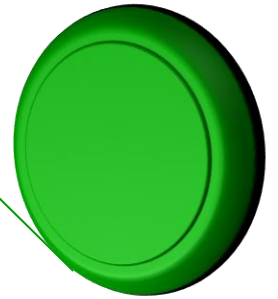
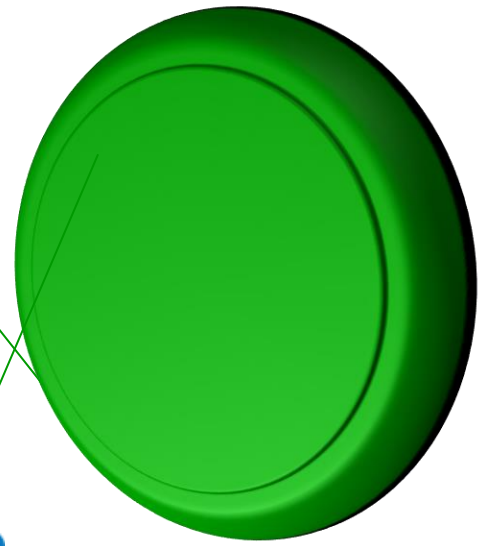




WYKE COMMUNITY &  
CHILDREN'S CENTRE  
A Sure Start Children's Centre

# Core Policies and Procedures





# Index of Policies and Procedures

These policies and procedures refer to our Centre and other community venues from where our services are delivered. They set out the standards that all of our staff, partners and users of our Centre should be aware of and be able to implement in practice.

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## Policy Review

Our Policies and Procedures will be reviewed annually by our Centre Management team and Board of Directors.

<b>Date of Review</b>	<b>Review Completed By</b>
September 2021	Joanne Hayhurst
September 2022	Joanne Hayhurst
 08 September 2023	 Joanne Hayhurst

Any queries or concerns about these policies should be raised with our Senior Management Team..

All policies and procedures contained in this document are condensed for the easy use and reference of parents, staff, volunteers and external partners and agencies.

A full and comprehensive file of all Centre policies are held in electronic format by the admin and management team. All policies contained in this file were advised and supported by 'Alcumus HR' – 01133570580

# 1. Accident Reporting Policy & Procedure



## 1.1 Statement

Wyke Community and Children's Centre will take all reasonable and practicable steps to ensure the health, safety and welfare of all employees and service users.

## 1.2 Implementation & Procedure

- The aim of this policy is to ensure that we take appropriate action to prevent and reduce accidents and ill health occurring as a result of our activities and that we comply with Health and Safety legislation, using our reporting procedure.
- The Centre will, at all times comply with the Early Years Foundation Stage, Statutory Framework with regards to 'First Aid' Qualifications of staff.
- First Aid Kits will be available at all times, including when off the premises. It is the responsibility of the Department manager to ensure First Aid kits are accessible at all times.
- All accidents must be reported immediately and logged (even if there is no injury) on a 'Universal Accident Form' held in the main office and main room file.
- All information about accidents that take place must be included so that appropriate action can be taken to reduce injury and ill health and to promote the care and well-being of all employees and service users.
- In the case of a child becoming injured whilst within our care parents should be informed at the earliest possible opportunity, either upon collection of the child from the setting or in more severe accidents immediately via Phone Call. All accident forms must be signed by parents/carers upon collection.
- Where Children are being taken off premises staff must carry with them Parent/ Carers contact information at all times. Staff must also hold information about any allergies or ongoing medical conditions. Department managers are responsible for ensuring this at all times.
- Should Parents/carers be unavailable to contact emergency contact should be informed immediately.
- In order to be cared for by any department of the Centre parents/ carers must have completed and signed the Emergency Medical treatment declaration.
- The setting is legally obliged to share information regarding serious accidents, illnesses, injuries or death of a child with OFSTED as soon as possible or always within 14 days of the initial date of the incident.

### **1.3 Roles and Responsibilities**

All employees, partner agencies and service users have a responsibility for promoting health and safety and for reporting accidents.

\*Amendment July 2016 – Accident forms to be held centrally in-response to Ofsted action.

## 2. Behaviour Management Policy & Procedure

### 2.1 Statement

Wyke Community and Children's Centre is sensitive to the needs of individual children and their families and are committed to promoting positive behaviour through everyday activities within our stimulating, learning environment. Within our sessions we will try to create an environment where children, parents, carers and employees all value, respect and care for each other and where children can develop self-discipline and self-esteem in a happy, relaxed atmosphere.

### 2.2 Implementation & Procedure

To help us achieve this we will:

- The Centre recognises that some behaviours are typical and can be expected to be exhibited by children at certain stages of children's lives or stages of development. These include but are not limited to: Emotional distress, displayed via tantrums, upset, acts of aggression, biting and withdrawal. In instances where a child's behaviour needs further managing a 'My Individual Support Plan' should be put in place, alongside parents to ensure behaviour is handled consistently and appropriately centred around the child's needs.
- Be a good role model for children and parents at all times by being courteous and calm, encouraging respect.
- Give positive communication as often as possible, encouraging positive behaviour.
- Set boundaries to enable children and families to feel secure in knowing that they can attend without fear of being hurt or hindered by anyone else, These are available to parents at all times and included within the Welcome Pack.
- Ensure that all boundaries are reasonable to children's age and stage of development and understanding.
- Ensure that our expectations of a child's behaviour are appropriate for their age and stage of development.

When children behave in unacceptable ways we will:

- Never use or threaten corporal punishment, including but not limiting: smacking, shaking, biting, frightening or humiliating children.
- Ensure parents are supported and that they understand that it is the behaviour not the child that is unacceptable.
- Remind children and parents/carers of the behaviour we expect.
- Work with parents to support their child in developing positive behaviour.
- If children's behaviour exceeds that where it is deemed necessary for the safety of themselves or others around them staff should follow procedure in the Positive Handling procedure.

- In situations where physical intervention is necessary for the safety of the centre user themselves or that of other centre users complete a Physical intervention Log at the earliest opportunity. This should be signed by department managers and parents/ carers where applicable.

When parents/carers display undesirable behaviour we will support them in seeing what was wrong and suggest ways of working towards more appropriate behaviour.

### **2.3 Roles and Responsibilities**

All employees, partner agencies and service users have a responsibility for promoting positive behaviour.

## 3. Breastfeeding Policy & Procedure

### 3.1 Statement

Wyke Community and Children's Centre acknowledges that every woman has a right to make the decision about how to feed her baby without feeling pressured.

### 3.2 Implementation & Procedure

The aim of this policy is to ensure that we promote breastfeeding and its benefits and to offer support to those women who choose to breastfeed.

We will do this by offering:

- Information about breastfeeding.
- A safe, comfortable and relaxed environment for mothers wishing to breastfeed whilst in our centre.
- Internal promotion as a 'Breastfeeding Friendly' centre.
- Storage of Breast Milk for children within the Nursery, this must be brought to Nursery fresh, everyday. Under no circumstances will Nursery store or freeze breast milk. All bottles must be clearly labelled with the child's name and the date of supply.
- Breast milk can be included within individuals meals at the request of parents. Please see the above point for expected supply of Breast milk for cooking purposes.

### 3.3 Roles and Responsibilities

All employees have a responsibility for ensuring that breastfeeding is promoted and that breastfeeding mothers are made to feel comfortable and supported.



## 4. Bullying Policy & Procedure

### 4.1 Statement

Wyke Community and Children's Centre places the happiness, welfare and safety of the children who access our services as a high priority. We will endeavour to provide an environment that is safe and free from bullying and intimidation. Our employees are aware of what constitutes bullying. We know that this can take many forms, such as name calling, fighting or physical attacks, racial remarks and abuse.

Bullying can include **all** service users. Bullying of children or adults will not be tolerated within our Centre.

### 4.2 Implementation & Procedure

We will ensure that we:

- Provide adequate supervision of all services to reduce the incidence of bullying.
- Make all service users aware of our Centre's 'Ground Rules'.
- Reassure children that they will be listened to and know that it is their right to tell.
- Listen to concerns of parents/carers and keep them informed of any action taken in response to the concern.
- Complete a 'Universal Incident Form' so that a full investigation can take place.
- Take appropriate action in all cases of bullying, this may include exclusion.

When dealing with suspected incidents of bullying, employees must use the following guidance:

1. Never ignore suspected bullying
2. Do not make premature assumptions - listen to both sides of the story
3. Listen carefully to all people - more than one child with the same version does not mean they are telling the truth
4. Use a logical approach that moves the children forward and focuses on making things better
5. Follow up the issue to check that bullying has not re-occurred

When dealing with reported incidents of bullying, employees must:

1. Comfort the victim and ensure they feel supported
2. Inform the Centre Management immediately
3. Complete a Universal Incident Report Form
4. Liaise with Centre Management to carry out a full investigation
5. Inform the parents of the incident, investigation and outcome and identify a solution

In the majority of cases bullying behaviour will be dealt with according to the strategies set out in the Behaviour Management Policy. This will involve working with and talking to the child who is bullying to help them to understand the impact of the behaviour and helping them to make changes to prevent a re-occurrence.

Sanctions for perpetrating bullying include:

- Verbal reprimand by senior staff
- Discussions with parents or carers
- Withdrawal of children from planned activities
- Fixed period of exclusion
- Permanent exclusion (depending on the severity of the incident)

#### **4.3 Roles and Responsibilities**

All employees and partner agencies are responsible for promoting anti-bullying and challenging bullying behaviour.

## 5. Complaints Policy & Procedure



### 5.1 Statement

Wyke Community and Children's Centre aim to provide a consistent approach to the high quality service of care meeting the individual needs of all children and families accessing our services. To achieve our aim we ensure that we engage and work in partnership with all service users in maintaining our high standards.

At times, service users may have concerns about the service we provide. In the event of a service user having concerns and/or making a complaint please discuss this with our Senior Management team, who will make a record of the complaint and address the matter accordingly. Where the complaint is about a member of our Senior Management team, correspondence should be addressed to our Chair of the Board of Directors, Mr Andy Hinchcliffe.

### 5.2 Implementation & Procedure

- **All concerns should be dealt with In confidence and not in front of other Centre users.**
- Complaints received by our Centre will be recorded on a formal 'Complaint Record'.
- Complaints will be acknowledged within 7 working days of receipt and a response be given within 28 working days of receipt, where applicable by the department manager.
- If the service user is still unhappy, they should be referred to the Centre manager or failing this Chair of our Board, so that the complaint can be followed up at a higher level. All complaints will be dealt with in accordance with our Complaints Procedure (Appendix 2).

If after this the service user is still unhappy they can submit a complaint to OFSTED. The OFSTED regulator for Wyke Community & Children's Centre is:

OFSTED, Piccadilly Gate, Store Street, Manchester, M1 2DW.

0300 123 1231

[enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk)

### 5.3 Roles and Responsibilities

The Centre Management have responsibility for ensuring that service user complaints are managed effectively.



WYKE COMMUNITY &  
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## Complaint Record

<b>Date Of complaint</b>	
<b>Who made the complaint?</b>	
<b>Nature of complaint</b> (please tick the Statutory Framework for the Early Years Foundation Stage that complaint relates to)	
The Learning and Development Requirements	
Assessment	
The Safeguarding and Welfare Requirements	
<b>Please give details of the complaint</b>	
<b>How was it dealt with?</b>	
Internal investigation	
Ofsted investigation	
Other (please state)	
<b>Please give details of investigation outcomes or attach any out come letter from</b>	



## 6. Confidentiality Policy & Procedure



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### 6.1 Statement

Wyke Community and Children's Centre believe that details regarding other people should only be shared on a need to know basis. Any details of a personal nature will only be disclosed with the consent of the person involved.

We understand that information is gathered by staff members during the course of their work. In some circumstances, this information will not be stated as confidential and staff members may have to exercise common sense and discretion in identifying whether information is expected to be confidential. If in doubt, always seek advice from your line manager.

