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## Matrix of Changes since July 2024 Edition

All changes made throughout the policies and procedures are highlighted in yellow.

‘Minor word/grammar changes’ indicates that there have been no significant changes and the meaning of the policy remains the same.

Providers are responsible for ensuring they follow the current version of the framework for their provider type.

Section/Policy	Changes Made
<b>Useful contacts and recommended reading</b>	Debt Recovery Guide – link updated
<b>Safeguarding Children and Child Protection Policy (example)</b>	Removed: to safeguard vulnerable and at risk children by  Added: ‘to help prevent the risk of people becoming terrorists or supporting terrorism’. This includes safeguarding learners from extremist ideologies and radicalisation  Minor word and grammar changes
<b>Accidents and First Aid Policy (example)</b>	Minor word and grammar changes
<b>Admissions Policy (example)</b>	Minor word and grammar changes
<b>Allergies and Allergic Reactions Policy (example)</b>	Minor word and grammar changes
<b>Animal Health and Safety Policy (example)</b>	Blue Cross – hyperlink updated

<p><b>Dealing with Discriminatory Behaviour Policy (example)</b></p>	<p>Added: We provide a neutral working environment where no one should feel threatened or intimidated and everyone should be treated with equity, inclusivity, dignity and respect. This includes ‘work situations’ such as social events and social media posts and interactions between colleagues.</p> <p><b>Harassment:</b> we have zero tolerance towards such behaviour</p> <p><b>Sexual harassment</b> is any unwanted sexual conduct that has the purpose or effect of violating a person’s dignity or creating a hostile environment for them; the law requires the setting to take reasonable steps to prevent sexual harassment of workers in the course of their employment; we have zero tolerance towards such behaviour</p> <p><b>Third party harassment</b> occurs where a person is harassed by someone who does not work for the same employer, such as a visitor or supplier; we have zero tolerance towards such behaviour</p> <p>including understanding that harassment, of any kind, is subjective and so depends on how the behaviour makes someone feel. Training ensures staff understand this in order to create a culture of zero tolerance towards sexual harassment in the workplace</p> <p>Ensure a zero-tolerance approach is actually taken by challenging</p> <p>Expecting all staff to intervene in the case of third-party harassment, reporting issues to the nursery manager and/or reporting criminal acts to the police; we have an anonymous reporting procedure for sexual harassment</p> <p>We foster a safe, inclusive, and positive work environment, with our leadership team ensuring policies are kept up-to-date, conducting risk assessments, providing regular training and monitoring to ensure effective implementation. These demonstrate taking ‘reasonable steps’ to ensure compliance with the duty to prevent harassment of our employees, including harassment from third parties, such as visitors to the premises</p>
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<p><b>Grievance Procedure (example)</b></p>	<p>Removed: Grievances raised while you are subject to disciplinary proceedings will usually be heard when the disciplinary process has been completed.</p> <p>If a grievance has any bearing on the disciplinary proceedings, it will be dealt with as part of the disciplinary hearing or disciplinary appeal, as appropriate.</p> <p>Added: Where an employee raises a grievance during a disciplinary process the disciplinary process may be temporarily suspended in order to deal with the grievance.</p> <p>Where the grievance and disciplinary cases are related it may be appropriate to deal with both issues concurrently.</p> <p>Minor word or grammar changes</p>
<p><b>Inclusion and Equality Policy (example)</b></p>	<p>Added: Worker Protection Act 2023</p> <p>We foster a safe, inclusive, and positive work environment, with our leadership team ensuring policies are kept up-to-date, conducting risk assessments, providing regular training and monitoring to ensure effective implementation. These demonstrate taking 'reasonable steps' to ensure compliance with the duty to prevent harassment of our employees, including harassment from third parties</p> <p>Our zero-tolerance approach includes having anonymous reporting procedures and dealing with any instances which arise via our disciplinary procedures.</p> <p>Training includes ensuring staff understand that harassment, of any kind, is subjective and so depends on how the behaviour makes someone feel. We encourage all staff members to create a culture of zero tolerance towards discrimination and sexual harassment in our setting.</p>
<p><b>Looked After Children Policy (example)</b></p>	<p>Added: Looked after children can also be referred to as 'children in care', a term which many children and young people prefer.</p>

<p><b>Low-Level Concerns Policy (example)</b></p>	<p>Added:</p> <ul style="list-style-type: none"> <li>• Inadvertent or thoughtless behaviour</li> <li>• Behaviour that might be considered inappropriate depending on the circumstances</li> <li>• Behaviour which is intended to enable abuse.</li> </ul>
<p><b>Medication Policy (example)</b></p>	<p>Minor word or grammar changes</p>
<p><b>Mobile Phone and Electronic Device Use Policy (example)</b></p>	<p>Added: e.g. smart glasses</p>
<p><b>Nappy Changing Policy (example)</b></p>	<p>Added: and any other image sharing or recording devices</p>
<p><b>Online Safety Policy (example)</b></p>	<p>Added: Our nursery is aware of the growth of the internet and technology and the advantages this can bring to everyday life</p> <p>Minor word or grammar changes</p>
<p><b>Respectful Intimate Care Policy (example)</b></p>	<p>Removed: with respect</p> <p>Added: in a safe, respectful and child-centred way</p> <p>Providing intimate care involves working with children when they are particularly vulnerable, which can provide heightened opportunities for abuse. Therefore, to promote good practice</p> <p>Ensure children are afforded privacy and dignity during intimate care routines</p>
<p><b>Social Networking Policy (example)</b></p>	<p>Removed: Twitter</p> <p>Added: X (formerly Twitter)</p>

<p><b>Staff Well-being Policy (example)</b></p>	<p>Added: we have anonymous procedures to encourage reporting sexual harassment</p> <ul style="list-style-type: none"> <li>We have a zero tolerance approach towards discriminatory behaviour and sexual harassment</li> <li>Training includes an appropriate understanding that harassment, of any kind, is subjective and so depends on how the behaviour makes someone feel in order to create a culture of zero tolerance towards sexual harassment, in particular</li> </ul>
<p><b>Supervision of Visitors Policy (example)</b></p>	<p>Added: and other devices capable of recording or sharing audio and/or images, e.g. smart (camera) glasses</p>
<p><b>Harassment and Sexual Harassment Risk Assessment Template (example)</b></p>	<p>New template</p>
<p><b>Parent Contract and Terms and Conditions (example)</b></p>	<p><b>Agreement for payment of fees:</b> Table format for agreement created</p>
<p><b>Permission Forms (example)</b></p>	<p>Removed: Twitter</p> <p>Added: X (formerly Twitter)</p>

# Glossary

The following terms are used throughout this publication and refer to:

**Early Years Foundation Stage (EYFS)** – the statutory framework for care and early learning in England. It is mandatory for all early years providers including maintained schools, non-maintained schools, independent schools, all providers on the Early Years Register and all providers registered with an early years childminder agency. Providers are responsible for ensuring they follow the current version of the framework for their provider type.

**Ofsted** – is the Office for Standards in Education, Children’s Services and Skills and regulates and inspects early years providers in England against the EYFS.

**Parents** – for the purpose of this publication the term ‘parents’ will be used to describe all types of primary caregivers, such as biological and adoptive parents, foster carers and guardians. You may want to adapt the example documents to use the terminology you feel most comfortable with.

**Practitioner** – any adult who works with children in a nursery.

**Key person** – the named member of staff assigned to a child. Their role is to help ensure that every child’s care is tailored to meet their individual needs, to help the child become familiar with the setting, offer a settled relationship for the child and build a relationship with their parents.

# Safeguarding Children and Child Protection Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

*Ensure you review this policy to be consistent with the guidance and procedures of your local safeguarding partners (LSP).*

## PART 1: Safeguarding children and child protection procedures

### **Introduction**

**100 Acrewood Pre-school** is dedicated to the support, development and promotion of high-quality care and education for the benefit of our children, families and community. We are committed to safeguarding children and promoting their welfare.

All staff, students and volunteers have a responsibility for safeguarding children, being vigilant and identifying and reporting any safeguarding concerns, in line with this and supporting policies, including:

Acceptable internet use policy	Online safety policy
CCTV policy	Promoting positive behaviour policy
Data protection and confidentiality policy	Recruitment, selection and suitability of staff policy
Emergency lockdown policy	Respectful intimate care policy
Inclusion and equality policy	Social networking policy
Late collection and non-collection of children policy	Special educational needs and disabilities (SEND) policy
Lone working policy	Staff code of conduct
Looked after children policy	Supervision of children policy
Low-level concern policy	Supervision of visitors policy
Missing child from nursery policy	Volunteers policy
Missing child from outings policy	Whistleblowing policy
Mobile phone and electronic device use policy	Young workers policy
Nappy changing policy	

We ensure all staff, students and volunteers have the necessary knowledge and skills to carry out their duties and have sufficient understanding of how this policy and procedures support



them in promoting and safeguarding the welfare of children. This is achieved through recruitment and induction processes and by offering ongoing training and support to all staff, appropriate to their specific role.

This policy is reviewed annually to ensure it remains in line with statutory guidance. Its effectiveness is monitored through staff and stakeholder reviews, appraisals and feedback to ensure appropriate knowledge and awareness is in place.

It is the responsibility of every staff member, student and volunteer to report any breaches of this policy to the Designated Safeguarding Lead (DSL).

### **Policy intention**

The policy makes it clear that all staff, students and volunteers have a responsibility to safeguard children and young people and to protect them from harm. It aims to raise awareness of how to safeguard and promote the welfare of children and provides procedures should a child protection issue arise.

This policy applies to all children up to the age of 18 years whether living with their families, in state care, or living independently (*Working together to safeguard children*).

Safeguarding and promoting the welfare of children, in relation to this policy, is defined 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 family network through a kinship care arrangement, wherever possible and where this is in the best interests of the children
- 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 integral part of safeguarding children and promoting their overall welfare. In this policy, child protection shall mean:

- The activity that is undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including online.

*(Working together to safeguard children)*

To safeguard children and promote their welfare we will:

- Develop a safe culture where staff are confident to raise concerns about professional conduct
- Ensure all staff are able to identify the signs and indicators of abuse, including the softer signs of abuse, and know what action to take

- Understand and be sensitive to factors, including economic and social circumstances and ethnicity, which can impact children and families' lives
- Share information with other agencies as appropriate.

We promote:

- Always listening to children
- Positive images of children
- Children developing independence and autonomy as appropriate for their age and stage of development
- Safe and secure environments for children
- Tolerance and acceptance of different beliefs, cultures and communities
- British values
- Providing intervention and help for children and families in need.

We have a duty to act quickly and responsibly in any instance that may come to our attention. If in any doubt about what constitutes a safeguarding concern, refer to the Designated Safeguarding Lead (DSL). If there is a concern, never do nothing (Laming, 2009), always do something, including sharing information with any relevant agencies. Safeguarding is everybody's responsibility.

The nursery aims to:

- Keep the child at the centre of all we do, providing sensitive interactions that develop and build children's well-being, confidence and resilience. We will support children to develop an awareness of how to keep themselves safe, healthy and develop positive relationships
- Be aware of the increased vulnerability of children with Special Educational Needs and Disabilities (SEND), isolated families and vulnerabilities in families, including the impact of toxic trio on children and Adverse Childhood Experiences (ACEs)
- Ensure that all staff feel confident and supported to act in the best interest of the child, maintaining professional curiosity around welfare of children, sharing information, and seeking help that a child may need at the earliest opportunity
- Ensure that all staff are familiar and updated regularly with child protection training and procedures and kept informed of changes to local and/or national procedures, including thorough annual safeguarding updates
- Make any child protection referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the **Surrey County Council**
- Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest
- Ensure that staff identify, minimise and manage risks while caring for children
- Take any appropriate action relating to allegations of serious harm or abuse against any person working with children including reporting such allegations to Ofsted and other relevant authorities

- Ensure parents are fully aware of our safeguarding and child protection policies and procedures when they register with the nursery and are kept informed of all updates when they occur
- Regularly review and update this policy with staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by **Surrey County Council**.

### **Designated Safeguarding Lead (DSL)**

The DSL has overall responsibility for the Safeguarding children and child protection policy and procedures. It is their role to ensure that the policy and procedures are implemented to safeguard and promote the welfare of children. They are responsible for coordinating safeguarding and child protection training for staff across the organisation.

There is always at least one designated person on duty during the opening hours of the setting. The designated persons receive comprehensive training at least every two years and update their knowledge on an ongoing basis, but at least once a year. They in turn support the ongoing development and knowledge of the staff team with regular safeguarding updates.

<b>Designated Safeguarding Lead</b>	Lisa Hunt
<b>Deputy Designated Safeguarding Lead</b>	Noemi Hoffmann

In the unlikely event of the DSL or Deputy DSL absence and to ensure immediate action can be taken, contact the Local Safeguarding Partnership (LSP).

### **The role of the DSL**

The role of the DSL is to:

- Monitor and update the Safeguarding children and child protection policy and procedures in line with new legislation and to ensure it is effective. This will be done by making sure that everyone understands the correct procedures during their individual annual review
- Ensure updates and new legislation are reflected in our services as soon as they are known
- Act as a source of support, advice and expertise for all staff, students, volunteers, children and parents who have child protection concerns
- Ensure detailed, accurate, secure written records of concerns and referrals
- Review all written safeguarding reports
- Assess information provided promptly, carefully and refer as appropriate to external agencies
- Provide signposting to other organisations
- Consult with statutory child protection agencies and regulatory bodies where required
- Make formal referrals to statutory child protection agencies or the police, as required.

In addition, the DSL is required to:

- Keep up-to-date with good practice and national requirements for safeguarding and child protection
- Provide information on safeguarding and child protection for the setting
- Raise awareness of any safeguarding and child protection training needs and implement where necessary
- Retain up-to-date knowledge of the role of the local safeguarding partnership arrangements and local child protection procedures.

The DSL does not investigate whether or not a child has been abused or investigate an allegation or disclosure. Investigations are for the appropriate authorities, usually the police and social services.

### **Sharing low-level concerns**

On occasion, inappropriate, problematic or concerning behaviour by staff or other adults is observed but does not meet the threshold for significant harm. This may be classed as a 'low-level' concern, although this does not mean that it is insignificant.

See Low-level concerns policy for full details.

We define a low-level concern as:

- Any concern, no matter how small, that an adult working with children may have acted in a way that is inconsistent with our Staff behaviour policy, including inappropriate behaviour outside of work
- A concern that may be a sense of unease or a 'nagging doubt' and does not meet the harm threshold or is serious enough to refer to the LADO.

We encourage a culture of openness, trust and transparency, with clear values and expected behaviour, monitored and reinforced by all staff. All concerns or allegations, however small, will be shared and responded to. All concerns will be shared with the DSL, or other nominated person, as in our reporting procedures. We encourage concerns to be shared as soon as reasonably practicable and preferably within 24 hours of becoming aware of it. However, it is never too late to share a low-level concern.

It is not expected that staff will be able to determine whether the behaviour in question is a concern, complaint or allegation before sharing the information. If the DSL is in any doubt as to whether the information meets the harm threshold, they will consult the LADO.

Occasionally a member of staff may find themselves in a situation which could be misinterpreted or appear compromising to others. If this occurs, staff are encouraged to self-report to the DSL. Equally, a member of staff may have behaved in a manner which, on reflection, falls below the standards set in our Staff behaviour policy. If this occurs, staff are encouraged to self-report to the DSL. We encourage staff to be confident to self-refer and believe it reflects awareness of our standards of conduct and behaviour.

When the DSL receives the information, they will need to determine whether the behaviour:

- Meets, or may meet, the harm threshold (and so contact the LADO)
- Meets the harm threshold when combined with previous low-level concerns (and so contact the LADO)
- Constitutes a ‘low-level’ concern
- Is appropriate and consistent with the law and our Staff behaviour policy.

The DSL will make appropriate records of all information shared, including:

- With the reporting person
- The subject matter of the concern
- Any relevant witnesses (where possible)
- Any external discussions such as with the LSP or LADO
- Their decision about the nature of the concern
- Their rationale for that decision
- Any action taken.

This constitutes a record of low-level concern. We retain all records of low-level concerns in a separate low-level concerns file, with separate concerns regarding a single individual kept as a chronology. These records are kept confidential and held securely, accessed only by those who have appropriate authority. Records will be retained at least until the individual leaves their employment.

If the low-level concern raises issues of misconduct, then appropriate actions following our Disciplinary procedures will be taken. Records will be kept in personnel files as well as in the low-level concerns file.

### **Monitoring children’s attendance**

As part of our requirements under the statutory framework we are required to monitor children’s attendance patterns to ensure they are consistent and no cause for concern. We ask parents to inform the nursery prior to their children taking holidays or days off, and all incidents of sickness absence should be reported to the nursery the same day so the nursery management are able to account for a child’s absence.

If a child has not arrived at nursery within one hour of their normal start time, the parents will be contacted to ensure the child is safe and healthy. If the parents are not contactable then the emergency contacts numbers listed will be used to ensure all parties are safe. Staff will work their way down the emergency contact list until contact is established and we are made aware that all is well with the child and family.

