2024/25 Child Protection and Safeguarding Policy for …………………………… Childminder

Childminder Logo

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| This policy is a framework and should be seen as a starting point for development of your own policy to fit your setting’s individual context.  Prior to being adopted, each section should be reviewed to determine if it is appropriate for your setting. If more or less information is required, it is the responsibility of you to make those amendments.  This document is based on guidance from the  [Keeping Children Safe in Education (KCSIE)](https://www.gov.uk/government/publications/keeping-children-safe-in-education--2)  and [Working Together to Safeguard Children](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2) documents.  Maintained Nursery Schools and Reception classes must follow the statutory guidance in KCSIE. Whilst Early Years providers do not have a statutory duty to follow the guidance in KCSIE the local authority has adopted the guidance within that document for the purpose of updating this policy. If the Government re-issues this guidance during the 202/25 period, please ensure that your policy is compliant with any changes. You can keep up to date by subscribing to the Early Years enewsletter and or OSCB’s Twitter (X) @OSCB6 to see OSCB latest newsletters and bulletins (or check the OSCB website periodically).  KCSIE highlights the importance of the frontline staff in developing the setting’s policy. As part of the review process, we strongly recommend that those who are working with your children have a say in the development of your policy and that this can be evidenced. |

**Published September 2024 to be reviewed by September 2025**

The policy must be reviewed and updated at least annuallyand/or following any updates to national and local guidance and procedure

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| --- | --- | --- |
| Key Personnel | Childminder’s name | Contact details |
| Designated Safeguarding Lead (DSL) |  |  |
| Education Safeguarding Advisory Team / Local Authority Designated Officers  (LADOs) | **LADO Team**  Jo Lloyd  Sandra Barratt  Amie Pilcher  Sophie Kendall  (ESAT)  Becky Langstone (ESAT) | 01865 810603  [Lado.safeguardingchildren@oxfordshire.gov.uk](mailto:Lado.safeguardingchildren@oxfordshire.gov.uk) |
| Linked  Locality Community Support Service (LCSS) worker |  |  |
| Multi Agency Safeguarding hub (MASH) |  | 0345 050 7666  (office hours (8.30am – 5pm, Monday to Thursday, 8.30am – 4pm, Friday) |
| Out of hours Emergency Duty Team (EDT) |  | 0800 833 408 |
| Police |  | 101 or in  emergencies 999 |

I (Name of Childminder) …………………………. recognise my responsibility for safeguarding and child protection.

**Introduction**

It is essential that everybody working in this Early Years Setting understands their safeguarding responsibilities. Everyone who comes into contact with children and families has a role to play in ensuring children and young people are safe from abuse, neglect, exploitation and harm.

I am committed to safeguarding children and aim to create a culture of openness and vigilance. I, and my staff will make sure that any decisions made are in the best interests of the child.

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

[Working Together to Safeguard Children](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2)

[Keeping children safe in education - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/keeping-children-safe-in-education--2)

[The Early Years Foundation Stage Statutory Framework](https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2)

[What to do if you are Worried a Child is being abused](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

[Oxfordshire Safeguarding Children’s Board Safeguarding Policies and Procedures](https://oscb.trixonline.co.uk/)

[What to do if you think a child is at risk of abuse or neglect - Oxfordshire Safeguarding Children Board (oscb.org.uk)](https://www.oscb.org.uk/concerned-about-a-child/)

[Promoting the education of children with a social worker (publishing.service.gov.uk)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1086931/Promoting_the_education_of_children_with_a_social_worker_-_virtual_school_head_role_extension_2022.pdf)

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

I take seriously my responsibility under Section 11 of the Children Act and duties under “Working Together to safeguard Children”, the Human Rights Act 1998, and the Equality Act 2010, to safeguard and promote the welfare of children; to work together with other agencies to ensure adequate arrangements exist within my setting to identify and support those children who are suffering harm or are likely to suffer harm.

I recognise that I (and my assistants) have a full and active part to play in protecting children from harm, and that the child’s welfare is my paramount concern.

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

This policy applies to myself, my assistants and volunteers working in my setting.

All staff will sign to confirm they have read and understood this policy.

**Policy Statement**

I recognise my moral and statutory responsibility to safeguard and promote the welfare of all children.

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

I maintain an attitude of ‘it could happen here’ where safeguarding is concerned.

I recognise that children may not feel ready or know how to tell someone they are being abused.

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

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

**Definitions**

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

* providing help and support to meet the needs of children as soon as

problems emerge.

* protecting children from maltreatment, whether that is within or outside the

home, including online.

* preventing impairment of children's mental and physical health or

development.

* ensuring that children grow up in circumstances consistent with the provision

of safe and effective care

* promoting the upbringing of children with their birth parents, or otherwise

their family network through a kinship care arrangement, whenever possible

and where this is in the best interests of the child.

* taking action to enable all children to have the best outcomes in line with the

outcomes set out in the Children's Social Care National Framework.

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

**Early Help** is support for children of all ages that improves a family’s resilience and outcomes or reduces the chance of a problem getting worse. Providing early help is more effective in promoting the welfare of children rather than reacting later.

The term **Staff**applies to myself and all those working for or on behalf of my setting, full time or part time, in either a paid or voluntary capacity.

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

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

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

**DSL** refers to Designated Safeguarding Lead (the Childminder)

**Safeguarding Partners -** local safeguarding arrangements are led by three statutory safeguarding partners:

* The Local Authority
* Integrated Care Systems (Previously the clinical commissioning group)
* The Chief Police Officer

In Oxfordshire, the safeguarding partners have made arrangements to work with other relevant partners through the OSCB

**OSCB** refers to Oxfordshire Safeguarding Children Board

**LCSS** refers to Locality Community Support Service

**MASH** refers to Multi Agency Safeguarding Hub

**LADO** refers to the Designated Officer for Allegations, also referred to as Local Authority Designated Officer

**EYFS** refers to the Statutory Framework for the Early Years Foundation Stage (2021)

**The aims of this policy and associated procedures are:**

* To provide myself and all staff with the framework to promote and safeguard the wellbeing of children and in doing so ensure I meet statutory responsibilities.
* To ensure consistent good practice across the setting and ensure that safeguarding follows a whole setting approach.
* To demonstrate my commitment to protecting children.

**Principles and Values**

Children have a right to feel safe and secure and cannot learn effectively unless they do so.

All children have a right to be protected from harm.

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

I acknowledge that working in partnership with other agencies protects children and reduces risk and so we will engage in partnership working throughout the child protection process to safeguard children.

Whilst I will work openly with parents as closely as possible, I reserve the right to contact Children’s Social Care (via MASH) or the police, without notifying parents if this is believed to be in the child’s best interests.

I will always act in the best interests of the child and ensure that my decisions around safeguarding are child centred and coordinated in approach.

**Leadership and Management**

I recognise that staff anxiety around child protection can compromise good practice and so have established clear lines of accountability, training and advice to support the process and my assistants within that process.

As an employer of assistants, I follow safer recruitment guidance as set out in KCSIE.

Arrangements are in place for supervision of staff through supervision meetings.

**Dealing with concerns, disclosures and record keeping**

**(As a setting you need to edit this section in line with your own recording keeping processes)**

If I (or a member of staff) has a concern about a child or if a child tells me or my assistants they are being, or at risk of being, abused, exploited or neglected, I will respond by listening and offering reassurance. All staff must be aware that they cannot promise a child to keep secrets which might compromise the child’s safety or wellbeing.

