



Kingston and Richmond
Safeguarding Children Partnership



Safeguarding and Child Protection

A guide for early years and childcare providers in Kingston and Richmond

This guidance is aimed at nurseries, childminders, schools, clubs, children's centres and drop-in groups. It sets out the statutory responsibilities and guidance with regard to safeguarding children and child protection. This guidance is applicable to all practitioners working with children and young adults.

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Introduction

Safeguarding children is everyone's responsibility.

'Everyone who works with children has a responsibility for keeping them safe. No single practitioner can have a full picture of a child's needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.'

'Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children' July 2018 (updated December 2020).

Due to the close contact childcare providers have with children and families, they could be the first people to spot early signs of abuse and neglect so it is important that providers feel confident in knowing what to look out for and what to do if they have concerns.

This document sets out the statutory responsibilities and guidance for practitioners and includes:

- a definition of safeguarding and child protection
- categories and indicators of abuse and neglect
- Single Point of Access (SPA) and local authority designated officer (LADO)
- what to do if you have concerns
- roles and responsibilities
- record keeping
- safeguarding processes flowchart
- contact details

This is not an exhaustive guide and there are additional local and national documents, guidelines, resources and publications that you must refer to in order to guide your practice, policies and procedures. Some of these are listed at the end of this document and additional information may be found on the Kingston, Richmond and Achieving for Children (AfC) websites, the Kingston and Richmond Safeguarding Children Partnership (KRSCP) website, or via the Early Years' Service. The term staff is used throughout the document to refer to paid and unpaid staff, childminders, assistants and volunteers.

How to promote a protective ethos

Settings should have an ethos and environment that actively promotes an awareness of safeguarding and the welfare of children in their care.

All adults should act as a positive role model for children and young people and should actively promote high self-esteem in all children.

All practitioners should be confident in their knowledge of how to respond to child protection concerns and to ask for help, advice and training when needed.

Practitioners should help children learn about how to recognise and manage risks that they may face (using appropriate level of language) and act to keep themselves safe.

Practitioners should promote the safe use of ICT and help children and young people understand any potential risks this may present.

Practitioners should work with parents and carers to build an understanding of the setting's responsibilities for the welfare of children. This could be done through providing up-to-date safeguarding information which is shared and displayed prominently for parents.

Settings should adopt safe and robust recruitment procedures.

What is safeguarding?

For the purposes of this guide the definition of safeguarding is as follows.

'Safeguarding children is the action we take to promote the welfare of children and protect them from harm – it is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.'

Safeguarding is:

- protecting children from maltreatment
- preventing impairment of children's 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

'Child protection refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.'

'Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children' July 2018

What is child abuse and neglect?

Child abuse is 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. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (for example, via the internet). They may be abused by an adult or adults, or another child or children.

Definitions of abuse and neglect

Physical abuse

Physical abuse is 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.

This is possibly a more obvious form of abuse as injuries can often be seen, but not always. All children acquire bumps and bruises, cuts and grazes from time to time but sometimes the injuries can be found in unusual places which may be cause for concern.

Signs that may suggest physical abuse:

- unexplained bruising, marks or injuries on any part of the body
- bruising to a pre-mobile or non-independently mobile baby
- bruising to a non-mobile child with disabilities
- fingertip bruising to the chest, back, arms or legs
- multiple bruising in clusters, often on the upper arm, outside of the thigh
- injuries on parts of the body where accidental injury is unlikely, such as bruises on the cheeks, ears, palms, arms, chest, thighs and feet
- bruising which looks like it has been caused by fingers, a hand or an object
- bruising of different colours indicating repeated injuries
- untreated injuries or injuries that have been treated inadequately
- human bite marks
- scalds or burns of any shape or size, particularly to the backs of hands, feet, legs, genitals or buttocks
- fractures in children under 18 months
- aggressive behaviour
- flinching when approached or touched

The KRSCP have produced a protocol for bruising in pre-mobile babies and non-mobile children with disabilities (see link at the end of the document).

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child that causes severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. 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, including interactions that are beyond a child's capability, as well as overprotection and limitation of exploration and learning, or preventing normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Signs that may suggest emotional abuse:

- neurotic behaviour, for example hair twisting, rocking
- stress related illnesses (e.g. eating disorders)
- being overly affectionate towards strangers or people they haven't known for long
- being unable to play
- fear of or over reaction to making mistakes
- sudden speech disorders
- excessive lack of confidence, low self esteem
- self-harm
- not appearing to have a close relationship with their parent
- fear of parent being approached regarding their behaviour
- a failure to grow or thrive
- developmental delay

Bullying

There is no legal definition of bullying. However, it's usually defined as behaviour that is:

- repeated
- intended to hurt someone either physically or emotionally
- often aimed at certain groups, for example because of race, religion, gender or sexual orientation

It takes many forms and can include:

- physical assault
- teasing
- making threats
- name calling

Bullying behaviour can be displayed by children as young as 3 years old. Early years provision can provide a good opportunity to understand and influence how young children play together and communicate.

Cyberbullying is bullying that takes place online. Unlike bullying in the real world, online bullying can follow the child wherever they go, via social networks, gaming and mobile phone.

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching 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, persuading or forcing a child to send or post sexually explicit images of themselves, persuading or forcing a child to take part in sexual activities via a webcam or smartphone, having sexual conversations with a child by text or online. Technology can be used to facilitate offline abuse.

Abusers may threaten to send sexually explicit images, video or copies of sexual conversations to the young person's friends and family unless they take part in other sexual activity.

Sexual abuse is not solely perpetrated by adult males. Women and other children can also commit sexual abuse.

Signs that may suggest sexual abuse:

- pain, bruising or bleeding in the genital or anal areas
- an unusual discharge or infection
- sexually transmitted infections (STI)
- discomfort when walking or sitting down
- stomach pains
- sudden or unexplained changes in behaviour
- fear of being left with a specific person or group of people
- sexual knowledge beyond their developmental level
- sexually active or pregnant at a young age
- sexual drawings or language
- eating problems
- self-harm
- acting in a sexually explicit way towards adults
- unexplained money, gifts or treats

Child sexual exploitation (CSE)

Child sexual exploitation is a form of sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity in exchange for something the victim needs or wants, and/or for the financial advantage or increased status for the perpetrator or facilitator. It could be part of a seemingly consensual relationship. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Sexual exploitation can be very difficult to identify. Young people who are being sexually exploited may go missing from home, care or education, be involved in abusive relationships and petty crime such as shoplifting and have new things such as clothes and mobile phones, which they aren't able to easily explain.

Harmful sexual behaviour

Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour which is displayed by children and young people and which may be harmful or abusive. It may also be referred to as sexually harmful behaviour or sexualised behaviour.

HSB encompasses a range of behaviour, which can be displayed towards younger children, peers, older children or adults. HSB can include:

- using sexually explicit words and phrases
- inappropriate touching
- using sexual violence or threats
- sexual activity with other children or adults

It is normal for children to show signs of sexual behaviour at each stage in their development, and children develop at different rates. Behaviours which might be concerning depend on the child's age and the situation.