If contact cannot be established then we would assess if a home visit were required to establish all parties are safe. If contact is still not established, we would assess if it would be appropriate to contact relevant authorities, including the police, in order for them to investigate further.

Where a child is part of a child protection plan, or during a referral process, any absences will immediately be reported to the Local Authority children’s social care team to ensure the child remains safe and well.

### **Informing parents**

Parents are normally the first point of contact. If a suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of the Local Authority children's social care team, police or LADO does not allow this to happen.

This will usually be the case where the parent or family member is the likely abuser or where a child may be endangered by this disclosure. In these cases the investigating officers will inform parents.

### **Support to families**

The nursery takes every step in its power to build up trusting and supportive relationships among families, staff, students and volunteers within the nursery.

The nursery will continue to welcome a child and their family whilst enquiries are being made in relation to abuse in the home situation. Parents and families will be treated with respect in a non-judgmental manner whilst any external investigations are carried out in the best interest of the child.

### **Confidentiality**

Confidentiality must not override the right of children to be protected from harm. However, every effort will be made to ensure confidentiality is maintained for all concerned if an allegation has been made and is being investigated.

If uncertain about whether sensitive information can be disclosed to a third party, contact the DSL or call the Information Commissioner's Office on 0303 123 1113. They will provide advice about the particulars relating to each individual case, including information which can and cannot be shared.

Staff must not make any comments either publicly or in private about the supposed or actual behaviour of a parent, child or member of staff.

### **Record keeping and data protection**

Confidential records kept on a child are shared with the child's parents or those who have parental responsibility for the child, only if appropriate and in line with guidance of the Local Authority with the proviso that the care and safety of the child is paramount. We will do all in our power to support and work with the child's family.

The nursery keeps appropriate records to support the early identification of children and families which would benefit from early help. Factual records are maintained in a chronological order with parental discussions. Records are reviewed regularly by the DSL to look holistically at identifying children's needs.

Our Data protection and confidentiality policy will be applied with regards to any information received from an individual. Only persons involved in the investigation should handle this information although any investigating body will have access to all information stored in order to support an investigation.

## PART 2: Definitions of abuse

### **Definition of significant harm**

The Children Act 1989 introduced the concept of significant harm as *'the threshold that justifies compulsory intervention in family life in the best interests of children'*. It gives LAs a duty to make enquires to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.

Whilst there are no absolute criteria to rely on when judging what constitutes significant harm, consideration should be given to:

- The severity of the ill-treatment, including the degree of harm
- The extent and frequency of abuse and/or neglect
- The impact this is likely to have, or is having, on the child involved.

This may be a single traumatic event, such as a violent assault, suffocation or poisoning, or it can be a combination of events (both acute and long-standing) that impairs the physical, intellectual, emotional, social or behavioural development of the child.

### **Definitions of abuse and neglect**

Abuse and neglect are forms 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 within a family, institution or community setting by those known to them or, more rarely, a stranger.

Perpetrators of abuse can be an adult, or adults, another child or children.

*(What to do if you're worried a child is being abused: Advice for practitioners and Working together to safeguard children)*

The signs and indicators listed below may not necessarily indicate that a child has been abused, but can help to indicate that something may be wrong, especially if a child shows a number of these symptoms, or any of them to a marked degree.

### **Indicators of child abuse**

- Failure to thrive and meet developmental milestones
- Fearful or withdrawn tendencies
- Unexplained injuries to a child or conflicting reports from parents or staff
- Repeated injuries
- Unaddressed illnesses or injuries
- Significant changes to behaviour patterns.

Softer signs of abuse as defined by National Institute for Health and Care Excellence (NICE) include:

**Emotional states:** Fearful, withdrawn, low self-esteem.

**Behaviour:** Aggressive, habitual body rocking.

**Interpersonal behaviours:**

- Indiscriminate contact or affection seeking
- Over-friendliness to strangers including healthcare professionals
- Excessive clinginess, persistently resorting to gaining attention
- Demonstrating excessively 'good' behaviour to prevent parent disapproval
- Failing to seek or accept appropriate comfort or affection from an appropriate person when significantly distressed
- Coercive controlling behaviour towards parents
- Lack of ability to understand and recognise emotions
- Very young children showing excessive comforting behaviours when witnessing parental or carer distress.

**Child-on-child abuse**

Child-on-child abuse is also known as peer-on-peer abuse; children are included as potential abusers in our policies. Child-on-child abuse may take the form of bullying, physically hurting another child, emotional abuse or sexual abuse. Reporting procedures in these instances remain the same although additional support from relevant agencies may be required to support both the victim and the perpetrator. Children who develop harmful behaviours are also likely to be victims of abuse or neglect.

If **child-on-child abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

**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.

If **physical abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

**Fabricated or induced illness (FII)**

This abuse is when a parent fabricates the symptoms of, or deliberately induces, illness in a child. The parent may seek out unnecessary medical treatment or investigation. They may exaggerate a real illness and symptoms, or deliberately induce an illness through poisoning with medication or other substances, or they may interfere with medical treatments. This may also be presented through false allegations of abuse or encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.

**FII** is a form of **physical abuse** and any concerns must be reported in line with our safeguarding procedures.



### **Female genital mutilation (FGM)**

FGM is a procedure where the female genital organs are injured or changed with no medical reason. The procedure may be carried out shortly after birth, during childhood or adolescence, just before marriage or during a woman's first pregnancy, according to the community.

It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother, and/or death (definition taken from the *Multi-agency statutory guidance on female genital mutilation*). Other consequences include shock, bleeding, infections (tetanus, HIV and hepatitis B and C) and organ damage.

**FGM** is a form of **physical abuse** and any concerns must be reported in line with our safeguarding procedures. In addition, there is a mandatory duty to report to police any case where an act of FGM appears to have been carried out on a girl under the age of 18.

### **Breast ironing or breast flattening**

Breast ironing, also known as breast flattening, is a process where young girls' breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear or to delay the development of the breasts entirely. It is believed that by carrying out this act, young girls will be protected from harassment, rape, abduction and early forced marriage. These actions can cause serious health issues such as abscesses, cysts, itching, tissue damage, infection, discharge of milk, dissymmetry of the breasts, severe fever.

**Breast ironing/flattening** is a form of **physical abuse** and any concerns must be reported in line with our safeguarding procedures.

### **Emotional abuse**

*Working together to safeguard children* defines emotional abuse as 'the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.' Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur separately.

Examples of emotional abuse include:

- Conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person
- Not giving a child opportunity to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate
- Age or developmentally inappropriate expectations being imposed, such as interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction
- Serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children
- A child seeing or hearing the ill-treatment of another.

A child may also experience emotional abuse through witnessing domestic abuse or alcohol and drug misuse by adults caring for them. In England, The Domestic Abuse Act (2021) recognises in law that children are victims of emotional abuse if they see, hear or otherwise experience the effects of domestic abuse.

Signs and indicators may include delay in physical, mental and/or emotional development, sudden speech disorders, overreaction to mistakes, extreme fear of any new situation, neurotic behaviour (rocking, hair twisting, self-mutilation), extremes of passivity or aggression, appearing to lack confidence or self-assurance.

If **emotional abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Sexual abuse**

Sexual abuse involves forcing, or enticing, a child to take part in sexual activities. Sexual abuse does not necessarily involve a high level of violence and includes 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. Adult males are not the sole perpetrators of sexual abuse; women also commit acts of sexual abuse, as do other children. This policy applies to all children up to the age of 18 years.

Action must be taken if staff witness symptoms of sexual abuse including a child indicating sexual activity through words, play or drawing, having an excessive preoccupation with sexual matters or having an inappropriate knowledge of adult sexual behaviour, or language,

for their developmental age. This may include acting out sexual activity on dolls or toys or in the role-play area with their peers, drawing pictures that are inappropriate for a child, talking about sexual activities or using sexual language or words.

Additional signs of emotional and physical symptoms are shown below.

Emotional signs	Physical signs
<ul style="list-style-type: none"> <li>• Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age or stage of development</li> <li>• Personality changes, such as becoming insecure or clingy</li> <li>• Regressing to younger behaviour patterns, such as thumb sucking or bringing out discarded cuddly toys</li> <li>• Sudden loss of appetite or compulsive eating</li> <li>• Being isolated or withdrawn</li> <li>• Inability to concentrate</li> <li>• Lack of trust or fear of someone they know well, such as not wanting to be alone with a carer</li> <li>• Becoming worried about clothing being removed.</li> </ul>	<ul style="list-style-type: none"> <li>• Bruises</li> <li>• Bleeding, discharge, pains or soreness in their genital or anal area</li> <li>• Sexually transmitted infections</li> <li>• Pregnancy.</li> </ul>

If **sexual abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### Neglect

*Working together to safeguard children* defines neglect as ‘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 as a result of maternal substance abuse. Once a child is born, neglect may involve adults involved in the care of the child failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect them from physical harm or danger
- Ensure adequate supervision (including the use of inadequate caregivers)

- Ensure access to appropriate medical care or treatment
- Respond to their basic emotional needs.

The NSPCC statistics briefing for 2024 has found neglect continues to be the most common form of abuse, with one in ten children in the UK having been neglected. Concerns around neglect have been identified for half of children who are the subject of a child protection plan or on a child protection register in the UK. Younger children are more likely than older children to be the subject of a child protection plan in England because of neglect, although research suggests that the neglect of older children is more likely to go overlooked.

Signs of neglect include a child persistently arriving at nursery unwashed or unkempt, wearing clothes that are too small (especially shoes that may restrict the child's growth or hurt them), arriving at nursery in the same nappy they went home in, or a child having an illness or identified special educational need or disability that is not being addressed. A child may be persistently hungry if a caregiver is withholding, or not providing enough, food. A child who is not receiving the attention they need at home may crave it from other adults, such as at nursery or school.

If **neglect** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Domestic abuse**

The definition of domestic abuse from the Domestic Abuse Act, 2021 is:

*Behaviour of a person (A) towards another person (B) is 'domestic abuse' if:*

- *A and B are each aged 16 or over and are personally connected to each other*
- *The behaviour is abusive.*

*Behaviour is 'abusive' if it consists of any of the following:*

- *Physical or sexual abuse*
- *Violent or threatening behaviour*
- *Controlling or coercive behaviour*
- *Economic abuse (any behaviour that has a substantial adverse effect on B's ability to acquire, use or maintain money or other property and/or obtain goods or services)*
- *Psychological, emotional or other abuse.*

*It does not matter whether the behaviour consists of a single incident or a course of conduct.*

Domestic abuse can happen to anyone regardless of gender, age, social background, religion, sexuality or ethnicity and domestic abuse can happen at any stage in a relationship.

Signs and symptoms of domestic abuse include:

- Changes in behaviour (for example, becoming very quiet, anxious, frightened, tearful, aggressive, distracted, depressed etc.)
- Visible bruising or single, or repeated, injury with unlikely explanations
- Change in the manner of dress (for example, clothes to hide injuries that do not suit the weather)
- Stalking, including excessive phone calls or messages
- Partner or ex-partner exerting an unusual amount of control or demands over work schedule
- Frequent lateness or absence from work.

All children can witness and be adversely affected by domestic abuse in the context of their home life. Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children.

Where incidents of domestic abuse are shared by our own staff, students or volunteers we will respect confidentiality at all times and not share information without their permission. However, we will share this information, without permission, in cases of child protection or where we believe there is an immediate risk of serious harm to the person involved.

If **domestic abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Contextual safeguarding**

As young people grow and develop, they may be vulnerable to abuse or exploitation from outside their family. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online.

As part of our safeguarding procedures we will work in partnership with parents and other agencies to work together to safeguard children and provide the support around contextual safeguarding concerns.

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

Both CSE and CCE are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation (*Keeping children safe in education*).

**If involvement in county lines is suspected, then any concerns must be reported in line with our safeguarding procedures.**

### **Child sexual exploitation (CSE)**

CSE is where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into **sexual** activity. 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 and may be without the child's immediate knowledge such as through others copying videos or images they have created and posted on social media.

Signs and symptoms include:

- Physical injuries such as bruising or bleeding
- Having money or gifts they are unable to explain
- Sudden changes in their appearance
- Becoming involved in drugs or alcohol, particularly if it is suspected they are being supplied by older men or women
- Becoming emotionally volatile (mood swings are common in all young people, but more severe changes could indicate that something is wrong)
- Using sexual language beyond that expected for their age or stage of development
- Engaging less with their usual friends
- Appearing controlled by their phone
- Switching to a new screen when you come near the computer
- Nightmares or sleeping problems
- Running away, staying out overnight, missing school
- Changes in eating habits
- Talk of a new, older friend, boyfriend or girlfriend
- Losing contact with family and friends or becoming secretive
- Contracting sexually transmitted diseases.

### **Child Criminal Exploitation (CCE)**

CCE is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any **criminal** activity. The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.

Other examples include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country forced to shoplift or pickpocket, or to threaten other young people. Signs and symptoms of CCE are similar to those for CSE.

If CSE or CCE is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **County Lines**

The National Crime Agency (NCA) defines county lines as gangs and organised criminal networks involved in exporting illegal drugs from big cities into smaller towns, using dedicated mobile phone lines or other form of 'deal line.' Customers live in a different area to the dealers, so drug runners are needed to transport the drugs and collect payment.

Perpetrators often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims. A child is targeted and recruited into county lines through schools, further and higher educational institutions, pupil referral units, special educational needs schools, children's homes and care homes.

Signs and symptoms include:

- Changes in dress style
- Unexplained, unaffordable new things (for example, clothes, jewellery, cars etc.)
- Missing from home or school and/or significant decline in performance
- New friends with those who don't share any mutual friendships with the victim, gang association or isolation from peers or social networks
- Increase in anti-social behaviour in the community including weapons
- Receiving more texts or calls than usual
- Unexplained injuries
- Significant changes in emotional well-being
- Being seen in different cars or taxis driven by unknown adults
- A child being unfamiliar with where they are.

### **Cuckooing**

Cuckooing is a form of county lines crime. In this instance, the drug dealers take over the home of a vulnerable person in order to criminally exploit them by using their home as a base for drug dealing, often in multi-occupancy or social housing properties.

Signs and symptoms include:

- An increase in people, particularly unknown people, entering or leaving a home or taking up residence

- An increase in cars or bikes outside a home
- A neighbour who hasn't been seen for an extended period
- Windows covered or curtains closed for a long period
- Change in resident's mood and/or demeanour (for example, secretive, withdrawn, aggressive or emotional)
- Substance misuse and/or drug paraphernalia
- Increased anti-social behaviour.

If **cuckooing** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Child trafficking and modern slavery**

Child trafficking and modern slavery is when children are recruited, moved, transported and then exploited, forced to work or are sold.

For a child to have been a victim of trafficking there must have been:

- *Action*: recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation
- *Purpose*: sexual exploitation, forced labour or domestic servitude, slavery, financial exploitation, illegal adoption, removal of organs.

Modern slavery includes slavery, servitude and forced or compulsory labour and child trafficking. Victims of modern slavery are also likely to be subjected to other types of abuse such as physical, sexual and emotional abuse.

Signs and symptoms for children include:

- Being under control and reluctant to interact with others
- Having few personal belongings, wearing the same clothes every day or wearing unsuitable clothes
- Being unable to move around freely
- Appearing frightened, withdrawn, or showing signs of physical or emotional abuse.

If **child trafficking** or **modern slavery** are suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Forced marriage**



A forced marriage is defined as ‘a marriage in which one, or both spouses, do not consent to the marriage but are coerced into it. Duress can include physical, psychological, financial, sexual and emotional pressure.’

Where incidents of forced marriage are shared by our own staff, students or volunteers, we will respect confidentiality at all times and not share information without their permission. However, we will share this information without permission in cases of child protection, or where we believe there is an immediate risk of serious harm to the person involved.

If it is suspected that a **forced marriage** is being planned, then any concerns must be reported in line with our safeguarding procedures.

### **Honour based abuse (HBA)**

HBA is described as ‘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.’ (*Keeping children safe in education*). Such abuse can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their ‘honour’ code. It is a violation of human rights and may be domestic, emotional and/or sexual abuse such as being held against their will, threats of violence or actual assault. It often involves wider family networks or community pressure and so can include multiple perpetrators.

Signs and symptoms of HBA include:

- Changes in how the child dresses or acts, such as not ‘western’ clothing or make-up
- Visible injuries, or repeated injury, with unlikely explanations
- Signs of depression, anxiety or self-harm
- Frequent absences
- Restrictions on friends or attending events.

Where incidents of HBA are shared by our own staff, students or volunteers, we will respect confidentiality at all times and not share information without their permission. However, we will share this information without permission in cases of child protection, or where we believe there is an immediate risk of serious harm to the person involved.

If **honour based abuse** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### **Child abuse linked to faith or belief (CALFB)**

Child abuse linked to faith or belief (CALFB) can happen in families when there is a concept of belief in:

- Witchcraft and spirit possession, demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs)
- The evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context)

- Ritual or multi-murders where the killing of children is believed to bring supernatural benefits, or the use of their body parts is believed to produce potent magical remedies
- Use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation
- Children’s actions are believed to have brought bad fortune to the family or community.