I am aware that very young children including those with disabilities, special needs or with language delay may be more likely to communicate concerns with behaviours rather than words. I am aware that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and /or they may not recognise their experiences as harmful.

Additionally, I will question the cause of knocks and bumps in children who have limited mobility which will include children visiting the site as well as those who are children registered with me.

OSCB Information for parents and carers about bruising to pre-mobile babies and children [OSCB\_Pre-Mobile-Bruising-Leaflet-003.pdf](https://www.oscb.org.uk/wp-content/uploads/2021/04/OSCB_Pre-Mobile-Bruising-Leaflet-003.pdf)

I will record any welfare concerns that I have about a child on/in the… (**edit to include your individual system** **i.e. record of concern form/ electronic recording system etc and any reference to assistants you may employ).** Records will be completed as soon as possible after the incident/event, using the child’s words and facts and will be signed and dated by me.

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

All safeguarding concerns, discussions and decisions (and justifications for those decisions) will be recorded in writing. The records must be signed and dated (or equivalent on electronic based records) by me.

Safeguarding records are kept for individual children and are maintained separately from all other records relating to the child in the setting. Safeguarding records are kept in accordance with General Data Protection Regulations (GDPR) and my own setting GDPR policy and are retained securely by me. Safeguarding records are shared with staff on a ‘need to know’ basis only.

A chronology of concerns will be kept.

All safeguarding records will be transferred in accordance with GDPR to the child’s subsequent setting/school, under confidential and separate cover. These will be given to the new DSL and a receipt of delivery will be obtained.

Detailed guidance on Record Keeping is found in a separate document[Record Keeping Guidance for Early Years Settings, schools and colleges](http://schools.oxfordshire.gov.uk/cms/sites/schools/files/folders/folders/documents/safeguarding/RecordkeepingGuidance.docx)

**Reporting and referring concerns**

KCSIE states: “No single practitioner can have a full picture of a child’s needs and circumstances. 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.

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

The following procedures apply to all staff working in the setting and will be covered by training to enable staff to understand their role and responsibility.

The aim of my procedures is to provide a robust framework which enables me and my staff to take appropriate action when they are concerned that a child is being harmed or is at risk of harm.

The prime concern at all stages must be the interests and safety of the child. Where there is a conflict of interest between the child and an adult, the interests of the child must be paramount.

I am aware that very young children including those with disabilities, special needs or with language delay may be more likely to communicate concerns with behaviours rather than words. Additionally, I will question the cause of knocks and bumps in children who have limited mobility, which will include children visiting the site as well as those children on roll.

**If I or a member of staff suspects abuse, spots signs or indicators of abuse, or they have a disclosure of abuse made to them I must:**

1. Consider if there is a requirement for immediate medical intervention.
2. Make an initial record of the information [clarify if your setting records this on paper or computer based]
3. Make an accurate factual record as soon as possible, and within 24 hours, including details of:

* Dates and times of the observations/concerns
* Dates and times of any discussions in which they were involved
* Any injuries
* Explanations given by the child/adult
* Any actual words or phrases used by the child
* Any questions the staff member asked (remembering not to ask any leading questions)
* What action was taken

The records must be signed and dated by myself (or equivalent on electronic based records).

**Following a report of** **concerns I, the DSL, must:**

1. Decide whether there are sufficient grounds for suspecting significant harm, in which case a referral must be made to Children’s Social Care via MASH and the police if it is appropriate. The rationale for this decision will recorded by me.
2. Normally I will try to discuss any concerns about a child’s welfare with the family and where possible to seek their agreement before making a referral to Children’s Social Care (via MASH). However, in accordance with DfE guidance, this should only be done when it will not place the child at increased risk or could impact a police investigation. Where there are doubts or reservations about involving the child’s family, I should clarify with Children’s Social Care (via MASH) or the police whether the parents should be told about the referral and, if so, when and by whom. This is important in cases where the police may need to conduct a criminal investigation. The child’s views should also be taken into account.
3. If there are grounds to suspect a child is suffering, or is likely to suffer, significant harm I must contact Children’s Social Care via MASH, sharing:
   * 1. the known facts
     2. any suspicions or allegations
     3. whether or not there has been any contact with the child’s family.

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| MASH can be contacted by phone on **0345 050 7666**  (Monday to Thursday 8.30am – 5pm, Friday 8.30am – 4pm)  Outside office hours call the Emergency Duty Team on **0800 833 408** |

1. If a child is in immediate danger and urgent protective action is required, the police must be called. I must then notify Children’s Social Care (via MASH) of the occurrence and what action has been taken.
2. When a child needs *urgent* medical attention and there is suspicion of parental abuse causing the medical need, I should seek immediate advice from the MASH about informing the parents, remembering that parents should normally be informed if a child requires urgent hospital attention. However, as in all cases if it is felt this could put the child more at risk then all action should be taken in the best interests of the child.
3. If there is not considered to be a risk of significant harm, I will either actively monitor the situation, and consider the Early Help process.
4. I will keep up to date records, including chronologies, of my actions, decisions and outcomes.

**Confidentiality and Information Sharing**

**(The following also applies to any staff employed)**

I recognise that all matters relating to child protection are confidential. I will only disclose information about a child to other members of staff on a ‘need to know’ basis.

I am aware that whilst I have duties to keep any information confidential, I also have a professional responsibility to share information with other agencies to safeguard children.

I am aware that I cannot promise a child to keep secrets which might compromise the child’s safety or wellbeing.

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

I have due regard to the relevant data protection principles, which allow to share (and withhold) personal information, as provided for in the Data Protection Act 2018 and the GDPR.

DfE Guidance on Information Sharing (July 2018) provides further detail. <https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

OSCB provides advice on the Seven Golden Rules of Information Sharing <https://www.oscb.org.uk/wp-content/uploads/2019/07/The-Seven-Golden-Rules-for-Info-Sharing.pdf>

Gov.uk [Guidance to support schools with Data protection activity, including compliance with GDPR](https://www.gov.uk/government/publications/data-protection-toolkit-for-schools)

**Training**

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

I have undergone training to provide myself with the knowledge and skills required to carry out my role. I, as DSL, will undertake training every 2 years through the OSCB to enable me to fulfil my role.

Training is provided for all other staff to a generalist level every 3 years and regular updates around safeguarding are shared with staff regularly.

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

Any update in national or local guidance will be shared with all staff. This policy will be updated during the year to reflect any changes brought about by new guidance.

**Safeguarding Children with Special Educational Needs and Disabilities**

I acknowledge that children with special educational needs (SEN) and disabilities can face additional safeguarding challenges as they may have an impaired capacity to resist or avoid abuse. I recognise that additional barriers can exist when recognising abuse and neglect of children with SEND.

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

I am aware that children with SEN and disabilities can be disproportionally impacted by safeguarding concerns, such as bullying. I will appropriately explore possible indicators of abuse such as behaviour/mood change or injuries and not to assume that they are related to the child’s disability and be aware that children with SEN and disabilities may not always outwardly display indicators of abuse.

**Multi-agency Working**

Irecognise and am committed to my responsibility to work with other professionals and agencies in line with statutory guidance.

