they affect family life at home through use by parents/carers, siblings, child-minders etc. Risks associated with drugs and alcohol are built into the year 5-6 curriculum in schools.

More details can be found at: [Substance Misuse - Oxfordshire Safeguarding Children Partnership \(OCSP.org.uk\)](#)  
[Parents who Misuse Substances \(trixonline.co.uk\)](#)

Staff members must not be under the influence of alcohol or any other substance which may affect their ability to care for children.

## **Female Genital Mutilation (FGM)**

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. FGM mandatory reporting duty for teachers Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon teachers, along with regulated health and social care professionals in England and Wales, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases may face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils or students, but the same definition of what is meant by “to discover that an act of FGM appears to have been carried out” is used for all professionals to whom this mandatory reporting duty applies. Information on when and how to make a report can be found at: Mandatory reporting of female genital mutilation procedural information. Teachers must personally report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has good reason not to, they should still consider and discuss any such case with the school or college’s designated safeguarding lead (or deputy) and involve local authority children’s social care as appropriate. The duty does not apply in relation to at risk or suspected cases (i.e. where the teacher does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is 18 or over. In these cases, teachers should follow local safeguarding procedures.

## **Forced marriage**

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some perpetrators use perceived cultural practices to coerce a person into marriage. In addition, since February 2023 it has also been a crime to carry out any conduct whose purpose is to cause a child to marry before their eighteenth birthday, even if violence, threats or another form of coercion are not used. As with the existing forced marriage law, this applies to non-binding, unofficial ‘marriages’ as well as legal marriages. [Forced marriage - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/forced-marriage)  
[The right to choose: government guidance on forced marriage - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/the-right-to-choose-government-guidance-on-forced-marriage)

## **Fabricated or Induced Illness / Perplexing Presentation**

Staff must be aware of the risk of children being abused through fabricated or induced illness (FII). There are three main ways of the carer fabricating or inducing illness in a child.

These are not mutually exclusive and include:

- fabrication of signs and symptoms. This may include fabrication of past medical history

- fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents
- induction of illness by a variety of means

Where this is identified and considered a risk a referral will be made to the MASH for support and guidance. The setting may involve other agencies in making their assessments. That could include Health Visitor, community paediatrician, occupational therapists for example.

### **Gang and Youth / Serious Violence**

Children and Young People who become involved in gangs are at risk of violent crime and as a result of this involvement are deemed vulnerable. Agencies and professionals have a responsibility to safeguard these children and young people and to prevent further harm both to the young person and their potential victims. Risks associated with gang activity include access to weapons (including firearms), retaliatory violence and territorial violence with other gangs, knife crime, sexual violence, and substance misuse

<https://www.gov.uk/government/publications/serious-violence-strategy>

Children are also increasingly being targeted and recruited online using social media. Children can easily become trapped by this type of exploitation as county lines gangs can manufacture drug debts which need to be worked off or threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

A number of the indicators for CSE and CCE may be applicable to where children are involved in county lines. Some additional specific indicators that may be present where a child is criminally exploited through involvement in county lines are children who:

- go missing and are subsequently found in areas away from their home
- have been the victim or perpetrator of serious violence (e.g. knife crime)

### **Faith Based Abuse**

Information for those who work with children on a plan to help prevent child abuse arising from religion or superstition [National Action Plan to Tackle Abuse linked to faith or belief](#)

### **Harmful sexual behaviours (HSB)**

Children's sexual behaviour exists on a wide continuum, ranging from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. Consensual image sharing, especially between older children of the same age, may require a different response. It might not be abusive – but children still need to know it is illegal- whilst non-consensual is illegal and abusive. The harmful sexual behaviour term has been widely adopted in child protection. HSB can occur online and/or face-to-face and can also occur simultaneously between the two. HSB should be considered in a child protection context. When considering HSB, both ages and the stages of development of the children are critical factors. Sexual behaviour between children can be considered

harmful if one of the children is much older, particularly if there is more than two years' difference or if one of the children is pre-pubescent and the other is not. However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature. It is effective safeguarding practice for the DSL (and their deputies) to have a good understanding of HSB. This will aid in planning preventative education, implementing preventative measures, drafting and implementing an effective child protection policy and incorporating the approach to sexual violence and sexual harassment into the whole school or college approach to safeguarding. HSB can, in some cases, progress on a continuum. Addressing inappropriate behaviour can be an important intervention that helps prevent problematic, abusive and/or violent behaviour in the future. Children displaying HSB have often experienced their own abuse and trauma. It is important that they are offered appropriate support.