If **CALFB** is suspected, then any concerns must be reported in line with our safeguarding procedures.

### Extremism and radicalisation

Under the Counter-Terrorism and Security Act 2015, there is a duty ‘to help prevent the risk of people becoming terrorists or supporting terrorism’. This includes safeguarding learners from extremist ideologies and radicalisation to prevent them from being drawn into terrorism. This is known as the Prevent Duty.

Children can be exposed to different views and receive information from various sources and some of these views may be considered radical or extreme. Radicalisation is the way a person comes to support or be involved in extremism and terrorism; usually it’s a gradual process so those who are affected may not realise what’s happening. Radicalisation is a form of harm.

The process may involve:

- Being groomed online or in person
- Exploitation, including sexual exploitation
- Psychological manipulation
- Exposure to violent material and other inappropriate information
- The risk of physical harm or death through extremist acts.

For further information visit [The Prevent Duty](#) website.

If **radicalisation or extremism** is suspected, then any concerns must be reported in line with our safeguarding procedures. This includes reporting concerns to the police.

### Online safety

While the growth of internet and mobile device use brings many advantages, the use of technology has become a significant component of many safeguarding issues such as child sexual exploitation and radicalisation.

Your essential guide to policies and procedures – England **V0.7** – January 2025

There are four main areas of risk associated with online safety:

- Content - being exposed to illegal, inappropriate or harmful material such as pornography, fake news, racist or radical and extremist views
- Contact - being subjected to harmful online interaction with other users such as commercial advertising or adults posing as children or young adults
- Conduct - personal online behaviour that increases the likelihood of, or causes, harm, such as making, sending and receiving explicit images and online bullying
- Commerce - risks such as online gambling, inappropriate advertising, phishing and or financial scams.

Report **online safety concerns** to the DSL and to the Child Exploitation and Online Protection Centre (CEOP): <https://www.ceop.police.uk/Safety-Centre/>  
**Inappropriate content** received via email must be reported to the DSL and to the Internet Watch Foundation (IWF): <https://www.iwf.org.uk/en/uk-report/>

### **Up skirting/down blousing**

Up skirting and down blousing are criminal offences. They involve taking pictures of someone's genitals, buttocks or other intimate images under their clothing without them knowing, either for sexual gratification or in order to humiliate, or distress, the individual.

If **up skirting or down blousing** is suspected, then any concerns must be reported in line with our safeguarding procedures.

## PART 3: Reporting procedures

### **Public interest disclosure (whistleblowing)**

Whistleblowing is the term used when a worker passes on information concerning wrongdoing. All safeguarding allegations, internal or external, current or historical, must be passed on the DSL. We will cooperate fully with the authorities involved and follow any guidance given.

We believe keeping children safe is the highest priority and if, for whatever reason, concerns cannot be reported to the DSL or deputy DSL, concerns can be reported anonymously to the NSPCC, the police or the LA social services safeguarding children team.

### **Allegation against our staff**

An allegation against our staff may relate to a person who 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

- Behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children, or
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children.

We will make every effort to maintain the confidentiality of all parties while an allegation or concern is being investigated. Dealing with an allegation can be a stressful experience and, to support the staff member, a named person (usually the DSL or Deputy DSL) to liaise with will be offered. The timeframes for an investigation will follow the guidelines of other involved authorities.

We reserve the right to suspend a staff member until the investigation is concluded. Further action will be determined by the outcome of the investigation.

*Founded allegations* are considered gross misconduct, in accordance with our disciplinary procedures, and may result in the termination of employment. DBS will be informed to ensure their records are updated and Ofsted will be informed. We retain the right to dismiss any member of staff in connection with founded allegations following an inquiry.

All safeguarding records are kept until the person reaches normal retirement age or for 22 years, if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids unnecessary reinvestigation.

*Unfounded allegations* will result in all rights being reinstated. A return to work plan will be put in place for any member of staff returning to work after an allegation has been deemed unfounded. Individual support will be offered to meet the needs of the staff member and the nature of the incident such as more frequent supervisions, coaching and mentoring or external support services.

If the member of staff resigns during the investigation, we will inform DBS, Ofsted and the police, where appropriate.

### **Support for staff during safeguarding incidents**

The DSL will support staff throughout any of the processes listed above and will organise appropriate counselling should this be required.

Any member of staff who has concerns about the content of this policy and its procedures, should speak to the DSL as soon as possible. If any member of staff wishes to talk confidentially about any safeguarding concern or any other issue relating to child protection or personal circumstance, it is important to do this as soon as possible.

### **Reporting procedure**

We will always act on behalf of the child and will do everything possible to ensure the safety and welfare of any child and so will take all allegations of potential abuse seriously. All concerns reported to staff will be pursued, regardless of the nature of the concern and to whom the allegation relates.

All staff have a responsibility to report safeguarding and child protection concerns and suspicions of abuse. These concerns will be discussed with the DSL as soon as possible, as follows:

	<b>Staff member role</b> on receiving information that causes a safeguarding concern	<b>DSL role</b> on receiving information that causes a safeguarding concern
<b>Step 1</b>	<ul style="list-style-type: none"> <li>• Contact the DSL immediately. This must be a verbal conversation to ensure the concern is clearly understood and action is taken</li> <li>• If the DSL is unavailable, contact the Deputy DSL, LSP, NSPCC, social services or police until you are able to have a verbal conversation</li> <li>• For children who arrive at nursery with an existing injury, an 'incident outside nursery' form will be completed. If there are queries or concerns regarding the injury or information given, follow these procedures</li> </ul>	<ul style="list-style-type: none"> <li>• If it is believed a child is in immediate danger, contact the police</li> </ul>

<p><b>Step 2</b></p>	<ul style="list-style-type: none"> <li>• Write an objective report including: <ul style="list-style-type: none"> <li>– Child's name and address</li> <li>– Age and date of birth</li> <li>– Date, time and location of the observation or disclosure</li> <li>– Exact words spoken by the child (as close to word-for-word as possible) and non-verbal communication</li> <li>– Outline of the concern</li> <li>– Exact position and type of any injuries or marks seen</li> <li>– Exact observation of any incident or concern reported and the names of any other person present at the time</li> <li>– Any known confidentiality issues</li> <li>– Signature and date of person making the report and the DSL or other nominated individual receiving the report</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Sign and date report received from staff member</li> <li>• Securely store the information according to the nursery procedures</li> <li>• If the safeguarding concern relates to a child, contact the Local Authority children's social care team, report concerns and seek advice immediately, or as soon as it is practical to do so</li> <li>• If the safeguarding concern relates to an allegation against an adult working or volunteering with children, contact the Local Authority Designated Officer (LADO) and request a confirmation email of the report, then report the concern to Ofsted</li> <li>• A full investigation into any allegation will be carried out by the appropriate professionals to determine how this will be handled</li> <li>• Note any actions requested by LADO / Ofsted and follow any instructions received</li> </ul>
<p><b>Step 3</b></p>	<ul style="list-style-type: none"> <li>• If you feel the report is not being taken seriously or are worried about an allegation getting back to the person in question, then it is your duty to inform the Local Authority children's social care team yourself directly</li> <li>• Follow all instructions from the Local Authority children's social care team and/or Ofsted, co-operating where required</li> </ul>	<ul style="list-style-type: none"> <li>• If appropriate, discuss the concerns or incidents with parent(s), unless it is believed that this would place the child at greater risk of harm</li> <li>• Record all discussions (remember parents will have access to these records on request in line with GDPR and data protection guidelines)</li> <li>• Follow all instructions from the Local Authority children's social care team and/or Ofsted, co-operating where required</li> <li>• Record information and actions taken</li> </ul>

<b>Step 4</b>		<ul style="list-style-type: none"> <li>• If the DSL is not the owner/ manager and there is an allegation against a member of staff, then the owner/manager must be informed as they have a duty of care for their employees</li> </ul>
<b>Step 5</b>		<ul style="list-style-type: none"> <li>• If the Local Authority children’s social care team have not been in contact within the timeframe set out in Working Together to Safeguard Children, it must be followed up</li> <li>• Never assume that action has been taken</li> </ul>
<b>Step 6</b>	<ul style="list-style-type: none"> <li>• Safeguarding procedures will be reviewed to ensure the process has been applied in line with the policy</li> </ul>	

If a concern is raised anonymously and we have no contact details, we will treat the concern as valid and follow the procedures as above. If a malicious call is suspected, the procedures will still be followed: a child may be in danger. The Information Commissioners Office (ICO) will be contacted to ensure permitted data sharing.

#### PART 4: Recruitment, selection, induction and training

##### **Recruitment and selection**

Through the implementation of our Safer recruitment of staff policy, we endeavour to prevent unsuitable people from becoming members of staff. Procedures include relevant checks, such as requesting references, establishing the identity of applicant and conducting criminal records disclosures. Where required, staff and stakeholders have enhanced DBS checks. Clear person specification criteria and processes during the recruitment and selection process enable us to determine a candidate’s suitability for the role.

We have specific responsibilities, as outlined in this policy, for any staff, apprentices, students and learners under the age of 18 whether living with their families, in state care, or living independently.

##### **Induction and probation for staff**

As part of our induction process, all new workers will receive basic training on this Safeguarding children and child protection policy so they have the necessary knowledge and skills to safeguard and promote the welfare of children.

Within the first week of induction, all staff will receive a copy of this policy. It is the line manager’s responsibility to ensure that the new staff member understands it and is able to follow it. All safeguarding training must be completed by the end of the probationary period.

All staff are expected to keep their safeguarding knowledge and skills up-to-date and report any concerns they may have. We maintain records to ensure all staff have received the training they need.

### **Learners on placements or in employment**

We hold responsibility for ensuring that learners on placement or in employment are familiar with and sign up to this policy and agree to work within this framework. Learners will receive basic child protection training prior to starting their placement.

Learners and students under the age of 18 will be protected as children. Risk assessments will be completed to ensure their safety and well-being are protected and supported during their employment or training period. If situations arise during employment or placement which identifies those aged 18 or under are at risk from abuse or neglect, we will contact the appropriate bodies to ensure the individual is safeguarded.

### **Responding to and recording disclosures**

Staff, volunteers or students may receive a safeguarding disclosure. See the guidance below for responding to and reporting disclosures of abuse.

#### **Responding to a child's disclosure of abuse - what to do and say**

- Stay calm and listen carefully
- Try not to look shocked and reassure them that this is not their fault
- Find an appropriate opportunity to say that the information will need to be shared and do not promise to keep the information shared a secret
- Allow the child to continue at their own pace
- Only ask questions for clarification and avoid asking any questions that may suggest a particular answer
- Reassure the child that they have done the right thing, let them know what you will do next and with whom the information will be shared
- Record the disclosure in writing using the child's own words as soon as possible, but not while the child is talking
- Includes the date and time, any names mentioned and to whom the information was given
- Sign and date the record, store it securely and refer the disclosure to the setting DSL and/or manager.



### **Recording a case of disclosure or suspicions of abuse in the community**

If you observe a concern or receive a disclosure, make an objective record. Where possible include:

- Child's name and address
- Age of the child and date of birth
- Setting name and address
- Date and time of the observation or disclosure
- Details of the concern using factual information, including the exact words, if relevant
- Accurate details of the observation, including actions of the child or adult involved
- Accurate details of an injury or wound seen, including position and size
- The names of any other person present at the time
- Name of the person completing the report
- Name of the person to whom the concern was shared, with date and time.

Discuss the record with the setting DSL or manager and follow the procedures. We expect all members of staff and stakeholders to co-operate with relevant agencies to ensure the safety of children.

### **Legal framework**

We adhere to all current legislation, as below:

Children and Social Work Act 2017  
Criminal Justice and Court Services Act 2000  
Female Genital Mutilation Act 2003 (as amended by the Serious Crime Act 2015)  
Freedom of Information Act 2012  
Safeguarding Vulnerable Groups Act 2006  
The Childcare Act 2006  
The Children Act 2004  
The Children Act (England and Wales) 1989  
The Counter-Terrorism and Security Act 2015  
The Data Protection Acts 1984, 1998 and 2018  
The Domestic Abuse Act 2021  
The Equality Act 2010  
The Human Rights Act 1998  
The Police Act 1997  
The Sexual Offences Act 2003  
Keeping Children Safe in Education  
Working together to safeguard children

Relevant non-statutory guidance:

Child sexual exploitation, DfE 2017  
Information sharing, DfE 2024  
What to do if you're worried a child is being abused, DfE 2015

### **Useful contacts**

Your essential guide to policies and procedures – England **V0.7** – January 2025

<b>Setting</b>	
Main office	07799 541168
DSL	07799 541168
Deputy DSL	07799 541168
Local Authority Designated Officer (LADO)	0300 123 1650
Local Authority Safeguarding Children Partnership	0300 470 9100
<a href="#">Ofsted</a> (England)	0300 123 4666

<b>Police and related contacts</b>	
Emergency police	999
Non-emergency police	101
<a href="#">Child exploitation and online protection</a> (CEOP)	Online contact only
<a href="#">DfE counter-extremism helpline</a>	020 7340 7264

<b>Other useful contacts</b>	
<a href="#">Anti-terrorist hotline</a>	0800 789 321
<a href="#">NSPCC Child Protection Helpline</a>	0808 800 5000
<a href="#">Childline</a>	0800 1111
<a href="#">Kidscape</a>	020 7823 5430
<a href="#">National Domestic Abuse helpline</a>	0808 2000 247
<a href="#">Modern slavery helpline</a>	08000 121 700
<a href="#">Crimestoppers</a>	0800 555 111
<a href="#">Internet Watch Foundation</a> (IWF)	01223 20 30 30
<a href="#">Information Commissioners Office</a> (ICO)	0303 123 1113

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026





## Accidents and First Aid Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At 100Acrewood Pre-school the safety of all children is paramount and we have measures in place to help to protect children. However, sometimes accidents do unavoidably happen.

We follow this policy to ensure all parties are supported and cared for when accidents or incidents happen<sup>1</sup> and that the circumstances of the accident or incident are reviewed with a view to minimising any future risks.

### Accidents or incidents

When an accident or incident occurs, we ensure:

- The child is comforted and reassured first
- The extent of the injury is assessed and if necessary, a call is made for medical support or an ambulance
- First aid procedures are carried out where necessary, by a trained paediatric first aider
- The person responsible for reporting accidents, incidents or near misses is the member of staff who saw the incident or was first to find the child where there are no witnesses
- The accident or incident is recorded on an accident/incident form and it is reported to the nursery manager. Other staff who have witnessed the accident may also countersign the form and, in more serious cases, provide a statement. This should be done as soon as the accident is dealt with, whilst the details are still clearly remembered
- Parents are shown the accident/incident form and informed of any first aid treatment given. They are asked to sign it the same day, or as soon as reasonably practicable after
- The nursery manager reviews the accident/incident forms at least monthly for patterns, e.g. one child having a repeated number of accidents, a particular area in the nursery or a particular time of the day when most accidents happen. Any patterns are investigated by the nursery manager and all necessary steps to reduce risks are put in place
- The nursery manager reports any serious accidents or incidents to the registered person for investigation for further action to be taken (i.e. a full risk assessment or report under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR))
- The accident forms are kept for at least 22 years

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<sup>1</sup> An accident is an unfortunate event or occurrence that happens unexpectedly and unintentionally, typically resulting in an injury, for example tripping over and hurting your knee.

An incident is an event or occurrence that is related to another person, typically resulting in an injury, for example being pushed over and hurting your knee.

- Where medical attention is required, a senior member of staff will notify the parent(s) as soon as possible whilst caring for the child appropriately
- Where medical treatment is required the nursery manager will follow the insurance company procedures, which may involve informing them in writing of the accident
- The nursery manager or registered provider will report any accidents of a serious nature to Ofsted and the local authority children’s social care team (as the local child protection agency), where necessary. Where relevant, such accidents will also be reported to the local authority environmental health department or the Health and Safety Executive and their advice followed
- If the setting is an awarded Millie’s Mark setting, or working towards the award, then the manager or registered provider will also notify Millie’s Mark to meet the requirements under this scheme. Notification must be made as soon as is reasonably practical, but in any event within 14 days of the incident occurring.

Location of accident files: In the Kitchen(Blank)  
 Lockable filing cabinet (Completed)

**Contact Details:**

Organisation	Contact
Ofsted	<b>0300 123 4666</b>
Local authority children’s social care team	0300 470 9100
Local authority environmental health department	01737 276000
Health and Safety Executive	<b>0300 003 1747</b>
RIDDOR report form	<a href="http://www.hse.gov.uk/riddor/report.htm">http://www.hse.gov.uk/riddor/report.htm</a>
Millie’s Mark	<a href="https://www.milliesmark.com/">https://www.milliesmark.com/</a>

**Head injuries**

If a child receives a head injury while in the setting then we will follow this procedure:

- Comfort, calm and reassure the child
- Assess the child’s condition to ascertain if a hospital or ambulance is required. We will follow our procedures if this is required (see below)
- If the skin is not broken we will administer a cold compress for short periods of time, repeated until the parent arrives to collect their child
- If the skin is broken then we will follow our first aid training and stem the bleeding
- Call the parent and make them aware of the injury and if they need to collect their child
- Complete the accident form
- Keep the child in a calm and quiet area whilst awaiting collection, where applicable
- We will continue to monitor the child and follow the advice on the NHS website as per all head injuries <https://www.nhs.uk/conditions/minor-head-injury/>
- For major head injuries we will follow our paediatric first aid training.