### 6.2 Implementation & Procedure

We will ensure that:

- Employees and volunteers feel able to share information with their line manager in order to discuss issues and seek advice.
- Employees and volunteers will not exchange personal information or comments (gossip) about individuals with whom they have a professional relationship.
- Employees should not talk about the organisation or individuals in a social setting.
- Employees and volunteers will not disclose to anyone, other than their line manager or 'Designated person any information considered sensitive, personal, financial or private without the knowledge or consent of the individual concerned.
- No information will be disclosed to any third party without the explicit written consent of the individual concerned. The line manager/designated person must be informed of the course of action an employee wishes to take before any information is disclosed.
- Any information collected must be for legitimate reasons. Information not to be used in such a way that there would be an unjustified adverse effect on the individual. We will always be transparent about how the information will be used. We will handle all personal data in ways they would reasonably expect and make sure nothing unlawful is done with the data.
- Where there is a legal duty for us to disclose information, the person to whom the confidentiality is owned will be informed that the disclosure has or will be made (unless it is deemed that doing so would put a child a risk).

### Access to information

- Where information is sensitive, i.e. family in crisis, it will be confidential to the employee dealing with the case and their line manager. Such information should be clearly labelled 'Confidential', kept in a locked cabinet/cupboard and only be accessed by the relevant persons.
- Information is confidential to our organisation.
- Personal information regarding our service users, outreach clients or any other person giving details will remain at our registered office..
- Clients of outreach and Family Support Workers may have access to any information kept on them by authorising this through the Centre Management. Sensitive information will only be made available to the person named on the file.

- Employees may have sight of their personnel records, by giving 7 days notice in writing to the Centre Management.
- When working on confidential documents, employees must ensure that any information is not able to be seen or read by people in passing. This includes records or contact lists being left open on desks, information on computer screens not being visible and in the case of photocopying, ensuring sensitive documents are placed face down when finished with.

### **6.3 Roles and Responsibilities**

All employees and partner agencies are responsible for ensuring the confidentiality of our service users is maintained.

## 7. Data Collection & Data Protection Policy & Procedure



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### 7.1 Statement

At Wyke Community Children's Centre Nursery we believe that each child deserves the best start in life. By working closely with parents, families & carers we offer support with some of the life-changing journeys children take. We strive to make family life a positive and enjoyable experience by building strong relationships, helping children and families to explore their futures and contribute to improving their outcomes. Children are unique and we aim to help them to make the most of their individual talents as they grow and develop, by providing a secure, safe & happy environment. Our inclusive provision enables children to thrive, be respected, be independent, be confident, and enjoy many educational experiences. We are passionate about working with children & families and supporting them through an important part of their "journey of life"

### What information do we collect?

We collect this signed consent form which allows us to work with your child.

The information we collect includes: Name, Date of Birth, Address, Gender, Ethnicity, SEND Details, Other professional agencies involved with a child's care, Details of other providers the child attends. Personal information of the parent, such as: Name, Address, Date Of Birth, National Insurance number, HMRC 30 Hour Eligibility Code Children's Eligibility for early years pupil premium, Eligibility for disability access fund.

### Who keeps the information?

All information is stored securely for a period of 4 years following the end of the Nursery place or in line with statutory guidelines under the following circumstances: Child Protection orders, Looked After Child Orders, Child In Need Plans or Serious Case Reviews.

### How long does consent last?

Your consent allows us to work with your child for the period of their time within our Nursery and to keep all information for a period of four years after their place has ended. However, you reserve the right to change or withdraw consent at any time by notifying Wyke Community and Children's centre in writing. You can view the latest version of our Privacy Policy at [tinyurl.com/wykeccc](http://tinyurl.com/wykeccc). We may update this Policy from time to time to continue to comply with legal requirements.

### How is your information not shared?

The information that Wyke Community and Children's Centre will share may include, but is not limited to, your and your child's name, address, Date of Birth, Ethnicity, Religion, National Insurance Number and Disability where appropriate. It is important that Wyke Community and Children's Centre have this information to access funding for children's Early Education Place. Your information will be sent securely to the Bradford Schools Online Portal. A small number of authorized members of Bradford Council will access this information. All information provided will be stored securely and in strict confidence.

### Sensitive Information

Special categories of particularly sensitive information require higher levels of protection. We need to have further justification for collecting, storing, and using this type of information. We may process special categories of information as follows:

- In limited circumstances, with your written consent.



- Where we need to carry out our legal obligations and in line with our data protection policy.
- Where it is needed in the public interest, such as for equal opportunities monitoring and in line with our data protection policy. We will use information about your race, nationality, ethnic origin, religious, philosophical or moral beliefs to ensure meaningful equal opportunities monitoring or reporting.
- Where it is needed for funding Early Education Places, National Insurance Numbers will be kept.
- Where it is necessary for your child to access provision suitable to their individual needs, medical reports, referrals, letters, information/reports from Children's Social Care or Early Help may be kept.
- Documentation to demonstrate eligibility for free nursery places, e.g. Benefit/tax credit information, proof of earnings.
- Disability Information.

Wyke Community And Children's Centre handles information in accordance with The Data Protection Act 1998, General data protection regulation 2018. Access to information is conducted on a strictly need to know basis, information is held securely and confidentially. Where information is shared this will be done in an appropriate, secure manner.

#### **7.4 Roles and Responsibilities**

Joanne Hayhurst is the allocated Data Protection Officer and will ensure Wyke CCC enforce the following:

- To ensure there is a lawful reason for collecting personal data and to ensure this is done in a fair and transparent way.
- To ensure centre users are clear about why their data is being collected and what it will be used for.
- To ensure that data is used only for the reason it is initially obtained.
- To ensure that no more data is collected than necessary.
- To ensure all data is accurate and update forms are regularly sent out to update information.
- To ensure that data is kept as long as needed in line with relevant Legislation.
- To ensure that all data is protected and kept confidential.

All employees have a responsibility for ensuring that data collection and data protection aims are adhered to.

## **8. Equality & Diversity Policy & Procedure**



## **8.1 Statement**

At Wyke Community and Children's Centre, equality is important. It's about making sure everyone who uses our services and who works for us, has the opportunity to achieve their full potential and has the experience of feeling included, respected and valued for who they are as a unique individual. That's why we're committed to promoting equality, valuing diversity and working inclusively in all our planning and services. It's part of how we're able to offer the best support to the most vulnerable and neglected children, young people and their families.

Our commitment to equality and diversity is part of everything we do. This helps to define our actions, behaviour and practices - as an employer, service provider and campaigning organisation.

## **8.2 Implementation & Procedure**

It is our equality and diversity aim at Wyke Community & Children's Centre to become an integrated Centre we will do this by ensuring that we:

- Welcome children and families from our diverse community and work in partnership with them to develop community cohesion.
- Provide an environment where all our children can flourish and be valued.
- Ensure that the Setting has a designated Special Education Needs Co-ordinator (SENCO) to lead on matters regarding Special Educational Needs and Disabilities.
- Ensure that all children attending the setting have completed 'All about me' Form and any other relevant information required, such as but not limited to, Individual Education Plans, Individual Risk assessments and Health Care Plans.
- Complete registration forms that include information about childrens dietary requirements, cultural or individual needs.
- Offer extended services and develop parents and carers involvement in activities.
- Are responsive to the needs of our service users and ensure that all services are equally accessible.
- Ensure that where necessary or where in the child's best interests the setting works in partnership with other agencies to ensure children's needs are being met.
- Ensure that all children, parents, carers and staff are aware of procedures, rights and responsibilities in relation to equalities issues.
- Recognising and celebrating diversity through the services that we deliver.
- In line with the British Values implement and Promote tolerance, respect and understanding of equality and diversity through all the activities, daily routines and experiences we provide for children and families
- Continually encourage children to celebrate similarities and differences between each other, through both planned and unplanned experiences
- Ensure that all activities, resources, play materials, books and images reflect a diverse range of communities.
- Work in accordance with the Equality Act 2010, to ensure children's right are held of the upmost importance at all times.

## **8.3 Roles and Responsibilities**

All employees have a responsibility for promoting equality and inclusion and avoiding discrimination of any kind.

## 9. Fire Safety and Prevention Policy & Procedure

## 9.1 Statement

Wyke Community and Children's Centre places the safety of children, parents/carers, visitors and employees as our highest priority. Fire safety is one very important aspect of this ethos and we shall adhere to all relevant fire guidance and law.

## 9.2 Implementation & Procedure

To protect everyone's safety we shall ensure that:

- All employees, visitors and service users are aware of our Fire Safety & Evacuation Process
- The Fire Safety and Evacuation Process is clearly signposted in each appropriate room.
- All fire exits are clearly marked and regularly checked through daily risk assessments for obstructions and all fire exits remain locked whilst people are in the building.
- The fire alarm system is tested and the results recorded.
- We have a designated Fire Safety Officer who will be responsible for the overseeing the Fire Safety & Evacuation Procedure.
- Every 3 months a fire drill (without warning) is carried out.
- Ensure that Department staff take the register out to count the children whilst assembling at the Emergency Assembly point.
- Ensure that reception staff take the staff register, visitor register and group register out to count staff and adults whilst assembling at the Emergency assembly point.
- Reception staff to ensure a mobile phone is brought to the Emergency assembly point to contact emergency services and parents immediately.

## 9.3 Roles and Responsibilities

All employees have a responsibility for ensuring that they follow the correct procedure.





## **Fire Action**

**Any person discovering a fire should:**

1. Sound the nearest alarm
2. Call the Fire Service on 999

**On hearing the fire alarm you should :**

1. Leave the building by the nearest and safest route
2. Close all doors behind you
3. Report to the assembly point in the car park
4. Do NOT re-enter the building until told you can do so

### **10.1 Statement**

Wyke Community and Children's Centre recognises that the competent administration of first aid can save lives and prevent minor injuries becoming more serious. We are committed to ensuring that all appropriate staff are well trained and skilled at administering first aid.

### **10.2 Implementation & Procedure**

As a minimum requirement, the lead person delivering any service should act as the 'appointed person' and must take responsibility for responding to an accident.

There should be a First Aider on site who is known to all staff, where this is not possible e.g. where the service is being delivered in an alternative setting - the lead person at that venue should be a First Aider or be aware of the host organisations named First Aider.

#### Responses are:

##### Minor Injury

- Provide first aid equipment to the injured person if appropriate
- Record the accident in the Accident Book (held in the main office)

##### Major Injury

- Contact the emergency services if appropriate without delay
- Record the accident in the Accident Book (held in the main office) and report to the Centre Management team for further action

First aid is the immediate treatment necessary for the purpose of preserving life and minimising the consequences of injury or illness until expert medical assistance can be obtained. First aid also includes the initial treatment of minor injuries, which do not need treatment by a medical practitioner.

### **10.3 Roles and Responsibilities**

All employees have a responsibility for offering first aid. The Centre Management will ensure that there is adequate and appropriate provision of first aid equipment, facilities and appropriately trained staff to enable first aid to be administered to all employees and service users.

## **11. Healthy Eating Policy & Procedure**

### **11.1 Statement**

Wyke Community and Children's Centre aims to promote healthy eating and healthy lifestyles and where food is provided is will be healthy, balanced, varied and nutritious.

### **11.2 Implementation & Procedure**

To ensure that we are promoting healthy eating we will ensure that:

- Fresh drinking water is available at all times.
- We promote hand washing prior to food and drinks being served.
- Appropriate equipment and utensils are used.
- We provide healthy snacks and drinks where appropriate in all of our activities.
- We provide for and encourage children's healthy choices.
- We promote children, parents/carers and employees being seated for snacks and meals to role model positive social skills for children at mealtimes.
- All appropriate employees have a Basic Food Hygiene certificate.
- Information is available that promotes health and fitness.

### **11.3 Roles and Responsibilities**

All employees have a responsibility for ensuring we promote healthy eating and healthy lifestyles.

## **12. Health and Safety Policy & Procedure**

### **12.1 Statement**

Wyke Community and Children's Centre recognises and accepts our responsibility as an employer for providing a safe and healthy working environment for all employees and to avoid risks to the health and safety of others who may be affected by our activities. We will take all reasonable steps within our power to meet this responsibility.

### **12.2 Implementation & Procedure**

We will implement this policy by:

- Identifying significant hazards and planning for elimination, reduction and control by conducting risk assessments at regular intervals, the results of which will be communicated to our employees.
- Communicating between levels of employees within the Centre - this is paramount and we will ensure that there are adequate arrangements in place to permit the flow of information both to and from employees.
- Giving our employees adequate information, instruction and training as is necessary to ensure their and others safety, whilst carrying out their duties on behalf of the Centre.
- Planning and budgeting to address the issues identified from the risk assessments and those deficiencies identified through our regular monitoring exercises.
- Employing contractors to conduct certain works on our behalf and undertake only to employ contractors who are professionally competent and who are compliant with relevant health and safety legislation.
- For further information please refer to the Wyke Community and Children's Centre Health and Safety Policy.