Settings are not the investigating agency when there are child protection concerns. I will, however, contribute to the investigation and assessment processes as required. I recognise the importance of multi-agency working and will support attendance at relevant safeguarding meetings, including Child Protection Conferences, Core Groups, Strategy Meetings, Child in Need meetings or other early help multi-agency meetings.

I will participate in Child Safeguarding Practice Reviews (CSPR’s), other reviews and file audits as and when required to do so by the Oxfordshire Children’s Safeguarding Board (OSCB). I will ensure that we have a clear process for gathering the evidence required for reviews and audits and embed recommendations into practice and compile required actions within agreed timescales.

**Safer Recruitment (if working with assistants, including family members I employ)**

I am committed to developing a safe culture and that all steps are taken to recruit suitable staff and volunteers who are safe to work with our children

I am responsible for ensuring safer recruitment processes have been followed

I will not accept a Curriculum Vitae (CV) without an application form

I am responsible for ensuring that I maintain an accurate Central Record in line with statutory guidance (the EYFS)

I attended safer recruitment training on…………(date)

I amcommitted to supporting the statutory guidance from the Department for Education on the application of the Childcare (Disqualification) Regulations 2009 and related obligations under the Childcare Act 2006 in settings

I advise all staff to disclose any information or reason that may affect their suitability to work with children, including convictions, cautions, court orders, cautions, reprimands and warnings

**Managing allegations against myself, staff, volunteers or someone I live with**

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

The following procedure should be used in all cases in which it is alleged myself or a member of staff or volunteer in a setting, or another adult who works with children has:

* behaved in a way that has harmed a child, or may have harmed a child;
* possibly committed a criminal offence against or related to a child; or
* behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children
* behaved or may have behaved in a way that indicates they may not be suitable to work with children

In dealing with allegations or concerns against an adult, staff must:

* Report any concerns about the conduct of any member of staff or volunteer to me as soon as possible.
* If an allegation is made against me/staff/volunteers, the Designated Officer for Oxfordshire (LADO) should be contacted directly and as soon as possible (within 24 hours).
* Where I am not the employer of supply staff, I will ensure allegations are dealt with properly. In no circumstances should I decide to cease to use a supply staff due to safeguarding concerns, without finding out the facts and liaising with the local authority designated officer (LADO) to determine a suitable outcome. Further information can be found in KCSiE.
* There may be situations where I will want to involve the police immediately, if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.
* Once an allegation has been received, I will contact the LADO on 01865 810603 or [lado.safeguardingchildren@oxfordshire.gov.uk](mailto:lado.safeguardingchildren@oxfordshire.gov.uk) as soon as possible **and before** carrying out any investigation into the allegation other than preliminary enquiries.

In liaison with the LADO, I will determine how to proceed and if necessary, a referral will be made to the MASH and/or the police.

**The named Designated Officer (LADO) for Oxfordshire County Council is Jo Lloyd.** She Is supported by the LADO team.

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The Designated Officer or a member of the team, will assess the information provided and advise on next steps, in line with KCSIE part 4, and Oxfordshire County Council’s Designated Officers local procedures.

I must also inform Ofsted or my 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). I must also notify Ofsted or my childminder agency of the action taken in respect of the allegations. These notifications must be made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made.

**Whistleblowing in a Safeguarding Context**

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

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

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

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

If you would prefer to raise your concerns outside of the setting, then you are able to contact the NSPCC whistleblowing line on 0800 028 0285 or email [help@nspcc.org.uk](mailto:help@nspcc.org.uk) for national organisations, OFSTED or make contact with Oxfordshire County Council.

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

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

Further guidance for staff can be accessed through <https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2> and through the NSPCC website <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/>

**Preventing radicalisation**

Myself and my staff will undergo online Prevent Awareness training to support start in identifying radicalisation and understanding what steps they need to take to protect the children and families in our setting.

This offers an introduction to the Prevent duty, the first objective of which is to tackle the ideological causes of terrorism, and explains how it aims to safeguard vulnerable people from being radicalised to supporting terrorism or becoming terrorists themselves. Sharing information on Prevent should be treated in the same way as wider safeguarding which includes securely transferring concerns when a child moves to another school or setting.

<http://www.elearning.prevent.homeoffice.gov.uk> All staff should complete this training.

OSCB guidance on PREVENT <https://www.oscb.org.uk/safeguarding-themes/prevent/>

**Site security**

I have a responsibility to ensure my premises and grounds are safe, this includes ensuring the safety of any visitors into the setting.

Hazards are made safe and/or removed.

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

**Safeguarding and the curriculum**

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

**Promoting educational outcomes**

There is a culture of high aspirations for children where safeguarding and welfare has been an issue. I understand their development needs, promote educational outcomes, progress and attainment, and identify the challenges that children in this group might face. Additional academic support and adjustments will be made to best support these children. Where a child has a Social Worker, staff will work closely with the Social Worker to ensure the child makes progress and reaches their full potential.

**Related Safeguarding Policies**

Amend these details according to your individual setting documents etc. and add any other relevant documents or policies to the list.

This policy should be read in conjunction with the policies as listed below:

* Behaviour Management, linked to the Use of Physical Intervention
* Online Safety and Social Media
* Use of mobile phones and cameras and wearable technology
* Anti-Bullying
* Data Protection and Information Sharing
* Image Use
* Personal and Intimate Care
* Health and Safety
* Attendance
* Risk Assessments (e.g. Outings, use of technology)
* First Aid and Accidents
* Administering Medicines
* Staff Behaviour Policy/Code of conduct for staff
* Acceptable Use of Technology
* Code of conduct for parents/visitors
* Safer Recruitment
* Whistleblowing
* Complaints
* Food Hygiene
* Emergency Evacuation and lockdown
* Missing child
* Uncollected child

**Policy review**

I review this policy at least annually in line with DfE, OSCB and OCC requirements and other relevant statutory guidance.

**Date approved by…………………………………….**

**Date reviewed by ………………………………………**

Annex 1: Roles and Responsibilities

1. **Staff Responsibilities**

All staff including myself (the childminder) have a key role to play in identifying concerns early and in providing help for children. To achieve this, they will:

* Establish and maintain an environment where children feel secure, are encouraged to talk and are listened to.
* Ensure children know that there are adults in the setting who they can approach if they are worried or have concerns.
* Plan opportunities within the curriculum for children to develop the skills they need to recognise, assess and manage risk appropriately and keep themselves safe.
* Attend training in order to be aware of and alert to the signs of abuse.
* Maintain an attitude of “it could happen here” with regards to safeguarding.
* Record their concerns if they are worried that a child is being abused.
* Be prepared to refer directly to Children’s Social Care (via MASH), and the police if appropriate.
* Follow the allegations procedures, as set out in this policy and KCSIE, if the disclosure is an allegation against a member of staff or someone living with me.
* Follow the procedures set out by the Oxfordshire Safeguarding Children Board (OSCB) and take account of guidance issued by the DfE.
* Support children in line with their child protection plan.
* Treat information with confidentiality but never promising to ‘keep a secret’.
* Notify the DSL (childminder) of any child on a child protection plan or child in need plan who has unexplained absence.
* Have an understanding of Early Help and be prepared to identify and support children who may benefit from early help.
* Liaise with other agencies that support children and provide early help.
* Have an awareness of the Child Protection Policy, the Behaviour Policy, the Staff Behaviour Policy (or Code of Conduct), procedures relating to the safeguarding response for children who are absent from education and the role of the DSL.
* Have an awareness of Mental Health problems and how in some cases an indicator of the child being at risk of harm.