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## Transporting children to hospital procedure

The nursery manager or staff member must:

- Call for an ambulance immediately if the injury is severe. We will not attempt to transport the injured child in our own vehicles\*\*
- Whilst waiting for the ambulance, contact the parents and arrange to meet them at the hospital
- Arrange for the most appropriate member of staff to accompany the child, taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Inform a member of the management team immediately
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident.

**\*\***If a child has an accident that may require hospital treatment but not an ambulance and you choose to transport children within staff vehicles Citation advise you **to** consider the following in your policy:

- Request permission from parents
- Maintain ratio requirements of the setting
- Consider the age and height of the child, in regards to whether they will need a car seat. Further guidance can be found at [www.childcarseats.org.uk/types-of-seat/](http://www.childcarseats.org.uk/types-of-seat/)
- There are some exceptions for needing a child seat depending on the age of the child. Further guidance can be found at [www.childcarseats.org.uk/the-law/cars-taxis-private-hire-vehicles-vans-and-goods-vehicles/#under-three](http://www.childcarseats.org.uk/the-law/cars-taxis-private-hire-vehicles-vans-and-goods-vehicles/#under-three)
- When fitting the car seat, check the individual has training in carrying this out
- Check this transport is covered under business insurance, by calling your insurance company, or check if the staff member has business insurance on their vehicle
- Ensure the child is effectively safeguarded, e.g. a designated member of staff appointed to plan and provide oversight of all transporting arrangements and respond to any difficulties that may arise
- Wherever possible and practicable it is advisable that transport is undertaken other than in private vehicles, with at least one adult additional to the driver acting as an escort. Staff should ensure that their behaviour is safe and that the transport arrangements and the vehicle meet all legal requirements. They should ensure that the vehicle is roadworthy and appropriately insured and that the maximum capacity is not exceeded
- Plan emergency procedures, e.g. what will happen if the child's health begins to deteriorate during the journey.

## First aid

The first aid boxes are located in: **Kitchen and Hallway next to Children's toilets.**

These are accessible at all times with appropriate content for use with children.

The appointed person responsible for first aid checks the contents of the boxes regularly **Termly** and replaces items that have been used or are out of date.

The staff first aid box is kept in the Kitchen. This is kept out of reach of the children.

First aid boxes should only contain items permitted by the Health and Safety (First Aid) Regulations Act 1981, such as sterile dressings, bandages and eye pads. No other medical items, such as paracetamol should be kept in them.

### **The appointed person responsible for first aid is Julie Earle**

All of the staff are trained in paediatric first aid and this training is updated every three years.

New staff when joining us are required to do First Aid Training as part of their contract with us.

We ensure there is at least one person who holds a current full (12 hour) paediatric first aid (PFA) certificate on the premises and available at all times when children are present.

All first aid trained staff are listed. When children are taken on an outing away from our nursery, we will always ensure they are accompanied by at least one member of staff who holds a current full (12 hour) PFA certificate. A first aid box is taken on all outings, along with any medication that needs to be administered in an emergency, including inhalers etc.

### **Food safety and play**

Children are supervised during mealtimes and food is adequately cut up to reduce the risk of choking. The use of food as a play material is discouraged. However, as we understand that learning experiences are provided through exploring different malleable materials the following may be used:

- Playdough
- Cornflour
- Dried pasta, rice and pulses.

These are risk assessed and presented differently to the way it would be presented for eating, e.g. in tuff trays.

Food items may also be incorporated into the role play area to enrich the learning experiences for children, e.g. fruits and vegetables. Children will be fully supervised during these activities.

Food that could cause a choking hazard, including raw jelly, is not used.

See the Food play policy for further details.

### **Personal protective equipment (PPE)**



The nursery provides staff with PPE according to the need of the task or activity. Staff must wear PPE to protect themselves and the children during tasks that involve contact with bodily fluids. PPE is also provided for domestic tasks. Staff are consulted when procuring PPE to ensure all allergies and individual needs are supported and this is evaluated on an ongoing basis.

### **Dealing with blood**

We may not be aware that any child attending the nursery has a condition that may be transmitted via blood. Any staff member dealing with blood must:

- Always take precautions when cleaning wounds as some conditions such as hepatitis or the HIV virus can be transmitted via blood
- Wear disposable gloves and wipe up any blood spillage with disposable cloths, neat sterilising fluid or freshly diluted bleach (one part diluted with 10 parts water). Such solutions must be carefully disposed of immediately after use.

### **Needle punctures and sharps injury**

We recognise that injuries from needles, broken glass and so on may result in blood-borne infections and that staff must take great care in the collection and disposal of this type of material. For the safety and well-being of the employees, any staff member dealing with needles, broken glass etc. must treat them as contaminated waste.

Parents of children requiring needles as part of managing a medical condition should supply the nursery with an approved sharps box for safe disposal. Full boxes will be returned to the parents.

If a needle is found, e.g. in the nursery grounds, the local authority must be contacted to deal with its disposal.

We treat our responsibilities and obligations in respect of health and safety as a priority and provide ongoing training to all members of staff which reflects best practice and is in line with current health and safety legislation.

This policy is updated at least annually in consultation with staff and parents and/or after a serious accident or incident.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026

# Admissions Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

Comment from the legal team to consider:

*When using this policy ensure that it is reflecting your admissions criteria, as this must be followed otherwise you could find yourselves in difficulties.*

At **100 Acrewood Pre-school** we care for **up to 42 registered** children between the ages of **2** and **4.5**.

The numbers and ages of children admitted to the nursery comply with the legal space requirements set out in the Early Years Foundation Stage (EYFS). When considering admissions we are mindful of staff: child ratios and the facilities available at the nursery.

The nursery uses the following admission criteria, which is applied in the following order of priority:

1. Looked after children
2. A child known by the local authority to have special educational needs and/or a disability (SEND) and whose needs can be best met at the preferred nursery
3. A vulnerable child with either a Child Protection or a Child in Need Plan, or in receipt of other local authority support
4. Children who have siblings who are already with us
5. Children whose parents live within the area.

A child requiring a full-time place may have preference over one requiring a part-time place. This is dependent upon work commitments, occupancy and room availability. We operate a waiting list and places are offered on an availability basis.

We operate an Inclusion and equality policy and ensure that all children have access to nursery places and services irrespective of their gender, race, disability, religion or belief or sexual orientation of parents.

Prior to a child attending nursery, parents must complete and sign a contract and registration form. These forms provide the nursery with personal details relating to the child. For example, name, date of birth, address, emergency contact details, parental responsibilities, dietary requirements, collection arrangements, fees and sessions, contact details for parents, doctor's contact details, health visitor contact details, allergies, parental consent and vaccinations etc.

## **Providers eligible to provide government funded places for early education**

All settings registered to accept government funding (detailed in the Nursery operational plan) must offer the funded places for *\*two/\*three* to five year olds for early learning sessions specified by the local authority. At **100 Acrewood Pre-school** we currently provide government funded places for children; this is subject to availability and varies between the

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terms. These places will be allocated on a first come, first served basis and can be booked a term in advance. Please note for the admissions of the government funded nursery education places we have a termly intake, beginning the term following your child's birthday.

All funded sessions are now in line with the flexible arrangement as specified by the Government. When you register your child for their funded place, we will discuss your needs and, as far as possible with availability and staffing arrangements, we will accommodate your wishes. We reserve the right to limit and/or have specific funded sessions, according to our business requirements.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026

# Allergies and Allergic Reactions Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we are aware that children may have or develop an allergy resulting in an allergic reaction.

We aim to ensure allergic reactions are minimised or, where possible, prevented and that staff are fully aware of how to support a child who may be having an allergic reaction.

## **Our procedures**

- All staff are made aware of the signs and symptoms of a possible allergic reaction in case of an unknown or first reaction in a child. These may include a rash or hives, nausea, stomach pain, diarrhoea, itchy skin, runny eyes, shortness of breath, chest pain, swelling of the mouth and/or tongue, swelling of the airways to the lungs, wheezing and anaphylaxis
- We ask parents to share all information about allergic reactions and allergies on their child's registration form and to inform staff of any allergies discovered after registration
- We share all information with all staff and keep an allergy register on our wall next in the hall next to the kitchen on a board
- Where a child has a known allergy, the nursery manager will carry out a full allergy risk assessment with the parent prior to the child starting the nursery and/or following notification of a known allergy and this assessment is shared with all staff. This may involve displaying photos of the children along with their known allergies in the kitchen or nursery rooms, where applicable
- All food prepared for a child with a specific allergy is prepared in an area where there is no chance of contamination and served on equipment that has not been in contact with this specific food type, e.g. nuts, gluten
- The manager, nursery cook and parents work together to ensure a child with specific food allergies receives no food at nursery that may harm them. This may include designing an appropriate menu or substituting specific meals on the current nursery menu
- Seating is monitored for children with allergies. Where deemed appropriate, staff will sit with children who have allergies and, where appropriate, staff will discuss food allergies with the children and the potential risks
- If a child has an allergic reaction to food, a bee or wasp sting, plant etc. a paediatric first aid trained member of staff will act quickly and administer the appropriate treatment, where necessary. We will inform parents and record the information in the incident book and on the allergy register
- If an allergic reaction requires specialist treatment, e.g. an EpiPen, then at least two members of staff working directly with the child and the manager will receive specific medical training to be able to administer the treatment to each individual child.

## Food Information Regulations (FIR) 2014

We incorporate additional procedures in line with the FIR, including displaying our weekly menus on the parent information board, website or online system identifying any of the 14 allergens that are used as ingredients in any of our dishes.

### In the event of a serious allergic reaction and a child needing transporting to hospital

The nursery manager or staff member will:

- Call for an ambulance immediately if the allergic reaction is severe. Staff will not attempt to transport the sick child in their own vehicle
- Ensure someone contacts the parents whilst waiting for the ambulance and arrange to meet them at the hospital
- Arrange for the most appropriate member of staff to accompany the child, taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Inform a member of the management team immediately
- Remain calm at all times and continue to comfort and reassure the child experiencing an allergic reaction. Children who witness the incident may also be well affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the incident
- Where a serious incident occurs and a child requires hospital treatment, Ofsted will be informed.

*\*If a child has an accident that may require hospital treatment but not an ambulance and you choose to transport children within staff vehicles Citation advise you **to** consider the following in your policy:*

- *Request permission from parents*
- *Maintain ratio requirements of the setting*
- *Consider the age and height of the child, in regards to whether they will need a car seat. Further guidance can be found at [www.childcarseats.org.uk/types-of-seat/](http://www.childcarseats.org.uk/types-of-seat/)*
- *There are some exceptions for needing a child seat depending on the age of the child. Further guidance can be found at [www.childcarseats.org.uk/the-law/cars-taxis-private-hire-vehicles-vans-and-goods-vehicles/#under-three](http://www.childcarseats.org.uk/the-law/cars-taxis-private-hire-vehicles-vans-and-goods-vehicles/#under-three)*
- *When fitting the car seat, check the individual has training in carrying this out*
- *Check this transport is covered under business insurance, by calling your insurance company, or check if the staff member has business insurance on their vehicle*
- *Ensure the child is effectively safeguarded, e.g. a designated member of staff appointed to plan and provide oversight of all transporting arrangements and respond to any difficulties that may arise*
- *Wherever possible and practicable it is advisable that transport is undertaken other than in private vehicles, with at least one adult additional to the driver acting as an escort. Staff should ensure that their behaviour is safe and that the transport arrangements and the vehicle meet all legal requirements. They should ensure that the vehicle is roadworthy and appropriately insured and that the maximum capacity is not exceeded*

*Plan emergency procedures, e.g. what will happen if the child's health begins to deteriorate during the journey.*

This policy is updated at least annually in consultation with staff and parents and/or after a serious incident.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026

# Animal Health and Safety Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we recognise the value animals and pets can bring to the emotional needs of children and adults. Caring for animals and pets also gives children the opportunity to learn how to be gentle and responsible for others and supports their learning and development.

We recognise that preparation is key and have researched our choice(s) of animals, including gender, breed, numbers living together and suitability for our environment, taking relevant advice from [Blue Cross](#).

## **Nursery pets\***

At **100 Acrewood Pre-school** we have Goldfish

Our safety procedures are:

- A full documented risk assessment is completed, including considerations for children with any allergies
- Only staff have responsibility for cleaning out the animals (where applicable). Protective equipment is used, such as gloves and aprons

## **Visits to farms**

- A site visit is made by a senior member of staff before an outing to a farm can be arranged. We check that the farm is well-managed, that the grounds and public areas are as clean as possible and that suitable first aid arrangements are in place. Animals should be prohibited from any outdoor picnic areas
- We check that the farm has suitable hand washing facilities, appropriately signposted, with running water, soap and disposable towels or hot air hand dryers. Any portable water taps should be appropriately designed in a suitable area
- We ensure that there is an adequate number of adults to supervise the children, taking into account the needs of the children
- We explain to the children that they will not be allowed to eat or drink anything, including crisps and sweets, or place their hands in their mouths, while touring the farm because of the risk of infection and explain why
- We ensure suitable precautions are in place where appropriate, e.g. in restricted areas such as near slurry pits or where animals are isolated.

## **During the visit**

- If children are in contact with or feeding animals, we will warn them not to place their faces against the animals or put their hands in their own mouths afterwards, and explain why
- After contact with animals and particularly before eating and drinking, we will ensure all children, staff and volunteers wash and dry their hands thoroughly. If young

children are in the group, hand washing will be supervised. We will always explain why the children need to do this

- We will encourage children to leave comforters (e.g. soft toys and blankets) and dummies either at nursery, in the transport used or in a bag carried by a member of staff to limit cross-contamination
- Meals, breaks or snacks will be taken well away from the areas where animals are kept and children will be warned not to eat anything which has fallen on the ground. Any crops produced on the farm will be thoroughly washed in potable water before consumption
- We will ensure children do not consume unpasteurised produce, e.g. milk or cheese
- Manure or slurry presents a particular risk of infection and children will be warned against touching it. If they do touch it, we will ensure that they thoroughly wash and dry their hands immediately
- We will ensure all children, staff and volunteers wash their hands thoroughly before departure
- We will ensure footwear and clothing is as free as possible from faecal materials.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026







# Conflict Resolution with Parents and Aggressive Behaviour Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we believe that we have a strong partnership with our parents and an open door policy to discuss any matters arising (if applicable).

If, as a parent, you have any concerns or issues you wish to raise with the nursery then please follow the complaints procedure.

In the case of a parent emailing, calling or using social media to complain the nursery will direct them to the correct procedure for raising a complaint.

We have a zero tolerance on abusive calls, emails, social media contact and face-to-face confrontation.

## **Calls of an aggressive or abusive manner**

The call taker receiving a call leading to abuse or aggression will remain calm and professional and ask the caller to follow the Complaints and compliments policy. If the abuse continues the call taker will end the call. Abusive and aggressive calls will be logged with an outline of the conversation.

## **Emails of an aggressive or abusive manner**

The responder will ask the parents to come into the setting to speak in person, as per our Complaints and compliments policy. If the emails persist the manager may seek legal action. All emails will be kept as evidence until the matter is resolved.

## **Social media**

If slanderous or abusive messages appear on any social media sites, we will address these immediately with a request to follow our Complaints procedure. We will endeavour to resolve any issue raised through our complaints procedure. If slanderous or abusive messages continue we will seek legal action against the complainant.

In the event that any person inside the nursery starts to act in an aggressive manner at the nursery, our policy is to:

- Direct the person away from the children and into a private area, such as the office (where appropriate)
- Ensure that a second member of staff is in attendance, where possible, whilst continuing to ensure the safe supervision of the children
- Remain composed and professional in order to calm the aggressive person, making it clear that we do not tolerate aggressive or abusive language or behaviour
- If the aggressive behaviour continues or escalates, we will contact the police in order to ensure the safety of our staff team, children and families
- If the person calms down and stops the aggressive behaviour a member of staff will listen to their concerns and try to resolve the issue
- Following an aggressive confrontation an incident form will be completed detailing the time, reason and any action taken
- Any aggressive behaviour from a parent could result in the withdrawal of their child's place. Parents will be informed, by the management team, in writing within three days of any incident that involved aggressive or threatening behaviour to their staff
- Management will provide support and reassurance to any staff member involved in such an incident

- Management will signpost parents to organisations or professionals that can offer support, if applicable.

This policy will be followed in the event of any other visitor or member of the public displaying this type of behaviour either by phone, email, social media or in person.