### **12.3 Roles and Responsibilities**

All of our employees have a legal duty to co-operate in all safety related matters.



## 13. Illness Policy & Procedure



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### 13.1 Statement

Wyke Community and Children's Centre recognise that illness and infection in early childhood is a normal occurrence as children under the age of 5 have typically lower resistance to infection and communicable diseases. We believe that preventing illness and infection in our centre is a shared responsibility between ourselves and the home environment. We understand that elimination of all infection and illness is not possible, but take our responsibility to reduce occurrences seriously.

### 13.2 Implementation & Procedure

To enable us to do this we will:

- Advise the parent/carer to take the child home or to their GP if a child is ill on arrival or falls ill whilst attending a session within our centre.
- Use the 'Guidance on Infection control in schools and other Childcare settings' only, to assess whether children are suitable to attend the setting whilst ill. Use this guidance in assessing how long children should be absent from Nursery upon contracting an illness.
- Always take appropriate steps to prevent the spread of infection, including but not limiting: Handwashing, cleaning of the environment and equipment and using safe hygiene practices when dealing with coughs and sneezes, toileting, nappy changing. .
- Encourage parents to notify us if their child has any infectious diseases, we will then notify other parents/carers of any known infection/illness.

### 13.3 Roles and Responsibilities

## 14. Lone Worker and Home Visiting Policy & Procedure



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### **14.1 Statement**

Wyke Community and Children's Centre places the safety of our employees as one of our highest priorities and will follow best practice systems for conducting lone working, home visiting and outreach services within the community, to ensure that our employees are kept safe at all times.

### **14.2 Implementation & Procedure**

To enable us to do this we will:

- Carry out risk assessments where appropriate.
- Ensure employees have a working mobile phone.
- Ensure that employees have received appropriate training on how to prevent and manage difficult situations, personal safety and violence at work.
- Ensure that employees confirm with Reception where they are going and give an estimated time for the visit and contact Reception after leaving.
- Only allow lone working and home visiting during daylight hours.

### **14.3 Roles and Responsibilities**

All employees have a responsibility for taking every action to protect their safety. Employees must never enter a building, premises or location where they feel unsafe or fear potential danger or harm.

## **15. Lost or Missing Child Policy & Procedure**

### **15.1 Statement**

Wyke Community and Children's Centre is committed to the values of the Every Child Matters agenda and place the safety of children in our care as a high priority. We have put in place systems and procedures which are an integral part of employee training and should ensure that children do not go missing or get lost whilst in our care, however we recognise that this may still be a risk and have implemented a set of procedures if this should occur.

### **15.2 Implementation & Procedure**

In the event of a lost or missing child on site employees must:

- Inform the Department Manager or in their absence a member of the Senior Management Team (SMT).

The Department Manager or a member of SMT will:

- Gather staff present and inform them of the situation - an immediate thorough search of the premises and grounds will be carried out.
- If the child is not found the Centre Management will contact the police, followed by the parent/carer of the missing child.
- Continue the search until directed otherwise and follow guidance and instruction given by the police.
- For all missing or lost children an 'Incident Report' form must be completed and passed to the Centre Management so that employees can be de-briefed and appropriate action taken. In case of missing/lost children not being found the Centre Management must also notify appropriate agencies and Ofsted.

In the event of a lost or missing child off site:

- The lead worker must assemble all children and parents/carers at a designated meeting point.
- Notify the venue security staff of the missing child and help with a thorough search.
- If the child is not found, the police must be contacted.
- Continue searching until directed otherwise and follow guidance and instructions given by the police.
- For all missing or lost children an 'Incident Report' form must be completed and passed to the Centre Management so that employees can be de-briefed and appropriate action taken. In case of missing/lost children not being found the Centre Management must also notify appropriate agencies and Ofsted.

### **15.3 Roles and Responsibilities**

All employees take responsibility for ensuring the safety of children in their care and for following the above procedure for dealing with a lost or missing child.

## **16. Parental Involvement Policy & Procedure**

## 16.1 Statement

Wyke Community and Children's Centre is committed to the values of the Early Years Foundation Stage Statutory Framework and will work with parents and carers to ensure that children are safe, achieve well and live positive and healthy lives.

We will provide quality care, education and information for their children and ensure that parents and carers are involved in all aspects of our work.

## 16.2 Implementation & Procedure

- We will work with parents and carers to ensure that: Their concerns are listened to, taken seriously and treated sensitively.
- We follow the Freedom of Information Act by ensuring all information and records held by us are available to parents and carers upon request.
- Any information about our Centre including Policies and Procedures is easily accessible and understandable.
- We keep parents informed and up to date with what is happening in our Centre and the work that is being done with their child/ren.
- We have an 'open door' policy in that parents and carers are able to speak to our staff at a time that suits them.
- We work with the groups who are less represented including fathers, parents who live apart from their children but who still play a part in their lives and working parents.
- Ensure that all children are added to Capture Education Services tracking tool and that parents have access to their child's profile and receive email notifications when new information is added.
- Ensure that practitioners communicate often with parents to ensure children's transitions are well supported, including those to another setting or life transitions, such as moving house or the birth of a new baby.

**16.3** We recognise that a number of other policies and procedures developed and implemented by us form part of the wider agenda Parental Involvement and this policy should be read in conjunction with the following policies and procedures:

Settling in and Transition Policy

Early Years Foundation Stage Policy

Special Educational Needs and Disabilities Policy.

## 16.3 Roles and Responsibilities

All employees have responsibility for ensuring that this policy is adhered to and that our parents and carers feel welcome and valued at our Centre.

# 17. Photography and Video Policy & Procedure

### **17.1 Statement**

Wyke Community and Children's Centre believe that photographic images can contribute to children's achievements being recognised and help children to feel valued and proud of their achievements. Photography and videos are useful tools and can be used in a variety of ways, such as record keeping, displays, marketing and publicity. We will adopt a common sense approach to the taking and use of photographic and video images. We will be sensitive to the rights and wishes of parents and carers who may not want their children to be photographed/videoed.

### **17.2 Implementation & Procedure**

We will ensure that:

- Permission is gained from all parents before any imagery is used of a child.
- We never take any imagery of a child if they object or are distressed.
- Any images recorded show positive issues and events.
- Imagery will never be exchanged or removed for private use by an employee or volunteer.
- For events such as play days we will ensure that appropriate signage is available which states that 'photographs will be taken during this event' and advising parents and carers that they may opt out by speaking to a member of staff.
- For groups such as Baby Group and Toddler Group, verbal consent will be sought from the participants.

### **17.3 Roles and Responsibilities**

All employees have a responsibility for ensuring this Policy is adhered to and to ensure our service users are also aware.

## **18. Risk Assessment Policy & Procedure**

### **18.1 Statement**

Wyke Community and Children's Centre will complete risk assessments for all work activities to determine the risks to the health and safety of our employees, visitors and service users. We will take all reasonable steps to ensure that the risk assessments detail the range of potential hazards and risks and the condition of our premises (including alternative settings from which our services are delivered) together with any remedial actions needed. Individual room risk assessments are also carried out throughout the day to prevent or remove any possible risks, these are kept on file for further reference. Overall risk assessments are completed and reviewed yearly or whenever new resources/furniture are brought in the nursery these are updated where necessary.

### **18.2 Implementation & Procedure**

We will ensure that each lead worker responsible for the individual work activity completes a risk assessment to:

- Identify what the hazards are and the people who may be harmed by the hazard.
- Disregard insignificant hazards.
- Evaluate the risks from identified hazards.
- Ensure all aspects of work activity are reviewed, including routine and non-routine activities.
- Take into account any existing control measures.
- Take account of the way in which the work is organised and the affects this can have on health.
- Take account of the risks to the public.
- Take account of the need to cover fire risks.
- Enable us to prioritise remedial actions.

### **18.3 Roles and Responsibilities**

All lead workers have a responsibility for carrying out appropriate risk assessments for the work activity that they are lead worker for.

## **19. Safeguarding and Child Protection Policy & Procedure**



This Safeguarding & Child Protection Policy is available on our website and is reviewed and ratified annually by the Board of Directors (BoD) or as events, or legislation requires.

Any deficiencies or weaknesses identified will be remedied without delay.

This policy is for all staff and directors.

Designated Safeguarding Lead	Deputy Designated Safeguarding Lead/s	Nominated Safeguarding Director	Chair of the Board
Joanne Hayhurst	Alise Miskiw Ashleigh Farkas	Andy Hinchcliffe	Andy Hinchcliffe

Policy Review date	Date Ratified by Directors	Date Shared with staff
16/06/2023	23/06/2023	

## **Wyke Community and Children's Centre**

Child Protection and Safeguarding Advice  
Contact List – June 2023

Role / Agency	Name and role	Contact Details
<b>Designated Safeguarding Lead (DSL) / Child Protection Coordinator</b>	Joanne Hayhurst	01274 800500 <a href="mailto:Joanne.h@wykeccc.co.uk">Joanne.h@wykeccc.co.uk</a>
<b>Deputy DSL</b>	Alise Miskiw	01274 800500
<b>Other DSLs</b>	Ashleigh Farkas	01274 800500
<b>Director with responsibility for Child Protection and Safeguarding</b>	Andy Hinchcliffe	01274 800500
<b>Chair of the Board</b>	Andy Hinchcliffe	01274 800500
<b>SENDCo</b>	Samantha Crossland	01274 800500
<b>Bradford Children's Social Care</b>	Children's Initial contact point	01274 437500
<b>Bradford Children's services Duty Team (out of hours)</b>	Emergency Duty Team	01274 431010
<b>Bradford Children's Services Practitioners Advice Line</b>	Practitioners advice and referral contact	01274 433999
<b>Local Authority Designated Officer (LADO)</b>	Duty Lado	01274 435600
<b>PREVENT Team</b>	Danielle King	01274 474783

We are committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers, contractors and visitors to share this commitment.

**All staff** refers to all adults, volunteers (including Directors) or students on placement, working in any capacity in the setting.

**Child Protection** refers to the multi-agency arrangements to identify and protect children who are or may be at risk of or suffering significant harm.



**Safeguarding** refers to the protection, safety and promotion of the welfare of all children including when in off-site provision or activities and using ICT. This includes the building of resilience and awareness of risk through criteria set out in the EYFS Framework and Working Together to Safeguarding Children Guidance 2018.

**Child** is any child under the age of 18.

### **Glossary**

DSL	Designated Safeguarding Lead
DDSL	Deputy Designated Safeguarding Lead
SENDCo	Special Education Needs and Disabilities Coordinator
BCSC	Bradford Children's Social Care
EYFS	Early Years Foundation Stage (Statutory guidance)

### **Visitors to the Centre**

All visitors must sign in on arrival and collect a visitor's badge and a Centre Information Leaflet which outlines Child Protection and Safeguarding procedures, including how to report any concerns regarding a child/young person or another adult in our Centre.

Visitor badges must be worn at all times when in the Centre.

Staff must ensure that visitors to the Centre are supervised as appropriate and the requisite pre-employment checks have been completed.

All contractors must follow the Centre's signing in arrangements.

Part One:

### **Aims**

1.1 The Centre aims to ensure that:

- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- All staff are aware of their statutory responsibilities with respect to safeguarding, identifying children in need of early help, at risk of harm or those that have been harmed.
- Staff are properly trained in recognising and reporting safeguarding issues
- A culture of vigilance is created and maintained to ensure that we will also act in the best interests of children to protect them online and offline.
- Systems for reporting abuse are well promoted, easily understood and easily accessible for children

1.2 The Board of Directors and staff of Wyke Community and Children's Centre (hereinafter referred to as "WCCC") take as our first priority the responsibility to safeguard and promote the welfare of our children, to minimise risk and to work together with other agencies to ensure rigorous arrangements are in place within our setting to identify, assess and support those children who are suffering harm and to keep them safe and secure whilst in our care.

