

Butterflies Childcare Safeguarding policy

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Our settings Designated Safeguarding Lead officer is Clare Amey and Deputy Safeguarding Officer Zoe Marshall.

This policy applies to anyone working on behalf of Butterflies Childcare including senior managers, paid staff, volunteers, sessional workers, agency staff and students.

As an Early Years setting, we aim to keep children safe by adopting the highest possible standards and taking all reasonable steps to protect children from harm. Our prime responsibility is the welfare and well-being of children in our care. As such it is our duty to the children, parents/carers, and staff to act quickly and responsibly in any instance that may come to our attention. All staff will work as part of a multi-agency team where needed in the best interest of the child.

The purpose of this policy statement is:

- **to protect the children at Butterflies Childcare from harm**
- **to provide staff and volunteers, as well as children and young people and their families, with the overarching principles that guide our approach to child protection.**

At Butterflies Childcare we believe that:

- children and young people should never experience abuse of any kind
- we have a responsibility to promote the welfare of all children and young people, to keep them safe and to practise in a way that protects them.

We recognise that:

- the welfare of children is paramount in all the work we do and in all the decisions we take
- working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare

- all children, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation have an equal right to protection from all types of harm or abuse
- some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues
- extra safeguards may be needed to keep children who are additionally vulnerable safe from abuse.

We will seek to keep children safe by:

- valuing, listening to and respecting them
- appointing a nominated child protection lead for children and a deputy for safeguarding
- adopting child protection and safeguarding best practice through our policies, procedures and code of conduct for staff and volunteers
- developing and implementing an effective online safety policy and related procedures
- provide effective management for staff and volunteers through supervision, support, training and quality assurance measures so that all staff and volunteers know about and follow our policies, procedures and behaviour codes confidently and competently.
- Ensuring that all staff are alert to the signs and understand what is meant by safeguarding and are aware of the different ways in which children can be harmed.
 - operate safer recruitment procedures when recruiting and selecting staff and volunteers ensuring all necessary checks are made
 - recording and storing and using information professionally and securely, in line with data protection legislation and guidance.
 - sharing information about safeguarding and good practice with children and their families via leaflets, posters, group work and one-to-one discussions
 - making sure that children, young people and their families know where to go for help if they have a concern
 - using our safeguarding and child protection procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, parents, families and carers appropriately

- using our procedures to manage any allegations against staff and volunteers appropriately ensuring that we have effective complaints and whistleblowing measures in place
- creating and maintaining an anti-bullying environment and ensuring that we have a policy and procedure to help us deal effectively with any bullying that does arise
- ensuring that we provide a safe physical environment for our children, young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance
- Ensure staff and volunteers are aware the use of personal Mobile phones, smart watches and cameras in the setting is prohibited in areas occupied by the children.
- building a safeguarding culture where staff and volunteers, children, young people and their families, treat each other with respect and are comfortable about sharing concerns.

To Report a concern about a child to the Children and Families Hub on 0345 603 7627.

Essex Social care 0845 606 1212.

North Essex telephone for help and advice: 01206 286785

Whistleblowing policy

The setting has processes in place for reporting any concerns about a member of staff (or any adult working with children). Any concerns about the conduct of a member of staff must be referred to the Manager(or Deputy Manager in their absence)

The LADO should be contacted if you have concerns or receive a complaint or allegation that a worker/volunteer 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

There are four LADOs for Essex County Council and they are based within the Children's Safeguarding Team. **They can be contacted by phone on 03330 139 797 or by e-mail: lado@essex.gov.uk.**

If a concern is raised outside of office hours, and an immediate referral to Social Care is required, this should be made to Essex Social care on 0845 606 1212. The LADO should then be informed at the first available opportunity.

Recognising and responding to abuse

Any member of staff receiving a disclosure of abuse or noticing signs or indicators of abuse will record it as soon as possible, noting what was said or seen (if appropriate, using a body map to record), giving the date, time, and location. All records will be dated and signed and will include the action taken. This is then presented to the Lead Practitioner(or Deputy), who will decide on appropriate action and record this accordingly.

Any records relating to child protection are kept on an individual child protection file for that child (which is separate to any other child file). All child protection records are stored securely and confidentially until the child transfers to another educational setting.

The following identifies some possible manifestations of child abuse; however, these lists are not exhaustive.

Neglect- is the persistent failure to meet basic physical and psychological needs, which may result in the serious impairment of the child's medical

problems, emaciation or under nourishment. Staff may notice behavioural signs such as a child who always seems hungry, tired, has ill -fitting clothes, poor personal hygiene, e.g., soiled, unchanged nappies, etc.

Procedure:

- The concern should be discussed with the parent/carer.
- Such discussions will be recorded, and the parent/carer will access to such records.
- If there appears to be any queries regarding the circumstances the child protection/MASH team will be contacted.