Neglect

Neglect is the persistent failure to meet a child's basic physical and psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Neglect is the most common type of child abuse. It often happens at the same time as other types of 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 and keeping them safe from harm (including the use of inadequate care-givers)
- ensure access to appropriate medical and dental care or treatment
- respond to a child's basic emotional needs

Signs that may suggest neglect:

- constant hunger
- lack of energy and feeling tired
- continually dirty, smelly or unkempt
- loss of weight or being constantly underweight
- being overweight or obese
- inappropriately dressed for the conditions
- frequent injuries
- medical assistance not sought when necessary
- living in an unsuitable home environment
- mentioning being left alone or unsupervised
- poor attendance at setting or school
- poor language, communication or social skills for their stage of development

Definitions above adapted from 'Working Together to Safeguard Children 2018' and 'Definitions and signs of child abuse' NSPCC July 2020.

Kingston and Richmond Safeguarding Children Partnership (KRSCP) have produced a Child Neglect Toolkit (see link at the end of the document) which assists practitioners to analyse and assess situations of possible neglect. It helps consider the quality of care given to children, whether the care meets the children's needs and what support the family may require.

Female genital mutilation (FGM)

FGM 'includes all procedures which involve partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons whether for cultural or other non-therapeutic reasons' (*WHO, UNICEF, UNFPA, 1997*). It may be carried out when a child is new-born, during childhood or adolescence, just before marriage or during pregnancy.

FGM constitutes child abuse and causes physical, psychological and sexual harm which can be severely disabling.

Signs that may suggest FGM:

- a child may talk about a special procedure or ceremony that is going to take place
- prolonged absence from the setting
- change in behaviour on return
- damage to the genital area and/or adjacent tissues
- pain or difficulty in walking, standing or sitting
- bleeding or infection
- urine retention
- fracture or dislocation as a result of restraint
- psychological damage, including depression, anxiety, and sexual dysfunction

There is a mandatory duty requiring regulated health and social care professionals and teachers to report known cases of FGM in under-18s. More information regarding FGM can be found on the Kingston and Richmond Safeguarding Children Partnership website and in the document 'Multi-agency statutory guidance on female genital mutilation' July 2020.

In the case of suspected FGM providers must not contact parents before seeking advice from SPA or mediate between the children and their parents.

Breast ironing

Breast ironing or 'breast flattening' is the process whereby young pubescent girl's breasts are ironed, massaged or pounded down through the use of hard or heated objects in order for the breasts to disappear or delay the development of breasts. It is believed by carrying out this act young girls will be protected from harassment, rape, abduction and early forced marriage. It is a form of physical abuse.

Domestic abuse

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents, inside or outside of the home. Domestic abuse is abusive behaviour of a person towards another person if they are both over 16 and personally connected to each other. This includes intimate partner violence, abuse by family members, teenage relationship abuse and adolescent to parent violence.

The abuse can encompass, but is not limited to:

- physical or sexual abuse
- violent or threatening behaviour
- controlling or coercive behaviour
- economic abuse
- psychological, emotional or other abuse

Signs that may suggest children are exposed to domestic abuse:

- aggressive behaviour
- displaying anti-social behaviour
- acting out their experiences
- suffering from depression or anxiety
- not achieving potential - due to difficulties at home or disruption of moving to and from refuges

County lines

As set out in the Serious Violence Strategy, published by the Home Office, a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of 'deal line'. They are likely to exploit children and vulnerable adults to move and store the

drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

Child criminal exploitation

As set out in the Serious Violence Strategy, published by the Home Office, where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact. It can also occur through the use of technology.

Child trafficking

Children and young people are tricked, forced or persuaded to leave their homes and are moved or transported and then exploited, forced to work or sold. Traffickers use abuse as a form of control and children and young people are likely to be physically and emotionally neglected and may be sexually exploited.

Modern slavery

Modern forms of slavery can include forcing a person to work for free to pay off a debt, child slavery, forced marriage, domestic servitude and forced labour, where victims are made to work through violence and intimidation.

Indicators of abuse

It is vital that staff are aware of the range of physical and behavioural indicators of abuse and report any concerns to the safeguarding and child protection designated lead. It is the responsibility of the childcare setting to report concerns, but that it is not their responsibility to investigate or decide whether a child has been abused.

Indicators could take a number of forms, and individual indicators will rarely, in isolation, provide conclusive evidence of abuse. They will be viewed as part of the picture, and each piece of information will help the safeguarding and child protection designated lead decide how to proceed. The setting does not need absolute proof that the child is at risk to act.

Children who may be particularly vulnerable to abuse

All children should receive equal protection, so providers should be particularly aware of children in the following circumstances who may be particularly vulnerable:

- looked after children (LAC)
- disabled and have specific additional needs
- having special educational needs
- young carers

- living in a known domestic abuse situation
- affected by known parental substance misuse
- asylum seekers
- living in temporary accommodation or living transient lifestyles
- living in chaotic, neglectful and unsupportive home situations
- vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion or sexuality
- do not have English as a first language
- having a parent with enduring or untreated mental health problems
- having a parent or carer in custody

Private fostering

A private fostering arrangement is when a child under the age of 16 (or under 18 if disabled) is cared for by someone who is not their parent, a close relative or an approved foster carer for 28 days or more. Private fostering can place a child in a vulnerable position as the carer may not provide the child with adequate protection and does not have the authority to provide consent as the parent maintains legal responsibility.

Settings have a duty to notify SPA if they are aware of a private fostering arrangement so that measures can be put in place to ensure the arrangement is suitable.

Early help assessment – everyone’s business

Kingston and Richmond Safeguarding Children Partnership launched the Early Help Strategy in November 2020. Resilience network meetings have been introduced in age groups: 0 to 5, 5 to 11 and 11 to 17. All agencies can attend should they have any low level concerns about a child or family.

The early help assessment is an assessment and planning tool that enables professionals to efficiently identify the emerging needs of children and young people at risk of poor outcomes in a timely and coordinated way. It reduces duplication of assessment and improves involvement between agencies, facilitating coordinated multi-agency support.

What is the Prevent (preventing violent extremism) duty?

All schools and childcare providers must have due regard to the need to prevent people being drawn into terrorism. The Prevent duty defines terminology relating to terrorism as the following.

Radicalisation: the process by which a person comes to support terrorism and forms of extremism leading to terrorism.

Extremism: vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

‘In order for schools and childcare providers to fulfil the Prevent duty, it is essential for staff to identify children who may be vulnerable to radicalisation, and know what to do when they are identified’. The Prevent duty June 2015 p5

Childcare and early years providers are expected to demonstrate activity in the following areas:

- assessing the risk of children being drawn into terrorism
- protecting children and young people from being drawn into terrorism by having robust safeguarding policies
- ensuring that safeguarding arrangements take into account the policies and procedures of the Kingston and Richmond Safeguarding Children Partnership (KRSCP)
- making sure staff have training that gives them the knowledge and confidence to identify children at risk of being drawn into terrorism, and to challenge extremist ideas which can be used to legitimise terrorism
- expected to ensure children are safe from terrorist and extremist material on the internet

How to implement the Prevent duty

- Ensure that the Prevent duty guidance and values are included in your policies and procedures including your safeguarding policy
- Ensure that all staff are aware and understand these values
- Ensure designated safeguarding leads have attended Prevent awareness training and cascaded to all staff
- Build up children’s resilience to radicalisation by promoting fundamental British values
- Ensure that any resources are age appropriate for the children and that staff have the knowledge and confidence to use the resources effectively
- Ensure that staff understand the risks so that they can respond in an appropriate and proportionate way
- Be aware of the online risk of radicalisation through the use of social media and the internet
- Ensure staff are alert to any changes in children’s behaviour which could indicate that they may be in need of help or protection (children at risk may display different signs or hide their views)
- Ensure that staff build up an effective engagement with parents, carers and families
- Assist and advise families who raise concerns and signpost them to the right support
- Work in partnership with the SPA and KRSCP for guidance and support

Promoting British values

British values are a set of four values introduced to keep children safe and promote their welfare:

- democracy
- rule of law
- individual liberty
- mutual respect and tolerance for those with different faiths and beliefs

The Early Years Foundation Stage (EYFS) 2021 places a clear duty on providers to keep children safe and promote their welfare. Personal, social and emotional development (PSED) supports in promoting British values, enhancing children's knowledge and understanding of others and ensuring children learn right from wrong, how to mix and share with other children, know about similarities and differences between themselves and others, and challenge negative attitudes and stereotypes.