1.3 The responsibilities set out in this policy apply (as appropriate) to all members of the Centre's community including children, staff, directors, visitors/contractors, volunteers, supply staff, students on placement and trainees working within the Centre. It is fully incorporated into the whole Centre ethos and is underpinned within the safety of the physical environment provided for the children.

## **Legislation and guidance**

2.1 This policy is based on the Department for Education's statutory guidance, [Statutory framework for the early years foundation stage](#) and [Working Together to Safeguard Children \(WTSC 2018\)](#). We comply with this guidance and the procedures set out by the Safer Bradford Community Partnership.

2.2 This policy is also based on the following legislation and guidance:

[Childcare Act 2006](#), which places a duty on childcare settings and local authorities to safeguard and promote the welfare of children in their care.

[The Children Act 1989](#) (and [2004 amendment](#)), which provides a framework for the care and protection of children

Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the [Serious Crime Act 2015](#), which places a statutory duty on senior leaders to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18

[Statutory guidance on FGM](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM

[The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children

Schedule 4 of the [Safeguarding Vulnerable Groups Act 2006](#), which defines what 'regulated activity' is in relation to children

Statutory [Guidance on the Prevent duty](#), which explains the Centres' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism

[Guidance for safer working practice for those working with children and young people in education settings \(GSWP\)](#) (Safer Recruitment Consortium Feb 2022)

[When to call the police – Guidance for schools and colleges \(NPCC – 2020\)](#)

## [Education and Training \(Welfare of Children\) Act 2021](#)

The [Childcare \(Disqualification\) Regulations 2018](#) and [Childcare Act 2006](#), which set out who is disqualified from working with children

### **Definitions**

**3.1 Safeguarding and promoting the welfare of children** means:

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

**3.2 Child protection** is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.

Appendix 1 explains the different types and indicators of abuse.

**3.3 Children** includes everyone under the age of 18.

### **Equality statement**

4.1 Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

4.2 We give special consideration to children who:

- Have special educational needs or disabilities or health conditions
- Are young carers
- May experience discrimination due to their race, ethnicity, disability, religion, gender identification, sex or sexual orientation.
- Have English as an additional language
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Are asylum seekers
- Are at risk due to either their own or a family member's mental health needs
- Children who are in care, previously looked after or any children not growing up with their birth family (this covers private fostering and all kinship arrangements)

### **Roles and responsibilities**

5.1 Safeguarding and child protection is **everyone's** responsibility. This policy applies to all staff (including those not directly employed by the Centre), volunteers, contractors and directors in the Centre. Our policy and procedures also apply to extended and off-site activities. All staff are expected to read this policy as part of their induction arrangements.

### **5.2 All staff**

5.2.1 All staff working directly with children will read and understand their statutory responsibilities outlined within this policy.

5.2.2 All staff will be aware of:

- Our systems which support safeguarding, including understanding the role of the designated safeguarding lead (DSL/DDSL).
- The early help process and their role in it, including being alert to emerging problems that may warrant Early Help intervention. All staff should be reporting emerging problems that may warrant early help intervention in the first instance to Joanne Hayhurst – Centre Manager.
- That children's behaviours can be indicative of their emotional wellbeing and can be linked to mental health. They should be aware of behaviours that may communicate that poor wellbeing can be an indicator of factors such as abuse, neglect or exploitation. Staff should understand the children's experiences such of abuse, neglect, trauma and adverse childhood experiences can impact on children's mental health, behaviour & education.
- The process for making referrals to local authority Bradford Children's Social Care (BCSC) and for statutory assessments that may follow a referral, including the role they might be expected to play. Fig 1: **Summary of internal procedures to follow where there are concerns about a child** illustrates the procedure to follow if you have concerns about a child's welfare. Wherever possible, speak to the DSL, DDSL first to agree a course of action. In the absence of a DSL or DDSL being available, staff must not delay in directly contacting Bradford Children's Social Care, Duty and advice team or the police if they believe a child is at immediate risk of significant harm.
- Our work in partnership with other agencies in the best interests of the children. Requests for service to BCSC will (wherever possible) be made by the Safeguarding Designated Staff, to the BCSC Duty and Advice team. Where a child already has a child protection social worker, the Centre will immediately contact the social worker involved or in their absence, the team manager of the child protection social worker.
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as Female Genital Mutilation (FGM), and how to maintain an appropriate level of confidentiality while liaising with relevant professionals.
- In-setting procedures for recording any cause for concerns and passing information on to DSLs in accordance with Centre recording systems.
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), child criminal exploitation (CCE) FGM, radicalisation, child-on-child sexual abuse and serious and violent crime. All staff to be aware safeguarding incidents/ behaviours can occur outside the setting or be associated with outside factors CSE and CCE are forms of abuse and both occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into sexual or criminal activity.
- Children absconding during the day can also be a sign of CCE, including involvement in County Lines.
- Children may not feel ready or know how to tell someone that they are being abused, exploited, neglected, and/or they may not recognise their experiences as harmful.

Appendix 1 details different kinds of abuse.

Appendix 2 provides guidance to staff on how to respond to children who report abuse

### 5.3 The designated safeguarding lead (DSL) and deputy designated staff.

- 5.3.1 Our DSL is Joanne Hayhurst – Centre Manager, The DSL takes lead responsibility for child protection and wider safeguarding.
- 5.3.2 The optimal scenario is to have a trained DSL or DDSL available on site. Where this is not possible a trained DSL or DDSL will be available to be contacted via phone or online video – for example when working from home.
- 5.3.3 When the DSL is absent Alise Miskiw – Deputy Manager and/or Ashleigh Farkas - Deputy Manager will act as cover.
- 5.3.4 If the DSL and deputies are not available the next, most senior member of staff will act as cover (for example, during out-of-hours/out-of-term activities).
- 5.3.5 The DSL will be given the time, training, resources and support to:
- Provide advice and support to other staff on child welfare and child protection matters
  - Take part in strategy discussions and inter-agency meetings and/or support other staff to do so
  - Contribute to the assessment of children by providing as much information as possible as part of the referral process to help social care assessments consider contexts outside the home and enable a contextual approach to harm.
  - Refer suspected cases, as appropriate, to the relevant body (Bradford children's social care Advice team, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly. Provide support for staff to comply with their mandatory reporting duties in cases where FGM has been identified.
  - Joanne Hayhurst – Centre Manager will ensure that all staff involved in direct case work of vulnerable children, where there are child protection concerns/issues, have access to regular supervision.
  - The DSL will also keep the Safeguarding Director Andy Hinchcliffe informed of any issues and liaise with local authority officers and relevant professionals for child protection concerns as appropriate.
  - The DSL is responsible for responding to domestic abuse notifications from the local authority and providing support to children and their families as appropriate
  - The Centre will ensure representation at appropriate inter-agency meetings such as Initial Child Protection Case Conferences, Child Protection Reviews, Looked After Child Reviews, and Planning and Core Group meetings, as well as Family Support Meetings.
  - Provide reports as required for meetings. Reports will, wherever possible, be shared with parents/carers at least 24 hours prior to the meeting.
  - Where a child at the Centre is subject to an inter-agency child protection plan or any multi-agency risk management plan, the DSL will contribute to the preparation, implementation and review of the plan as appropriate.
  - The designated safeguarding lead and any deputies should liaise with the three safeguarding partners and work with other agencies in line with Working Together to Safeguard Children (2018). When to call the police (NPCC 2020) should help designated safeguarding leads understand when they should consider calling the police and what to expect when they do.

**The full responsibilities of the DSL are set out the EYFS Statutory guidance. All designated safeguarding leads and deputy safeguarding leads must read and comply with this.**

### 5.4 The Board of Directors

5.4.1 The Board of Directors will approve this policy at each review and hold the Centre Manager to account for its implementation and any actions/recommendations made by the Local Authority and/or Ofsted in respect to strengthening the Centre's safeguarding arrangements.

5.4.2 The Board of Directors will appoint a lead Director (Andy Hinchcliffe) to monitor the effectiveness of this and other related safeguarding policies/processes in conjunction with the Board of Directors.

Lead Safeguarding Directors should be appropriately trained in a range of safeguarding areas.

5.4.3 In the event that safeguarding concerns, or an allegation of abuse is made against the Centre Manager, the Chair of the Board (Andy Hinchcliffe) will act as the 'case manager'.

5.4.4 The Board of Directors will ensure that the Centre has robust IT filtering and monitoring systems in place – Informed by the Safer Internet Centre.

## **5.5 The Centre Manager**

5.5.1 The Centre Manager is responsible for the implementation of this policy, including:

- Ensuring that staff (including temporary and supply staff) and volunteers are informed of this policy as part of their induction
- Communicating this policy to parents when their child joins the setting and via the Centre website
- Ensuring that the roles and responsibilities of the DSL/DDSL are reflected in their job description.
- Ensuring that the DSL has appropriate time, training and resources, and that there is always adequate cover if the DSL is absent
- Ensuring that they complete the required advanced training for DSL's through the Local Authority.
- Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff (including supply staff) or volunteer, where appropriate.
- Ensuring that all recommendations made by the Local Authority and/or Ofsted in relation to strengthening the Centre's safeguarding arrangements are actioned in a timely fashion.
- Ensuring the relevant staffing ratios are met, where applicable (of 1:3 for children aged 2 and under, 1:4 of children aged 2 Years, 1:8 of children aged 3-5 years).
- Making sure each child in the Early Years Foundation Stage is assigned a key person

### **Fig 1: Summary of in-centre procedures to follow where there are concerns about a child**

## Child Protection Procedure – Staff & Volunteers

Staff/Volunteer has concerns about a child's welfare and reports these to the Designated Safeguarding Lead (DSL) via Family or in person immediately.

Cause for Concern to be reported to:  
Joanne Hayhurst – Designated Safeguarding Lead (DSL) – 01274 800500  
or in her absence another member of the DSL team:  
Alise Miskew (DDSL) or Ashleigh Farkas (DDSL)

DSL to consider information / seek advice from other agencies / call a meeting with relevant people :

Bradford Children's Social Care (BCSC) – 01274 433999  
DSL to consider Early Help Assessment and consider discussing concerns with parents/carers.

No immediate external action required

DSL to confirm receipt of Cause of Concern and advise monitoring / next steps / review

Discussion held with inclusion Team to consider next steps / Early Help Assessment / External support.

No further action required / associated staff asked to speak with parents / carers / monitor / report any further concerns.

All information updated and recorded to Family at the earliest opportunity .

Immediate external action required

DSL to make referral to BCSC \*\*

No further action required .

Reasons given to DSL

Feedback to referrer Discussion about continued monitoring agreed / internal procedure .

Initial Assessment (BCSC) within 10 days

Once a 'Cause for Concern' is submitted there may be several steps the DSL has to take before responding to you, such as: Investigating within school, contacting family, discussing information with other professionals, working on the next action.

If the action from the DSL is to share information with the family, remember to explain the issue clearly and the impact this is having on the child, be honest, offer support on behalf of the school and direct them to our Parent support Advisor .

### Confidentiality and Information Sharing

6.1 Confidentiality is an issue that needs to be understood by all those working with children, particularly in the context of safeguarding.

6.2 The Centre recognises that the only purpose of confidentiality in this respect is to benefit the child. Staff/volunteers and visitors to the Centre should never promise a child that they will not tell anyone about an allegation/report of abuse, and must pass any cause for concerns immediately to a designated safeguarding lead.

6.3 Confidentiality is addressed throughout this policy with respect to record-keeping dealing with reports of abuse (see Appendix 2), allegations of abuse against staff information sharing and working with parents.

6.4 Timely information sharing is essential for effective safeguarding. Our Centre will share safeguarding information as appropriate in keeping with the principles outlined in the government guidance document, [Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers \(DfE 2018\)](#). This guidance has been produced to support practitioners in the decisions they take to share information, which reduces the risk of harm to children and young people and promotes their well-being.

6.5 Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children.

6.6 All staff must have due regard for the relevant data protection principles which allow them to share (in the context of their role) and withhold personal information, as provided for in the Data Protection Act 2018 and GDPR.

6.7 In order to promote positive outcomes for vulnerable children, including children with social workers information that can help to support positive outcomes being achieved will be shared with staff at the Centre, that are not DSLs or DDSLs as appropriate.

6.8 If staff are in any doubt about sharing information, they must speak to the designated staff and/or the Centre Manager.