### **Homelessness**

Being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The DSL (and deputy) should be aware of contact details and referral routes into the Local Housing Authority so they can raise/progress concerns at the earliest opportunity. Indicators that a family may be at risk of homelessness include household debt, rent arrears, domestic abuse and anti-social behaviour, as well as the family being asked to leave a property. Whilst referrals and/or discussion with the Local Housing Authority should be progressed as appropriate, and in accordance with local procedures, this does not, and should not, replace a referral into local authority children's social care where a child has been harmed or is at risk of harm. The Homelessness Reduction Act 2017 places a new legal duty on English councils so that everyone who is homeless or at risk of homelessness will have access to meaningful help including an assessment of their needs and circumstances, the development of a personalised housing plan, and work to help them retain their accommodation or find a new place to live. The following factsheets usefully summarise the new duties: Homeless Reduction Act Factsheets

<https://www.gov.uk/government/publications/homelessness-reduction-bill-policy-factsheets>

The new duties shift the focus to early intervention and encourages those at risk to seek support as soon as possible, before they are facing a homelessness crisis.

### **Modern slavery and the National Referral Mechanism (NRM)**

Modern slavery encompasses human trafficking and slavery, servitude and forced or compulsory labour. Exploitation can take many forms, including sexual exploitation, forced labour, slavery, servitude, forced criminality and the removal of organs. Further information on the signs that someone may be a victim of modern slavery, the support available to victims and how to refer them to the NRM is available in Statutory Guidance.

<https://www.gov.uk/government/publications/modern-slavery-how-to-identify-and-support-victims>

**Preventing radicalisation** Children may be susceptible to radicalisation.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. Similar to protecting children from other forms of harms and abuse, protecting children from this risk should be a part of a setting's safeguarding approach.

- **Radicalisation** is the process of a person legitimising support for, or use of, terrorist violence.
- **Terrorism** is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.
- **Extremism** is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.

Although there is no single way of identifying whether a person is likely to be susceptible to radicalisation into terrorism, there are factors that may indicate concern. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The internet and the use of social media has become a major factor in the radicalisation of young people.

<https://www.gov.uk/government/publications/the-prevent-duty-safeguarding-learners-vulnerable-to-radicalisation/managing-risk-of-radicalisation-in-your-education-setting>

As with managing other safeguarding risks, staff should be alert to changes in children's behaviour, or things they say which could indicate that they may need help or protection.

It is possible to protect people from extremist ideology and intervene to prevent those at risk of radicalisation being drawn to terrorism. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead (or a deputy) making a Prevent referral (see the Prevent duty).

<https://www.gov.uk/guidance/making-a-referral-to-prevent>

### **The Prevent duty**

Prevent is one part of the government's overall counter-terrorism strategy, **CONTEST**. The aim of Prevent is to:

- tackle the ideological causes of terrorism
- intervene early to support people susceptible to radicalisation
- enable those who have already engaged in terrorism to disengage and rehabilitate

Settings are expected to assess the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. This means being able to demonstrate both a general understanding of the risks affecting children and young people in the local area and a specific understanding of how to identify individual children who may be at risk of radicalisation and what to do to support them.



During the process of radicalisation, it is possible to intervene to prevent vulnerable people being radicalised.

Settings should have clear procedures in place for protecting children at risk of radicalisation. It is not necessary for settings to have distinct policies on implementing the Prevent duty. The Prevent duty builds on existing local partnership arrangements and early years providers should ensure that their safeguarding arrangements consider the policies and procedures of OSCP.

Designated safeguarding leads and other senior leaders should familiarise themselves with the revised [Prevent duty guidance: for England and Wales](#). The Prevent guidance refers to the importance of Prevent Awareness training to equip staff to identify children at risk of being drawn into terrorism and to challenge extremist ideas. Individual settings are best placed to assess the training needs of staff in the light of their assessment of the risk to children of being drawn into terrorism. In Oxfordshire we advise that all staff should complete the online Prevent awareness training. [Prevent duty training: Learn how to support people susceptible to radicalisation | Prevent duty training](#)

Settings must ensure that children are safe from terrorist and extremist material when accessing the internet in the setting. Settings should ensure that suitable filtering is in place. It is also important that settings teach children about online safety more generally.

The Department for Education has also published advice for schools and childcare providers on the Prevent duty and is intended to complement the Prevent guidance and signposts other sources of advice and support.