Practitioners should provide a range of experiences and resources for children to reflect on inclusivity, tolerance, respect and appreciation of each other and within the wider community, considering different faiths, cultures, traditions and views. It is important to promote positive relationships with parents and share ideas for use at home, encouraging input into the setting.

Single Point of Access (SPA)

Kingston and Richmond SPA acts as a central hub and front door for Children Services. Professionals and members of the public who have concerns around children and families refer in to SPA where information is collated and decisions are made within 24 hours. Cases may be considered through the multi-agency safeguarding hub (MASH) process. Police officers, health professionals, CAMHS clinicians and early help and education consultants are all part of the SPA team.

Professionals should use the online SPA referral form to make a referral.

SPA offers phone consultations to professionals and will provide advice and support in managing concerns. If the concerns are of safeguarding nature or the family are in need, SPA social workers will advise that a referral is made to ensure all the information is reviewed and safe decisions are made.

The outcome of making a referral to SPA can be:

- advice and signposting to universal services
- referral to Tier 2 dedicated Early Help teams or other early help services
- referral to Tier 3 statutory safeguarding team such as Referral and Assessment

Every referrer will receive feedback on the outcome of their referral within 72 hours, please contact the SPA if this is not received.

When seeking advice or reporting concerns, be sure that you clearly understand and keep a record of any actions you are told to take, along with related timescales and actions taken. There is a safeguarding incident recording form (page 31-33) to support you in recording any incidents, who you spoke to and actions taken. The safeguarding record chronology form (page 34) enables you to have an overview of the incident.

Other local authorities will have their own team and procedures. Settings should contact the local authority in which the child or family live.

Local authority designated officer (LADO)

The local authority designated officer (LADO) works within children's services to help safeguard children in accordance with the statutory guidance, Working Together to Safeguard Children 2018. The LADO should be informed, through SPA, of all cases where it is alleged that a person who works with children has:

- behaved in a way that has harmed, or may have harmed, a child
- possibly committed a criminal offence against children, 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

Once an allegation has been made, the LADO's role is to capture and co-ordinate the sharing of all the information relating to the case with the officers and agencies that need to be informed.

The LADO will be involved from the initial phase, providing advice and guidance to the setting, employer or voluntary organisation, and monitoring the progress of the case through to its conclusion. LADO meetings are held where allegations are such that they may require a multi-agency response and involve both children's services and the police alongside the employer.

If an allegation does not require police or children's social care involvement the LADO will support the organisation to investigate, following their own internal procedures and can advise regarding disciplinary, training and policy matters.

A LADO information leaflet is available on the KRSCP web pages. LADO procedures and information on the team can also be found on AfC community info pages, link at the end of the booklet.

Child protection: responsibilities of the childcare provider

Early years and childcare providers have a duty under Section 40 of the Childcare Act 2006 to comply with the Statutory Framework for the Early Years Foundation Stage (EYFS) 2021.

- Providers must be alert to any issues for concern in the child's life at home or elsewhere.
- A practitioner must be designated to take lead responsibility for safeguarding children in every setting. Childminders must take the lead responsibility themselves.
- Training, made available by the provider, must enable staff to identify signs of possible abuse and neglect at the earliest opportunity and to respond in a timely and appropriate way.
- Providers must be aware of the government's statutory guidance 'Working Together to Safeguard Children' 2018 and the 'Prevent duty guidance for England and Wales', 2015.
- All schools are required to have regard to the government's statutory guidance 'keeping children safe in education' Sept 21, and other childcare providers may also find it helpful to refer to this guidance.
- Providers must ensure they keep accurate attendance records and are aware of poor attendance which may be a cause for concern.
- Providers must only release children into the care of individuals who have been notified to the provider by the parent, and must ensure that children do not leave the premises unsupervised. Providers must take all reasonable steps to prevent unauthorised persons entering the premises, and have an agreed procedure for checking the identity of visitors.
- If providers have concerns about children's safety or welfare, they must notify agencies with statutory responsibilities without delay. This means Single Point of Access (SPA) and, in emergencies, the police.
- Providers must inform Ofsted or their childminder agency of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere) and actions taken within 14 working days.
- Providers must have and implement a policy, and procedures to safeguard children. These must include an explanation of the action to be taken when there are safeguarding concerns about a child and in the event of an allegation being made against a member of staff, and cover the use of mobile phones and cameras in the setting.
- Providers should ensure that all safeguarding policies are reviewed annually.
- Providers have a duty to make a referral to the Disclosure and Barring Service where a member of staff is dismissed (or would have been, had the person not left the setting first) because they have harmed a child or put a child at risk of harm (Safeguarding Vulnerable Groups Act 2006).

Additional responsibilities

- Adults understand the risks associated with using technology, including social media, of bullying, grooming, exploiting, radicalising or abusing children or learners. They have well-developed strategies in place to keep children and learners safe and to support them to develop their own understanding of these risks and in learning how to keep themselves and others safe. Leaders oversee the safe use of technology when children and learners are in their care and take action immediately if they are concerned about bullying or children's wellbeing. (Inspecting safeguarding in early years, education and skills settings, updated 24 August 2021).
- Providers should develop an e-safety policy and clear rules regarding the use of the internet, social media, and any other modern technology tools within and outside the workplace.
- Providers should coordinate the early identification of vulnerable children, with the involvement of parents and carers and actively participate in the early help assessment (EHA) process.
- Adults recognise that children and young people are capable of abusing their peers and this risk is covered adequately in the child protection or safeguarding policy and staff are confident about what to do if a child reports that they have been sexually abused by another child.
- In cases of peer-on-peer abuse, staff should consider what support might be needed for the perpetrators as well as the victims.
- The setting takes effective action to prevent and tackle discriminatory and derogatory language – this includes language that is derogatory about disabled people and homophobic, sexist and racist language.

Roles and responsibilities of the designated safeguarding lead

All early years settings must nominate a senior member of staff as the designated safeguarding lead. Urgent concerns must be reported immediately even if the designated safeguarding lead is not available. It is good practice to have a deputy safeguarding lead.