## **6.2 Working with parents and other agencies to protect children**

6.2.1 Parents/carers will be made aware of our procedures in respect to taking any reasonable action to safeguard the welfare of its children. In cases where the Centre has reason to be concerned that a child may be suffering significant harm, ill treatment, neglect or other forms of harm, staff will follow the procedures for responding to suspected cases of child abuse or neglect outlined in this policy document and contact BCSC Duty and Advice team to discuss their concerns.

6.2.2 We will endeavour wherever possible to obtain at least two emergency contacts for every child at the Centre in case of emergencies, and in case there are welfare concerns at the home.

6.2.3 In general, we will discuss concerns with parents/carers before approaching other agencies and will seek to inform parents/carers and receive their consent when making a referral to another agency. Appropriate staff will approach parents/carers after consultation with the DSL. The exception to this rule will be in situations where a member of staff has reasonable cause to believe that informing parents/carers of a referral to another agency may increase the risk of significant harm to the child.

6.2.4 Parents/carers are informed about our Safeguarding & Child Protection policy during initial registration, via FAMILY app, our website, newsletters etc. A safeguarding & child protection statement is prominent in the Centre's reception area.

## **6.3 Multi-agency work**

6.3.1 We will co-operate with BCSC in accordance with the requirements of the Children Act 1989 and allow access to child and child protection records for them to conduct section 17 or section 47 assessments.



6.3.2 In the best interests of our children, we will work with all relevant professionals and agencies as required to safeguard children and promote their welfare.

#### **6.4 Continuum of need and risk identification tool**

6.4.1 The Continuum of need and risk identification tool document is aimed at every agency, and professional who works directly or indirectly with children, young people and families.

This guidance is to help agencies identify a child's level of need and vulnerability, and respond appropriately, "getting the right help, at the right time."

The framework describes need in 4 levels - these are not rigid, as a child's needs are unique.

The description of each level 1 to 4, gives examples of how need might present itself and may help you understand better how a child's needs will be met. It can be stepped up and down depending on factors along the way.

- Level 1 – Universal: no additional needs. Needs are met by universal services e.g. GP, dentist, health visitor, school, childcare setting.
- Level 2 – Universal Plus: additional support needed which may or may not require multiagency work with other professionals and/or services i.e. food bank, debt service.
- Level 3 – Targeted Support / Partnership Plus: help and support from a range of professionals for families with complex needs.
- Level 4 – Statutory / Specialist and Child Protection: high priority needs including other specialist services – children who are experiencing significant harm.

6.4.2 If concerns are at level 1 or 2 in the continuum of need document, the DSL will complete an Early Help Assessment with parent/carer consent.

If concerns are at level 3 or 4 in the continuum of need document, the setting will phone Bradford Children's Services Integrated Front Door (IFD) to make a referral. After phoning Bradford Children's Services Integrated Front Door (IFD) and discussing concerns, the IFD will advise what steps to take next.

### **6. Opportunities to teach safeguarding – Preventative**

#### **7.1 Our role in the prevention of abuse**

We will identify and provide opportunities for children to develop skills, concepts, attitudes and knowledge to promote their safety and well-being.

7.1.1 We will ensure that children are taught about safeguarding in an age and stage appropriate way, including online safety, and recognise that a one size fits all approach may not be appropriate for all children, and a more personalised or contextualised approach for more vulnerable children, victims of abuse and some SEND children may be needed.

#### **1.2 Other areas of work**

7.2.1 Our Safeguarding and Child Protection policy cannot be separated from the general ethos of the Centre which is to ensure that children are treated with respect and dignity, feel safe, and are listened to.

7.2.2 The Centre's online safety policy is reflective of the requirements set out in the EYFS Statutory Framework [Keeping Children Safe in Out of School Provision](#) in regards to content, contact, conduct and commerce.

## **7. Our role in supporting children**

**We will offer appropriate support to individual children who have experienced abuse or who have abused others.**

8.1 In cases where children have experienced abuse/abused others, the DSL will ensure that appropriate support is offered.

8.2 For children who have sexually harmed or may have sexually harmed peers, where appropriate an AIM Risk Assessment Management Plan (RAMP) will be completed between the Centre Manager and Safeguarding Director that includes safety and support planning.

## **8. Children with special educational needs, disabilities, or health issues**

9.1 We recognise that while all children have a right to be safe, some children may be more vulnerable to abuse e.g. those with a disability, special educational needs, mental health issues or those living with domestic violence or drug/alcohol abusing parents, parents mental health issues, learning disabilities, children who are in care or previously looked after, children having adverse childhood experiences etc.. Additional barriers can exist when recognising abuse and neglect in this group, including:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration
- The potential for children with SEN, disabilities or certain health conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs
- Communication barriers and difficulties in managing or reporting these challenges

9.2 All staff have a role in preventing impairment of children's mental health/emotional wellbeing, including promoting positive mental health and identifying where students are struggling with their Mental Health. We regularly communicate messages to children regarding wellbeing and the promotion of positive mental health strategies.

9.3 Concerns regarding a child's mental health/emotional wellbeing should be reported to the Centre Manager / SENDCo in keeping with the Centre's safeguarding reporting arrangements.

## **9. Intimate Care Needs**

10.1 At Wyke Community and Childrens Centre we provide care and Education for children aged 0-5 years old and as part of our care role is to change nappies as and when required. All employees who have a responsibility for the intimate care of children will undertake their duties in a sensitive, respectful and professional manner.

10.2 Staff must:

- Ensure all Nappy changes are completed by staff only - volunteers or students will not be responsible for any Intimate Care practices.
- Nappy changes are always completed within the designated spaces within the Nursery rooms, where privacy for the child can be maintained and staff are supervised by other professionals.
- Change all nappies according to the rota for their allocated room and, in addition as and when required.
- Always ensure that the child is safe whilst on the changing unit, if the child is too big, place on the floor to change the nappy.
- Senior Nursery staff are responsible for supervision of the changing area and enforcement of the rotas.

- All staff wear gloves and aprons provided before changing nappies to prevent cross-contamination.

## **11 Female Genital Mutilation: The Mandatory Reporting Duty**

11.1 The Department for Education's Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".

11.2 FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.

11.3 The duty above **does not apply** in cases where a child **is at risk** of FGM or FGM is suspected but is not known to have been carried out. Staff must not examine children.

11.4 **Any member of staff** who discovers that an act of FGM appears to have been carried out on a **child under 18** must speak to the DSL and follow the Centre's and BSCP safeguarding procedures.

11.5 **Any member of staff** who suspects a child is *at risk* of FGM must speak to the DSL who will follow BSCP procedures.

## **12 Radicalisation and Terrorism**

12.1 Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism. Terrorism is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

12.1 If staff are concerned about a change in the behaviour of an individual or see something that concerns them (**this could be a colleague too**) they must seek advice appropriately with the DSL who must contact Bradford Prevent Team either via phone call on 01274 474783 or via Online referral form and sent to [fimucentral@ctpne@police.uk](mailto:fimucentral@ctpne@police.uk)

12.2 Effective early help relies on all staff to be vigilant and aware of the nature of the risk for children and young people, and what support may be available. Our Centre will ensure that all front-line staff will undertake Prevent awareness training.

12.3 Wyke Community and Children's Centre builds children's resilience to radicalisation through the use of Fundamental British Values. British values include;

- Democracy: making decisions together
- Rule of law: understanding rules matter as cited in Personal Social and Emotional development
- Individual liberty: freedom for all
- Mutual respect and tolerance: treat others as you want to be treated

12.4 The British Values run throughout all practice within the setting, staff working with children should ensure that these values are upheld at all times.

## **13 Child on child abuse**

13.1 We recognise that children are capable of abusing their peers and that child on child abuse can manifest in many different ways, including bullying, cyber bullying, criminal and sexual exploitation, sexual harassment and violence, initiation/hazing, sharing of nudes and semi-nudes, , up skirting (taking a picture under a person's clothing without them knowing, with the intention of

viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm) and abuse within intimate partner relationships. It is very clear that this type of abuse should always be treated seriously, and never just as banter, part of growing up or boys being boys. Our Centre has a zero tolerance approach to such attitudes and behaviours.

13.2 We will take steps to minimise the risk of child-on-child abuse by ensuring children recognise behaviour that is not appropriate and understand how to stay safe and challenge and report unwanted behaviours. We will also regularly review the Centre's site and activities to further minimise the risk of child-on-child abuse occurring.

13.1 We recognise that abuse can often go unreported or be reported latterly. We will encourage and support children to report child-on-child abuse to trusted adults at the Centre or the NSPCC helpline.

13.2 All concerns around child-on-child abuse will be taken seriously, reported, investigated, recorded and managed in line with the child protection procedures outlined in this policy. Our Centre will ensure that at least one DSL and one Director has completed training on understanding and managing harmful sexual behaviour in children

13.3 The DSL is responsible for providing support to all children involved in incidents of child-on-child sexual abuse. Where incidents of child-on-child abuse involve children attending another setting we will liaise with the relevant DSL/DO at the setting to ensure appropriate information is shared.

13.4 We will ensure that all children who may have/have been sexually harmed will be taken seriously and that they will be supported and kept safe. Where appropriate support plans will be put in place for children subjected to sexual harm.

13.5 In cases where allegations of sexual violence and/or harassment are found to be unsubstantiated, unfounded, false or malicious, the DSL will consider whether the child or person who has made the allegation is in need of support or may have been abused by someone else. In cases where the report is found to be deliberately invented or malicious the Centre will consider whether it is appropriate to take any action to protect other children and staff.

13.6 Where child exploitation (ie; criminal, sexual, trafficking, modern day slavery etc..), or the risk of it, is suspected, frontline practitioners must notify the designated member of staff for child protection, in line with the child protection policy reporting systems.

13.7 If the child /young person already has an allocated social worker, the DSL must contact them (or their team manager) to discuss any concerns about child exploitation.

## **14 Sharing Nudes and Semi Nudes**

### **Staff responsibilities when responding to an incident**

14.1 If any adult at the Centre is made aware of an incident involving the consensual or non-consensual sharing of nude or semi-nude images/videos (also known as 'sexting' or 'youth produced sexual imagery'), they must report it to the DSL immediately.

They must **not**:

6. View, copy, print, share, store or save the imagery yourself, or ask a child to share or download it (if you have already viewed the imagery by accident, you must report this to the DSL)
7. Delete the imagery or ask the child to delete it
8. Ask the child(ren) who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)

9. Share information about the incident with other members of staff, the child(ren) it involves or their, or other, parents and/or carers
10. Say or do anything to blame or shame any child / young people involved

### **DSL Responsibilities**

14.2 Following a report of an incident, the DSL will hold an initial review meeting with appropriate staff – this may include the staff member who reported the incident. This meeting will consider the initial evidence and aim to determine:

11. Whether there is an immediate risk to child(ren)
12. If a referral needs to be made to the police and/or children's social care
13. If it is necessary to view the image(s) in order to safeguard the child/ young person (in most cases, images or videos should not be viewed)
14. What further information is required to decide on the best response
15. Whether the image(s) has been shared widely and via what services and/or platforms (this may be unknown)
16. Whether immediate action should be taken to delete or remove images or videos from devices or online services
17. Any relevant facts about the child(ren) involved which would influence risk assessment
18. If there is a need to contact another setting or individual
19. Whether to contact parents or carers of the child(ren) involved (in most cases parents/carers should be involved)

The DSL will make an immediate referral to police and/or children's social care if:

20. The incident involves an adult
21. There is reason to believe that a child /young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example, owing to special educational needs)
22. What the DSL knows about the images or videos suggests the content depicts sexual acts which are unusual for the child / young person's developmental stage, or are violent
23. The imagery involves sexual acts and any child in the images or videos is under 13
24. The DSL has reason to believe a child is at immediate risk of harm owing to the sharing of nudes and semi-nudes (for example, the child / young person is presenting as suicidal or self-harming)

14.3 If none of the above apply then the DSL, in consultation with the Safeguarding Director and other members of staff as appropriate, may decide to respond to the incident without involving the police or children's social care. The decision will be made and recorded in line with the procedures set out in this policy.