**2) DSL responsibilities**:

* Contribute to inter-agency working in line with Working Together to Safeguard Children guidance.
* Provide a co-ordinated offer of early help when additional needs of children are identified.
* Ensure staff are alert to the various factors that can increase the need for early help as written in KCSIE
* Working with Children’s Social Care, support their assessment and planning processes including the setting’s attendance at conference and core group meetings and the contribution of written reports for these meetings.
* Carry out tasks such as training of staff, safer recruitment and maintaining a central register.
* Provide support and advice on all matters pertaining to safeguarding and child protection to all staff, regardless of their position within the setting.
* Treat any information shared by staff or children with respect and follow agreed policies and procedures.
* Ensure that allegations or concerns against staff are dealt with in accordance with guidance from Department for Education (DfE) and the OSCB procedures.
* Ensure the setting has effective safeguarding policies and procedures including a Child Protection Policy, a Staff Behaviour Policy or Code of Conduct, a Behaviour Policy and a written response to children who go missing from education.
* Ensure OSCB is informed in line with local requirements about the discharge of duties via the Annual Safeguarding Early Years Self-Assessment Audit which should be completed and returned to the Early Years Team when requested (see Early Education Funding Terms and Conditions).
* Ensure recruitment, selection and induction follows safer recruitment practice including all appropriate checks.
* Ensure allegations against staff are dealt with.
* Ensure a member of the Senior Leadership Team is appointed as Designated Safeguarding Lead and has this recorded in their job description.
* Ensure staff have been trained appropriately and this is updated in line with guidance.
* Ensure any safeguarding deficiencies or weaknesses are remedied without delay.
* Ensure that children are taught about safeguarding, including online safety, in an age-appropriate way.
* Refer cases to MASH, and the police where appropriate, in a timely manner avoiding any delay that could place the child at more risk.
* Attend appropriate training and demonstrate evidence of continuing professional development to carry out the role.
* Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns about a child to the DSL and concerns about an adult to the DSL.
* Ensure whole setting training occurs regularly, with at least annual updates so that staff and volunteers can fulfil their responsibilities knowledgeably.
* Ensure any members of staff joining the setting outside the agreed training schedule receive induction prior to commencement of their duties.
* Keep records of child protection concerns securely and separately from the main child file and use these records to assess the likelihood of risk.
* Ensure that safeguarding records are transferred accordingly (separate from child files) and in a timely fashion when a child transfers setting.
* Ensure that, where a child transfers to another setting and is on a child protection plan or is a CWCF (Child We Care For), their information is passed to the new setting immediately and that the child’s social worker is informed. Consideration is given to a transition meeting prior to moving if the case is complex or on-going.
* Be aware of the training opportunities and information provided by OSCB to ensure staff are aware of the latest local guidance on safeguarding
* Develop, implement and review procedures in the setting that enable the identification and reporting of all cases, or suspected cases, of abuse.
* Meet any other expectations set out for DSLs in KCSE.
* Help promote educational outcomes, understand their academic progress and attainment and maintain a culture of high aspirations for children where safeguarding and welfare has been an issue.
* Work alongside and liaise with the Three Safeguarding Partners in line with Working together to Safeguard Children.

**Annex 2: Dealing with disclosures**

**All staff should ensure:**

A member of staff who is approached by a child should listen positively and try to reassure them. They cannot promise complete confidentiality and should explain that they may need to pass information to other professionals, to help keep the child or other children safe. The degree of confidentiality should always be governed by the need to protect the child.

Additional consideration needs to be given to children with communication difficulties and for those whose preferred language is not English. It is important to communicate with them in a way that is appropriate to their age, understanding and preference.

Ultimately, all staff have the right to make a referral to the police or Children’s social care (via MASH) directly and should do this if, for whatever reason, there are difficulties following the agreed protocol, e.g. they are the only adult on the setting premises at the time and have concerns about sending a child home.

**Guiding principles, the seven R’s**

**Receive**

* Listen to what is being said, without displaying shock or disbelief
* Accept what is said and take it seriously
* Make a note of what has been said as soon as practicable

**Reassure**

* Reassure the child, but only so far as is honest and reliable
* Don’t make promises you may not be able to keep e.g. ‘I’ll stay with you’ or ‘everything will be alright now’ or ‘I’ll keep this confidential’
* Do reassure e.g. you could say: ‘I believe you’, ‘I am glad you came to me’, ‘I am sorry this has happened’, ‘We are going to do something together to get help’

**Respond**

* Respond to the child only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details
* Do not ask ‘leading’ questions i.e. ‘did he touch your private parts?’ or ‘did she hurt you?’ Such questions may invalidate your evidence (and the child’s) in any later prosecution in court
* Do not ask the child why something has happened.
* Do not criticise the alleged perpetrator; the child may care about him/her, and reconciliation may be possible
* Do not ask the child to repeat it all for another member of staff. Explain what you have to do next and whom you have to talk to. Reassure the child that it will be a senior member of staff

**Report**

* Share concerns with the DSL as soon as possible
* If you are not able to contact your DSL and the child is at risk of immediate harm, contact the children’s services department directly

**Record**

* If possible, make some very brief notes at the time, and record them as soon as possible (amend to reflect your recording process, electronic, paper etc.)
* Keep your original notes on file
* Record the date, time, place, persons present and noticeable nonverbal behaviour, and the words used by the child. If the child uses sexual ‘pet’ words, record the actual words used, rather than translating them into ‘proper’ words
* Complete a body map to indicate the position of any noticeable bruising
* Record facts and observable things, rather than your ‘interpretations’ or ‘assumptions’

**Remember**

* Support the child: listen, reassure, and be available
* Complete confidentiality is essential. Share your knowledge only with appropriate professional colleagues
* Try to get some support for yourself if you need it

**Review processes (led by DSL)**

* Has the action taken provided good outcomes for the child?
* Did the procedure work?
* Were any deficiencies or weaknesses identified in the procedure? Have these been remedied?
* Is further training required?

**Annex 3: Abuse and neglect**

Knowing what to look for is vital to the early identification of abuse and neglect. **All**

staff should be aware of indicators of abuse and neglect so that they are able to identify cases of children who may be in need of help or protection. If staff are unsure, they should **always** speak to the designated safeguarding lead (or deputy).

**All** setting staff should be aware that abuse, neglect and safeguarding

issues are rarely stand-alone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

**Definitions and Indicators of abuse and neglect**

**Abuse**: a form of maltreatment of a child. Somebody may abuse or neglect a child

by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

**Physical abuse**: a form of abuse which 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.

**Indicators of physical abuse / factors that should increase concern**

* Multiple bruising or bruises and scratches (especially on the head and face)
* Clusters of bruises – e.g., fingertip bruising (caused by being grasped)
* Bruises around the neck and behind the ears – the most common abusive injuries are to the head
* Bruises on the back, chest, buttocks, or on the inside of the thighs
* Marks indicating injury by an instrument – e.g. linear bruising (stick), parallel bruising (belt), marks of a buckle
* Bite marks
* Deliberate burning may also be indicated by the pattern of an instrument or object – e.g. electric fire, cooker, cigarette
* Scalds with upward splash marks or *tide marks*
* Untreated injuries
* Recurrent injuries or burns
* Bald patches.