The designated safeguarding lead will:

- refer suspected abuse or neglect of children and young people to SPA
- report allegations made against members of staff to the local authority designated officer through SPA (this is known as the duty to refer)
- develop and update child protection and other safeguarding policies ensuring staff are made aware of their responsibilities and families are familiar with how to raise a concern
- ensure that confidential records are kept of any concerns about a child or young person and of any conversation or referrals to statutory agencies
- provide support, supervision and advice for any staff member, volunteer or student with a safeguarding or child protection concern

- provide safeguarding and child protection induction for new staff, students and volunteers
- have an understanding of the Kingston and Richmond Safeguarding Children Partnership procedures
- ensure their own safeguarding training is up-to-date and follow the local recommended training requirements as a minimum
- ensure all safeguarding and child protection training is cascaded to the whole staff team, including new staff, bank or agency staff or volunteers
- ensure all staff have appropriate child protection and safeguarding training and maintain training records
- cooperate with any request for information from the local authority such as child protection training returns and self-evaluative forms for safeguarding and child protection compliance with section 11 of the Children Act 2004

Organisational responsibilities

Organisations and agencies working with children and families should have clear policies for dealing with allegations against people who work with children. All practitioners working in voluntary, charity, social enterprise, faith-based organisations and private sectors who are working with children and their families are subject to the same safeguarding responsibilities, whether paid or a volunteer. Charity trustees are responsible for ensuring that those benefiting from, or working with, their charity, are not harmed in any way through contact with it. Charities also have the responsibility of reporting any serious incident to the Charity Commission if they have charitable status.

‘Working together to safeguard children 2018’

Information sharing

The December 2020 update to ‘Working together to safeguard children 2018’ includes additional guidance covering information sharing. The guidance clarifies that the Data Protection Act 2018 and General Data Protection Regulations do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

Safer recruitment

Policy statement

Providers should have a written recruitment and selection policy statement and procedures that detail all aspects of the process and links to the organisation's child protection and safeguarding policy and procedures.

Planning

Ensure enough time is given to each stage of the process. References should be submitted and considered prior to interview.

Advertisement

This should include reference to the organisation's commitment to safeguarding and make clear that appropriate vetting checks will be carried out.

Information to applicants

Providers should demonstrate their commitment to safeguarding. Statements about the safeguarding responsibilities of the post should be included in the job description and person specification. The information should stress that the qualifications and identity of the shortlisted candidates will be thoroughly checked and that an enhanced Disclosure and Barring Service (DBS) check will be carried out prior to appointment.

Application form

Standardised application forms should be used. It is not good practice to accept a CV (Curriculum Vitae) in place of an application form. An application form will ask for all the information needed and will provide a common set of information on all applicants to support an equitable shortlisting and selection process. Two referees should be asked for as a minimum, one of which should be the applicant's current or most recent employer. Guidance should be provided with the application form which includes an explanation that the post is exempt from the Rehabilitation of Offenders Act 1974 and that, therefore, all convictions, cautions, court orders, reprimands and warnings, including those regarded as spent must be declared. Forms should have a signed declaration that all information provided is true and that providing false information is an offence.

Job description and person specification

The job description should clearly set out the main duties and responsibilities of the post. Also, include a statement on the post holder's responsibility for promoting and safeguarding the welfare of children. The person specification should detail the qualifications and experience needed for the role and the competencies and qualities that the applicant should be able to demonstrate.

Scrutinising applications and shortlisting

At least two people should be involved in the scrutiny of applications and the shortlisting of candidates in order to ensure objectivity and avoid subjective judgements. Consider reasons for gaps in employment or repeated changes of employment without any clear career or salary progression or significant changes in role or status.

Taking up references

Wherever possible, obtain references before interview. References should always be sought directly from the referee. Referees should always be asked to comment on the candidate's suitability for the post with explicit reference to the job description and person specification, and in particular, their suitability to work with children.

Considering references

Active consideration should be given to references. It is best practice to contact at least one referee to verify that the reference has been provided by them.

Other checks before or at the interview stage

It is good practice to check the candidate's specific qualifications or experience relevant to working with children before interview. Candidates should be asked to provide original qualification certificates. The identity of the candidate will need to be checked and where a DBS disclosure is applicable to the post, all candidates should be required to bring documentary evidence of their identity that will satisfy DBS requirements. For candidates from overseas, the same processes and checks should apply, but more time may be needed to obtain references and for checking qualifications, possible criminal record etc.

Interviews

Interviews should be planned and the interviewers should be well briefed and appropriately trained in recruitment practice, wherever possible. It is recommended that interviews are conducted by a minimum of two people. Safeguarding interview questions should aim to draw out candidates' actual experience of working with children and young people, rather than asking hypothetical questions. The interview should assess the merits of each candidate against the job requirements and explore their suitability to work with children. All candidates should be assessed equally against the criteria contained in the person specification.

Offer of appointment

An offer of appointment to the successful candidate should be conditional on all pre-employment checks having been satisfactorily completed. Where concerning information emerges from any of these checks, such as:

- the DBS disclosure or barring checks show that they are barred from working with children
- the candidate has provided false information
- there are serious concerns about the candidate's suitability to work with children
- an appointment should not be made and these should be acted upon by seeking advice. Where false information is provided, this may need to be reported to the police.

Induction and supervision of newly appointed staff

Newly appointed staff must not start to work with children until all appropriate checks and vetting procedures have been satisfactorily completed. All newly appointed staff should be provided with an induction programme appropriate to the roles and responsibilities of the post.

An induction programme should include thorough safeguarding information and clear expectations of behaviour and professional boundaries and staff should sign a code of conduct.

Monitoring and review

Monitoring and review of both the safer recruitment processes and induction programmes will allow for future recruitment and selection processes to be better informed and practice improved.

Ongoing supervision of all staff which includes safeguarding and child protection, including asking staff regularly to declare if there has been any change to their health or disqualification status, including disclosing any convictions, cautions, court orders, reprimands and warnings that may affect their suitability to work with children. In addition, staff should declare if they work or volunteer at any other setting or organisation involving children or young people, and any issues outside of work that may impact on the setting. All relevant information should feed into the individual's' continuous development plan.

This information is adapted from the Richmond Local Safeguarding Children Board and Kingston Local Safeguarding Children Board Safer Recruitment: Standards and guidance for organisations who work with children and young people, January 2015. The full document is available on the Kingston and Richmond LSCB web pages.

Staff code of conduct

Settings should have a staff code of conduct so staff understand their responsibilities to safeguard and promote the welfare of children. The code of conduct should include the settings policy on the use of mobile phones, taking photographs, dress and appearance,

being fit for work, social conduct outside of the setting, smoking and vaping, intimate and personal care, babysitting and social media.

Disqualification

Any childcare setting or school must ensure that they are not knowingly employing a person who is disqualified in connection with relevant childcare provision under Disqualification under the Childcare Act 2006.

A change in the law in September 2018 meant that 'disqualification by association' will only apply on 'premises which are used wholly or mainly as a private dwelling' in section 98 of the act, or under a domestic premises registration, e.g., childminding and childcare on domestic premises. Settings must not ask staff about the cautions or convictions of someone living or working in their household.

It should be noted that other statutory guidance may be relevant where the third party lives on the school premises, such as in boarding schools.

For early years providers: The EYFS 2021 states 'A provider must notify Ofsted or the agency with which the childminder 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. If a provider or childcare worker is disqualified they may, in some circumstances, be able to obtain a 'waiver' from Ofsted.'

A provider must inform Ofsted or the childminder agency with which they are registered as soon as reasonably practicable, but at the latest within 14 days of the date the provider became aware of any relevant information.

For schools: In February 2015, the government issued guidance which clarifies the position with regard to schools. This is 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 schools. Schools and local authorities must have regard to it when carrying out their duties to safeguard and promote the welfare of children.

What to do if you have concerns about a child

You may become concerned or worried about a child's care, behaviour or an injury to a child, but the child may not have said anything to suggest that they have been abused. Every case is individual and decisions to investigate or follow up a concern should be made by SPA or a social worker not by the setting manager or designated safeguarding and child protection lead.

