

Safe guarding & Child Protection policy

POLICY STATEMENT OF INTENT

We at Wishing Well Family Centre have a responsibility to provide a safe environment for children in which their welfare is of paramount importance. This also means we need to inform and consult parents and carers about any decision affecting their child.

This policy aims to provide all members of staff, children and their families with a clear and secure framework for ensuring that all children in the school are protected from harm.

Practitioners who work with children should read this policy within the framework of:

Keeping Children Safe in Education September (2016)

Working Together to Safeguard Children (2015)

Co-operating to Safeguard Children & Young people in NI (Revised Aug 17)

United Nations Convention rights child (UNCRC)

Our children and young people - Our pledge (2006-2016)

Human Rights Act (1998)

The Children (NI) Order 1995

Data Protection Act

We believe in supporting all aspects of children's development and learning, and keeping children safe.

PRINCIPLES: The Children (NI) Order 1995 came into force in Northern Ireland in November 1996. It significantly affects the moral and legal responsibilities of all those, both in the statutory and voluntary sectors, who work with children and young people up to the age of 18 years.

The Order embodies five key principles:

- Paramountcy - in childcare, law and practice, the welfare of the child is the principal consideration in any decisions about him or her.
- Parental responsibility - parents have responsibilities to their children, rather than rights over them. In some situations, 'significant adults' share this responsibility with one or both parents.
- Prevention - this principle is concerned with the prevention of significant harm to children.
- Partnership - the basis of this principle is that the most effective way of ensuring that a child's needs are met is by working in partnership, especially with parents.
- Protection - children should be safe, and should be protected by intervention if they are in danger.

Safeguarding

Safeguarding is a term which is broader than 'child protection' and relates to the action the commission takes to promote the welfare of children and protect them from harm. Safeguarding is everyone's responsibility. Safeguarding is defined in Working together to safeguard children as:

- Protecting children from maltreatment.
- Preventing impairment of children's health and development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care and
- Taking action to enable all children to have the best outcomes.
- Ensuring the voice of children is heard.

Having safeguards in place not only protects and promotes the welfare of children but also it enhances the confidence of staff, volunteers, parents/carers and other users.

Our prime responsibility is to safeguard and promote the welfare and well-being of all children in our care. We have a duty to the children, parents and staff to act quickly and responsibly in any instance that may come to our attention. All staff will work in the best interests of the child.

We aim to:

- Ensure that children are never placed at risk whilst at nursery.
- Ensure the child paramount in all we do.
- Ensure that confidentiality is maintained at all times.
- Ensure that all staff are alert to the signs of abuse, understand what is meant by child protection and are aware of the different ways in which children can be harmed including by other children i.e. bullying, discriminatory behaviour.
- Ensure that our staff and volunteers are carefully selected, vetted, trained and supervised.
- Ensure that all staff are familiar and updated regularly with child protection issues and procedures.
- Ensure parents are fully aware of child protection policies and procedures when they register with the nursery and are kept informed of all updates when they occur.
- Work in partnership with parents, unless this is inconsistent with ensuring the child's safety.
- Work alongside other agencies to support family units through effective information sharing, strong governance & leadership, collaboration and understanding between all involved.
- Regularly review and update this policy with committee/management and staff.
- Children will be supported, listened too and offered reassurance, comfort and

sensitivity.

- Activities will be devised according to individual circumstances to enable children to develop confidence within their peer group.

We endeavour to promote an open and child-centred environment in which everyone feels comfortable and free to share information and concerns.

Harm and Significant Harm

The likelihood or actuality of significant harm is the threshold that justifies compulsory intervention in family life in the best interests of children.

Harm

Harm is defined in the Children Order as ill-treatment or the impairment of health or development. The Order states that 'ill-treatment' includes sexual abuse, forms of ill-treatment which are physical and forms of ill-treatment which are not physical; 'health' means physical or mental health; and 'development' means physical, intellectual, emotional, social or behavioural development.

Significant Harm

The significance of harm will be a matter for assessment and judgment in relation to each individual child. The question of whether harm is significant should be determined in accordance with Article 50(3) of the Children Order, which states that 'where the question of whether harm suffered by a child is significant turns on the child's health or development, his health or development shall be compared with that which could reasonably be expected of a similar child.'

We will endeavour to safeguard children in our care by:

Recruitment/selection

- Ensuring all staff and volunteers are fit to work with children in accordance with the Children (NI) Order 1995. This includes ensuring that all staff and volunteers are cleared through Access NI and are granted vetting clearance through the Trust.

Training & supervision

- All staff will complete Child Protection Training at least every 3 yrs.
- Selected staff will complete Designated Child Protection Officer Training. Three Designated Officers are appointed to implement our Child Protection Policy.
- Effective management is provided for all staff and volunteers through supervision, support and training. An annual appraisal is carried out to help identify training needs and also provides a means of enhancing support and supervision.
- All staff must sign that they have read and understood all policies and procedures.