**In the social context of the setting, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:**

* the explanation given does not match the injury
* the explanation uses words or phrases that do not match the vocabulary of the child (adult words)
* no explanation is forthcoming
* the child (or the parent/carer) is secretive or evasive
* the injury is accompanied by allegations of abuse or assault.

**You should be concerned if the child or young person:**

* is reluctant to have parents/carers contacted
* runs away or shows fear of going home
* is aggressive towards themselves or others
* flinches when approached or touched
* is reluctant to undress to change clothing for sport
* wears long sleeves during hot weather
* is unnaturally compliant in the presence of parents/carers.
* has a fear of medical help or attention
* admits to a punishment that appears excessive.

Link to OSCB guidance on physical abuse <https://www.oscb.org.uk/safeguarding-themes/physical-abuse/>

**Emotional abuse**: the persistent emotional maltreatment of a child such as to

cause severe and adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child’s developmental capability as well as overprotection and limitation of exploration and learning or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

**Indicators of emotional abuse**

**Developmental issues**

* Delays in physical, mental and emotional development
* Poor setting performance
* Speech disorders, particularly sudden disorders or changes.

**Behaviour**

* Acceptance of punishment which appears excessive
* Over-reaction to mistakes
* Continual self-deprecation (I am stupid, ugly, worthless etc)
* Neurotic behaviour (such as rocking, hair-twisting, thumb-sucking)
* Self-mutilation
* Suicide attempts
* Drug/solvent abuse
* Running away
* Compulsive stealing, scavenging
* Acting out
* Poor trust in significant adults
* Regressive behaviour – e.g. wetting
* Eating disorders
* Destructive tendencies
* Neurotic behaviour
* Arriving early at setting, leaving late

**Social issues**

* Withdrawal from physical contact
* Withdrawal from social interaction
* Over-compliant behaviour
* Insecure, clinging behaviour
* Poor social relationships

**Emotional responses**

* Extreme fear of new situations
* Inappropriate emotional responses to painful situations (“I deserve this”)
* Fear of parents being contacted
* Self-disgust
* Low self-esteem
* Unusually fearful with adults
* Lack of concentration, restlessness, aimlessness
* Extremes of passivity or aggression

Most harm is produced in *low warmth, high criticism* homes, not from single incidents.

Emotional abuse is difficult to define, identify/recognise and/or prove.

Emotional abuse is chronic and cumulative and has a long-term impact.

It is sometimes possible to spot emotionally abusive behaviour from parents and carers to their children, by the way that the adults are speaking to, or behaving towards children. An appropriate challenge or intervention could affect positive change and prevent more intensive work being carried out later on.

Link to OSCB guidance on emotional abuse <https://www.oscb.org.uk/safeguarding-themes/emotional-abuse/>

Link to OSCB guidance on Domestic Abuse <https://www.oscb.org.uk/safeguarding-themes/domestic-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, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education see ANNEX 4.

**Characteristics of child sexual abuse:**

* it is often planned and systematic – people do not sexually abuse children by accident, though sexual abuse can be opportunistic
* grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent
* grooming the child’s environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Most people who sexually abuse children are men, but some women sexually abuse too.

**Indicators of sexual abuse**

**Physical observations**

* Damage to genitalia, anus or mouth
* Sexually transmitted diseases
* Unexpected pregnancy, especially in very young girls
* Soreness in genital area, anus or mouth and other medical problems such as chronic itching
* Unexplained recurrent urinary tract infections and discharges or abdominal pain

**Behavioural observations**

* Sexual knowledge inappropriate for age
* Sexualised behaviour or affection inappropriate for age
* Sexually provocative behaviour/promiscuity
* Hinting at sexual activity Inexplicable decline in setting performance
* Depression or other sudden apparent changes in personality as becoming insecure or clinging
* Lack of concentration, restlessness, aimlessness
* Socially isolated or withdrawn
* Overly compliant behaviour
* Acting out, aggressive behaviour
* Poor trust or fear concerning significant adults
* Regressive behaviour,
* Onset of wetting, by day or night; nightmares
* Onset of insecure, clinging behaviour
* Arriving early at setting, leaving late, running away from home
* Suicide attempts, self-mutilation, self-disgust
* Suddenly drawing sexually explicit pictures
* Eating disorders or sudden loss of appetite or compulsive eating
* Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
* Become worried about clothing being removed

Link to OSCB guidance on sexual abuse <https://www.oscb.org.uk/safeguarding-themes/sexual-abuse/>

**Neglect**: the persistent failure to meet a child’s basic physical and/or psychological

needs, likely to result in the serious impairment of the child’s health or development.

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

adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

**NSPCC research has highlighted the following examples of the neglect of children under 12:**

* frequently going hungry
* frequently having to go to setting in dirty clothes
* regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse
* being abandoned or deserted
* living at home in dangerous physical conditions
* not being taken to the doctor when ill
* not receiving dental care.

Neglect is a difficult form of abuse to recognise and is often seen as less serious than other categories. It is, however, very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group.

Neglect is often noticed at a stage when it does not pose a risk to the child. The duty to safeguard and promote the welfare of children (*What to do if You’re Worried a Child is Being Abused* DfE 2015) would suggest that an appropriate intervention or conversation at this early stage can address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm or in significant need.

Link to the OSCBB guidance on Neglect: [Neglect - Oxfordshire Safeguarding Children Board (oscb.org.uk)](https://www.oscb.org.uk/safeguarding-themes/neglect/)

Neglect is often linked to other forms of abuse, so any concerns setting staff have should at least be discussed with the DSL.

**Indicators of neglect**

The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm. It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don’t keep it to yourself. The OSCB neglect toolkit provides a more detailed list of indicators of neglect and is available to all staff.

**Physical indicators of neglect**

* Constant hunger and stealing food
* Poor personal hygiene - unkempt, dirty or smelly
* Underweight
* Dress unsuitable for weather
* Poor state of clothing
* Illness or injury untreated

**Behavioural indicators of neglect**

* Constant tiredness
* Frequent absence from setting or lateness
* Missing medical appointments
* Isolated among peers
* Frequently unsupervised
* Stealing or scavenging, especially food

**Annex 4: Child on child abuse**

**All** staff should be aware that children can abuse other children.

This is most likely to include, but may not be limited to:

* bullying (including cyberbullying)
* physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise
* causing physical harm
* sexual violence, such as rape, assault by penetration and sexual assault
* sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be stand-alone or part of a broader pattern of abuse
* up skirting, which typically involves taking a picture under a person’s clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm
* sexting (also known as youth produced sexual imagery); and
* initiation/hazing type violence and rituals.

**All** staff should be clear as to the setting’s policy and procedures with

regards to child-on-child abuse. My setting uses the OCC child on child abuse guidance.

**Sexual violence and sexual harassment between children**

Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment as well as their emotional well-being. Sexual violence and sexual harassment exist on a continuum and may overlap; they can occur online and offline (both physically and verbally) and are never acceptable. It is important that all victims are taken seriously and offered appropriate support.

Reports of sexual violence and sexual harassment are extremely complex to manage. It is essential that victims are protected, offered appropriate support and every effort is made to ensure their education is not disrupted. It is also important that other children, adult students and setting and college staff are supported and protected as appropriate.