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## Dealing with Discriminatory Behaviour Policy

*This may form part of your Inclusion and equality policy rather than a standalone policy. This policy also links to Safeguarding children and child protection, Prevent duty and radicalisation and Whistleblowing policies.*

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we do not tolerate discriminatory behaviour and take action to tackle discrimination. We believe that parents have a right to know if discrimination occurs and what actions the nursery will take to tackle it. We follow our legal duties in relation to discrimination and record all perceived or actual incidents relating to discrimination on any grounds and report these where relevant to children's parents and the registering authority.

We provide a neutral working environment where no one should feel threatened or intimidated and everyone should be treated with equity, inclusivity, dignity and respect. This includes 'work situations' such as social events and social media posts and interactions between colleagues.

### Definition and legal framework

#### **Types of discrimination**

- **Direct discrimination** occurs when someone is treated less favourably than another person because of a protected characteristic
- **Discrimination by association** occurs when there is a direct discrimination against a person because they associate with a person who has a protected characteristic
- **Discrimination by perception** occurs when there is a direct discrimination against a person because they are perceived to have a protected characteristic
- **Indirect discrimination** can occur where a provision, criterion or practice is in place which applies to everyone in the organisation but particularly disadvantages people who share a protected characteristic and that provision, criterion or practice cannot be justified as a proportionate means of achieving a legitimate aim
- **Harassment** is defined as 'unwanted conduct related to a relevant protected characteristic, which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual'; we have zero tolerance towards such behaviour
- **Sexual harassment** is any unwanted sexual conduct that has the purpose or effect of violating a person's dignity or creating a hostile environment for them; the law requires the setting to take reasonable steps to prevent sexual harassment of workers in the course of their employment; we have zero tolerance towards such behaviour
- **Third party harassment** occurs where a person is harassed by someone who does not work for the same employer, such as a visitor or supplier; we have zero tolerance towards such behaviour
- **Victimisation** occurs when an employee is treated badly or put to detriment because they have made or supported a complaint or raised grievance under the Equality Act 2010 or have been suspected of doing so.

## Protected characteristics

The nine protected characteristics under the Equality Act 2010 are:

- Age
- Disability
- Gender reassignment
- Race
- Religion or belief
- Sex
- Sexual orientation
- Marriage and civil partnership
- Pregnancy and maternity.

*Note: The Act uses the term 'transsexual' which covers those who are 'transgender' or 'trans'. When reviewing discrimination in the setting, seek specialist advice regarding recruitment and promotion processes, the use of toilet facilities, managing absences for transitioning employees, recording employee gender identity and chosen pronouns and correct information sharing for personal details. It is also recommended to plan how to address any questions or concerns raised by other employees or parents so that they are handled in a respectful and sensitive way.*

*The Disclosure and Barring Service (DBS) offers confidential checks for trans applicants through the 'sensitive applications' route which excludes gender/name information from the certificate (<https://www.gov.uk/guidance/transgender-applications>).*

Examples of discriminatory behaviour are:

- Physical assault against a person or group of people
- Derogatory name calling, insults and discriminatory jokes
- Graffiti and other written insults (depending on the nature of what is written)
- Provocative behaviour such as wearing badges and insignia and the distribution of discriminatory literature
- Threats against a person or group of people pertaining to the nine protected characteristics listed above
- Discriminatory comments including ridicule made in the course of discussions
- Patronising words or actions.

Incidents may involve a small or large number of persons, they may vary in their degree of offence and may not even recognise the incident has discriminatory implications, or at the other extreme their behaviour may be quite deliberate and blatant.

## Our procedures

We tackle discrimination by:

- Providing inclusive early years practice where all staff are able to identify, understand and break down barriers to participation and belonging and create an ethos of equality
- Consistently promoting the British values of democracy, the rule of law, individual liberty, mutual respect and tolerance of different faiths and beliefs to all

practitioners, children and families in the setting. We value diversity and celebrate differences in children and families

- Providing training and support around this subject to support staff understanding and confidence in challenging discriminatory practice, including understanding that harassment, of any kind, is subjective and so depends on how the behaviour makes someone feel. Training ensures staff understand this in order to create a culture of zero tolerance towards sexual harassment in the workplace
- Ensure a zero-tolerance approach is actually taken by challenging any observed instances of inequalities, discrimination and prejudice as they arise in play, conversation, books or other contexts from practitioners, children and families and follow this policy, as outlined below, to ensure that discriminatory behaviours against the protected characteristics are not tolerated within our setting
- Ensuring all children and families have a sense of belonging and they can see themselves and their family's identity reflected in the setting
- Expecting all staff in the nursery to be aware of and alert to any discriminatory behaviour, stereotyping, bias or bullying taking place in person or via an online arena
- Expecting all staff to intervene firmly and quickly to prevent any discriminatory behaviour or bullying, including behaviour from parents and other staff members
- Expecting all staff to intervene in the case of third-party harassment, reporting issues to the nursery manager and/or reporting criminal acts to the police; we have an anonymous reporting procedure for sexual harassment
- Expecting all staff to treat any allegation seriously and report it to the nursery manager. Investigating and recording each incident in detail as accurately as possible and making this record available for inspection by staff, inspectors and parents where appropriate, on request. The nursery manager is responsible for ensuring that incidents are handled appropriately and sensitively and recorded appropriately. Any patterns of behaviour should be noted. Perpetrator's and victim's initials may be used in the record.
- Ensuring any online bullying or discriminatory behaviour is tackled immediately
- Informing the parents of the child(ren) who are perpetrators and/or victims of the incident and of the outcome, where an allegation is substantiated following an investigation
- Excluding or dismissing any individuals who display continued discriminatory behaviour or bullying, but such steps will only be taken when other strategies have failed to modify behaviour. This includes any employees where any substantiated allegation after investigation leads to disciplinary procedures (please see the Disciplinary procedures).

We foster a safe, inclusive, and positive work environment, with our leadership team ensuring policies are kept up-to-date, conducting risk assessments, providing regular training and monitoring to ensure effective implementation. These demonstrate taking 'reasonable steps' to ensure compliance with the duty to prevent harassment of our employees, including harassment from third parties, such as visitors to the premises.

We record any incidents of discriminatory behaviour or bullying to ensure that:

- Strategies are developed to prevent future incidents

- Patterns of behaviour are identified
- Persistent offenders are identified
- Effectiveness of nursery policies are monitored
- A secure information base is provided to enable the nursery to respond to any discriminatory behaviour or bullying.

If the behaviour shown by an individual is deemed to be radicalised, we will follow our procedure as detailed in our Safeguarding children and child protection policy and the Prevent duty and radicalisation policy in order to safeguard children and families.

### **Nursery staff**

We expect all staff to be alert and seek to overcome any ignorant or offensive behaviour based on fear or dislike of distinctions that children, staff or parents may express in nursery.

We aim to create an atmosphere where the victims of any form of discrimination have confidence to report such behaviour, and that subsequently they feel positively supported by the staff and management of the nursery.

It is incumbent upon all members of staff to ensure that they do not express any views or comments that are discriminatory, or appear to endorse such views by failing to counter behaviour, which is prejudicial in a direct manner. We expect all staff to use a sensitive and informed approach to counter any harassment perpetrated out of ignorance.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026



# Grievance Procedure

At **100 Acrewood Pre-school** we follow our legal obligations as an employer at all times including hearing and investigating grievances. We have the following policy and procedures that set out our process.

## Legal obligations

Our obligations as an employer are detailed in the ACAS Code of Practice on disciplinary and grievance procedures. A full copy of the ACAS Code of Practice and the accompanying guidance can be obtained from the ACAS website <https://www.acas.org.uk/>

We note that a failure to follow the code does not, in itself, make an organisation liable to formal proceedings at an employment tribunal, but failure to follow the code may result in any compensation award payable to be increased by up to 25%, or reduced by 25% if the employee does not comply.

## Objectives and guiding principles

We recognise that an employee needs to feel that his or her grievance has been fully investigated and has received a fair hearing. The employee also needs to understand the reasons for the decision made by the manager who heard their grievance. The employee should then be given the opportunity to appeal against the decision. Their appeal should be submitted in writing and should be investigated and heard by someone more senior to the person who heard the initial grievance. The person allocated to hear the employee's appeal should be able to take a fresh and independent look at the issue. In our organisation the individual's immediate line manager deals with the grievance initially separately before being passed on to the owner, manager in charge of the nursery.

ACAS advocates the use of mediation to resolve grievances, in an attempt to maintain a good working relationship and resolve issues within the workplace. We may decide to use such mediation where appropriate using ACAS support and guidance.

Our grievance procedure does not form part of any employee's contract of employment. It may be amended at any time, and we may depart from it depending on the circumstances of any case.

This procedure applies to all employees regardless of length of service.

Our nursery believes that all employees should be treated fairly and with respect. We encourage all employees to try to resolve any grievance with the individual concerned on an

informal basis, as most grievances can be resolved quickly through discussion. Your line manager will assist you with this if you feel this is the best route for you.

If this does not resolve the complaint, issue or problem, you should initiate the formal process below.

## **Grievance process**

### **Stage 1**

#### **Making your grievance**

- You should put your grievance in writing and forward it to your line manager
- This written statement will form the basis of any investigations and the subsequent hearing, so it is important that you set out clearly the nature of your grievance and any dates and names of individuals involved. You should also indicate the outcome that you are seeking. If your grievance is unclear, you may be asked to clarify your complaint before any meeting takes place
- If your complaint relates to an issue with your line manager, the grievance may be sent to ***another nominated manager***
- Before proceeding to a full grievance hearing, it may be necessary to carry out investigations of any allegations made by you. If any evidence is gathered in the course of these investigations, you will be given a copy in advance of the hearing and appropriate time for you to consider your response. In exceptional circumstances, the evidence given by individuals may have to remain confidential. Where confidentiality is necessary, this will be explained to you and an appropriate summary of the evidence gathered will be given to you.

### **Stage 2**

#### **The grievance hearing**

The hearing will be held as soon as is reasonably possible following any investigations, and within ***five days*** working days of the receipt of your written complaint. It will be conducted by your line manager or another nominated manager if your complaint relates to an issue with your line manager. You are entitled to bring a companion to the grievance meeting if you make a reasonable request to do so. This request must be in advance of the meeting and you should tell us the name of your chosen companion. The companion may either be a trade union representative or a work colleague.

You should ensure that you attend the meeting where possible. If you are unable to attend because of circumstances beyond your control, you should inform your line manager as soon as possible and a further meeting will be re-arranged as soon as possible. If you fail to attend without explanation, or if it appears that you have not made sufficient attempts to attend, the hearing may take place in your absence.

During the hearing you will be given the opportunity to explain your complaint. Your explanations should focus on the complaint and not on irrelevant issues. The manager conducting the hearing will inform you if they believe the key issues are not being focused on. They may also set a reasonable timeframe for the meeting; this will be determined by the nature and complexity of your complaint.

The hearing may be adjourned to allow further investigations to take place. Following the meeting, you will be informed in writing of the outcome within **five** working days, where reasonably practicable, and told of any action that the nursery proposes to take as a result of your complaint, if applicable. If it is anticipated that further investigation is required and therefore the outcome cannot be provided within this timeframe, we will inform you as to when you can expect to receive the outcome.

*[N.B. However, if another employee has been disciplined as a result of the grievance, you should not inform the employee who raised the grievance as this information is confidential between you as the employer and the other employee.]*

If you are dissatisfied with the outcome, you may make a formal appeal in writing to **nursery owner**, stating your full grounds of appeal, within **five** working days of the date on which the decision was sent or given to you.

### Stage 3

We will hold an appeal meeting within 14 working days of receiving the appeal, where reasonably practicable. This will be dealt with impartially by a more senior manager, where applicable who has not previously been involved in the case. You will have the right to bring a companion, as explained above.

We will confirm our final decision in writing, usually within **seven working days** of the appeal hearing, where reasonably practicable. There is no further right of appeal.

### Grievances linked to disciplinary matters

Complaints that you may have about any disciplinary action taken against you should be dealt with as an appeal under the disciplinary procedure.

Where an employee raises a grievance during a disciplinary process the disciplinary process may be temporarily suspended in order to deal with the grievance.

Where the grievance and disciplinary cases are related it may be appropriate to deal with both issues concurrently.

This policy was adopted on	Signed on behalf of the nursery	Date for review
23.01.2025	J A Earle	23.01.2026

onditions, equipment and systems of work for all our employees and a safe early learning environment in which children learn and are cared for. To develop and promote a strong health and safety culture within the nursery for the benefit of all staff, children, parents and any visitors, we provide information, training and supervision. We also accept our responsibility for the health and safety of other people who may be affected by our activities.

- ort of hazardous articles and substances



# Inclusion and Equality Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

*Note: Inclusion is a process of identifying, understanding and breaking down barriers to participation and belonging. Inclusive early years practice is about anticipating, paying attention, responding to and reflecting on the needs and interests of all children. A commitment to inclusion should permeate all aspects of the design of educational programmes and the structuring of environments, as well as shaping every interaction with children, parents and other professionals (Birth to 5 Matters).*

## **Statement of intent**

At **100 Acrewood Pre-school** we take great care to treat each individual as a person in their own right, with equal rights and responsibilities to any other individual, whether they are an adult or a child. We are committed to providing equality of opportunity and anti-discriminatory practice for all staff, children and families according to their individual needs. Discrimination on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation has no place within our nursery.

A commitment to implementing our Inclusion and equality policy is part of each employee's job description. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of the **nursery manager/ owner/** at the earliest opportunity.

Appropriate steps will then be taken to investigate the matter and if such concerns are well-founded, the nursery's Disciplinary procedure will be followed.

## **The legal framework for this policy is based on:**

- Special Education Needs and Disabilities Code of Practice 2015
- Children and Families Act 2014
- Equality Act 2010
- Childcare Act 2006
- Children Act 2004
- Care Standards Act 2002
- Special Educational Needs and Disability Act 2001
- **Worker Protection Act 2023.**

## **The nursery and staff are committed to:**

- Recruiting, selecting, training and promoting individuals on the basis of occupational skills requirements. In this respect, the nursery will ensure that no job applicant or employee will receive less favourable treatment because of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation

- Creating a working environment free of bullying, harassment, victimisation and unlawful discrimination, promoting dignity and respect for all, and where individual differences and the contributions of all staff are recognised and valued
- Providing a childcare place, wherever possible, for children who may have special educational needs and/or disabilities or are deemed disadvantaged according to their individual circumstances
- Making reasonable adjustments for children with special educational needs and disabilities to remove barriers and improve access for all
- Striving to promote equal access to services and projects by taking practical steps (wherever possible and reasonable), such as ensuring access to people with additional needs and by producing materials in relevant languages and media for all children and their families
- Providing a secure environment in which all our families are listened to, children can flourish and all contributions are valued
- Including and valuing the contribution of all families to our understanding of equality, inclusion and diversity
- Providing positive non-stereotypical information
- Continually improving our knowledge and understanding of issues of equality, inclusion and diversity and training all staff about their rights and responsibilities under the inclusion and equality policy.
- Regularly reviewing, monitoring and evaluating the effectiveness of inclusive practices to ensure they promote and value diversity and difference and that the policy is effective and practices are non-discriminatory
- Making inclusion a thread which runs through the entirety of the nursery, for example, by encouraging positive role models through the use of toys, imaginary play and activities, promoting non-stereotypical images and language and challenging all discriminatory behaviour (see Dealing with discriminatory behaviour policy).

*Note: The Act uses the term 'transsexual' which covers those who are 'transgender' or 'trans'. When reviewing discrimination in the setting, seek specialist advice regarding recruitment and promotion processes, the use of toilet facilities, managing absences for transitioning employees, recording employee gender identity and chosen pronouns and correct information sharing for personal details. It is also recommended to plan how to address any questions or concerns raised by other employees or parents so that they are handled in a respectful and sensitive way.*

### **Admissions and service provision**

The nursery is accessible to all children and families in the local community and further afield through a comprehensive and inclusive admissions policy.

The nursery will strive to ensure that all services and projects are accessible and relevant to all groups and individuals in the community within targeted age groups.

### **Recruitment**

Recruitment, promotion and other selection exercises such as redundancy selection will be conducted on the basis of merit, against objective criteria that avoids discrimination.

Redundancy selection will take account of the legal protections from redundancy, as described below.<sup>2</sup>

Shortlisting will be done by more than one person, where possible.

All members of the selection group are committed to the inclusive practice set out in this policy and will have received appropriate training in this regard.

Application forms are sent out along with a copy of the equal opportunities monitoring form. Application forms do not include questions that potentially discriminate on the grounds specified in the statement of intent.

Vacancies are generally advertised to a diverse section of the labour market. Advertisements avoid stereotyping or using wording that may discourage particular groups from applying.

At interview, no questions are posed which potentially discriminate on the grounds specified in the statement of intent. All candidates are asked the same questions and members of the selection group will not introduce nor use any personal knowledge of candidates acquired outside the selection process. Candidates are given the opportunity to receive feedback on the reasons why they were not successful.