Physical abuse- physical signs may involve unexplained bruising/marks in unlikely areas, facial bruising, hand/finger marks, bite marks, burns, lacerations, or abrasions. Staff may notice several behavioural signs that also indicate physical abuse such as a child that shy's away from physical contact, is withdrawn or aggressive towards others or their behaviour changes suddenly.

Procedure:

- All signs of marks/injuries noticed on a child will be recorded immediately on an pre-existing injury form and signed by parents
- The incident will be discussed with the parent/carer at the earliest opportunity (when signing form)
- If there appears to be any queries or concerns regarding the injury, the child protection/MASH team will be called for advice immediately.

Sexual abuse –physical signs may include bruising consistent with being held firmly, discomfort in walking/sitting, pain or itching in the genital area, discharge, or blood on under clothes, or loss of appetite. Behavioural signs may include drawings or play showing indicators of sexual activity, sexually explicit language, and knowledge of adult sexual behaviour, seductive behaviour towards others, poor self-esteem and a child who is withdrawn.

Procedure:

- The observed instances will be detailed in a confidential report
- The observed instances will be reported immediately to the designated person/nursery manager.
- The matter will be referred straight to the child protection team/MASH hub.

Emotional abuse – physical signs of emotional abuse may include a general failure to thrive, not meeting expected developmental milestones and behaviourally a child may be attention seeking, telling lies, have an inability to have fun and join in play, low self-esteem, speech disorders, and be inappropriately affectionate towards others.

Procedure:

- The concerns should be discussed with the parent/carer by the designated person/nursery manager.
- Such discussions will be recorded, and the parent/carer will have access to such records
- If there appears to be any queries or ongoing concerns after discussion with parent/carer the child protection team/MASH team will be notified.

Recording suspicions of abuse and disclosures (procedures);

Staff will be an objective record of any observation or disclosure and include-

- Child's name/address/D.O.B and age
- Date, time, location of the observation or disclosure
- EXACT words spoken by the child, this should not be changed by an adult "to sound better".

- Name of the person who the concern was reported to with date and time and names of any other person present at the time.
- Any discussion held with parents/carers
- Name and signature of person completing the report/observation.

However, when identifying any potential instances of abuse, staff must always be aware that children may demonstrate individual, or combinations of indicators detailed above but may not be the subject of abuse. Individual or isolated incidents do not necessarily indicate abuse. Staff should always remain vigilant and must **NOT** ignore warning signs and contact the relevant services at any stage for support.

Female Genital mutilation (FGM)

As our duty of care, we have a statutory obligation under national safeguarding protocols (e.g working together to safeguard children) to protect young girls and women from FGM as it is an illegal, extremely harmful practise and a form of abuse.

It is essential that we work closely together with other agencies if we suspect a child has suffered or is likely to suffer FGM as appropriate safeguarding efforts. This is reflected in the Multi-Agency Practise Guidelines.

If a child in our care shows signs and symptoms (see below) of FGM or we have good reason to suspect the child is at risk of FGM, we **MUST** refer the child using our existing standard safeguarding procedures as it is a form of child abuse. When a child is identified as “at risk” of FGM, this information **MUST** be brought to the child’s GP attention and health visitor (as per section 47 of The Children’s Act 1989)

Important Signs & Symptoms to look out for if you suspect the child is “at risk” of FGM

- Father comes from a community that is known to practice FGM
- Mother/Family may have limited contact with people outside family
- It is known that the mother has FGM
- Family does not engage with professionals (health, school, other)

- Parents say that they or a relative will take the child abroad for a prolonged period
- Childs spoken about a holiday to her country of origin or another where the procedure is practiced
- Child has confided that she is to have a “special procedure” to “become a woman” or to be “more like her mum/sister/aunt” etc
- Family/child are already known to social services

Important Signs & Symptoms to look out for if you suspect the child has had FGM

- Child regularly attends GP appointments, has frequent Urinary Tract Infections (UTI’S)
- Increased emotional and physiological needs e.g. withdrawals, depression, or significant changes in behaviour.
- Child talks about pain/discomfort between legs
- Child has difficulty walking, sitting for extended periods of time- which was not a problem previously

Significant or Immediate Risk

- Child confides in a member of staff/professional that FGM has taken place
- Parent or family member discloses professional/ nursery child has had FGM

If you suspect at any time any concerns around FGM speak with the DSL immediately.

Child sexual exploitation

Child Sexual Exploitation (CSE) is defined a form of child sexual abuse. It occurs when an individual or a group take advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity in exchange for something the victim needs, or wants, and/or the financial advantage or increased status of the perpetrator facilitator. The victim may have been sexually exploited even if the sexual activity is consensual. CSE does not always have to involve physical contact; it can also occur through the use of technology.

Indicators/warning signs of CSE

- Staff members will be aware of the children most at risk of being sexually exploited, including vulnerable children/young people
- Being secretive
- Acting withdrawn and isolated
- Unexplained school absences
- Acting hostile or aggressive
- Displaying inappropriate sexualised behaviour for age
- Having physical injuries without plausible explanation
- Trying to conceal marks or scars on their body

As with any type of abuse, we will be aware of signs and symptoms and any concerns we may have will be followed with the same procedure.