<https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>

Further information and guidance are available:

[Radicalisation - Oxfordshire Safeguarding Children Board \(OCSB.org.uk\)](#)

Educate Against Hate <https://www.educateagainsthate.com/>

London Grid for Learning has also produced useful resources on Prevent (Online Safety Resource Centre - <https://lgfl.net/Safeguarding/TypesOfHarm/Prevent?s=13>)

Channel is a voluntary, confidential support programme which focuses on providing support at an early stage to people who are identified as being susceptible to being drawn into terrorism. Prevent referrals are assessed and may be passed to a multi-agency Channel panel, which will discuss the individual referred to determine whether they are at risk of being drawn into terrorism and consider the appropriate support required. An individual will be required to provide their consent before any support delivered through the programme is provided.

### **Sexual harassment and violence**

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Sexual violence refers to sexual offences under the Sexual Offences Act 2003, including rape, assault by penetration and sexual assault.



The following information relates to school aged children, but it is important for Early Years staff to be aware that this is a form of abuse and the fact children can, and sometimes do, abuse their peers in this way. Sexual harassment means 'unwanted conduct of a sexual nature' that can occur online and offline. When referencing sexual harassment, it is in the context of child on child, sexual harassment. Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded, or humiliated and/or create a hostile, offensive or sexualised environment.

Staff must challenge any form of derogatory and sexualised language or behaviour. Staff should be vigilant to sexualised/aggressive touching/grabbing. DfE guidance situates sexual violence, sexual harassment, and harmful sexual behaviour in the context of developing a whole-school safeguarding culture, where sexual misconduct is seen as unacceptable, and not 'banter' or an inevitable part of growing up.

It should be recognised that these issues are likely to occur. Schools should have procedures in place to deal with them. Groups at particular risk include girls, students who identify as Lesbian, Gay, Bisexual, Transgender+ (LGBT+), or are perceived by peers to be LGBT+, and pupils with SEND so schools should provide a safe space for these children to speak out and share their concerns with members of staff. Pupils are protected from 'upskirting', bullying, homophobic, biphobic and transphobic behaviour, racism, sexism, and other forms of discrimination. Staff should have familiarity with the [Equality Act 2010 and the Public Sector Equality Duty](#) (PSED), the Human Rights Act 1998 and recent reforms to the Act and how they apply to safeguarding.

Our setting acknowledges the need to treat everyone equally, with fairness, dignity, and respect. Any discriminatory behaviours are challenged, and children are supported to understand how to treat others with respect. We also have a statutory duty to report and record any of the above incidents and must record incidents across the whole spectrum of sexual violence, sexual harassment, and harmful sexualised behaviours and in doing so understand the scale of the problem and make appropriate plans to reduce it.

All such incidents should be immediately reported to the Designated Safeguarding Lead (DSL) or equivalent and managed in line with the setting's child protection policies. Victims of harm should be supported by the school's pastoral system and, and their wishes and feelings considered and that the law on child-on-child abuse is there to protect them, not criminalise them.

The appropriate safeguarding lead person should be familiar with the full guidance from the UK Council for Internet Safety (UKCIS), Sharing nudes and semi-nudes: advice for education settings working with children and young people <https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people>

### **So-called 'honour'-based abuse (including Female Genital Mutilation and Forced Marriage)**

So-called 'honour'-based abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as

breast ironing. Abuse committed in the context of preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBA are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBA, or already having suffered HBA. If staff have a concern regarding a child who might be at risk of HBA or who has suffered from HBA, they should speak to the DSL (or deputy). As appropriate, the designated safeguarding lead (or a deputy) will activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with the police and local authority children's social care. Where FGM has taken place, since 31 October 2015 there has been a mandatory reporting duty placed on teachers that requires a different approach (see below). [Karma Nirvana](#) run the national Honour Based Abuse Helpline.

### Upskirting

'Upskirting' is where someone takes a picture under a person's clothing (not necessarily a skirt) without their permission and or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress, or alarm. It is a criminal offence. Anyone of any gender, can be a victim. The Voyeurism (Offences) Act, which is commonly known as the Upskirting Act, came into force on 12 April 2019.

## Annex G: Online safety and cybercrime

An effective whole setting approach to online safety empowers us all to protect and educate children and staff in their use of technology and establishes mechanisms to identify, intervene in, and escalate any concerns where appropriate. It is essential that children are safeguarded from potentially harmful and inappropriate online material. It is also important to share with parents how they can keep their children safe online at home and have procedures in place for remote learning in the event this should be needed.