We may ask questions (under the Equality Act 2010) prior to offering someone employment in the following circumstances:

- To establish whether the applicant will be able to comply with a requirement to undergo an assessment (i.e. an interview or selection test)
- To establish whether the applicant will be able to carry out a function that is intrinsic to the work concerned
- To monitor diversity in the range of people applying for work
- To take positive action towards a particular group – for example offering a guaranteed interview scheme

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## <sup>2</sup> **Protection from redundancy**

*We recognise that employees on maternity leave, adoption leave and shared parental leave must be given priority over other employees in being offered any suitable alternative employment should their existing role be made redundant. While these do not prevent the employee being selected for redundancy, it ensures that they have priority under these circumstances.*

*Under maternity leave regulations, the protection against redundancy is from the point the employer is made aware of the pregnancy and up to 18 months after the birth of the child.*

*For those on adoption leave, the redundancy protection is extended to 18 months from the date of the placement of the adopted child(ren).*

*For employees taking less than 6 weeks shared parental leave, they are protected during their period of leave. Employees taking more than 6 continuous weeks of shared parental leave are protected for 18 months from the birth of the child or placement of the adopted child/ren.*

*If the pregnancy ends and the employee is not entitled to statutory maternity leave then the protected period will end two weeks after the pregnancy.*

The National College for Teaching and Leadership provides further guidance specific to working with children, which we follow:

*Providers have a responsibility to ensure that practitioners have the health and physical capacity to teach and will not put children and young people at risk of harm. The activities that a practitioner must be able to perform are set out in the Education (Health Standards England) Regulations 2003. Providers are responsible for ensuring that only practitioners who have the capacity to teach remain on the staff team.*

*People with disabilities or chronic illnesses may have the capacity to teach, just as those without disabilities or medical conditions may be unsuitable to teach. Further information on training to teach with a disability is available from the DfE website.*

*Successful applicants offered a position may be asked to complete a fitness questionnaire prior to commencing the programme. Providers should not ask all-encompassing health questions, but should ensure that they only ask targeted and relevant health-related questions, which are necessary to ensure that a person is able to teach.*

## **Staff**

It is our policy not to discriminate in the treatment of individuals. All staff are expected to co-operate with the implementation, monitoring and improvement of this and other policies. They are expected to challenge language, actions, behaviours and attitudes which are oppressive or discriminatory on the grounds specified in this policy and recognise and celebrate other cultures and traditions. All staff are expected to participate in equality and inclusion training.

We foster a safe, inclusive, and positive work environment, with our leadership team ensuring policies are kept up-to-date, conducting risk assessments, providing regular training and monitoring to ensure effective implementation. These demonstrate taking 'reasonable steps' to ensure compliance with the duty to prevent harassment of our employees, including harassment from third parties

Staff will follow the Dealing with discriminatory behaviour policy where applicable to report any discriminatory behaviours observed. Our zero-tolerance approach includes having anonymous reporting procedures and dealing with any instances which arise via our disciplinary procedures.

## **Training**

The nursery recognises the importance of training as a key factor in the implementation of an effective inclusion and equality policy. All new staff receive induction training including specific reference to the Inclusion and equality policy. The nursery strives towards the provision of inclusion, equality and diversity training for all staff on a **[insert details, e.g. annual]** basis.



Training includes ensuring staff understand that harassment, of any kind, is subjective and so depends on how the behaviour makes someone feel. We encourage all staff members to create a culture of zero tolerance towards discrimination and sexual harassment in our setting.

### **Early learning framework**

We follow the Early Years Foundation Stage statutory requirements and ensure that all learning opportunities offered in the nursery encourage children to develop positive attitudes to people who are different from them. Our curriculum encourages children to empathise with others and to begin to develop the skills of critical thinking.

#### **We do this by:**

- Identifying a key person to each child who will ensure that each child's care is tailored to meet their individual needs and continuously observe, assess and plan for their learning and development
- Listening to children's verbal and non-verbal communication and making children feel included, valued and good about themselves
- Ensuring that we know what each child knows and "can do" and has equal access to tailored early learning and play opportunities
- Reflecting the widest possible range of communities in the choice of resources
- Avoiding stereotypical or derogatory images in the selection of materials
- Acknowledging and celebrating a wide range of religions, beliefs and festivals
- Creating an environment of mutual respect
- Supporting children to talk about their feelings and those of others, manage emotions and develop empathy
- Helping children to understand that discriminatory behaviour and remarks are unacceptable
- Knowing children well, being able to meet their needs and know when they require further support
- Ensuring that all early learning opportunities offered are inclusive of children with special educational needs and/or disabilities and children from disadvantaged backgrounds
- Ensuring that children whose first language is not English have full access to our early learning opportunities and are supported in their learning
- Working in partnership with all families to ensure they understand the policy and challenge any discriminatory comments made
- Ensuring the medical, cultural and dietary needs of all children are met and help children to learn about a range of food and cultural approaches to meal times and to respect the differences among them.

### **Parent information and meetings**

Information about the nursery, its activities, experiences and resources are shared with parents as well as information about their child's development. This is given in a variety of ways according to individual needs (written, verbal and translated), to ensure that all parents can access the information they need.

Wherever possible, meetings are arranged to give all families opportunities to attend and share information about their child.

We also consult with parents regularly about the running of the nursery and ask them to contribute their ideas.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
<i>23.01.2025</i>	J A Earle	23.01.2026

## Looked After Children Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we are committed to providing a welcoming and inclusive quality environment for all children and families.

### Definition and legal framework

The description 'looked after' is generally used to describe a child who is looked after by the local authority. This includes children who are subject to a care order or temporarily classed as looked after on a planned basis for short breaks or respite care. Most looked after children will be cared for by foster carers with a small minority in children's homes, looked after by family members or even placed back within the family home.

The term 'looked after child' denotes a child's current legal status. The nursery never uses this term to categorise a child as standing out from others or refers to a child using acronyms such as LAC. **Looked after children can also be referred to as 'children in care', a term which many children and young people prefer.**

The legal framework for this policy is underpinned by or supported through:

- Childcare Act (2006)
- Children Act (1989 and 2004)
- Adoption and Children Act (2002)
- Children and Young Persons Act (2008)
- Children and Families Act (2014)
- Children and Social Work Act (2017).

### Our policy

Our nursery treats each child as an individual. We recognise that for young children to get the most out of educational opportunities they need to be settled appropriately with their carer. We will discuss with the child's carer, and social worker where applicable, the length of time the child has been with the carer before they start nursery to establish how secure the child feels and whether they are ready to be able to cope with further separation, a new environment and new expectations made upon them.

We are aware that there are a number of reasons why a child may go into care and these reasons may or may not include traumatic experiences or abuse. All our practitioners are committed to doing all they can to support all children to achieve their full potential. The nursery staff team are all trained to understand our safeguarding policy and procedures. Additional training to support children's individual needs will be planned for, where appropriate. Practitioners are supported by management at all times and we have an open door policy if they need to discuss any sensitive issues regarding the child.

Where applicable, we contribute to any assessment about the child, such as those carried out under local authorities' assessment frameworks or Early Help Assessment (EHA) and to

any multi-agency meetings, case conferences or strategy meetings in relation to the child's learning and development. The designated person for looked after children and/or the child's key person will attend meetings as appropriate.

**The designated person** for 'looked after children' is **JULIE EARLE**

Each child is allocated a key person. The key person will support the child initially with transition and settling in and then continue to support and build up a relationship with the child, carers and any other agencies involved. Regular contact will be maintained with the carers throughout the child's time at the nursery and with the social worker, virtual schools head or other professionals (where applicable).

The key person will carry out regular ongoing practice such as observations to build up a picture of the child's interests, and plan activities accordingly to support the child's stage of learning and development and interests. This information will be shared with carers and other professionals as appropriate as well as any concerns surrounding their developmental stages.

Where necessary the key person/manager will develop a care plan with the child's carers and any relevant professionals. This will include:

- The child's emotional needs and how they are to be met
- How any emotional issues and problems that affect behaviour are to be managed
- The child's sense of self, culture, language/s and identity - how this is to be supported
- The child's need for sociability and friendship
- The child's interests and abilities and possible learning journey pathway
- Where applicable, how any special educational needs and/or disabilities will be supported.

In addition, the care plan may also consider:

- How information will be shared with the carer and local authority (as the 'corporate parent') as well as what information is shared with any other organisation or professionals and how it will be recorded and stored
- What contact the child has with his/her birth parent(s) and what arrangements will be in place for supervised contact. If this is to be in the setting, when, where and what form the contact will take will be discussed and agreed
- Who may collect the child from nursery and who may receive information about the child
- What written reporting is required
- Wherever possible, and where the plan is for the child to return to their home, the birth parent(s) should be involved in this planning
- With the social worker's agreement, and as part of the plan, whether the birth parent(s) should be involved in the setting's activities that include parents, such as outings, fun days etc. alongside the foster carer.

Where applicable, we will complete a Personal Education Plan (PEP) for any children aged two to five in partnership with the social worker and/or care manager and carers. We will also attend all appropriate meetings and contribute to reviews.

The key person and designated 'looked after children' person **JULIE EARLE** will work together to ensure any onward transition to school or another nursery is handled sensitively to ensure that this is as smooth as possible and all necessary information is shared. The child's individual file, including observations, photographs and pieces of artwork and mark making will be passed on to the carer at this stage.

**Key contact details:**

Organisation	Contact Number
Local authority	SURREY COUNTY COUNCIL
Children's social care team	0300 470 9100.
Named social worker	

**Private Fostering**

Private fostering is an arrangement made between the parent and the private foster carer, who then becomes responsible for caring for the child in such a way as to safeguard and promote their welfare.

A privately fostered child is a child under the age of 16 (18 if a disabled child) who is cared for and provided with accommodation etc. for more than 28 days and where the care is intended to continue by someone other than:

- The parents
- A person who is not a parent but has parental responsibility
- A close relative
- The local authority.

It is a statutory duty for us to inform the local authority where we are made aware of a child who may be subject to private fostering arrangements. We will do this by contacting the local authority children's social care team.

This policy was adopted on	Signed on behalf of the nursery	Date for review
23.01.2025	J A Earle	23.01.2026

# Low-Level Concerns Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

*Ensure you review this policy to be consistent with the guidance and procedures of your local safeguarding partners (LSP).*

## Introduction

At 100 Acrewood Pre-school we are committed to safeguarding children and promoting their welfare at all times.

This policy applies to all concerns (including allegations) about members of staff, including students, volunteers and agency staff. We ensure that all those working with children behave appropriately and the early identification and prompt and appropriate management of concerns about adults is critical to effective safeguarding. This section is based on concerns that do not meet the harm threshold, as defined in Keeping Children Safe in Education.

We recognise the importance of responding to and dealing with any concerns in a timely manner to safeguard the welfare of children.

Concerns may arise through, for example:

- Suspicion
- Complaint
- Disclosure made by a child, parent or other adult within or outside the nursery
- Pre-employment vetting checks.

## Definition of 'low-level' concerns

The term 'low-level' concern is any concern – no matter how small – that an adult working in, or on behalf of, the nursery may have acted in a way that:

- Is inconsistent with the staff code of conduct, including inappropriate conduct outside of nursery
- Does not meet the harm threshold or is otherwise not considered serious enough to consider a referral to the local authority designated officer (LADO).

The behaviour of the staff, student or volunteer may not relate directly to a particular child or children but may raise an issue or issues of concern with respect to safeguarding a child/children. This may potentially call into question the adult's suitability to work with children.

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

- Being overly friendly with children
- Having favourites

- Taking photographs of children on their mobile phone
- Engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- Using inappropriate sexualised, intimidating or offensive language
- Inadvertent or thoughtless behaviour
- Behaviour that might be considered inappropriate depending on the circumstances
- Behaviour which is intended to enable abuse.

### **Sharing low-level concerns**

We recognise the importance of creating a culture of openness, trust and transparency to encourage all staff to share low-level concerns so that they can be addressed appropriately.

We create this culture by:

- Ensuring all staff are clear about what appropriate behaviour is, and are confident in differentiating expected and appropriate behaviour from concerning, challenging or inappropriate behaviour, in themselves and other adults
- Having clear policies and procedures
- Empowering staff to share any low-level concerns
- Empowering staff to self-refer
- Addressing unprofessional behaviour and supporting the individual to correct it at an early stage
- Providing a responsive, sensitive and proportionate handling of such concerns when they are raised
- Helping to reflect on and identify any weakness in the nursery safeguarding procedure.

A low-level concern about a member of staff should be reported to the Designated Safeguarding Lead (DSL) and the manager following the nursery Safeguarding children and child protection procedures. Staff should use the nursery Low-Level Concerns Reporting Form (below).

### **Responding to low-level concerns**

- If the concern is raised via a third party, the DSL/manager will collect evidence where necessary by speaking directly to the staff who raised the concern, unless it has been raised anonymously, regardless of whether a written summary or low-level concerns form has been provided
- If the staff member who raises the concern does not wish to be named, then the nursery should respect that person's wishes as far as possible. However, there may be circumstances where the staff member who raises the concern will need to be

named (for example, where it is necessary in order to carry out a fair disciplinary process) and, for this reason, anonymity should never be promised to members of staff who share low-level concerns. Where possible, we will encourage staff to consent to be named, as this will help to create a culture of openness and transparency

- The DSL/manager will speak to any potential witnesses, unless advised not to do so by the LADO/other relevant external agencies, where they have been contacted
- The DSL/manager will speak to the staff member about whom the low-level concern has been raised, unless advised not to do so by the LADO/other relevant external agencies, where they have been contacted
- The DSL/manager will use the information collected to categorise the type of behaviour and determine any further action, in line with our staff Code of conduct
- Allegations that meet the harm threshold will be referred to the LADO for advice
- Low-level concerns that the nursery feel may need further guidance on will be referred to the LADO for advice
- Low-level concerns that the nursery feel we can deal with internally will be dealt with via the nursery Safeguarding children and child protection procedures and/or Disciplinary procedures
- Where a low-level concern relates to agency staff, we will notify the agency, so any potential patterns of inappropriate behaviour can be identified.

### **Record keeping**

All low-level concerns will be recorded in writing. In addition to details of the concern raised, records will include the context in which the concern was raised, any action taken and the reasons for decisions and action taken.

Records will be:

- Reviewed so that potential patterns of concerning, difficult or inappropriate behaviour can be identified
- Retained at least until the volunteer, student or staff leaves employment at the nursery
- Kept confidentially, held securely and comply with Data Protection Act 2018 (DPA 2018) and UK GDPR procedure.

### **Reviewing low-level concerns**

When reviewing records of low-level concerns, patterns of concerning, challenging or inappropriate behaviour may be identified. When this occurs, the DSL/manager will decide on a course of action, which may include:

- Disciplinary investigation and/or proceedings
- Management advice, including recommendations for training



- Referral to the LADO (where a pattern of behaviour moves from a concern to meeting the harm threshold).

**Pre-employment references**

We will not include low-level concerns in references unless:

- The concern (or group of concerns) has met the threshold for referral to the designated officer at the local authority(LADO) and is found to be substantiated  
and/or
- The concern (or group of concerns) relates to issues which would be included in a reference, such as misconduct or poor performance.

This policy was adopted on	Signed on behalf of the nursery	Date for review
23.01.2025	J A Earle	23.01.2026

## Medication Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

*Note from legal: It may be useful to check conditions of liability insurance to see if there are any exclusions or requirements that need to be complied with.*

At **100 Acrewood Pre-school** we promote the good health of children attending nursery and take necessary steps to prevent the spread of infection (see Sickness and illness and Infection control policies). If a child requires medicine, we will obtain information about the child's needs for this and will ensure this information is kept up to date.

We follow strict guidelines when dealing with medication of any kind in the nursery and these are set out below.

### **Medication prescribed by a doctor, dentist, nurse or pharmacist**

*(Medicines containing aspirin will only be given if prescribed by a doctor)*

- Prescription medicine will only be given when prescribed by the above and for the person named on the bottle for the dosage stated
- Medicines must be in their original containers with their instructions printed in English
- Those with parental responsibility for any child requiring prescription medication should hand over the medication to the most appropriate member of staff who will then note the details of the administration on the appropriate form and another member of staff will check these details
- Those with parental responsibility must give prior written permission for the administration of each and every medication. However, we will accept written permission once for a whole course of medication or for the ongoing use of a particular medication under the following circumstances:
  - a. The written permission is only acceptable for that brand name of medication and cannot be used for similar types of medication, e.g. if the course of antibiotics changes, a new form will need to be completed
  - b. The dosage on the written permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed
  - c. Parents must notify us **IMMEDIATELY** if the child's circumstances change, e.g. a dose has been given at home, or a change in strength or dose needs to be given
- The nursery will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a letter from a doctor or dentist
- The parent must be asked when the child has last been given the medication before coming to nursery and the staff member must record this information on the

medication form. Similarly, when the child is picked up, the parent must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times

- At the time of administering the medicine, a senior member of staff will ask the child to take the medicine, or offer it in a manner acceptable to the child at the prescribed time and in the prescribed form (it is important to note that staff working with children are not legally obliged to administer medication)
- If the child refuses to take the appropriate medication, then a note will be made on the form
- Where medication is 'essential' or may have side effects, discussion with the parent will take place to establish the appropriate response.