[How to tell if a child’s sexual behaviour is age appropriate - Stop It Now](https://www.stopitnow.org.uk/concerned-about-a-child-or-young-persons-sexual-behaviour/how-to-tell-if-a-childs-sexual-behaviour-is-age-appropriate/)

[Preventing harmful sexual behaviour in children - Stop It Now](https://www.stopitnow.org.uk/concerned-about-a-child-or-young-persons-sexual-behaviour/preventing-harmful-sexual-behaviour/)

Annex 5: VULNERABLE CHILDREN

Any child may benefit from [early help](https://www.oxfordshire.gov.uk/residents/children-education-and-families/childrens-services/integrated-childrens-services/early-help-oxfordshire), but all staff should be particularly alert to the potential need for early help for a child who:

* is disabled and has specific additional needs.
* has special educational needs (whether they have a statutory Education, Health and Care Plan).
* is a young carer.
* is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups.
* is frequently missing/goes missing from care or from home.
* is at risk of modern slavery, trafficking, or exploitation.
* is at risk of being radicalised or exploited.
* is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse; <https://www.gov.uk/government/collections/domestic-abuse-bill>
* is misusing drugs or alcohol themselves.
* has returned home to their family from care; and
* is a privately fostered child.

**All** staff should have an awareness of safeguarding issues that can put children at

risk of harm. Behaviours linked to issues, such as drug taking, alcohol abuse, deliberately missing education, and sexting (also known as youth produced sexual imagery) put children in danger.

Annex 6: ONLINE SAFETY

**If you choose to integrate online safety within the child protection policy (and not have a separate policy) then you will need to ensure that there is sufficient depth of information provided within this section.**

* I recognisethat the use of technology presents challenges and risks to children and adults both inside and outside of setting.
* I have overall responsibility for online safeguarding within the setting.
* I know that the issues can be broadly categorised into three areas of risk:
* **content:** being exposed to illegal, inappropriate or harmful material
* **contact:** being subjected to harmful online interaction with other users
* **conduct:** personal online behaviour that increases the likelihood of, or causes, harm.
* I have read the information regarding Online Safety within ‘Keeping Children Safe in Education’ and [Safeguarding children and protecting professionals in early years settings: online safety considerations for managers - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/safeguarding-children-and-protecting-professionals-in-early-years-settings-online-safety-considerations/safeguarding-children-and-protecting-professionals-in-early-years-settings-online-safety-considerations-for-managers?utm_campaign=874874_Safeguarding%20children%20and%20protecting%20professionals%20in%20early%20years%20settings%3A%20online%20safety%20considerations&utm_medium=email&utm_source=dotmailer&dm_i=3WYE,IR22,4VYPRG,20WL7,1).
* I recognise the specific risks that can be posed by mobile phones and cameras and in accordance with KCSIE and the EYFS has appropriate policies in place that are shared and understood by all members of the setting community. Further information reading the specific approaches relating to this can be found in the settings Online Safety Policy, Acceptable Use Policy and Image Use Policy which can be found *on my noticeboard/website etc****.***
* I will ensure that appropriate filtering and monitoring systems are in place when children and staff access the setting’s systems and internet provision.
* I acknowledge that whilst filtering and monitoring is an important part of the setting’s online safety responsibilities, it is only one part of our approach to online safety. Children and adults may have access to systems external to the setting control such as mobile phones and other internet enabled devices and technology and where concerns are identified appropriate action will be taken.
* **I** acknowledge where children are being asked to learn online parents have been provided with information of how to do this safely.
* **I**will ensure a comprehensive whole setting curriculum response is in place to enable all children to learn about and manage online risks effectively and will support parents and the wider setting community.

**Annex 7: Safeguarding issues**

**Child Abduction and Community safety Incidents**

Child abduction is the unauthorised removal or retention of a minor from a parent or anyone with legal responsibility for the child. Child abduction can be committed by parents or other family members; by people known but not related to the victim (such as neighbours, friends and acquaintances); and by strangers. Other community safety incidents in the vicinity of a school can raise concerns amongst children and parents, for example, people loitering nearby or unknown adults engaging children in conversation.

It is important that lessons focus on building children’s confidence and abilities rather than simply warning them about all strangers. Further information is available at: <http://www.actionagainstabduction.org/>and <https://clevernevergoes.org/>

**Child Sexual Exploitation (CSE) & Child Criminal Exploitation (CCE)**

Both CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources. In some cases, the abuse will be in exchange for something the victim needs or wants and/or will be to the financial benefit or other advantage (such as increased status) of the perpetrator or facilitator. The abuse can be perpetrated by individuals or groups, males or females and children or adults.

The abuse can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse. It can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence. Victims can be exploited even when activity appears consensual, and it should be noted exploitation. As well as being physical can be facilitated and/or take place online.

**Child Sexual Exploitation (CSE)**

CSE occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. CSE does not always involve physical contact; it can also occur through the use of technology. CSE can affect any child or young person (male or female) under the age of 18 years, including 16- and 17-year-olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person’s immediate knowledge (e.g., through others copying videos or images they have created and posted on social media). CCE indicators can also be indicators of CSE, as can: • children who have older boyfriends or girlfriends; and • children who suffer from sexually transmitted infections or become pregnant.

The department provide: [Child sexual exploitation: guide for practitioners](https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners)

A full list of indicators can be found here: [Child Sexual Exploitation - Oxfordshire Safeguarding Children Board (oscb.org.uk)](https://www.oscb.org.uk/safeguarding-themes/child-exploitation-modern-slavery/child-sexual-exploitation/)

**Child Criminal Exploitation (CCE)**

While there is still no legal definition of ‘Child Criminal Exploitation’ or CCE, it is increasingly being recognised as a major factor behind crime in communities the UK, while also simultaneously victimising vulnerable young people and leaving them at risk of harm. A simple definition of CCE is: CCE often occurs without the victim being aware that they are being exploited and involves young people being encouraged, cajoled, or threatened to carry out crime for the benefit of others. In return they are offered friendship or peer acceptance, but also cigarettes, drugs (especially cannabis), alcohol or even food and accommodation.

County Lines is a term used to describe gangs, groups or drug networks that supply drugs from urban to suburban areas across the country, including market and coastal towns, using dedicated mobile phone lines or ‘deal lines. They exploit children and vulnerable adults to move the drugs and money to and from the urban area, and to store the drugs in local markets. They will often use intimidation, violence, and weapons, including knives, corrosives, and firearms. County lines is a major, cross-cutting issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery, and missing persons; and the response to tackle it involves the police, the National Crime Agency, a wide range of Government departments, local government agencies and voluntary and community sector organisations. County lines activity and the associated violence, drug dealing, and exploitation has a devastating impact on young people, vulnerable adults, and local communities. Further information can be found here: [Child Criminal Exploitation - Oxfordshire Safeguarding Children Board (oscb.org.uk)](https://www.oscb.org.uk/safeguarding-themes/child-exploitation-modern-slavery/child-drug-exploitation-county-lines/)

**Some of the following can be indicators of CCE:**

• children who appear with unexplained gifts or new possessions;

• children who associate with other young people involved in exploitation;

• children who suffer from changes in emotional well-being;

• children who misuse drugs and alcohol;

• children who go missing for periods of time or regularly come home late; and

• children who regularly miss school or education or do not take part in education.