SPA can be contacted for a consultation to give initial advice and guidance. Refer to the safeguarding processes flowchart.

Providers should:

- in an emergency take action to obtain urgent medical attention for the child, if required, call 999
- stop other activity, responding to a suspicion of abuse takes immediate priority
- report any concerns you have to the designated safeguarding and child protection lead or deputy immediately, or most senior person if not available
- refer to SPA directly if you feel the matter has not been dealt with satisfactorily, or in an appropriate or timely fashion within the setting
- childminders would share concerns directly with SPA
- refer to the safeguarding processes flowchart
- report concerns to the SPA team or out of hours Emergency Duty Team if there is any reason to believe that a child is subject to physical, emotional, sexual abuse or neglect
- record who you spoke to, any advice given and actions taken
- use referral forms available online
- ask the parent or carer about what has been observed, so long as it does not put the child at increased risk (see Seeking consent, p22)
- record if it is decided not to discuss concerns with the child's parents and the reason why the judgement was made
- record exactly what has been heard or seen, what has been said, and was done
- use a body map to record injuries, but do not take photographs
- keep the notes taken at the time, without amendments, omissions or addition, even though subsequent reports may be written (date and sign each page)
- operate on a need-to-know basis only, do not discuss the issue with colleagues, friends or family

What to do if a child discloses abuse

It often takes a great deal of courage for a child to talk to anyone about their abuse. Children learn to be very good at covering up abuse and give plausible explanations for what happened. Children may have to betray a person who is close to them, who they may love, or who has power over them. A child who discloses may risk a great deal by hoping that you will believe what they say.

Providers should:

- ensure the immediate safety of the child
- stop other activity and focus on what the child is saying, responding to a suspicion of abuse takes immediate priority
- seek any necessary medical treatment without delay
- stay calm and do not express shock or disbelief

- listen carefully to what is being said, allow the child to continue at their own pace
- ensure questions are absolutely minimal and completely open, for example 'How did that happen?'
- repeat back to the child (as accurately as possible) what was heard, to check understanding of what the child has said
- tell the child they are not to blame, it's not their fault and they have done the right thing in telling someone
- not promise to keep secrets - find an appropriate early opportunity to explain it will be necessary to tell someone else in order to help them and keep them safe
- ask the child if they have told anyone else
- tell the child what will happen next and with whom the information will be shared
- inform the designated safeguarding lead or senior manager as soon as possible
- ask the parent or carer about what has been disclosed, so long as it does not put the child at increased risk (see Seeking consent)
- record in writing what was said, as soon as possible, using the child's own words
- note the date, time and names mentioned, to whom the information was given and ensure that all records are signed and dated
- note anything the parent or carer says
- follow the setting's child protection procedures and contact SPA

Seeking consent

While settings should seek to discuss any concerns with the child's parents or carers and where possible, seek their agreement to make a referral to SPA, there are cases where concerns must not be discussed with them before making a referral.

Concerns must not be discussed with parents or carers before referral in the following circumstances:

- where discussion would put a child at risk of significant harm
- where discussion would impede a police investigation or social work enquiry
- where sexual abuse is suspected
- where female genital mutilation (FGM) is suspected to have been carried out or planned
- where organised or multiple abuse is suspected
- where factitious illness or induced illness is suspected
- where to contact parents or carers would place the staff member or others at risk

Where it is not possible to contact parents or carers without causing undue delay in making the referral, advice should be sought from SPA.

A decision by any professional not to seek parental permission before making a referral to SPA must be recorded, and the reasons given.

What to do if an allegation of abuse is made against an adult in contact with children

An allegation of child abuse made against a member of staff (within the work environment or outside of work) or other adult in contact with children in the setting may come from a parent, another member of staff or from a child's disclosure. The allegation or concern may relate to a person who has:

- 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

Providers should:

- treat the matter seriously
- be professional and impartial at all times
- remove the adult from the situation (if applicable)
- seek any necessary medical treatment for the child without delay
- make a written record of the information that includes: when the alleged incident took place (time and date), who was present, and what was said to have happened and who else may have been present
- keep an open mind and avoid asking leading questions
- write down exactly what is said, not what you think they have said, record the person's actual words, do not rephrase and avoid interpretation, if you are not sure about a word or phrase clearly state this in your notes
- not attempt to investigate the matter by interviewing any potential child witnesses or the accused person but simply record the facts and information presented to them
- sign and date the written record
- report the matter immediately to the designated safeguarding and child protection lead, or senior manager. Where the designated person is the subject of an allegation, report the matter directly to SPA. Childminders must contact SPA directly
- contact SPA within a maximum of 24 hours for advice and further guidance, who in turn will contact the LADO who will offer advice and guidance
- cooperate fully with the processes of the SPA team and with any police investigations. If the LADO and police decide an allegation requires further investigation a multi-agency strategy meeting will be held to agree on who has responsibility for the actions, their timescales and what records are to be made
- follow their own internal disciplinary procedure depending on the LADO's recommendation
- ensure staff involved, including those who may have been suspended, are treated with respect, kept informed, and supported throughout the investigation

- give the wider team the advice not to speak or discuss the matter with each other, or externally, via social media, remind staff of media and confidentiality policies
- ensure communication with all parties, including parents is clear and on a need to know basis in accordance with the settings policy
- await the outcome of the investigation before taking further action
- ensure, if it appears from the results of the investigation that the allegations are substantiated, that disciplinary action will follow, taking legal advice where necessary
- make a referral to the Disclosure and Barring Service (DBS) if the allegation is substantiated and the person concerned is dismissed
- inform Ofsted or childminder agency throughout the investigation as soon as is reasonably possible, but at the latest within 14 days of the allegations being made and actions taken. The settings registration may be suspended at any time if it is considered that children are at risk
- share relevant information with all parties (e.g. staff team, parents, owners, governors) after the conclusion of the investigation if applicable

If an adult tenders their resignation this must not prevent an allegation being followed up, a formal conclusion reached and action taken.

Parents or carers of a child involved should be informed of the allegation as soon as possible, providing provision of information and advice at that stage does not impede the enquiry, disciplinary or investigative processes. However, parents or carers may need to be told immediately, for example, if a child requires medical treatment. An information sheet that can be shared with parents showing the process is available on page 37.

Whistle blowing

Whistle blowing is when someone reports suspected wrongdoing at work, including health and safety issues, damage to the environment, a crime, misuse of public funds and where the welfare of children is being negatively affected, and the cover up of any of these.

All settings should have 'clear whistle blowing procedures, which reflect the principles in Sir Robert Francis's 'Freedom to speak up' review and are suitably referenced in staff training and codes of conduct, and a culture that enables issues about safeguarding and promoting the welfare of children to be addressed.'

'Working Together to Safeguard Children, 2018'

Any individual who has reasonable suspicion of staff malpractice or concerns about a child's welfare within a setting should inform the designated safeguarding and child protection person immediately who will follow the settings procedure. If you suspect the designated person may be related to the issue you should contact SPA or Ofsted directly. You are advised to set out the background and history of your concerns, giving names, dates and places, where possible, and the reason why you are particularly concerned about the situation. All reports will be investigated and dealt with in confidence, including staff on a need to know basis.