If you suspect at any time any concerns around CSE/ grooming speak with the DSL immediately.

Upskirting

Under the Voyeurism Act 2019, it is an offence to operate equipment and to record an image beneath a persons clothing without consent and with the intention of observing, or enabling another person to observe, the victims genitals or bottom. Upskirting will not be tolerated and any incidences will be reported to the DSL who will then decide on next steps to take, which may include police involvement.

Prevent Duty

In Line with section 26 of the counter terrorism and security act (2015) we understand the importance of staff members being able to recognise and identify vulnerable children and to have “due regard to the need to prevent people from being drawn into terrorism”.

We recognise the importance of protecting children from the risk of radicalisation and promoting British values in the same way we would protect and safeguard children from any other abuse.

We will ensure all staff members are able to notice changes in children’s behaviour as we would do with any kind of safeguarding matter as there is no single way of being able to identify a child who is at risk of being vulnerable or susceptible to radicalisation/extremism.

Regular reviews on our e-safety policy and use of mobile phones and internet policy are carried out as we recognise the increased risk of online radicalisation.

All staff members are also aware of the appropriate time to make a referral to the “Channel Programme”

WHAT TO DO IF YOU THINK A CHILD IS BEING RADICALISED

If you think a child or the people around them are involved in radicalisation and **there is an immediate risk of harm, call 999 straight away.**

If it isn’t an emergency:

Discuss any concerns with your DSL.

If there is a Prevent issue, settings will be referred to the Essex Police Prevent Team for advice and guidance.

They may advise settings to make a referral using the [Prevent referral form \(Word, 56KB\)](#).

For support completing a Prevent referral form use the [DfE Making a referral to Prevent guidance](#).

Individuals referred to Prevent may be considered at a Channel Panel meeting where it will be decided whether to adopt the case.

Settings can discuss Prevent concerns with the Essex Police Prevent team on:

Telephone: 01245 452 196

Email: prevent@essex.police.uk

Or with the education lead for prevent Jo Barclay.

National Police Prevent advice line: 0800 011 3764

DfE counter-extremism helpline on 0207 340 7264 (Monday to Friday, 9am to 5pm)

Criminal Exploitation & County lines

Criminal exploitation is child abuse where children and young people are manipulated and coerced into committing crimes.

A 'Gang' means different things in different contexts, the government in their paper 'safeguarding children and young people who may be affected by gang activity' distinguishes between peer groups, street gangs and organized criminal gangs.

- Peer group – a relatively small and transient social grouping which may or may not describe themselves as a gang depending on the context.
- Street gang – groups of young people who see themselves (and are seen by others) as a discernible group for whom crime and violence is integral to the group's identity.
- Organised criminal gangs – a group of individuals for whom involvement in crime is personal

It's not illegal for a young person to be in a gang – there are different types of 'gangs' and not every 'gang' is criminal or dangerous. However, gang membership can be linked to illegal activity, particularly organised criminal gangs involved in trafficking, drug dealing and violent crime.

Signs of criminal exploitation

There are some signs to look out for if you're worried a child or young person has joined a gang or is being criminally exploited. It might be hard to spot at first, but the sooner you're able to talk to the young person, the more you'll be able to help them.

Signs you may notice:

- Frequently absent from and doing badly in school.
- Going missing from home, staying out late and travelling for unexplained reasons.
- In a relationship or hanging out with someone older than them.
- Being angry, aggressive, or violent.
- Being isolated or withdrawn.
- Having unexplained money and buying new things.
- Wearing clothes or accessories in gang colours or getting tattoos.
- Using new slang words.
- Spending more time on social media and being secretive about time online.
- Making more calls or sending more texts, possibly on a new phone or phones.
- Self-harming and feeling emotionally unwell.
- Taking drugs and abusing alcohol.
- Committing petty crimes like shop lifting or vandalism.
- Unexplained injuries and refusing to seek medical help.
- Carrying weapons or having a dangerous breed of dog.

County lines

Is the police term for urban gangs exploiting young people into moving drugs from a hub, normally a large city, into other markets – suburban areas and market and coastal towns – using dedicated mobile phone lines or 'deal lines. Children as young as 12 years old have been exploited into carrying drugs for gangs. This can involve children being trafficked away

from their home area, staying in accommodation, and selling and manufacturing drugs. This can include:

- Airbnb and short term private rental properties
- Budget hotels
- The home of a drug user, or other vulnerable person, that is taken over by a criminal gang – this may be referred to as cuckooing.

Signs that Cuckooing has taken place include:

- Signs of drug use
- More people coming and going from the property
- More cars or bikes outside
- Litter outside
- You haven't seen the person who lives there recently or when you have, they've seemed anxious, distracted or not themselves.

Children living in these properties are at risk of neglect and other types of abuse.

If you have any concerns about a child relating to this, please let your DSL know immediately or contact the British Transport Police by texting 61016 via mobile. [Crimestoppers](#) on 0800 555 111