**The above CCE indicators can also be indicators of CSE, as can:**

• children who have older boyfriends or girlfriends; and

• children who suffer from sexually transmitted infections or become pregnant.

Link to OSCB guidance on CSE <https://www.oscb.org.uk/safeguarding-themes/child-exploitation-modern-slavery/> and the CSE screening tool <https://www.oscb.org.uk/wp-content/uploads/2019/07/Child-Exploitation-Screening-Tool.pdf>

Government Guidance:

[Child sexual exploitation: guide for practitioners](https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners)

**Children who are absent from education**

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

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

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

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

**Children with family members in prison**

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

**Cybercrime**

Cybercrime is criminal activity committed using computers and/or the internet. It is

broadly categorised as either ‘cyber-enabled’ (crimes that can happen off-line but are

enabled at scale and at speed on-line) or ‘cyber dependent’ (crimes that can be

committed only by using a computer). Cyber-dependent crimes include;

• unauthorised access to computers (illegal ‘hacking’), for example accessing a school’s computer network to look for test paper answers or change grades

awarded

• denial of Service (Dos or DDoS) attacks or ‘booting’. These are attempts to make a computer, network or website unavailable by overwhelming it with internet traffic from multiple sources; and,

• making, supplying or obtaining malware (malicious software) such as viruses, spyware, ransomware, botnets and Remote Access Trojans with the intent to commit further offence, including those above.

Children with particular skill and interest in computing and technology may inadvertently or deliberately stray into cyber-dependent crime.

If there are concerns about a child in this area, the designated safeguarding lead (or a deputy), should consider referring into the **Cyber Choices** programme. This is a

nationwide police programme supported by the Home Office and led by the National Crime Agency, working with regional and local policing. It aims to intervene where young people are at risk of committing, or being drawn into, low level cyber-dependent offences and divert them to a more positive use of their skills and interests.

Note that **Cyber Choices** does not currently cover ‘cyber-enabled’ crime such as fraud, purchasing of illegal drugs on-line and child sexual abuse and exploitation, nor other areas of concern such as on-line bullying or general on-line safety.

Additional advice can be found at: [Cyber Choices](http://www.cyberchoices.uk/), ['NSPCC-when to call the police'](https://www.npcc.police.uk/documents/Children%20and%20Young%20people/When%20to%20call%20the%20police%20guidance%20for%20schools%20and%20colleges.pdf)

and [National Cyber Security Centre - NCSC.GOV.UK](https://www.ncsc.gov.uk/)

**Domestic Abuse**

The statutory definition of domestic abuse, ensures that different types of relationships are captured, including ex-partners and family members. The definition captures a range of different abusive behaviours, including physical, emotional and economic abuse and coercive and controlling behaviour. Under the statutory definition, both the person who is carrying out the behaviour and the person to whom the behaviour is directed towards must be aged 16 or over and they must be “personally connected” (as defined in section 2 of the 2021 Act). Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and child to parent abuse. Anyone can be a victim of domestic abuse, regardless of sexual identity, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home. The government has issued statutory guidance to provide further information for those working with domestic abuse victims and perpetrators, including the impact on children. All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Experiencing domestic abuse can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Young people can also experience domestic abuse within their own intimate relationships. This form of child-on-child abuse is sometimes referred to as ‘teenage relationship abuse’. Depending on the age of the young people, this may not be recognised in law under the statutory definition of ‘domestic abuse’ (if one or both parties are under 16). However, as with any child under 18, where there are concerns about safety or welfare, child safeguarding procedures should be followed and both young victims and young perpetrators should be offered support.

**Homelessness**

Being homeless or being at risk of becoming homeless presents a real risk to a child’s welfare. The designated safeguarding lead (childminder) should be aware of contact details and referral routes into the Local Housing Authority so they can raise/progress concerns at the earliest opportunity. Indicators that a family may be at risk of homelessness include household debt, rent arrears, domestic abuse, and anti-social behaviour, as well as the family being asked to leave a property. Whilst referrals and/or discussion with the Local Housing Authority should be progressed as appropriate, and in accordance with local procedures, this does not, and should not, replace a referral into children’s social care where a child has been harmed or is at risk of harm

**Mental Health**

I aim to promote positive mental health and wellbeing for our whole community (children, staff, parents, and carers), and recognise how important mental health and emotional wellbeing is to our lives, in just the same way as physical health. I recognise that children and young people’s mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children and young people will have varying mental health during their school career. However, some face significant life events which can seriously impact their emotional wellbeing and can include mental illness.

Settings can be a place for all children to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience.

Settings are also a place of respite from difficult home lives and offers, positive role models and relationships, which are critical in promoting the wellbeing of all children.

A role of setting is to ensure that children can manage times of change and stress, and that they are supported to reach their potential or access help when they need it.

All staff should also be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

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

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that staff are aware of how these children’s experiences, can impact on their mental health, behaviour, and education. If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following my child protection policy.

There are three thresholds for and types of referral that need to be considered:

**Is this a child with additional needs** where their health, development or achievement may be adversely affected? - age-appropriate progress is not being made and the causes are unclear; the support of more than one agency is needed to meet the child or young person’s needs

**Is this a Child in Need matter?** Section 17 of the Children Act 1989 says:

* they are unlikely to achieve or maintain, or to have opportunity to achieve or maintain, a reasonable standard of health or development, without the provision of services by a local authority
* their health or development is likely to be impaired, or further impaired, without the provision of such services
* they are SEND (and as such can face additional safeguarding challenges)  
  If this is a child in need, discuss the issues with the Designated Safeguarding Lead and parents. Obtain their consent for referral.

**Is this a Child Protection matter?** Section 47 of the Children Act 1989 says:

* children at risk or who are suffering significant harm
* children suffering the effects of significant harm
* children with serious health problems

More on the thresholds can be found here: [Oxfordshire-Threshold-of-Needs-2021.pdf (oscb.org.uk)](https://www.oscb.org.uk/wp-content/uploads/2021/09/Oxfordshire-Threshold-of-Needs-2021.pdf)

If this is a child protection matter, this should needs to be referred to the MASH as soon as possible. [Multi-Agency Safeguarding Hub (MASH) | Oxfordshire County Council](https://www.oxfordshire.gov.uk/business/information-providers/multi-agency-safeguarding-hub)

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

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

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

[Early Help and the Locality Community Support Service (LCSS) - Oxfordshire Safeguarding Children Board (oscb.org.uk)](https://www.oscb.org.uk/practitioners-volunteers/locality-and-community-support-service-early-help/)

**Modern Slavery**

Modern slavery encompasses human trafficking and slavery, servitude and forced or compulsory labour. Exploitation can take many forms, including sexual exploitation, forced labour, slavery, servitude, forced criminality and the removal of organs. Further information on the signs that someone may be a victim of modern slavery, the support available to victims and how to refer them to the NRM is available in Statutory Guidance [Modern slavery: how to identify and support victims - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/modern-slavery-how-to-identify-and-support-victims)

**Preventing radicalisation**

Children may be susceptible to extremist ideology and radicalisation. Similar to protecting children from other forms of harms and abuse, protecting children from this risk should be a part of a settings safeguarding approach. Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces. Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. Terrorism is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

Although there is no single way of identifying whether a child is likely to be susceptible to an extremist ideology, there are possible indicators that should be taken into consideration alongside other factors and contexts. Background factors combined with specific influences such as family and friends may contribute to a child’s vulnerability. Similarly, radicalisation can occur through many different methods (such as social media or the internet) and settings (such as within the home). However, it is possible to protect people from extremist ideologies and intervene to prevent those at risk of radicalisation being drawn to terrorism. As with other safeguarding risks, staff should be alert to changes in children’s behaviour, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead making a Prevent referral. Although not a cause for concern on their own, possible indicators when taken into consideration alongside other factors or context may be a sign of being radicalised.