Individuals should raise any concerns about a child to their own employer in the first instance. However, if there are concerns about how child protection issues are being handled by the setting or by another organisation, such as a concern the setting will cover it up, the complainant is concerned they will be treated unfairly or the concern hasn't been dealt with appropriately, staff can contact the NSPCC whistle blowing helpline. The helpline is staffed by a range of professionals who can give expert advice and the issue will be dealt with in confidence with the individual's anonymity protected if the complaint is taken further. Contact details are at the end of this booklet.

Support for those involved in a child protection issue

Child abuse and neglect is devastating for the child and can also result in distress and anxiety for all those involved. Allegations against staff can also be upsetting for all involved. Settings can support by:

- taking all concerns and anxieties seriously
- listening to staff's worries
- responding sympathetically to requests for time out to deal with distress or anxiety
- ensuring all those involved are kept up to date and informed of proceedings, if applicable, maintaining confidentiality
- offering details of helplines, counselling or other avenues of external support

Record keeping

It is essential that clear and concise records are kept.

- Record the incident and include all relevant details, a sample form is available on page 31-33.
- Start a chronology at the earliest opportunity to ensure all contacts are recorded and logged. A sample form is available on page 34.
- A chronology must list specific and significant incidents, events and actions taken in relation to the child and, where appropriate, their family, with a brief explanation or cross-referenced to where the records can be found.
- All records must be dated and signed to ensure they can be attributed to the person completing them.
- Records must be written as soon as reasonably possible following any incident taking place.
- The incident, event, or observation should be described clearly and concisely, physical marks or injuries should be recorded on a body map where appropriate. A sample body map is available on page 30.
- Records should contain any comments made by the child, adult in their own words.

- Records must make a clear distinction between what is factual information and what are personal comments or thoughts.
- Record any advice given and actions taken.
- In the case of an allegation against a member of staff, a summary should be kept on the member of staff's file and the staff member should be provided with a copy.
- For related criminal or civil proceedings, records may be subject to disclosure.
- Records must be kept for an appropriate length of time.

All records and notes should be kept securely at all times. If records are kept electronically these must also be kept securely and password protected. Access should be restricted to appropriate members of staff.

Core safeguarding training

All early years' staff should have an awareness of safeguarding issues and complete KRSCP Level 1 safeguarding training as a minimum requirement. In addition to this early years staff can also complete level 2 safeguarding training to extend their knowledge and awareness.

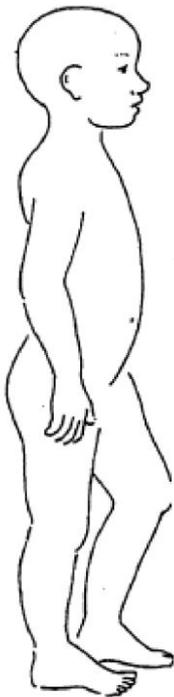
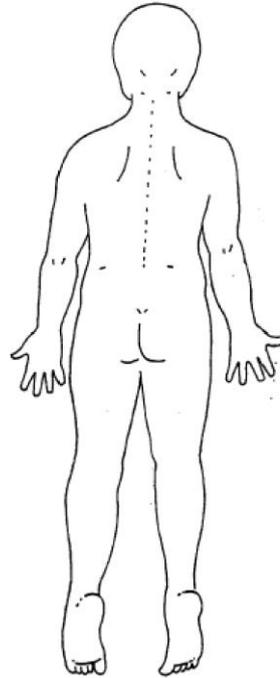
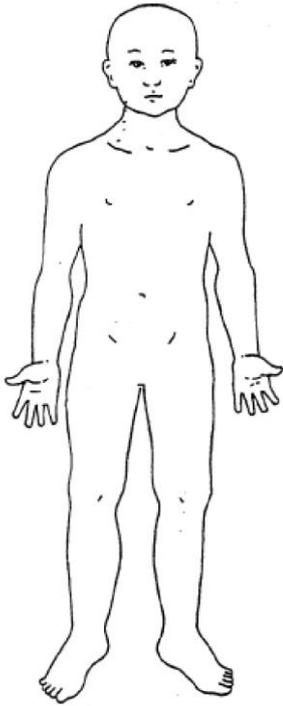
Designated safeguarding leads (DSL) or managers from early years' settings should complete levels 2 and 3 safeguarding training and then be responsible for disseminating and updating staff in their settings. DSLs can also attend the 'training for trainers' events hosted by the KRSCP to support them with the dissemination of safeguarding training.

All proposed childminders should attend the childminding training to gain basic awareness about safeguarding issues. They should also attend KRSCP Level 2 and 3 training to ensure they have an understanding of local trends, issues and policy and procedures. Childminders should keep their safeguarding knowledge current by attending other training opportunities being delivered by the KRSCP.

All staff should attend additional training covering neglect, female genital mutilation (FGM), Prevent, child sexual exploitation (CSE), child sexual abuse (CSA) and domestic abuse.

Body maps

Childs name: _____ Date of birth: _____



Name: _____

Signature: _____ Date _____

Safeguarding incident recording form

Date of incident:		Time of incident:	
Staff name/s			
Name(s) of child or children involved	<p>Name:</p> <p>Date of birth:</p> <p>Name:</p> <p>Date of birth:</p>		
Give details of incident:			
Immediate actions			
When and how were parents informed?	How	Details	
	<ol style="list-style-type: none"> 1. Verbally on the day at normal collection time 2. By phone at the time of incident 3. Confirmation in writing within three days 4. Other 		

If parents were not informed of a referral, please state the reason:

--

Which agencies were informed

Please note referrals regarding children should be made to the local authority safeguarding team where the child or family lives

SPA, Out of Hours Team, Other local authority

<p>Date and Time: Organisation: Name: Contact number: Details of advice given: Date followed up in writing:</p>	
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Police

<p>Date and Time: Organisation: Name: Contact number: Details of advice given: Date followed up in writing:</p>	
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Early Years' Service

<p>Date and Time: Organisation: Name: Contact number: Details of advice given: Date followed up in writing:</p>	
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Ofsted or registering body

<p>Date and Time: Organisation: Name: Contact number: Details of advice given: Date followed up in writing:</p>	
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Other

<p>Date and Time: Organisation: Name: Contact number: Details of advice given: Date followed up in writing:</p>	
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How it was dealt with/ Actions taken? (Please tick all that apply)	1. Internal assessment (eg, reviewed risk assessment, or staff deployment resulting from incident) 2. Investigation by Ofsted or registering body 3. Investigation by other agencies (please give details)
Give dates and details of investigations carried out	
Give details and attach any reports or correspondence that are relevant	NB: any follow up conversations, phone calls, correspondence, emails etc. must include date, time, name of contact and be securely attached to original form.
Action and Outcomes: (Please tick all that apply)	1. Internal actions 2. Actions agreed with Ofsted or registering body 3. No action 4. Actions agreed with other agencies including Early Years and Childcare Team 5. Other action taken by Ofsted or registering body eg, changes to conditions of registration
Please give details:	
Has a copy of this record been shared with parents?	YES/NO If NO, give reason:
Name of recorder: Position: Signature: Date record completed:	
Outcome notified to parents (Within 28 days) Date:	YES

Safeguarding record – Chronology from date of incident

Name of child or adult: _____

Date and time	Name	Comments, records, contacts	Actions required	Date action completed

Safeguarding processes flowchart – Kingston

Practitioner has concerns about child's welfare or an allegation against an adult. Practitioner ensures they have discussed these concerns with parent or carer unless they are concerned the child is in immediate danger.
Call 999 if you think a child is in immediate danger

Early years providers: Practitioner shares concerns with manager and/or the designated safeguarding lead as appropriate
Children's centres: Practitioner shares concerns with designated safeguarding lead for the children's centre. Report to the Single Point of Access (SPA) or allocated social worker where known.
Childminders: may refer to SPA directly
SPA offer phone consultation to professionals and will provide advice and support in managing concerns
Any individual with concerns may also contact SPA directly

Still has concerns

No longer has concerns

Designated lead or practitioner contacts
 Single Point of Access
Kingston SPA: 020 8547 5008
 Out of hours: 020 8770 5000
For children living in the Kingston borough

An online SPA referral can be made at:
<https://www.kingston.gov.uk/children-young-people-families>

Follow any advice given by SPA or LADO

Use the safeguarding incident recording form to record information and support discussions

Early Years providers:

Contact Ofsted on 0300 123 1231 or your childminder agency to report a significant event within 14 days. Inform your Inclusion & Improvement Advisor (I&IA).
Children's centres: record activity at centre level and monitor.