- All staff, volunteers and students must complete an appropriate induction prior to commencement of their post.

Health & Safety

- By ensuring all playrooms are staffed by the recommended child/staff ratio set down by social services.
- In order to ensure that the safety of children is paramount, we at Wishing Well Family Centre strive to provide a safe environment for children.

Use of mobile phones/cameras within setting

- Use of mobile phones in the playrooms is unauthorised, staff must at all times adhere to the Mobile phone policy.
- Cameras are used within the setting/trips by staff to take photos of the children for use within the setting only. Parents' permission is sought on their authorisation form on their induction day. Images are removed from the device and stored on a password protected computer. Staff must refer at all times to the Photography policy in place.

Code of Practice/Behavior

- We are committed to reviewing and updating our policy and good practice.
- We are committed to delivering a service that promotes good practice and protects children from harm.
- By ensuring all incidents of suspicion, poor practice and allegations of inappropriate behaviour are taken seriously and responded to swiftly according to our guidelines.
- We strive to promote an atmosphere in which children are protected from harm and can grow and develop to their full potential.
- Children are encouraged to respect themselves and others. We have a clear anti bullying policy and we do not tolerate prejudice, all children are encouraged to respect differences e.g. disabilities, race & creed.

Confidentiality

- By sharing information about child protection and good practice with parents, staff and volunteers, and other relevant professionals on a need to know basis.
- Sharing information about concerns with agencies who need to know, and involving parents and children appropriately.
- Ensuring that accurate records are kept of any significant changes in a child's behaviour, physical condition or appearance.

Sharing info/Reporting

- It is our duty and responsibility to report any child protection concerns/disclosures or allegations immediately; as per flow chart.
- If any of our staff members or volunteers feel concerned about a child, it is essential that they know how to report their concern.
- All information will only be shared on a need to know basis.
- We have appointed three members of staff as Child Protection Designated Officers.
- All staff have been trained in child protection, and they are committed to the principle of confidentiality.

Responding appropriately to suspicions of abuse

We will do this by:

- Using appropriate strategies to support children who may make a disclosure of abuse. Ensuring that the child is listened too and believed.
- By observing children on an ongoing basis and noting any significant changes in behaviour that may give cause for concern.
- By keeping detailed and accurate records in accordance with confidentiality guidelines and the Data Protection Act.
- By keeping records until the child's 18th birthday due to possibility of legal action.

PROCEDURE FOR CHILD PROTECTION INVESTIGATION

When recording incidents of abuse or suspected abuse remember at all times to keep records factual and informative. Below are a few guidelines to help when recording -

- Listen carefully and record as precisely as possible what the child says
- Observe the child's behaviour
- Do not promise to keep secrets but offer re-assurance
- Communicate effectively - Do not ask leading questions or inquire into details of the abuse or INVESTIGATE
- Do not make a child repeat the story unnecessarily
- Stay calm
- Record in writing what was said as soon as possible and advise Designated Child Protection Officer (Tracey Hutchinson/Catherine Ferguson/Karen Johnston).

Procedure for Reporting incident -

Staff report concerns to Supervisor/Designated Officer - Staff make a record of:

- The child's name;
- The child's address;
- The age of the child & DOB
- Date and time of the observation or the disclosure;
- A non-subjective record of the observation or disclosure;
- The exact words spoken by the child;

- The name of the person to whom the concern was reported, with date and time; and the names of any other person present at the time.
- Name of DO reported to

These communication records are signed and dated and kept in a separate confidential file. All members of staff are aware of the procedures for recording and reporting. Supervisors report concerns to any of the designated child protection officers.

The designated officer will pass on their concerns to the Gateway team. (All incidents must be reported to a Designated Officer who will take the responsibility to implement child protection procedures. We have a legal duty to report any disclosure of abuse to the appropriate authorities.

Indicators of Abuse

Child abuse refers to any ill-treatment of a child, either through inflicting actual harm by knowingly not preventing harm, or by failing to provide proper care. Abuse can happen anytime, anywhere and by anyone. We all have a responsibility to protect children and we need to understand the signs and symptoms of abuse.

There are different types of abuse, and a child may suffer more than one type.

Physical abuse

Physical abuse is deliberate physical injury to a child, or the willful or neglectful failure to prevent a child's physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating.

Physical Indicators	Behavioural Indicators
Injuries in various stages of healing, especially burns and bruises	No expectation of parental comfort
More injuries than usually seen in children of the same age, scattered on many areas of the body	Overly friendly or withdrawn
Bruises or burns in patterns that suggest intentional infliction	Fear to return home, or fear of a parent/adult figure.
Any injury that does not match or is inconsistent with the description/reason given.	Hitting out at other children on a regular and consistent basis.
Injuries on areas of the body not consistent with normal childhood injuries.	Changes in normal behaviour or development i.e. bed wetting etc.