### **15 Mobile phones and Electronic devices,**

15.1 Staff, students and visitors are not permitted to use mobile phones in any childcare areas within the building.

- Staff must leave phones in the bags/coats within the assigned spaces during working hours, and they can be retrieved on breaks/shift end. Under no circumstances should any member of staff or student have a mobile phone with them in a Childcare room.
- Staff will give only the main office number to parents / carers to contact us in an emergency
- Anyone using a mobile phone during break times must do so in a 'child free' area (e.g. staffroom, office)

- Staff are asked to remind parents politely that both the indoor and outdoor childcare areas are 'mobile free' zones
- Where a centre Mobile phone is necessary for Emergency calls, this will be stored within the Baby Room Milk Kitchen and taken into the garden when necessary. This device should under no circumstances be used for photographing or videoing within the Nursery rooms.
- For external trips permission can be granted to use the Mobile Phone for photograph purposes.

15.2 The Use of Smart watches are permitted within the Nursery rooms, providing they do not contain a Built in Camera. Staff should under no circumstances use their watch within the room to check notifications, respond to messages or engage in any other form of communication.

15.2 Electronic devices such as Tablets and I-pads will be used in setting to take pictures/video's of children, these will then be uploaded to the Family App, for parents to view. These pictures may also be displayed throughout the Centre within displays or on Wyke Community and Childrens' Centre Social Media channels. Parents have the option to 'Opt' out of Photograph permissions via the registration process within the permissions on FAMLY

## **16 A Safeguarding Culture**

**The Board of Directors will ensure that the following appropriate policies, and procedures are in place and shared with staff at the point of induction, in order for appropriate action to be taken in a timely manner to safeguard and promote children's welfare:**

- Whistle Blowing/Confidential reporting policies (guidance to staff and volunteers on how they can raise concerns and receive appropriate feedback on action taken when staff have concerns about any adult's behaviour)
- Guidance on Safer Working Practices
- Safeguarding and Child Protection policy
- The names, roles and responsibilities of the designated safeguarding lead and any deputies.

## **17 Safer Recruitment, selection and pre-employment vetting**

17.1 The Centre pays full regard and commitment to following the safer recruitment, selection and pre-employment vetting procedures as outlined in Department for Education guidance.

17.2 The Centre will maintain a single central record which demonstrates the relevant vetting checks required including: a barred list check, DBS check at the correct level, identity, qualifications, prohibition order and right to work in the UK.

17.3 All recruitment materials will include reference to the Centre's commitment to safeguarding and promoting the wellbeing of children.

17.4 The Centre will ensure that all recruitment panels include at least one person that has undertaken the Safer Bradford safer recruitment training.

17.5 For individuals who have lived or worked outside the UK, in addition to the same checks as all other staff, the Centre will complete any additional checks required to satisfy themselves that the individual is suitable to work with children. This may include obtaining a letter from the professional regulatory authority in the country (countries) in which the candidate has worked confirming that they have not imposed any sanctions or restrictions, and /or that they are aware of any reason why they are unsuitable to work with children.

17.6 The Centre will ensure that written risk assessments are undertaken in situations where information provided on DBS certificates necessitates so. Written risk assessments must be undertaken for all volunteers **not** engaging in regulated activity.

## **18 Managing allegations or safeguarding concerns against a member of staff or person at the Centre procedures.**

18.1 These procedures must be followed in any case in which it is alleged that a member of staff (including supply staff), Director, visiting professional or volunteer has met the harm test, this includes where an adult has:

- a) behaved in a way that has harmed a child or may have harmed a child
- b) possibly committed a criminal offence against or related to a child
- c) behaved towards a child or children in a way that indicates s/he may pose a risk of harm to children
- d) behaved or may have behaved in a way that indicates they may not be suitable to work with children. *(This includes any behaviour that may have happened outside of the setting that might make the individual unsuitable to work with children. This is known as transferable risk.)*

18.2 All adults working at the Centre have duty to disclose to the Centre Manager (or Chair of the Board where appropriate) where their relationships and associations both within and outside of the workplace (including online) may have implications for safeguarding children.

18.3 Examples of behaviours that would warrant an allegation or safeguarding concern by a member of staff could include:

- Physical, for example intentional use of force as a punishment, slapping, use of objects to hit with, throwing objects or rough physical handling.
- Emotional, for example intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, and attitudes which discriminate on the grounds of race, gender, sex, disability or sexuality.
- Sexual, for example sexualised behaviour towards children, grooming, sexual harassment, sexual assault and rape, sending inappropriate messages through social media and other technologies.
- Neglect which may include failing to act to protect a child or children, failing to seek medical attention or failure to carry out appropriate/proper risk assessment etc.

18.4 A safeguarding complaint that meets the above criteria must be reported to the Centre Manager ("case manager") immediately. If the complaint involves the Centre Manager then Chair of the Board must be informed. In our setting the named case manager is Joanne Hayhurst. They will follow the processes outlined in this section.

18.5 Where the Centre Manager or Chair of the Board determines that a safeguarding allegation does not meet the harm threshold in line with the criteria above they will refer the matter to be managed by a designated deputy manager with appropriate safeguarding training. It is important for the Centre Manager to carefully consider who at the Centre is best placed to manage concerns that do not meet the harm threshold and ensure appropriate action is taken given the sensitive and confidential nature of the information relating to staff over time. In many cases the Centre manager may decide to retain this role.

18.6 All staff must fully understand that any adult behaviours that deviate from the Guidance for Safer Working Practice, including inappropriate conduct outside of work are a concern, even if they are low-level.

Low-level concerns are concerns that do not meet the harm test/allegations threshold. Examples of such behaviour include:

- *Being over familiar 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; or*
- *Humiliating children*

18.7 The case manager should ensure that the child is not at risk and where appropriate ensure that the child is referred to BCSC Duty and Advice team.

18.8 The case manager should gather as much information about the alleged incident as necessary in order to establish whether there is substance to the allegation. In situations where the case manager determines that the harm test has not been met the case manager must ensure that there is a clear record of the incident, include any actions (including whether any HR advice had been sought and actioned) taken to address the concern raised. This record must be kept confidential, stored securely and comply with the Data Protection Act 2018 and the UK GDPR (2018). . Records of low level concerns will be reviewed so that any patterns of recurring low level concerns can be identified and responded to appropriately, this may include a referral to the LADO where repeated behaviours indicate an individual may not be suitable to work with children.

18.9 All low level concern records will be kept for the duration of the member of staff's employment.

18.10 In situations where the case manager has sufficient information to suggest that the harm test/allegations threshold has been met, the case manager must refer the allegation onto the Bradford LADO Team **within one working day of the allegation being made via the LADO referral form, and sent to [LADO@bradford.gov.uk](mailto:LADO@bradford.gov.uk)**. This will assist the case manager and HR/supply agency senior manager in consultation with the LADO to decide on the most appropriate course of action. This includes when to inform the member of staff of the concerns raised. Parents or carers of the child or children involved should be told about the allegation as soon as possible if they do not already know of it.

18.11 The case manager **must** not carry out an investigation or **directly interview** any child/ witness/ or the individual whom the concern relates too, until the above process has been duly completed and relevant partners have been consulted. However, statements of any alleged incidents of harm should be obtained as appropriate at the earliest opportunity in order to establish facts from relevant individuals.

18.12 A multi-agency allegations management meeting may be arranged to look at the complaint in its widest context. The case manager must attend this meeting, which will be arranged by the LADO. All issues must be recorded and the outcome reached must be noted to ensure closure.

18.13 In many cases it may be appropriate to provide further training and support to staff/volunteers and ensure that they are clear about the expectations for their conduct.

18.14 In more serious cases, allegations may be investigated under the formal disciplinary procedures and, where allegations are upheld, formal warnings issued as well as specific training and support. In cases where children/young people may be at further risk and/or evidence/witnesses may be compromised and/or the allegations are so serious that they may, if upheld, constitute gross misconduct, suspension of the member of staff/volunteer may be appropriate and should be considered in line with the Centre's Disciplinary Procedures.



18.15 Any staff/volunteers who are dismissed by the Centre for gross misconduct or cumulative misconduct relating to safeguarding of children/young people will be referred to the DBS for consideration of barring. Similarly, where the Centre has a reasonable belief that the member of staff/volunteer would have been dismissed by the Centre had they been employed at the time of the conclusion of investigations, they will be referred to the DBS. The Centre will keep written records of all of the above.

- **LADO Contacts:, or**

18.16 Where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, staff can contact any of the professionals named in the above paragraph, in addition to other whistleblowing channels which may be open to them.

18.17 West Yorkshire Consortium Inter Agency Safeguarding and Child protection procedures whistleblowing policy states that concerns can be raised by the following methods:

- Bradford Childrens Social Care Team, Via the LADO Team
- Via Phone call on 01274 435600
- Via Online form found at:  
<https://www.saferbradford.co.uk/resources/childrens/allegations-management-and-safer-recruitment/>
- Sent to [LADO@bradford.gov.uk](mailto:LADO@bradford.gov.uk)
- The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00am to 8:00pm, Monday to Friday and Email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk).

## **19 Training and Support**

All staff members will be made aware of systems within our Centre that support safeguarding and these will be explained to them as part of our staff induction. This includes: the centre's safeguarding/child protection policy; safer working practice document and the Centre's whistleblowing procedures. This must be done as part of their induction and reviewed annually.

19.1 We recognise the stressful and traumatic nature of child protection work. Support is available for any member of staff from the Centre Manager or other DSL.

19.2 Designated Safeguarding staff must have attended the Designated Safeguarding Lead. They will attend refresher training at least every two years. The DSL will undertake Prevent Awareness Training to enable them to provide advice and support to other members of staff on protecting children from the risk of radicalisation.

19.3 The Centre will ensure all staff including temporary and volunteers receive induction and updated safeguarding training appropriate to their roles and responsibilities, especially staff new to the Centre with refresher training held at least every three years. All staff should receive regular safeguarding updates (for example, via email, e-bulletins, staff meetings), as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

19.4 Directors, including the nominated Safeguarding Director will attend specific training for their role, updated at least every three years.

19.5 Any training accessed through third party/independent providers must reflect the BSCB protocols.

19.6 The Centre Manager and at least one member of the Board of Directors must complete Accredited Safer Recruitment Training, this must be refreshed at least every 5 years.

## **20 Child Protection Records**

**20.1 The responsibility to maintain, process, share, transfer and store child protection and safeguarding records in accordance with the Data Protection Act 2018 and the GDPR principles is the responsibility of the DSL and any safeguarding deputies. Child protection information will be held securely, with access being restricted to the DSL and their deputies, and Centre Manager / Safeguarding Director.**

**20.2 The following information must be kept securely with restricted access, whether paper or electronic:**

- Chronology (summary of significant events and the actions and involvement of the Centre)
- A clear and comprehensive summary of the concern
- Details of how the concern was followed up and resolved
- A note of any action taken, decisions reached and the outcome.
- All completed child protection cause for concern records
- Any child protection information received from the child's previous setting.
- Records of discussions, telephone calls and meetings with colleagues and other agencies or services
- Professional consultations
- Letters and emails sent and received relating to child protection matters
- Referral forms sent to BCSC, other external agencies.
- Minutes or notes of meetings, e.g. child protection conferences, core group meetings, etc., copied to the file of each child in the family, as appropriate
- Formal plans for, or linked to, the child e.g. child protection plans, Early Help (previously known as CAF's), risk assessments etc
- A copy of any support plan for the child concerned

20.3 Where a child leaves our provision, we will ensure that the child protection file is transferred securely to the receiving setting. (where this is known) as soon as possible and within 5 working days. This is a legal requirement.

20.4 Child records will be transferred in a secure manner, for example, through secure electronic file transfer or by hand. When hand-delivering child records, a list of the names of the child whose records are being transferred and the name of the setting they are being transferred to must be made and a signature obtained from the receiving setting as proof of receipt. When sending records through secure electronic file transfer, a delivery and read receipt of the must be retained for audit purposes.

20.5 If a child moves from our setting, child protection records will be forwarded onto the named DSL at the new setting, with due regard to their confidential nature. Good practice suggests that this will always be done with a face to face handover between designated staff or a verbal conversation is had over the telephone if a face to face handover is not possible. A signed receipt of file transfer or electronic delivery and read receipt must be obtained for audit purposes by the delivering setting.