Ensure accurate records are collated, maintained and that they are securely stored.

It is your duty to protect any information you send electronically.

Ensure children's details are emailed securely and do not breach the Information Commissioners Office guidance. Confidentiality must be maintained adopting a 'need to know' approach.

No further child protection action.

Early Years providers: may need to act to ensure services are provided and discuss this with their Inclusion & Improvement Advisor (I&I) for further support.

Children's centres: Continue to engage with the family through children's centre services. Bring to children's centre multi agency meeting and locality meeting.

SPA acknowledges receipt of referral and decides on next course of action within one working day.

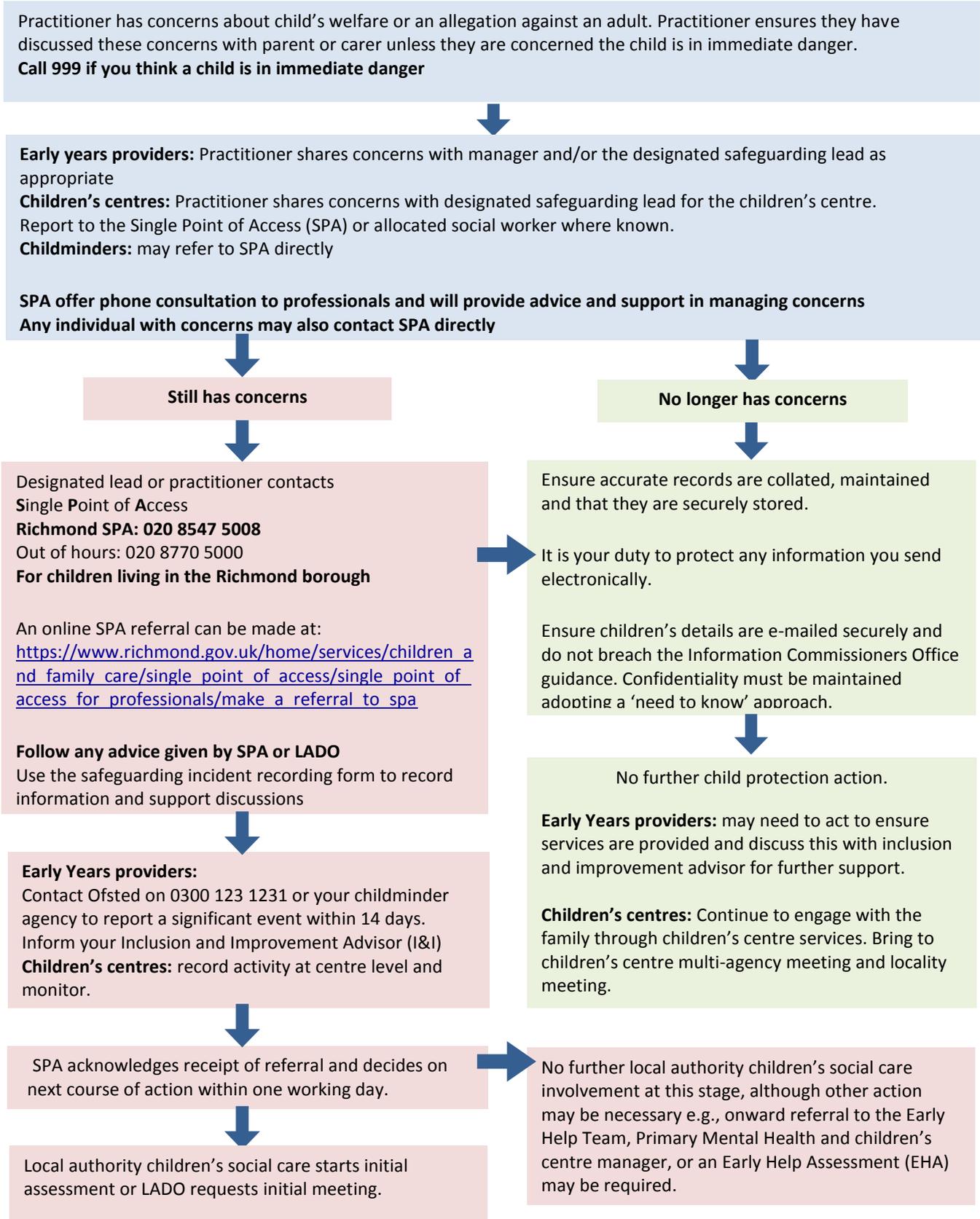
Local Authority Children's Social Care starts initial assessment or LADO requests initial meeting.

No further local authority children's social care involvement at this stage, although other action may be necessary eg, onward referral to the Early Help Team, Primary Mental Health and children's centre manager, or an Early Help Assessment (EHA) may be required.

The Early Years' Service is available for advice and support at **any** point during this process.

This is a reference document that you should adapt for your own provision (updated Sept 20)

Safeguarding processes flowchart – Richmond



The Early Years’ Service is available for advice and support at any point during this process.
 This is a reference document that you should adapt for your own provision (updated Sept 20)

Guide for parents – allegations against staff

If the setting is ever in the position where an allegation of abuse has been made against an adult working in the setting where a child may potentially be at risk, we will follow our safeguarding procedures.

We will:

- treat the matter seriously, being professional and impartial at all times
- remove the adult from the situation (if applicable)
- seek any necessary medical treatment for the child without delay, parents will be informed immediately if this is the case
- report the matter immediately to the designated safeguarding person, or senior manager. Where the designated person is the subject of an allegation, seek advice from the Single Point of Access (SPA) directly. Childminders must contact SPA directly
- not investigate the allegation ourselves, this is not our responsibility
- follow the advice and guidance of SPA and the local authority designated officer (LADO) whose role it is to co-ordinate the case
- keep accurate records
- deal with all matters sensitively, however communication with parents will be on a need to know basis
- inform you if your child is directly involved as soon as possible, providing provision of information and advice at that stage does not impede the enquiry, disciplinary or investigative processes
- cooperate fully with SPA and with any police investigations. If the LADO and police decide an allegation requires further investigation a multi-agency strategy meeting will be held
- maintain confidentiality and staff will not be able to discuss the situation
- await the outcome of the investigation before taking further action
- ensure, if it appears from the results of the investigation that the allegations are substantiated, that disciplinary action will follow, taking legal advice where necessary
- make a referral to the Disclosure and Barring Service (DBS) if the allegation is substantiated and the person concerned is dismissed
- inform Ofsted throughout, Ofsted may suspend our registration at any time if it considers children are at risk
- share relevant information with all parties (e.g. staff team, parents, owners, governors) after the conclusion of the investigation if applicable

If an adult tenders their resignation this will not prevent an allegation being followed up, a formal conclusion reached and action taken.