#### **Non-prescription medication (*these will not usually be administered*)**

- The nursery will not administer any non-prescription medication containing aspirin
- The nursery will only administer non-prescription medication for a short initial period, dependant on the medication or the condition of the child. After this time medical attention should be sought
- If the nursery feels the child would benefit from medical attention rather than non-prescription medication, we reserve the right to refuse nursery care until the child is seen by a medical practitioner
- If a child needs liquid paracetamol or similar medication during their time at nursery, such medication will be treated as prescription medication with the \*onus being on the parent to provide the medicine/\*nursery providing one specific type of medication should parents wish to use this
- On registration, parents will be asked if they would like to fill out a medication form to consent to their child being given a specific type of liquid paracetamol or antihistamine in particular circumstances such as an increase in the child's temperature or a wasp or bee sting. This form will state the dose to be given, the circumstances in which this can be given, e.g. the temperature increase of their child, the specific brand name or type of non-prescription medication and a signed statement to say that this may be administered in an emergency if the nursery CANNOT contact the parent
- An emergency nursery supply of fever relief (e.g. Calpol) and antihistamines (e.g. Piriton) will be stored on site. This will be checked at regular intervals by the designated trained first aider to make sure that it complies with any instructions for storage and is still in date
- If a child does exhibit the symptoms for which consent has been given to give non-prescription medication during the day, the nursery will make every attempt to contact the child's parents. Where parents cannot be contacted then the nursery manager will take the decision as to whether the child is safe to have this medication based on the time the child has been in the nursery, the circumstances surrounding the need for this medication and the medical history of the child on their registration form
- Giving non-prescription medication will be a last resort and the nursery staff will use other methods first to try and alleviate the symptoms (where appropriate). The child will be closely monitored until the parents collect the child

- For any non-prescription cream for skin conditions, e.g. Sudocrem, prior written permission must be obtained from the parent and the onus is on the parent to provide the cream which should be clearly labelled with the child's name
- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, the manager will decide if the child is fit to be left at the nursery. If the child is staying, the parent must be asked if any kind of medication has already been given, at what time and in what dosage and this must be stated on the medication form
- As with any kind of medication, staff will ensure that the parent is informed of any non-prescription medicines given to the child whilst at the nursery, together with the times and dosage given
- The nursery DOES NOT administer any medication unless prior written consent is given for each and every medicine.

### **Injections, pessaries, suppositories**

- As the administration of injections, pessaries and suppositories represents intrusive nursing, we will not administer these without appropriate medical training for every member of staff caring for the child. This training is specific for every child and not generic. The nursery will do all it can to make any reasonable adjustments including working with parents and other professionals to arrange for appropriate health officials to train staff in administering the medication. For children with long term medical requirements, an Individual Health Care Plan from the relevant health team will be in place to ensure that appropriate arrangements are in place to meet the child's needs.

### **Staff medication**

All nursery staff have a responsibility to work with children only where they are fit to do so. Staff must not work with children where they are infectious or feel unwell and cannot meet children's needs. This includes circumstances where any medication taken affects their ability to care for children, for example, where it makes a person drowsy.

If any staff member believes that their condition, including any condition caused by taking medication, is affecting their ability to care for children they must inform their line manager and seek medical advice. \*The nursery manager/\*person's line manager/\*registered provider will decide if a staff member is fit to work, including circumstances where other staff members notice changes in behaviour suggesting a person may be under the influence of medication. This decision will include any medical advice obtained by the individual or from an occupational health assessment.

Where staff may occasionally or regularly need medication, any such medication must be kept in the person's locker or a separate locked container in the staff room or nursery room where staff may need easy access to the medication such as an asthma inhaler. In all cases it must be stored securely out of reach of the children, at all times. It must not be kept in the first aid box and must be labelled with the name of the member of staff.

## Storage

All medication for children must have the child's name clearly written on the original container and kept in a closed box, which is out of reach of all children.

Emergency medication, such as inhalers and EpiPens, will be within easy reach of staff in case of an immediate need, but will remain out of children's reach. Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children. This must be in a designated place with the child's name clearly written in the original container.

All medications must be in their original containers, labels must be legible and not tampered with or they will not be given. All prescription medications should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with expiry dates, before staff agree to administer medication.

Medication stored in the setting will be regularly checked with the parents to ensure it continues to be required, along with checking that the details of the medication form remain current.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026



# Mobile Phone and Electronic Device Use Policy

*This policy refers to how mobile phones, cameras and other electronic devices with imaging and sharing capabilities are used in the setting. Providers may find it helpful to read ['Safeguarding children and protecting professionals in early years settings: online safety considerations'](#).*

*It is recommended that you amend this policy at your discretion depending on what the device is capable of doing, e.g. ones that receive calls and messages are prohibited but ones that only have a capacity to count steps are allowed.*

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

## **Mobile phones and other electronic devices with imaging and sharing capabilities**

At **100 Acrewood Pre-school** we promote the safety and welfare of all children in our care. We believe our staff should be completely attentive during their hours of working to ensure all children in the nursery receive good quality care and education.

To ensure the safety and well-being of children we do not allow staff to use personal mobile phones or other personal devices with imaging and sharing capabilities during working hours.

We use mobile phones supplied by the nursery only to provide a means of contact in certain circumstances, such as outings.

This policy should be used in conjunction with our Online safety policy and Acceptable internet use policy, to ensure children are kept safe when using the nursery devices online.

Staff must adhere to the following:

- Mobile phones, or other personal devices with imaging and sharing capabilities are not accessed during working hours
- Mobile phones, or other personal devices with imaging and sharing capabilities can only be used on a designated break and then this must be away from the children
- Mobile phones, or other personal devices with imaging and sharing capabilities must be stored safely in the safe in the kitchen at all times during working hours
- No personal device is allowed to be connected to the nursery Wi-Fi at any time
- The use of nursery devices, such as tablets, must only be used for nursery purposes
- The nursery devices will not have any social media or messaging apps on them, except those used by management for nursery purposes only
- Any apps downloaded onto nursery devices must be done only by management. This will ensure only age and content appropriate apps are accessible to staff, or children using them

- Passwords and/or passcodes for nursery devices must not be shared or written down, and will be changed regularly
- During outings, staff must only use mobile phones belonging to the nursery
- Only nursery owned devices will be used to take photographs or film videos
- Nursery devices will not be taken home with staff and will remain secure at the setting when not in use.

### **Parent use of mobile phones and smartwatches**

Parents are kindly asked to refrain from using their mobile telephones, or other personal devices with imaging and sharing capabilities, whilst in the nursery or when collecting or dropping off their children. We will ask any parents using their phone/device inside the nursery premises to finish the call or take the call outside. We do this to ensure all children are safeguarded and the time for dropping off and picking up is a quality handover opportunity where we can share details about your child

Parents are requested not to allow their child to wear or bring in devices with imaging and sharing capabilities. This ensures all children are safeguarded and also protects their property as it may get damaged or misplaced at the nursery.

### **Visitors' use of mobile phones or other personal devices with imaging and sharing capabilities**

Visitors are not permitted to use their mobile phones or other personal devices with imaging and sharing capabilities, e.g. smart glasses whilst at nursery and are asked to leave them in a safe secure place, such as the nursery office, for the duration of their visit.

### **Photographs and videos**

At 100 Acrewood Pre-school we recognise that photographs and video recordings play a part in the life of the nursery. We ensure that any photographs or recordings (including CCTV) taken of children in our nursery are only done with prior written permission from each child's parent and only share photos with parents in a secure manner. We will obtain this permission when each child is registered and update it on a regular basis to ensure that this permission is still valid.

We ask for individual permissions for photographs and video recordings for a range of purposes including use in the child's learning journey, for display purposes, for promotion materials including our nursery website, brochure and the local press and for security in relation to CCTV and the different social media platforms we use. We ensure that parents understand that where their child is also on another child's photograph, but not as the primary person, that may be used in another child's learning journey. Photographs and videos will not be taken in areas where intimate care routines are carried out.

If a parent is not satisfied about one or more of these uses, we will respect their wishes and find alternative ways of recording their child's play or learning.



Staff are not permitted to take any photographs or recordings of a child on their own personal devices with imaging and sharing capabilities, e.g. cameras, mobiles, tablets or smartwatches and may only use those provided by the nursery. The nursery manager will monitor all photographs and recordings to ensure that the parents' wishes are met and children are safeguarded.

Photographs or videos recorded on nursery mobile devices will be transferred to the correct storage device to ensure no images are left on these mobile devices.

Parents and children are not permitted to use any personal devices with imaging and sharing capabilities on the nursery premises without the prior consent of the manager.

During special events, e.g. Christmas or leaving parties, staff may produce group photographs to distribute to parents on request. In this case we will gain individual permission for each child before the event. This will ensure all photographs taken are in line with parental choice. We ask that photos of events such as Christmas parties are not posted on any social media websites or other platforms areas without permission from the parents of all the children included in the picture.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026

# Nappy Changing Policy

*NB This policy may be used as a stand-alone policy or adapted with your Respectful intimate care policy.*

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we support children's care and welfare on a daily basis in line with their individual needs. All children need contact with familiar, consistent carers to ensure they can grow confidently and feel self-assured. Wherever possible, each child's key person will change nappies according to the child's individual needs and requirements.

Our procedure meets best practice identified by the UK Health Security Agency's *Infection prevention and control* document<sup>3</sup>.

We enable a two-way exchange between parents and key persons so that information is shared about nappy changing and toilet training in a way that suits the parents and meets the child's needs.

We have appropriate designated facilities for nappy changing which meet the following criteria:

- Facilities are separate to food preparation, serving areas and children's play areas
- Changing mats have a sealed plastic covering and are frequently checked for cracks or tears. If cracks or tears are found, the mat is discarded.
- Clean nappies are stored in a clean dry place; soiled nappies are placed in a **'nappy sack'** before being placed in the bin. Bins are foot-pedal operated, regularly emptied and at the end of the day are always emptied into an appropriate waste collection area
- We ask that where any non-prescribed creams are needed, e.g. Sudocrem that these are supplied by the parent and clearly labelled with the child's name. Prior written permission is obtained from the parent. When applying creams for rashes, a gloved hand is used.

Staff changing nappies will

- Use a new disposable apron and pair of gloves for each nappy change and always wash hands before and after using gloves
- Clean, disinfect and dry mats thoroughly after each nappy change; Ensure they have all the equipment they need before each nappy change
- Keep nappy bags, gloves and aprons out of reach of babies and children.

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<sup>3</sup> <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

We wish to ensure the safety and welfare of the children whilst being changed and safeguard against any potential harm, as well as ensuring the staff member involved is fully supported and able to perform their duties safely and confidently. We aim to support all parties through the following actions:

- Promoting consistent and caring relationships through the key person system and ensuring all parents understand how this works and who is caring for their child
- Using this one-to-one time as a key opportunity to talk to children and help them learn, e.g. through singing and saying rhymes during the change
- Ensuring that the nappy changing area is inviting and stimulating and change this area regularly to continue to meet children's interests
- Ensuring all staff undertaking nappy changing have suitable enhanced DBS checks
- Training all staff in the appropriate methods for nappy changing
- Ensuring that no child is ever left unattended during the nappy changing time
- Making sure staff do not change nappies whilst pregnant until a risk assessment has been discussed and conducted
- Ensuring suitably competent and responsible students only change nappies with the support and supervision of a qualified member of staff
- Conducting thorough inductions for all new staff to ensure they are fully aware of all nursery procedures relating to nappy changing
- Ensuring hygiene procedures are followed appropriately, e.g. hands washed before and after nappies are changed and changing mats cleaned before and after each use
- Following up procedures through supervision meetings and appraisals to identify any areas for development or further training
- Working closely with parents on all aspects of the child's care and education as laid out in the Parents as partners policy. This is essential for any intimate care routines which may require specialist training or support. If a child requires specific support, the nursery will arrange a meeting with the parent to discover all the relevant information relating to this to enable the staff to care for the child fully and meet their individual needs
- Ensuring all staff have an up-to-date understanding of child protection and how to protect children from harm. This includes identifying signs and symptoms of abuse and how to raise these concerns as set out in the Safeguarding children and child protection policy
- Balancing the right for privacy for the children with the need for safeguarding children and adults by making sure intimate care routines do not take place behind closed doors
- Cameras, tablets, mobile phones and any other image sharing or recording devices are not permitted within toilet and intimate care areas
- Operating a Whistleblowing policy to help staff raise any concerns relating to their peers or managers and helping staff develop confidence in raising concerns as they arise in order to safeguard the children in the nursery
- Conducting working practice observations of all aspects of nursery operations to ensure that procedures are working in practice and all children are supported fully by the staff. This includes all intimate care routines
- Conducting regular risk assessments of all aspects of nursery operations including intimate care and reviewing the safeguards in place. The nursery has assessed all the

risks relating to intimate care routines and has placed appropriate safeguards in place to ensure the safety of all involved.

When developmentally appropriate, we work closely with parents to sensitively support toilet training in a way that suits the individual needs of the child and ensures consistency between home and nursery.

If any parent or member of staff has concerns or questions about nappy changing procedures or individual routines, please see the manager at the earliest opportunity.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026

## Online Safety Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

*This policy should be read in conjunction with the Data protection and confidentiality policy, Acceptable internet use policy and General Data Protection Regulation (GDPR) privacy notice.*

Our nursery is aware of the growth of the internet **and technology** and the advantages this can bring **to everyday life**. However, it is also aware of the dangers it can pose and we strive to support children, staff and families to use the internet safely.

We refer to ['Safeguarding children and protecting professionals in early years settings: online safety considerations'](#) to support this policy.

The Designated Safeguarding Lead is ultimately responsible for online safety concerns. All concerns need to be raised as soon as possible to .

The use of technology has become a significant component of many safeguarding issues such as child sexual exploitation, radicalisation and sexual predation with technology often providing the platform that facilitates harm.

The breadth of issues included within online safety is considerable, but can be categorised into three areas of risk:

1. **Content:** *being exposed to illegal, inappropriate or harmful material; for example, pornography, fake news, racist or radical and extremist views*
2. **Contact:** *being subjected to harmful online interaction with other users; for example commercial advertising as well as adults posing as children or young adults, and*
3. **Conduct:** *personal online behaviour that increases the likelihood of, or causes, harm; for example making, sending and receiving explicit images, or online bullying.*

Within the nursery we aim to keep children, staff and parents safe online. Our safety measures include:

- Ensuring we have appropriate antivirus and anti-spyware software on all devices and update them regularly
- Ensuring content blockers and filters are on all our devices, e.g. computers, laptops, tablets and any mobile devices
- Ensuring all devices are password protected and have screen locks. Practitioners are reminded to use complex strong passwords, keep them safe and secure, change them regularly and not to write them down
- Monitoring all internet usage across the setting
- Providing secure storage of all nursery devices at the end of each day

- Ensuring no social media or messaging apps are installed on nursery devices
- Reviewing all apps or games downloaded onto devices ensuring they are age and content appropriate
- Using only nursery devices to record and/or photograph children in the setting
- Ensuring that staff do not to use personal electronic devices with imaging and sharing capabilities, including mobile phones, smart watches and cameras
- Never emailing personal or financial information
- Reporting emails with inappropriate content to the internet watch foundation (IWF [www.iwf.org.uk](http://www.iwf.org.uk))
- Teaching children how to stay safe online and report any concerns they have
- Ensuring children are supervised when using internet connected devices
- Using tracking software to monitor suitability of internet usage (for older children)
- Not permitting staff or visitors private access to the nursery Wi-Fi
- Talking to children about ‘stranger danger’ and deciding who is a stranger and who is not; comparing people in real life situations to online ‘friends’
- When using online video chat, such as Zoom, Teams, Skype, FaceTime etc. (where applicable) discussing with the children what they would do if someone they did not know tried to contact them
- Providing training for staff, at least annually, in online safety and understanding how to keep children safe online. We encourage staff and families to complete a free online safety briefing, which can be found at <https://moodle.ndna.org.uk/>
- Staff modelling safe practice when using technology with children and ensuring all staff abide by an acceptable use policy such as instructing staff to use the nursery IT equipment for matters relating to the children and their education and care only. No personal use will be tolerated (see Acceptable internet use policy)
- Monitoring children’s screen time to ensure they remain safe online and have access to material that promotes their development. We ensure that their screen time is within an acceptable level and is integrated within their programme of learning
- Making sure the physical safety of users is considered, including the posture of staff and children when using devices
- Being aware of the need to manage our digital reputation, including the appropriateness of information and content that is posted online, both professionally and personally. This is continually monitored by the setting’s management
- Staff must not friend or communicate with parents on personal devices or social media accounts

- Ensuring all electronic communications between staff and parents is professional and takes place via the official nursery communication channels, e.g. the setting's email addresses and telephone numbers. This is to protect staff, children and parents
- Signposting parents to appropriate sources of support regarding online safety at home.