**The Prevent duty**

All settings are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions, to have “due regard to the need to prevent people from being drawn into terrorism”. This duty is known as the Prevent duty. The Prevent duty should be seen as part of a settings wider safeguarding obligations. The designated safeguarding lead should be aware of local procedures for making a Prevent referral.

**Serious violence**

All staff should be aware of indicators, which may signal that children are at risk

from, or are involved with serious violent crime. These may include increased absence from setting, a change in friendships or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs.

All staff should be aware of the associated risks and understand the measures

in place to manage these. Advice for settings is provided in the Home

Office’s Preventing youth violence and gang involvement [https://www.gov.uk/government/publications/advice-to-settings-and-colleges-on-gangs-and-youth-violence](https://www.gov.uk/government/publications/advice-to-schools-and-colleges-on-gangs-and-youth-violence) and its Criminal exploitation of children and vulnerable adults: county lines guidance <https://www.gov.uk/government/publications/criminal-exploitation-of-children-and-vulnerable-adults-county-lines>

**Upskirting**

‘Upskirting’ typically involves taking a picture under a person’s clothing without them

knowing, with the intention of viewing their genitals or buttocks to obtain sexual

gratification, or cause the victim humiliation, distress or alarm. It is now a criminal

offence.

**So called Honour-based abuse including Forced Marriage and FGM**

So-called ‘honour’-based abuse (including Female Genital Mutilation and Forced Marriage) So-called ‘honour’-based abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving ‘honour’ often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBA are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBA, or already having suffered HBA. Where FGM has taken place, since 31 October 2015 there has been a mandatory reporting duty placed on teachers that requires a different approach (see below).

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. FGM mandatory reporting duty for teachers Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon teachers, along with regulated health and social care professionals in England and Wales, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases may face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils or students, but the same definition of what is meant

**Forced Marriage**

Forced marriage Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some perpetrators use perceived cultural practices to coerce a person into marriage. Schools and colleges can play an important role in safeguarding children from forced marriage. The Forced Marriage Unit (FMU) has created: Multi-agency practice guidelines: handling cases of forced marriage (pages 32-36 of which focus on the role of schools and colleges) and, multi-agency statutory guidance for dealing with forced marriage, which can both be found at The right to choose: government guidance on forced marriage - GOV.UK (www.gov.uk) School and college staff can contact the Forced Marriage Unit if they need advice or information: Contact: 020 7008 0151 or email fmu@fcdo.gov.uk. In addition, since February 2023 it has also been a crime to carry out any conduct whose purpose is to cause a child to marry before their eighteenth birthday, even if violence, threats or another form of coercion are not used. As with the existing forced marriage law, this applies to non-binding, unofficial ‘marriages’ as well as legal marriages.

**Faith Based Abuse**   
Our policy recognises the ‘National Action Plan to Tackle Abuse linked to faith or belief’ which describes this abuse as:

‘*not about challenging people’s beliefs, but where beliefs lead to abuse that must not be tolerated. This includes belief in witchcraft, spirit possession, demons or the devil, the evil eye, or djinns, dakini, kindoki, ritual or muti murders and use of fear of the supernatural to make children comply with being trafficked for domestic slavery or sexual exploitation. The beliefs which are not confined to one faith, nationality or ethnic community*.’    
   
When this type of abuse is suspected staff will make a referral to MASH for support and guidance.

[https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief](http://www.karmanirvana.org.uk/)

**Contextual safeguarding**

Safeguarding incidents and/or behaviours can be associated with factors outside

the setting and/or can occur between children outside the setting. Allstaff, but especially the designated safeguarding lead (childminder) shouldconsider whether children are at risk of abuse or exploitation in situations outside their families. This is known as contextual safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child’s life that are a threat to their safety and/or welfare. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation, and serious youth violence. Children’s social care assessments should consider such factors, so it is important that settings provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and the full context of any abuse. Additional information regarding contextual safeguarding is available here: <https://contextualsafeguarding.org.uk/about/what-is-contextual-safeguarding>

Link to OSCB guidance on contextual safeguarding <https://www.oscb.org.uk/safeguarding-themes/contextual-safeguarding/>

**Further information around safeguarding issues can be found in KCSIE ANNEX B and on the OSCB website**

**Annex 8: Staff Induction, Awareness and Training**

The EYFS states:

What practitioners know, plan for, and do, matters for children’s learning, development, safety, and happiness in settings. Childminders must have appropriate skills, knowledge, and a clear understanding of their role and responsibilities in order to provide good quality early years provision.

Childminders are accountable for the quality of the work of any assistants and must be satisfied that assistants are competent to meet their roles and responsibilities. Childminders must ensure that assistants receive induction training to help them understand their roles and responsibilities. Induction training must include information about emergency evacuation procedures, safeguarding, child protection, and health and safety issues. Childminders must support assistants to undertake appropriate training and professional development opportunities to ensure they offer quality learning and development experiences for children that continually improves.

**List how and where this information is kept** **e.g. single central record**

* I will ensure that all new staff and volunteers (including temporary staff) are aware of the setting’s internal safeguarding processes.
* All staff members (including temporary staff) will receive training to ensure they are aware of a range of safeguarding issues.

* All staff members (including temporary staff) will receive regular safeguarding and child protection updates, at least annually.
* All staff members (including temporary staff) will be made aware of the settings expectations regarding safe and professional practice via the staff behaviour policy (or code of conduct) and Acceptable Use Policy.

**Annex 9: Contacts/links**

|  |  |  |
| --- | --- | --- |
| MASH | **0345 050 7666** | <http://www.oscb.org.uk/concerned-about-a-child/> |
| Out of Hours Emergency Duty Team | **0800 833 408** |  |
| Area link LCSS North | **0345 2412703** | [LCSS.North@oxfordshire.gov.uk](mailto:LCSS.North@oxfordshire.gov.uk) |
| Area link LCSS Central | **0345 2412705** | [LCSS.Central@oxfordshire.gov.uk](mailto:LCSS.Central@oxfordshire.gov.uk) |
| Area link LCSS South | **0345 2412608** | [LCSS.South@oxfordshire.gov.uk](mailto:LCSS.South@oxfordshire.gov.uk) |
| Designated Officer (LADO) | **01865 810603** | [Lado.safeguardingchildren@oxfordshire.gov.uk](mailto:Lado.safeguardingchildren@oxfordshire.gov.uk) |
| Police:  Emergency  Non-emergency | 999  101 |  |
| OSCB |  | [oscb.oxfordshire.gov.uk](mailto:oscb@oxfordshire.gov.uk) |
| NSPCC |  | <https://www.nspcc.org.uk/> |

**Annex 10**

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

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