[Safeguarding children and protecting professionals in early years settings: online safety considerations for managers - GOV.UK \(www.gov.uk\)](#)

[Safeguarding children and protecting professionals in early years settings: online safety guidance for practitioners - GOV.UK \(www.gov.uk\)](#)

The breadth of issues classified within online safety is considerable and ever evolving, but can be categorised into four areas of risk:

**content:** being exposed to illegal, inappropriate, or harmful content, for example: pornography, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation, extremism, misinformation, disinformation (including fake news) and conspiracy theories.

**contact:** being subjected to harmful online interaction with other users; for example: peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.

**conduct:** online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images (e.g. consensual and non-consensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying,

**and commerce:** risks such as online gambling, inappropriate advertising, phishing and or financial scams. If you feel at risk, please report it to the Anti-Phishing Working Group (<https://apwg.org/>).

Providers must do all they can to limit children's exposure to the risks from the settings IT system and ensure the setting has appropriate filters and monitoring systems in place and regularly review their effectiveness. Providers should ensure their setting has appropriate filters and monitoring systems in place and staff receive training about this induction.

Whilst considering their responsibility to safeguard and promote the welfare of children and provide them with a safe environment in which to learn, providers should consider the age range of their pupils, the number of pupils, how often they access the IT system and the proportionality of costs vs risks.

The appropriateness of any filters and monitoring systems are a matter for individual settings and will be informed in part, by the risk assessment required by the Prevent Duty. The UK Safer Internet Centre has published guidance as to what "appropriate" filtering and monitoring might look like: [UK Safer Internet Centre: appropriate filtering and monitoring](#)

The Department for Education has published Generative AI: product safety expectations to support schools to use generative artificial intelligence safely, and explains how filtering and monitoring requirements apply to the use of generative AI in education <https://www.gov.uk/government/publications/generative-ai-product-safety-expectations/generative-ai-product-safety-expectations>

**Cybercrime** is criminal activity committed using computers and/or the internet. It is broadly categorised as either 'cyber-enabled' (crimes that can happen off-line but are enabled at scale and at speed on-line) or 'cyber dependent' (crimes that can be committed only by using a computer). Cyber-dependent crimes include:

- unauthorised access to computers (illegal 'hacking'), for example accessing a settings computer network
- 'Denial of Service' (Dos or DDoS) attacks or 'booting'. These are attempts to make a computer, network or website unavailable by overwhelming it with internet traffic from multiple sources, and,
- making, supplying or obtaining malware (malicious software) such as viruses, spyware, ransomware, botnets and Remote Access Trojans with the intent to commit further offence, including those above.

Older children with particular skills and interest in computing and technology may inadvertently or deliberately stray into cyber-dependent crime. If there are concerns about a child in this area, the designated safeguarding lead (or a deputy), should consider referring into the Cyber Choices programme (a nationwide police programme supported by the Home Office and led by the National Crime Agency). It aims to intervene where young people are at risk of committing, or being drawn into,

low-level cyber-dependent offences and divert them to a more positive use of their skills and interests. Cyber Choices does not currently cover 'cyber-enabled' crime such as fraud, purchasing of illegal drugs on-line and child sexual abuse and exploitation, nor other areas of concern such as on-line bullying or general on-line safety.

Additional advice can be found at:

[Cyber Choices](#)

['NPCC- When to call the Police'](#) and [National Cyber Security Centre - NCSC.GOV.UK](#)

## Annex H: Mental Health

All staff should also be aware that 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.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Staff, however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one.

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that staff are aware of how these children's experiences, can impact on their mental health, behaviour, and education.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following their child protection policy, and speaking to the designated safeguarding lead or a deputy.

<https://www.gov.uk/government/publications/promoting-children-and-young-peoples-emotional-health-and-wellbeing>

For schools: [Preventing and Tackling Bullying](#), and [Mental Health and Behaviour in Schools](#).

The Anna Freud Centre has produced materials for the Early Years sector

<https://www.annafreud.org/services/services-for-children-and-young-people/for-under-fives/>

### **Risks Associated with Parent/Carer Mental Health**

The majority of parents who suffer mental ill-health can care for and safeguard their children and/or unborn child. Some parents, however, will be unable to meet the needs and ensure the safety of their children.

Our approach is to recognise; seek support; instil preventive factors and monitor. The DSL should seek support through the Early Help team but escalate to the MASH Team if they are concerned that the child involved is being placed at immediate risk of harm. The link below details the Early Help services available to children, young people, and their families.