If any concerns arise relating to online safety, then we will follow our Safeguarding children and child protection policy and report all online safety concerns to the DSL.

The DSL will make sure that:

- All staff know how to report a problem and when to escalate a concern, including the process for external referral
- All concerns are logged, assessed and actioned in accordance with the nursery's safeguarding procedures
- Parents are supported to develop their knowledge of online safety. Parents are offered support to help them talk about online safety with their children using appropriate resources
- Parents are signposted to appropriate sources of support regarding online safety at home and are fully supported to understand how to report an online safety concern
- Staff have access to information and guidance for supporting online safety, both personally and professionally
- Under no circumstances should any member of staff, either at work or in any other place, make, deliberately download, possess, or distribute material they know to be illegal, for example child sexual abuse material.

## Cyber security

Good cyber security means protecting the personal or sensitive information we hold on children and their families in line with the Data Protection Act. We are aware that cyber criminals will target any type of business including childcare and ensure all staff are aware of the value of the information we hold in terms of criminal activity, e.g. scam emails. All staff are reminded to follow all the procedures above including backing up sensitive data, using strong passwords and protecting devices to ensure we are cyber secure.

To prevent any attempts of a data breach (which is when information held by a business is stolen or accessed without authorisation) that could cause temporary shutdown of our setting and reputational damage with the families we engage with, we inform staff not to open any suspicious messages such as official-sounding messages about 'resetting passwords', 'receiving compensation', 'scanning devices' or 'missed deliveries'.

Staff are asked to report these to the manager as soon as possible and these will be reported through the National Cyber Security Centre (NCSC) Suspicious email reporting service at [report@phishing.gov.uk](mailto:report@phishing.gov.uk)

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026





## Respectful Intimate Care Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we believe that all children need contact with familiar, consistent carers to ensure they can grow and develop socially and emotionally. Children need to feel safe, secure and happy so we expect nursery staff to be responsive to children's needs, whilst maintaining professionalism. We accept that children need to be cuddled, encouraged, held and offered physical reassurance, and ensure intimate care routines are undertaken **in a safe, respectful and child-centred way.**

Intimate care routines may include nappy changing, supporting children with toileting, changing clothes, and giving first aid treatment and specialist medical support, where required. In order to maintain the child's privacy, we will carry out the majority of these actions on a one-to-one basis and, wherever possible, by the child's key person. First aid treatment will be carried out by a qualified paediatric first aider.

**Providing intimate care involves working with children when they are particularly vulnerable, which can provide heightened opportunities for abuse. Therefore, to** promote good practice and minimise the risk of allegations we have the following guidelines to ensure staff are fully supported and able to perform their duties safely and confidently.

### Management

- Promote consistent and caring relationships through the key person system in the nursery and ensure all parents understand how this works
- Ensure all staff undertaking intimate care routines have suitable enhanced DBS checks
- Conduct thorough inductions for all new staff to ensure they are fully aware of all nursery procedures and arrange specialist training where required, i.e. paediatric first aid training, specialist medical support
- Follow up procedures through supervision meetings and appraisals to identify any areas for development or further training
- Ensure all staff have an up-to-date understanding of the Safeguarding children and child protection policy, including how to protect children from harm. This will include identifying signs and symptoms of abuse and how to raise concerns
- Operate a Whistleblowing policy to help staff raise any concerns about their peers or managers and help staff develop confidence in raising worries as they arise in order to safeguard the children in the nursery
- Conduct working practice observations on all aspects of nursery operations to ensure that procedures are working in practice and all children are supported fully by the staff including intimate care routines
- Conduct regular risk assessments on all aspects of the nursery operation, including intimate care, and review the safeguards in place. The nursery assesses all the risks relating to intimate care routines and uses appropriate safeguards to ensure the safety of all involved.

### Environment

- Leave the doors open when changing children’s nappies, soiled or wet clothing, or other intimate routines, whilst maintaining their dignity
- Ensure children are afforded privacy and dignity during intimate care routines, whilst balancing this with the need to safeguard children and staff.

### Parents

- Work closely with parents on all aspects of the child’s care and education as laid out in the Parents as partners policy. This is essential for intimate care routines which require specialist training or support
- If a child requires specific support the nursery will arrange a meeting with the parent to discover all the relevant information relating to this to enable the staff to care for the child fully and meet their individual needs.

### Relationships

- Although we recognise it is appropriate to cuddle children, we give cuddles only when sought by children needing comfort to support their emotional development. Staff are advised to do this in view of other children and practitioners, whenever possible. We recognise that there may be occasions where it is appropriate for this to happen away from others, such as when a child is ill. In these circumstances, staff are advised to leave the door open. It is the duty of all staff and the manager to ensure that children are appropriately comforted and to monitor practice
- We discourage inappropriate behaviour such as over tickling, over boisterous play or inappropriate questions such as asking children to say they love a staff member and we advise staff to report any such observed practice
- Staff are respectful of each other and the children and families in the nursery and do not use inappropriate language or behaviour, including during breaks.

If a parent or member of staff has concerns or questions about intimate care procedures or individual routines, practice procedures or behaviour they consider as inappropriate, including between staff members, they are urged to see the manager at the earliest opportunity.

Management will challenge inappropriate behaviour in line with the Supervisions policy, Disciplinary procedure or Whistleblowing policy.

If the concern relates to the manager and/or nursery owner then parents should contact Ofsted 0300 123 4666 or the local safeguarding partner (LSP) 0300 470 9100.

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The nursery carries out written risk assessments at least annually. These are regularly reviewed and cover potential risks to children, staff and visitors at the nursery. When





# Social Networking Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

Social media is a large part of the world we live in and as such at **100 Acrewood Pre-school** we need to make sure we protect our children by having procedures in place to ensure the safe use.

We use Facebook to share posts, pictures and videos of the experiences and activities the children have accessed at nursery, as well as to post updates, reminders and links to best practice.

In order to safeguard children we ensure:

- We have prior written permission in place from parents before posting any images of children
- Only the designated person or management can post on our social media pages
- We have a closed page which only parents and others who have been invited to join the group can view and comment on the posts
- \* We have separate permission to use any images for any open public pages that we use for marketing purposes
- We monitor comments on all posts and address any concerns immediately.

## **Staff use of social media**

We require our staff to be responsible and professional in their use of social networking sites in relation to any connection to the nursery, nursery staff, parents or children.

- When using social networking sites such as Facebook or Instagram we ask staff:
  - Not to name the setting they work at
  - Not to make comments relating to their work or post pictures in work uniform
  - Not to send private messages to any parents or family members
  - To direct any parent questions relating to work via social networking sites, to the manager
  - To ensure any posts reflect their professional role in the community (e.g. no inappropriate social event photos or inappropriate comments i.e. foul language)
  - To report any concerning comments or questions from parents to the manager or designated safeguarding lead
  - To follow the Staff behaviour policy
  - Not to post anything that could be construed to have any impact on the nursery's reputation or relate to the nursery or any children attending the nursery in any way
  - To follow this in conjunction with the Whistleblowing policy.

- If any of the above points are not followed then the member of staff involved will face disciplinary action, which could result in dismissal.

*Note from Citation: Nursery settings are advised at their discretion to decide if staff and parents can connect on social media and should update the procedures based on this decision.*

All electronic communications between staff and parents should be professional and take place via the official nursery communication channels, e.g. work emails and phone numbers. This is to protect staff, children and parents.

### **Parents’ and visitors’ use of social networking**

We promote the safety and welfare of all staff and children and therefore ask parents and visitors not to post, publicly or privately, information about any child on social media sites such as Facebook, Instagram and Twitter. We ask all parents and visitors to follow this policy to ensure that information about children, images and information do not fall into the wrong hands.

We ask parents **not to:**

- \*Send friend requests to any member of nursery staff
- Screen shot or share any posts or pictures from the nursery on social media platforms (these may contain other children in the pictures)
- Post any photographs to social media that have been supplied by the nursery with other children in them (e.g. Christmas concert photographs or photographs from an activity at nursery).

We ask parents to:

- Share any concerns regarding inappropriate use of social media through the official procedures (please refer to the Parents as partners policy, Complaints and compliments policy).

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
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## Staff Well-being Policy

*This policy links to the Health and safety – general policy, Healthy workplace policy, Menopause policy, Absence management procedure, Supervision policy, Safeguarding children and child protection policy and Prevent duty and radicalisation policy.*

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At 100 Acrewood Pre-school we promote the good health and well-being of all our staff. As a nursery, we endeavour to support staff well-being, not only to ensure that children receive high quality care, but also to ensure our employees feel supported and cared for, as part of a team.

Mental ill-health is usually caused by a combination of work and non-work related factors. There is a myriad of reasons for mental ill-health, from the pressure of ongoing change at work to longer or more intense hours exacerbated by financial pressures at home, or relationship problems and greater caring responsibilities. Striking the balance between what is considered appropriate results, or output, and robust mental health is tricky. We are committed to constantly upskilling ourselves so that we know about how to create and maintain conditions that support and encourage good mental health, as well as recognise the signs of mental ill health and provide appropriate support.

We recognise the importance of safeguarding the mental health of all of our employees, by providing a happy and nurturing working environment. With statistics in the UK showing that each week 1 in 6 of us experiences a common mental health problem, we are committed to acknowledging and supporting our staff's physical and emotional needs.

### **Our ethos**

We know that the care and education of babies and young children is highly rewarding. However, we are also aware of the day-to-day demands and pressures of modern life such as family life, financial worries, health concerns and work-life balance and how these pressures, alongside the role of providing high quality care and education to babies and young children, can place a high level of demand on all of our employees.

In order to support our staff team, the management team put procedures in place that ensure staff well-being remains one of the key focuses of our practice. In doing this, we aim to provide our team with a safe, inclusive and nurturing working environment that acknowledges their needs, not just within the workplace but as a whole person.

**Lisa Hunt** is the named member of staff who leads our setting's well-being practice. They offer support on staff well-being and know where to access external support.

**Lisa Hunt** is also committed to keeping their well-being and mental health knowledge up-to-date and is responsible for reviewing our practices, supporting the developing knowledge of the whole staff team, to ensure we are implementing the necessary strategies to safeguard the well-being of our staff.

### **Procedures to minimise work related stress:**

- Complete a written stress risk assessment to identify and manage work-related stress linked to demands, control, support, relationships, role and change (see Health and Safety Executive advice<sup>4</sup>)
- To ensure staff are supported within the setting, new staff will receive a full induction, so they feel competent and capable to carry out their role and responsibilities
- Staff will receive ongoing training, coaching and mentoring to ensure that they are supported to feel confident in their role and to minimise stress within the workplace
- Regular supervisions take place every term in which staff well-being is discussed and recorded
- Practitioners are respected and valued in their work, whatever their role. Tasks are shared out appropriately according to their role and level of responsibility, the workload is monitored and reviewed on a regular basis
- Staff are encouraged to have a healthy work-life balance; this is supported by ensuring the workload is monitored so that it is not necessary for staff to work outside of their scheduled hours. All contributions to work are valued and celebrated
- We carefully review our expectations around the amount of paperwork that staff must complete, including observations and assessments of children. We work as a team to ensure all record keeping is meaningful and kept to an appropriate level so as not to add undue pressure to staff members
- We work hard to maintain a reflective culture within the setting that encourages feedback from staff about management procedures and working relationships. This reflective culture supports an environment of teamwork, facilitating the involvement of every member of staff in the practice of our setting
- The nursery manager and well-being representative are available for staff to come and discuss any issues or concerns
- The nursery ensures that confidential conversations take place in private, away from other staff members and children
- All information remains confidential or on a need to know basis to support the facilitation of open and honest conversations. However, where the manager or the well-being representative feels there is a question around the safety of the staff member, they will refer to outside agencies for support and guidance. These measures will be discussed in a sensitive and understanding manner with the staff member, as appropriate
- We actively promote a culture of mutual respect, tolerance and cooperation tolerance, in line with the British values

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<sup>4</sup> <https://www.hse.gov.uk/stress/risk-assessment.htm>

- Team meetings are facilitated to support with team development, to raise awareness of mental health and well-being by engaging staff in conversations about how the setting maintains a supportive environment
- We promote a culture that supports any staff member who is experiencing a mental health related illness to discuss this and reasonable adjustments will be made to support any staff experiencing stress and any mental health issues
- If the nursery is made aware of any member of staff who requires support, a plan for more regular support sessions and adjustments to their working day will be discussed and decided in partnership with the staff member. This plan will be reviewed regularly and adapted to ensure it is relevant and appropriate (see Supporting staff members individually section)
- If adjustments are unable to meet the needs of the member of staff or the nursery, then further advice and support will be sought
- Staff well-being and staff self-care information is available within designated staff areas
- Leaders and managers support practitioners in a safe culture where bullying, harassment and discrimination are not tolerated, along with a culture that challenges and deals with any inappropriate behaviour in a timely manner; we have anonymous procedures to encourage reporting sexual harassment
- We have a zero tolerance approach towards discriminatory behaviour and sexual harassment
- Training includes an appropriate understanding that harassment, of any kind, is subjective and so depends on how the behaviour makes someone feel in order to create a culture of zero tolerance towards sexual harassment, in particular
- If a member of staff is returning to work after a period of absence, a back to work interview is carried out as per our Absence management procedure.

### **Supporting staff members individually**

We include well-being as part of our discussions at staff supervision sessions and appraisals. During these sessions, we work with staff on an individual basis, and have well-being discussions to ascertain any individual well-being needs. Where the manager and staff member feel it is appropriate, they will draw up an individual action plan, including reviewing workload and any stress triggers. With the needs of the nursery also in mind, reasonable adjustments will be made for the member of staff; this could include flexible working agreements (see below), changes in environment, adjustments to job roles and responsibilities, more frequent breaks, a working buddy, or any other appropriate measure that it is felt could be helpful.

### **Flexible working requests**

Employees are able to request flexible working from day one of their employment and they can make two flexible working requests in any 12 month period.

We follow all statutory guidance on the safeguarding of our workforce and as stated, if the manager is concerned about the safety of a member of staff, we will work with the Designated Safeguarding Lead to ask for support from the appropriate external agencies; this is to ensure the continued safety of our workforce at all times.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
23.01.2025	J A Earle	23.01.2026

## Supervision of Visitors Policy

*Providers are responsible for ensuring they follow the current version of the framework for their provider type.*

At **100 Acrewood Pre-school** we take all reasonable steps to ensure the safety of children in our care. This includes making sure any visitors to the nursery are properly identified and supervised at all times.

All visitors must sign the visitors' book on arrival and departure.

Visitors may include prospective parents, other professionals, e.g. local authority workers, Ofsted inspectors, people in the community that may come to talk to the children (e.g. librarians), contractors to complete work, deliveries etc.

Where applicable, we ask visitors to book in advance, so arrangements can be made to accompany them. The identity is checked of any visitors attending in a professional capacity, e.g. Ofsted inspectors, speech and language therapists.

All visitors are informed of any relevant policies including the Fire safety procedures and Mobile phone and electronic device use policy including the use of smartwatches and other devices capable of recording or sharing audio and/or images, e.g. smart (camera) glasses.

We give each visitor a visitor's badge to wear to identify themselves to staff and parents within the nursery. A member of staff must accompany visitors in the nursery at all times while in the building; at no time should a visitor be left alone with a child unless under specific circumstances arranged previously with the manager.

### Security of premises

- All external doors must be kept locked at all times and external gates closed. All internal doors and gates must be kept closed to ensure children are not able to leave the nursery unattended
- Staff, parents, visitors and students are reminded not to hold doors open or allow entry to any person, whether they know this person or not. Staff within the nursery should be the only people allowing external visitors and parents entry to the nursery.

The nursery will under no circumstances tolerate any form of harassment from third parties, including visitors, towards others, including children, staff members and parents. The police may be called in these circumstances.

This policy was adopted on	Signed on behalf of the nursery	Date for review
23.01.2025	J A EARLE	23.01.2026

tial discussion of sensitive issues including the opportunity for staff and their managers to:

Your essential guide to policies and procedures – England **V0.5** – **January 2024**



















## Immunisation Disclaimer Form

Name of child		
Date of birth		
Statement	Acknowledgement (please ✓)	
I/We acknowledge that all children can be exposed to diseases that can have serious, if not fatal, consequences, e.g. measles, mumps, meningitis, polio		
I/We are aware of the view of the NHS that the best way to protect children is by immunisation and that this will also help to protect other people with whom the child may come into contact in the setting, such as those with weakened immune systems or newborn babies		
I/We are aware of the view of the NHS that immunisation is the best defence against epidemics that can kill or disable both children and adults		
I/We assume full responsibility for my/our decision and confirm that I/we understand the associated risks and benefits and the importance of childhood immunisations in reducing the risk of my/our child contracting serious, potentially fatal diseases		
Please indicate which vaccines have been received by your child	✓	
Diphtheria/Tetanus/Pertussis/Polio/Hib/Hep B		
Pneumococcal		
Men C		
Hib/Men C		
MMR1		
Preschool Booster		
MMR2		
Rotavirus		
Men B		
None of the above		
Name(s) of parent(s)		
Signature(s)		
Date		