Contact details

The Royal Borough of Kingston upon Thames

Single Point of Access (SPA)

T: **020 8547 5008** (hours Monday to Thursday, 8.00am to 5.15pm and Friday, 8.00am to 5.00pm)

[Online referral:](#)

Emergency out of hours contact: 020 8770 5000

For child protection concerns in an emergency outside of office hours all day Saturday, Sundays and bank holidays

London Borough of Richmond upon Thames

Single Point of Access (SPA)

T: **020 8547 5008** (hours Monday-Thursday 8am to 5.15pm and Friday 8am to 5pm)

[Online referral:](#)

Emergency out of hours contact: 020 8770 5000

For child protection concerns in an emergency outside of office hours, all day Saturday, Sundays and bank holidays

Kingston and Richmond

Kingston and Richmond Safeguarding Children Partnership (KRSCP)

T: **020 8831 6323**

[Website](#)

Referrals should be made to the borough where the child or family is living

Call 999 if you think a child or young person is in immediate danger

Legislation, guidance and sources of information

- Children Act 1989, 2004 and Childcare Act 2006
- Children and Families Act 2014
- Convention on the Rights of the Child, UNICEF 1989
- Data Protection Act 1998
- Freedom of Information Act 2000
- The Human Rights Act 2000
- Equality Act 2010
- London Child Protection Procedures 2014 and Practice Guidance
- Safeguarding Vulnerable Groups Act 2006
- Statutory framework for the Early Years Foundation Stage 2021

AfC Info: Community information	Community information contains information on safeguarding, childcare, family support and events for childcare providers, parents, carers and the wider community. Website
AfC Info: Local authority designated officer (LADO)	The Local Authority Designated Officer (LADO) is responsible for coordinating the response to concerns that an adult who works with children may have caused them or could cause them harm.
AfC Info: SEND Local Offer	Information on local services and support available for families including children and young people aged 0 to 25 years with special educational needs or disabilities. Website
Anti-bullying Alliance	A coalition of organisations and individuals, working together to stop bullying and create safer environments for children and young people. Provides a wide range of information and resources. Website
Brook	Brook provides wellbeing and sexual health support for young people. They also provide training for professionals for example, on using the traffic light tool guidance on safe, potentially concerning and unsafe sexual behaviours from 0 to 17 years.
Child Exploitation Online Protection Unit (CEOP)	The National Crime Agency (NCA) CEOP works with child protection partners across the UK and overseas to identify the main threats to children and coordinates activity against these threats. They protect children from harm online and offline, directly through NCA led operations and in partnership with local and international agencies.
ChildLine	ChildLine is a private and confidential service for children and young people up to the age of 19. Children can contact a ChildLine counsellor about anything. ChildLine provides information and posters.
Direct.Gov website	This website provides you with policies, announcements, publications, statistics and consultations and information relating to legislation.
Disclosure and Barring Service	The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

Disqualification under the Childcare Act 2006	Guidance for schools , updated August 2018
Information sharing: advice for practitioners providing safeguarding services July 2018	Non-statutory guidance to support practitioners in the decisions they take when sharing information to reduce the risk of harm to children and young people.
Keeping children safe in education September 2021	Statutory guidance on what schools and colleges should do and sets out legal duties with which they must comply when carrying out their duties to safeguard and promote the welfare of children.
Kingston and Richmond Safeguarding Children Partnership (KRSCP)	The Kingston and Richmond Safeguarding Children Partnership (KRSCP) is a statutory body that ensures everyone is working together for the safety and wellbeing of children and young people. They provide a variety of training opportunities, policies and procedures and useful resources, including guidance on the role of the Local Authority Designated Officer (LADO) and safer recruitment. The KRSCP undertakes learning and improvement case reviews.
KRSCP Child Neglect Toolkit	The child neglect toolkit has been developed to assist all practitioners to analyse and assess situations of possible neglect
KRSCP Protocol for bruising in pre-mobile babies and non-mobile children with disabilities	An agreed multi-agency protocol to provide professionals with a knowledge base and action strategy for the assessment, management and referral of pre-mobile babies who present with bruising or otherwise suspicious marks
Mandatory reporting of female genital mutilation (FGM) Home Office	The duty which came into force in October 2015 via the Serious Crime Act 2015 requires regulated health and social care professionals and teachers to report known cases of FGM in under-18s.
Multi-agency statutory guidance on female genital mutilation. July 20	This guidance provides detailed information and definitions of FGM. It includes advice and support in identifying when a girl or young woman may be at risk of or who has had FGM and mandatory reporting duties.
NSPCC	The National Society for the Prevention of Cruelty to Children (NSPCC) is a charity campaigning and working in child protection. They help children who have been abused to rebuild their lives, protect children at risk, and find the best ways of preventing child abuse. Leaflets and posters available to download. In addition they provide advice on safer recruitment
NSPCC Whistleblowing Helpline	The advice line was commissioned by the Home Office and is available to teaching or nursery staff concerned about anything from potentially harmful practices to instances of abuse. Telephone: 0800 0280285 Monday to Friday, 8am-8pm
Ofsted	Ofsted inspect childcare, publish reports and regulate a range of children's services
Ofsted: Early years inspection handbook for Ofsted registered provision Sept 21	This handbook describes the main activities inspectors undertake when they conduct inspections of early years providers in England registered under sections 49 and 50 of the Childcare Act 2006. It also sets out the judgements that inspectors will make and on which they will report.
Ofsted: Inspecting Safeguarding in Early Years, education and Skills Settings Updated 24 August 2021	This Ofsted guidance sets out the key points inspectors need to consider when inspecting safeguarding in early years, education and skills settings

Prevent Duty Guidance Updated 1 April 2021	The Counter-Terrorism and Security Act 2015 contains a duty on specified authorities to have due regard to the need to prevent people from being drawn into terrorism. The guidance includes a section for schools and registered childcare providers: Elearning module : Prevent strategy training is also available through AFC Workforce Development
Serious Violence Strategy	The Serious Violence strategy is centred on tackling county lines and misuse of drugs, early intervention and prevention.
Stop it Now!	Stop it Now is a child sexual abuse prevention campaign. It offers information, education and training and runs a confidential helpline: 0808 1000 900.
The London Safeguarding Children Partnership	Provides strategic advice and support to London's 32 Local Safeguarding Children Partnerships. The London Safeguarding Partnership is not responsible for individual child protection matters, but provides a range of useful information and resources.
UNICEF	UNICEF is the world's leading organisation working for children and child rights. They focus their work on the five big dangers children face in the world today: violence, exploitation and abuse, disease, hunger and malnutrition, war and conflict and disaster.
What to do if you're worried a child is being abused: Advice for practitioners March 2015	This advice booklet has been produced to help practitioners identify child abuse and neglect and take appropriate action in response. It complements the 'Working together to safeguard children' (2018) statutory guidance.
Working Together to Safeguard Children 2018 (updated Dec 20)	A guide to inter-agency working to safeguard and promote the welfare of children. This guidance covers: the legislative requirements and expectations on individual services to safeguard and promote the welfare of children; and a clear framework for local safeguarding partners to monitor the effectiveness of local services.