## Annex I: Pre-appointment checks and safer recruitment

All offers of appointment should be conditional until satisfactory completion of the mandatory pre-employment checks. Providers must not allow people, whose suitability has not been checked, including through a criminal records check, to have unsupervised contact with children being cared for.

When appointing new staff, providers must:

- verify a candidate's identity, it is important to be sure that the person is who they claim to be, this includes being aware of the potential for individuals changing their name. Best practice is checking the name on their birth certificate, where this is available. Further identification checking guidelines can be found on the GOV.UK website.
- obtain (via the applicant) an enhanced DBS check (including children's barred list information, for those who will be engaging in regulated activity with children). Note that when using the DBS update service, you still need to obtain the original physical certificate
- obtain a separate children's barred list check if an individual will start work in regulated activity with children before the DBS certificate is available. See paragraphs 266-267 in KCSIE on how to obtain a separate children's barred list check.
- verify the candidate's mental and physical fitness to carry out their work responsibilities. A job applicant can be asked relevant questions about disability and health in order to establish whether they have the physical and mental capacity for the specific role.
- verify the person's right to work in the UK, including EU nationals. If there is uncertainty about whether an individual needs permission to work in the UK, then follow advice on the GOV.UK website
- if the person has lived or worked outside the UK, make any further checks the setting consider appropriate and verify professional qualifications, as appropriate.
- Ensure a candidate's qualifications are 'approved' (full and relevant) in order for them to be counted in ratios. Managers can check qualifications here [Check an Early Years qualification](#)
- carry out prohibition check for all staff with QTS
- complete a risk assessment for each volunteer to decide whether they need to do an enhanced DBS check or not. (Please note even if it is decided an enhanced DBS is to be requested, if the volunteer is not in regulated activity, then you're not legally allowed to do a barred list check)
- only accept copies of a curriculum vitae (CV) alongside an application form. A CV on its own will not provide adequate information.

### Shortlisting

Shortlisted candidates should be asked to complete a self-declaration of their criminal record or information that would make them unsuitable to work with children.

Self-declaration is subject to Ministry of Justice guidance on the disclosure of criminal records, further information can be found on GOV.UK. For example:

- if they have a criminal history
- if they are included on the children's barred list
- if they are prohibited from teaching
- if they are prohibited from taking part in the management of an independent School
- information about any criminal offences committed in any country in line with the law as applicable in England and Wales, not the law in their country of origin or where they were convicted
- if they are known to the police and children's local authority social care
- if they have been disqualified from providing childcare (see paras 268-272), and,
- any relevant overseas information.

This information should only be requested from applicants who have been shortlisted. The information should not be requested in the application form to decide who should be shortlisted.

Applicants should be asked to sign a declaration confirming the information they have provided is true. Where there is an electronic signature, the shortlisted candidate should physically sign a hard copy of the application at point of interview. The purpose of a self-declaration is so that candidates will have the opportunity to share relevant information and allow this to be discussed and considered at interview before the DBS certificate is received.

In addition, as part of the shortlisting process consider carrying out an online search as part of their due diligence on the shortlisted candidates. This may help identify any incidents or issues that have happened, and are publicly available online, which the setting might want to explore with the applicant at interview. The setting should inform shortlisted candidates that online searches may be done as part of due diligence checks.

## References

The purpose of seeking references is to allow employers to obtain factual information to support appointment decisions.

Providers must obtain a reference for any member of staff (including students and volunteers) before they are recruited.

Providers should:

- Not accept open references e.g. to whom it may concern.
- Not rely on applicants to obtain their reference.
- Ensure any references are from the applicant's current employer, training provider or education setting and have been completed by a senior person with appropriate authority.
- Not accept references from a family member.
- Obtain verification of the individual's most recent relevant period of employment where the applicant is not currently employed.
- Secure a reference from the relevant employer from the last time the applicant worked with children (if not currently working with children). If the applicant has never worked with children, then ensure a reference is from their current employer, training provider or education setting.
- Ensure electronic references originate from a legitimate source.



- Contact referees to clarify content where information is vague or insufficient information is provided.
- Compare the information on the application form with that in the reference and take up any discrepancies with the applicant.
- Establish the reason for the applicant leaving their current or most recent post, and ensure any concerns are resolved satisfactorily before appointment is confirmed.

## Annex J: Central Record

The EYFS states: Providers must record information about staff qualifications and the identity checks, vetting processes and references that have been completed (including the criminal records check reference number, the date a check was obtained and details of who at the setting obtained it).

See section above for other checks which must be recorded.