Emotional abuse

Emotional abuse is the persistent emotional ill-treatment of a child, having severe and persistent adverse effects on the child's emotional development. It may involve making children feel they are worthless or unloved, inadequate, or only valued for what they can do for another person.

Physical Indicators	Behavioural Indicators
Speech disorder	Eating disorder
Failure to thrive	Phobias i.e. fear of something
Wetting and/or soiling	Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
Lack of attachment to a care-giver	Sudden changes in behaviour i.e. withdrawn
Lack of confidence/low self-esteem	Inability to form relationships/attachments
Attention seeking behaviour	Fear of new situations

Sexual abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts, subjecting the child to pornographic material.

Physical Indicators	Behavioural Indicators
Painful urination or defecation	Withdrawn
Bleeding/bruising around genitals	Sudden change in behaviour i.e. reverting to an earlier stage of development
Chronic ailments such as stomach pains or headaches	Exhibit complicated sexual or seductive behaviour - inappropriate language/play
Difficulty in walking or sitting	Refusal to wash/clean or to be bathed/changed.
	Low self-esteem/self-confidence

Neglect

Neglect is the persistent failure to meet a child's basic physical and psychological needs and is likely to seriously impair the child's health or development. Neglect may involve a parent or carer failing to provide adequate food, shelter or clothing; failing to protect a child from physical harm or danger; failing to ensure that the child receives appropriate medical care or treatment; lack of stimulation; or lack of supervision. It may also include neglecting a child's basic emotional needs.

Physical Indicators	Behavioural Indicators of Neglect
Underweight/Overweight	Lack of social relationships
Poor hygiene	Frequently absent or late
Clothing soiled or inappropriate to weather conditions etc.	Low self-esteem
Unattended dental/medical problems	Dull, inactive, little energy/falling asleep
Poor sleep and/or eating patterns.	Constant hunger, requests for food
	Inability to concentrate

Bullying

Bullying comes in many forms, physical, verbal, silent and isolation etc. We at Wishing Well Family Centre believe that all children and individuals have the right to come to the Nursery without fear of being bullied. Any act of bullying will be dealt with immediately. No one deserves to be a victim of bullying. Everybody has the right to be treated with respect.

Bullying can be:

Being unfriendly, ignoring or deliberately leaving someone out of things, teasing, tormenting (e.g. hiding books, threatening gestures), and playing unkind practical jokes.

This list below is not meant to be complete or exhaustive, and the presence of one or more of these indicators is not proof that abuse is actually taking place.

We stress, however, that it is not the responsibility of managers to prove that abuse is taking place. Instead, it is their responsibility to act on any concerns by reporting them to the Designated Officer, who in turn will report any concerns to Social Services.

Physical Indicators	Possible indicators of bullying
Pushing, kicking, hitting, punching or any use of violence, taking or damaging someone's things	Suddenly scared to go to nursery/upset coming into nursery
Racist/racial taunts, gestures	Complaining of headaches or stomach-aches for no reason
Sexual unwanted physical contact or	Clingy and whiny

sexually abusive comments	
Verbal name-calling, sarcasm, spreading rumours, teasing, threatening, or making people do things they don't want to do	Unexplained injuries
	Withdrawn
	Talks about one particular child doing mean things to them

Exploitation

Exploitation is the intentional ill-treatment, manipulation or abuse of power and control over a child or young person; to take selfish or unfair advantage of a child or young person or situation, for personal gain. It may manifest itself in many forms such as child labour, slavery, servitude, engagement in criminal activity, begging, benefit or other financial fraud or child trafficking. It extends to the recruitment, transportation, transfer, harbouring or receipt of children for the purpose of exploitation.

Children who may be particularly vulnerable

To ensure that all of children receive equal protection, we will give special consideration and attention to children who are:

- A looked after child
- Disabled or have special educational needs
- Living in neglectful and unsupportive home situations
- Vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion or sexuality; and
- Do not have English as a first language

PROCEDURES FOR REPORTING ABUSE

STAFF/VOLUNTEER/PARENT/GUARDIAN

SUPERVISOR

DESIGNATED CHILD PROTECTION OFFICERS



TRACEY HUTCHINSON - MANAGER
07572 629678 / 02890 585633



CATHERINE FERGUSON - DEPUTY MANAGER
07856 228338/02895 735247



KAREN B JOHNSTON - EARLY YRS MANAGER
07714 520747 / 02890 715174

**GATEWAY 02890 507000
OUT OF HOURS 02895 049999
EARLY YEARS 02895 042811
NSPCC
POLICE**