20.6 If sending by post, children records will be sent "Special Delivery". A note of the special delivery number will also be made to enable the records to be tracked and traced via Royal Mail.

20.7 For audit purposes a note of all child records transferred or received will be kept in either paper or electronic format. This will include the child's name, date of birth, where and to whom the records have been sent, and the date sent and/or received. A copy of the child protection chronology will also be retained for audit purposes and kept securely.

20.8 When a DSL member of staff resigns their post or no longer has child protection responsibility, there will be a full face to face handover/exchange of information with the new post holder.

20.9 In exceptional circumstances when a face to face handover is unfeasible, it is the responsibility of the Centre Manager / Safeguarding Director to ensure that the new post holder is fully conversant with all procedures and case files.

20.10 All DSLs receiving current (live) files or closed files must keep all contents enclosed and not remove any material.

20.11 All receipts confirming file transfer must be kept in accordance with the recommended retention periods.

## **21 Children's and parents' access to child protection files**

21.1 Under Data Protection legislation (General Data Protection Regulation & Data Protection Act 2018) a child or their nominated representative have a number of legal right in respect of information relating to them. These rights include the right to access and the right to rectification of inaccurate data. Therefore all information will be accurately recorded, objective in nature and expressed in a professional manner.

21.2 Any child who has a child protection file has a right to request access to it. However, neither the child nor the parent has an automatic right to see all the information held in child protection records. Information can be withheld if disclosure:

- could cause serious harm or is likely to cause serious harm to the physical or mental health or condition of the child or another person; or
- could reveal that the child or another person has been a subject of or may be at risk of child abuse, and the disclosure is not in the best interests of the child; or
- is likely to prejudice an on-going criminal investigation; or
- information about the child also relates to another person who could be identified from it or the information has been given by another person who could be identified as the source, unless the person has consented to the disclosure or the person providing the information is an employee of the establishment or the Local Authority.

21.3 It is best practice to make reports available to the child or their parents unless the exceptions described above apply.

21.4 Centre reports to the child protection conference will (wherever possible) be shared with the child, if old enough, and parent at least two days before the conference.

## **22 Archiving**

22.1 The setting that the child attended until statutory school leaving age (or the school where the child completed sixth form studies) is responsible for retaining any child protection records they may hold. The recommended retention periods is 35 years from closure when there has been a referral to BCSC. If no referral has been made to BCSC, the child protection record will be retained until the child's 25th birthday, after which point the file will be destroyed confidentially/deleted from our electronic system. The decision of how and where to store child protection files will be made by the Centre Manager via the Board of Directors. Due to sensitivity of the information, the records will continue to be held in a secure area with limited access e.g. designated officer or Centre Manager. The DSL is responsible for ensuring that all CP files are archived in accordance with the timescales referenced above. The DSL is responsible for ensuring that the appropriate timeframes for archiving

and destroying child protection records referenced above are set on electronic systems accordingly for each child.

## 23 Safe Destruction of child records

23.1 Records which have been identified for destruction will be confidentially destroyed. This is because they will either contain personal or sensitive information, which is subject to the requirements of Data Protection legislation or they will contain information which is confidential to the Centre or the Local Authority. Information will be shredded (or deleted as appropriate) prior to disposal or confidential disposal can be arranged through private contractors. For audit purposes the Centre will maintain a list of records which have been destroyed and who authorised their destruction. This can be kept securely in either paper or an electronic format.

## Appendix 1: Definitions and indicators of abuse

Reference: Working Together to Safeguard Children (DfE 2018).

**Neglect:** Neglect is 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 maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers)
- Ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Examples which may indicate neglect (it is not designed to be used as a checklist):

- Hunger
- Tiredness or listlessness
- Child dirty or unkempt
- Poorly or inappropriately clad for the weather
- Poor attendance or often late for sessions
- Poor concentration
- Affection or attention seeking behaviour
- Untreated illnesses/injuries
- Pallid complexion
- Stealing or scavenging compulsively
- Failure to achieve developmental milestones, for example growth, weight
- Failure to develop intellectually or socially
- Neurotic behaviour

**Physical abuse:** Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Examples which may indicate physical abuse (not to be used as a checklist):

- Patterns of bruising; inconsistent account of how bruising or injuries occurred
- Finger, hand or nail marks, black eyes
- Bite marks
- Round burn marks, burns and scalds
- Lacerations, wealds
- Fractures

- Bald patches
- Symptoms of drug or alcohol intoxication or poisoning
- Unaccountable covering of limbs, even in hot weather
- Fear of going home or parents being contacted
- Fear of medical help
- Fear of changing for PE
- Inexplicable fear of adults or over-compliance
- Violence or aggression towards others including bullying
- Isolation from peers

**Sexual abuse:** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Examples which may indicate sexual abuse (it is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge
- Anal or vaginal discharge, soreness or scratching
- Reluctance to go home
- Inability to concentrate, tiredness
- Refusal to communicate.
- Thrush, Persistent complaints of stomach disorders or pains
- Eating disorders, for example anorexia nervosa and bulimia
- Attention seeking behaviour, self-mutilation, substance abuse
- Aggressive behaviour including sexual harassment or molestation
- Unusually compliant
- Regressive behaviour, Enuresis, soiling
- Frequent or open masturbation, touching others inappropriately
- Depression, withdrawal, isolation from peer group
- Reluctance to undress for PE or swimming
- Bruises, scratches in genital area

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

Examples which may indicate emotional abuse (it is not designed to be used as a checklist):

- Over-reaction to mistakes, continual self-deprecation
- Delayed physical, mental, emotional development
- Sudden speech or sensory disorders
- Inappropriate emotional responses, fantasies
- Neurotic behaviour: rocking, banging head, regression, tics and twitches

- Self-harming, drug or solvent abuse
- Fear of parents being contacted
- Running away / Going missing
- Compulsive stealing
- Masturbation, Appetite disorders - anorexia nervosa, bulimia
- Soiling, smearing faeces, enuresis

N.B.: Some situations where children stop communication suddenly (known as “traumatic mutism”) may indicate maltreatment.

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

Reference: Child Sexual Exploitation. *Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation* (DfE 2017)

All staff should ensure they are aware of and respond to wider safeguarding this includes further information on:

- Child abduction and community safety incidents
- Children and the court system
- Children missing from education
- Children with family members in prison
- Child Criminal Exploitation (CCE) and Child Sexual Exploitation (CSE)
- County lines
- Modern Slavery and the National Referral Mechanism
- Cybercrime
- Domestic abuse
- Homelessness
- So-called 'honour-based' abuse (including Female Genital Mutilation and Forced Marriage)
- Preventing radicalisation (including the Prevent duty and Channel)
- Peer on peer/ child on child abuse
- Sexual violence and sexual harassment between children in settings(including Upskirting)

## Responses from parents

Research and experience indicates that the following responses from parents may suggest a cause for concern across all four categories:

- An unexpected delay in seeking treatment that is obviously needed
- An unawareness or denial of any injury, pain or loss of function (for example, a fractured limb)
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development
- Reluctance to give information or failure to mention other known relevant injuries
- Frequent presentation of minor injuries
- Unrealistic expectations or constant complaints about the child
- Alcohol misuse or other drug/substance misuse
- Parents request removal of the child from home
- Violence between adults in the household

## Children with special educational needs and disabilities

When working with children with special educational needs and disabilities, practitioners need to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as the shin, might be of concern on a non-mobile child. The LSCP have a multi-agency protocol to support professionals in making informed judgements for bruising in non-independently mobile children.

<https://www.saferbradford.co.uk/media/pbdp02ro/injuries-in-non-mobile-babies.pdf>

- Not getting enough help with feeding leading to malnourishment
- Poor toileting arrangements
- Lack of stimulation
- Unjustified and/or excessive use of restraint
- Rough handling, extreme behaviour modification e.g. deprivation of liquid medication, food or clothing, disabling wheelchair batteries
- Unwillingness to try to learn a child's means of communication
- Ill-fitting equipment e.g. callipers, sleep boards, inappropriate splinting;
- Misappropriation of a child's finances
- Invasive procedures

## **Appendix 2 Responding to children who report abuse.**

When a child tells me about abuse s/he has suffered, what must I remember?

- Stay calm
- Do not transmit shock, anger or embarrassment.
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you.
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed.
- Tell the child that it is not her/his fault.
- Encourage the child to talk but do not ask "leading questions" or press for information.
- Listen and remember.
- Check that you have understood correctly what the child is trying to tell you.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Do not tell the child that what s/he experienced is dirty, naughty or bad.
- Do not take photographs or make videos of any injuries reported by a child.
- It is inappropriate to make any comments about the alleged offender.
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

NB It is not education staff's role to investigate reports of abuse. Their role is to observe that something may be wrong, ask about it, listen, be available and respond appropriately.

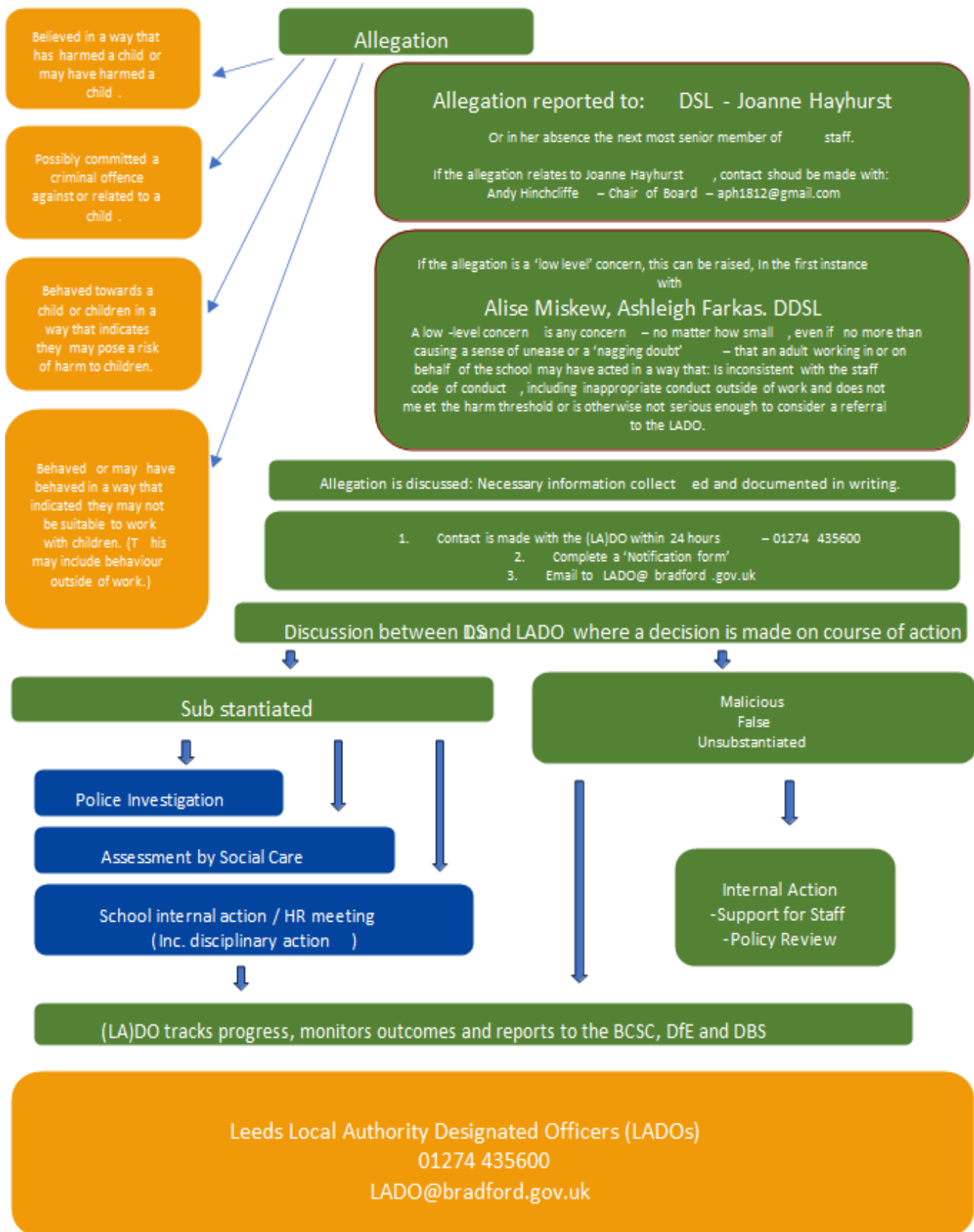
### **Immediately afterwards**

You must not deal with this yourself. All reports of abuse must be recorded and responded to in keeping with the professional roles and responsibilities outlined in Fig 1: Summary of in-setting procedures to follow where there are concerns about a child (Page 10)

## **Appendix 3 Allegations against Adults**



## Allegations Management Procedure – Staff, Volunteers, Visitors



## 20. Safer recruitment Policy and Procedure.

## **20.1 Statement**

At Wyke Community and Children's Centre we take our commitment to Safeguarding Children, Young People and Vulnerable Adults very seriously. We expect all staff, students and volunteers to do the same.