Copies of DBS certificates and records of criminal information disclosed by the candidate are covered by UK GDPR/DPA 2018 Article 10. To help with the requirements of the Data Protection Act 2018, when a provider chooses to retain a copy, there should be a valid reason for doing so and it should not be kept for longer than six months. When the information is destroyed a provider may keep a record of the fact that vetting was carried out, the result and the recruitment decision taken if they choose to. Providers do not have to keep copies of DBS certificates, in order to fulfil the duty of maintaining the single central record.

For agency staff, settings should also include whether written confirmation that the employment business supplying the member of agency staff has carried out the relevant checks and obtained the appropriate certificates, whether any enhanced DBS check certificate has been provided in respect of the member of agency staff, and the date that confirmation was received.

Committee member's identity and vetting checks should also be recorded.

Governance is not a regulated activity and so they do not need a barred list check unless, in addition to their governance duties, they also engage in regulated activity.

## Annex K: Staff Induction

The EYFS states: What practitioners know, plan for, and do matters for children's learning, development, safety, and happiness in settings. Providers must ensure that all staff receive induction training to help them understand their roles and responsibilities. Induction training must include information about emergency evacuation procedures, safeguarding, child protection, and health and safety issues. Providers must support staff to undertake appropriate training and professional development opportunities to ensure they offer quality learning and development experiences for children that continually improves.

The DSL will ensure that all new staff and volunteers, including committees and trustees (including temporary staff) are aware of the setting's internal safeguarding processes.

All staff members (including temporary staff) will receive training to ensure they are aware of a range of safeguarding issues. Committee members should also receive relevant training.

All staff members (including temporary staff) will receive regular safeguarding and child protection updates, at least annually.

All staff members (including temporary staff) will be made aware of the settings expectations regarding safe and professional practice via the staff behaviour policy (or code of conduct) and Acceptable Use Policy.

The DSL and manager will provide an annual report to the Provider/Management team / committee detailing safeguarding training undertaken by all staff and will maintain up to date register of who has been trained.

Although the setting has a nominated lead (name of lead) for the Management committee, all members of the Management committee will access appropriate safeguarding training which covers their specific strategic responsibilities on a regular basis.

## Annex L: Safeguarding Training

### (taken from Annex C of the EYFS)

1. Training is designed for staff caring for 0-5 year olds and is appropriate to the age of the children being cared for.

2. The safeguarding training for all practitioners must cover the following areas: •

What is meant by the term safeguarding.

- The main categories of abuse, harm and neglect.
- The factors, situation and actions that could lead or contribute to abuse, harm or neglect.
- How to work in ways that safeguard children from abuse, harm and neglect.
- How to identify signs of possible abuse, harm and neglect at the earliest opportunity. These may include:
  - Significant changes in children's behaviour.
  - A decline in children's general well-being.
  - Unexplained bruising, marks or signs of possible abuse or neglect.
  - Concerning comments or behaviour from children.
  - Inappropriate behaviour from practitioners, or any other person working with the children. This could include inappropriate sexual comments; excessive one-to-one attention beyond what is required through their role; or inappropriate sharing of images.
  - Any reasons to suspect neglect or abuse outside the setting, for example in the child's home or that a child may experience emotional abuse or physical abuse because of witnessing domestic abuse or coercive control or that a girl may have been subjected to (or is at risk of) female genital mutilation.
- How to respond, record and effectively refer concerns or allegations related to safeguarding in a timely and appropriate way.
- The setting's safeguarding policy and procedures.
- Legislation, national policies, codes of conduct and professional practice in relation to safeguarding.
- Roles and responsibilities of practitioners and other relevant professionals involved in safeguarding.

3. Training for the designated safeguarding lead (DSL) should take account of any advice from the local safeguarding partners or local authority on appropriate training

courses. In addition to the areas set out in paragraph 2, training for the DSL must cover the elements listed below:

- How to build a safe organisational culture.
- How to ensure safe recruitment.
- How to develop and implement safeguarding policies and procedures.
- If applicable, how to support and work with other practitioners to safeguard children.
- Local child protection procedures and how to liaise with local statutory children's services agencies and with the local safeguarding partners to safeguard children.
- How to refer and escalate concerns (including as described at paragraph 3.9 of the EYFS).
- How to manage and monitor allegations of abuse against other staff.
- How to ensure internet safety.

## Annex M: Staff Signatures

Staff must sign to say that they have read, understood, and will follow the Safeguarding Policy and Procedures.

| Name | Role | Signature | Date |
|------|------|-----------|------|
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