We aim to ensure that all people working with children, young people and vulnerable adults are suitable to do so and so employ extremely vigilant procedures when recruiting new staff.

## **20.2 Implementation and Procedure of Application process.**

### **At Wyke Community and Children's Centre we will:**

- Only advertise positions on reputable websites, usually Direct.gov.
- Ensure that all job position advertisements state that enhanced checks will be part of the recruitment procedure.
- Accept only application forms when considering applicants for a position. CV's or letters will not be accepted at any time.
- Supply Job description and personnel specifications along with the application form.
- Only provide a letter for successful applicants, who will be proceeding the next stage of the recruitment process, which will be an interview.
- Ensure all applicants are asked to provide proof of Identity, Qualifications, Eligibility to work in the UK and asked to disclose anything which may show up on DBS check.
- Investigate in the Interview process any gaps in employment or any other anomalies that are apparent.
- Ensure that two members of the SMT are present in all interviews. The manager whose department the vacancy is for will have the final decision upon the appointment of applicants.

## **20.3 Implementation and Procedure of Staff Induction**

### **At Wyke Community and Children's Centre we will**

- Ensure each new employee is informed that their job offer is conditional, dependant on satisfactory references and Enhanced DBS checks.
- Ensure all new staff will have an induction meeting with their line manager before commencing employment during which they will be asked to complete an online Awareness of Child Abuse and neglect course.
- Complete all relevant paper work within the induction meeting, including: staff details form, emergency contact form and staff induction checklist.
- Ensure all staff are provided with a full copy of the Centre's Policies and Procedures and asked to read these and confirm that these have been understood.
- Ensure that staff fully understand the conditions outlined within the Staff Induction Checklist and ask them to sign this as an acceptance of the Centre policies and Procedures.
- Guarantee that no member of staff will commence work at the Centre before their DBS has returned.
- Subject all staff to a probationary period, during which regular meetings will be held to assess the staff suitability for the position and address any issues promptly.
- During the probationary period work ethic and work produced will be monitored closely. If the standard of work is not satisfactory their employment may be reconsidered.
- Ensure all staff attend an annual appraisal where an ongoing staff suitability form will be completed by them. This includes notifying their line manager of any changes to their suitability to work with children, health concerns or incidents which may have happened outside of work.( In serious cases this information should be relayed to management at the earliest opportunity)
- Confirm that staff employed after 1 January 2015 to work in early years provision, and employees who are directly concerned in the management of such provision are not disqualified and that no members of their households are disqualified

## 21. Special Educational Needs & Disability



WYKE COMMUNITY &  
CHILDREN'S CENTRE  
A Sure Start Children's Centre

### **21.1 Statement**

Wyke Community and Children's Centre values the inclusion of all children and their families, this policy helps us identify any additional needs so that we can provide the best possible care, support and learning environment. Staff will work closely with parents/carers and all relevant professionals from health and education, this will ensure that children's needs are understood and any 'next steps' identified can be put in to place by all professionals involved. Our nursery has Special Educational Needs and Disability Co-ordination who is responsible for all aspects of children's additional needs, the name of our current SENCO is Sarah Walker.

### **21.2 Objectives**

At Wyke Community and Children's Centre we will;

- Ensure the special educational needs of each child are identified, assessed, provided for and reviewed regularly.
- Create an inclusive environment that meets the special educational needs of each child, including specialist resources and equipment, as appropriate.
- Listen and respond to the child's voice, including their interests, learning styles, motivations, responses and behaviour.
- Work in partnership with parent/carers in supporting their child's education.
- Identify the roles and responsibilities of staff in providing for children's special educational needs and provide relevant training as necessary.
- Work in partnership with outside agencies who provide specialist support for children with special educational needs.
- Recognise, value and celebrate children's achievements, however small.
- Work within the Equality and Diversity policy, to ensure that all staff promote equality and inclusion, avoiding discrimination of any kind.
- Be aware of and where necessary make individual safeguarding plans for children with a SEN or disability.

### **21.3 Implementation & Procedure**

To support the early identification of additional needs we will:

- Record observations in all learning areas and use these as a guide to completing the 'My Learning Picture', the 'Two Year Old Assessment', the 'Every Child A Talker' and 'The Early Support Journal'.
- Note and share any concerns if a child is having problems in any learning or social area.
- Invite parents/carers to meet with the key person and SENCO to discuss the needs of their child and agree a course of action to address these needs. A follow on meeting will take place to discuss action taken and agree an Individual Education Plan (IEP) or My Individual Support Plan, which can include small achievable targets and Early Assessment Tools which are completed termly alongside their summative assessments.
- Speak to parents/carers about any additional care and support needed, we always discuss this with the parent /carer first using a graduated approach.
- Work together with parents/carers and other professionals to continue to support the child.

### **21.4 Roles and Responsibilities**

All employees have a responsibility for ensuring that they understand and follow this policy and procedure.

SENCO will;

- Work positively with all members of our nursery to promote inclusion.
- Ensure appropriate procedures are in place working with and including children with SEN and disabilities.

- Liaise with nursery practitioners and external agencies to ensure planning and assessment is differentiated to reflect the needs of the children with SEN and disabilities.
- Liaise with nursery practitioners to discuss and put in place Individual Educational Plan's (IEP) or My Individual Support Plan's (MISP) and offer advice to support key persons in identifying children's strengths and areas for further development to develop meaningful 'next steps'.
- Maintain an 'SEND Register' naming the children with SEN and disabilities, area of need and their stage within the SEN code of practice.
- Keep nursery practitioners updated regarding the needs of the children with SEN or disabilities.
- Work closely with the SEN Equality and Access officer who supports in observing, monitoring and assessing children with SEN and Disability needs.

### **21.5 Identification, Assessment and Reviews of children with SEN or Disability.**

In our nursery we follow the SEND Code of Practice (2015) on the identification and assessment of Special Education Needs and Disability. We offer a graduated approach to ensure that all children make good progress. Children with additional needs will have access to a differentiated curriculum and a level of support necessary to be able to allow children to access all activities as fully as possible.

Parents will be kept completely informed at all stages of their child's Individual Education Plan (IEP) and where appropriate, Health and Medical care plans, My Individual Support Plans (MISP) and Early Support tools (Speech and Language Tracker and Early Support Journal), these will be written and reviewed every term. Early Support tools help SENCO and key persons to identify early intervention where necessary. Home Play packs and Early Interaction groups are then used to support the learning and developmental needs of the child.

Parents/Carers are involved in this process every step of the way. All plans are written and reviewed with parents every term. To keep parents involved we encourage parents to: take home Home Play packs for them to do with their children, input into their child's Summative assessments through uploading observations from Home to Capture Education Online and attend termly parents evenings to help understand their child's current developmental level and input into any next steps.

## **22. Special Educational Needs & Disability: Local Offer**



The purpose of our local offer is to improve choice for families by providing information about our service available for young children who have special educational needs and/or disabilities (SEND).

Wyke Community and Children’s Centre are committed to providing an appropriate and high quality provision in the Early Years Foundation Stage Curriculum for all the children living in our locality. We value the inclusion of all children and their families and this policy helps us identify any additional needs so that we can provide the best possible care, support and learning environment.

**22.1 How our setting knows if young children need extra help and what our parents should do if they think their child have special educational needs and disability (SEND)?**

When our children start nursery, they are allocated a key person. The role of the key person is to develop a trusting and caring attachment with children so they can monitor and track their development in line with the Early Years Foundation Stage requirements. We believe that enabling strong attachments with key persons, helps children to thrive and develop in their early education. Within the first six weeks of a child starting, it is vital for the key person to monitor and carry out observations to be able to complete summative assessments. This also enables the key person to be able to plan for children using their interests.

If a parent is worried or wants to raise concerns over their child’s development their first point of call can be to speak to their key person, the key person would then raise your concerns to the nursery manager (Joanne Hayhurst) and SENCO (Sarah Walker). The SENCO will then explain that the key person needs to complete the child's summative assessments, this then shows signs if a child is displaying developmental delays. If this occurs our SENCO would conduct a meeting with them self, the parent and key person to discuss the child's next steps. The SENCO may also ask the parent's permissions to speak to their health visitor to see if they have raised any concerns.

**22.2 How our setting supports young children with SEND.**

In nursery we try our utmost best to support children with special educational needs and disability. We aim to provide an inclusive, high quality learning environment, aiming to cater for all children's individual needs.

Children with SEN and/or disability display different needs to others, which impacts on the range of support they need. When a key person has completed summative assessments (My Learning Pictures and Every Child A Talker) this then shows where a child is ranging developmentally. If the child is showing signs of significant delay our SENCO will provide the key person with an Early Support tool called an Early Learning Journal, this tool focuses on the prime area of which the child is delayed in and provides a breakdown of the Early Years Foundation Stage milestones to be able to meet smaller more achievable targets. Early Learning Journals helps key persons and SENCO to pin point where the child need extra support in.

If a child continues to show signs of delay throughout the next terms, we would conduct a meeting with parents and ask for permission to involve other professionals. We would explain our reasoning and show our evidence through summative assessments and observations. With parental consent and signature a referral form would be sent to the correct outside agency. This can involve professionals such as; area of SENCO, Speech and Language Therapist and Health Visitor, dependant on the need of the child. If a child shows severe developmental delays, the meeting's and parent involvement will still be the same, however we will ask for permission to involve a one to one support worker. The one to one support worker would be allocated as the child's key person, receiving constant one to one supervision and care. This gives the child the consistency and support they need to be able to develop and achieve their personal targets. All information is shared with parents/carers throughout the whole process. Parents can speak to their key person daily about their child's day as well as updates or reports about communication with other professionals.

We believe we provide very effective wrap around care for all children, we have a range of provisions and resources especially for children with SEN and/or disability and we review these using the children's interests. If a child is interested in a particular object or a way the object works we will try and provide different resources for the child to use. As well as using our nursery environment, practitioner's and one to one support can take their key children in to a quieter room, or into the sensory room, as some children find it easier to engage in a quieter environment. Key persons/ one to one support workers ensure that all resources and provisions are effective for the child's specific needs. They do this through monitoring and observing whether the provisions are working.

### **22.3 How our setting creates learning and development opportunities for individual children with SEND?**

Wyke Community and Children's Centre ensures to create an inclusive environment for all children, creating equal opportunities for all children to develop and strive as an individual. To be able to evidence this, all our children have an individual learning journal, in which key persons input photos and observations of their key child's learning and development throughout their Early Education. Our learning journals back up the evidence of our termly summative assessments, where we track children's learning and development and decide on the child's next steps. This is liaised with parents, where they can also decide on next steps for their child.

If a child is showing delayed signs in any areas of the Early Years Foundation Stage key persons will assess the child with additional assessments which breaks down the Early Years Foundation Stage milestone's in

to small more achievable targets. This is called an Early Learning journal, which helps practitioners to pinpoint where a child is achieving and the specific areas of development needed for next steps.

As well as this, children who receive additional support follow provisions maps and session plans. The provision map and session plan breaks down personal targets of what the child can be developing to achieve on a daily basis throughout different points of the day, included in the nursery routine. Therefore children are still being included within the daily routine of nursery being treated equally as an individual. These are reviewed termly, either changing their next steps or keeping them long term dependant on the child.

Practitioners also run additional groups for if children are delayed in their development, we run an Early Interaction group for young children, focussing on speech and language, understanding of routine and personal, social and emotional development and a Focussed Group for older children focussing on personal, social and emotional development and turn taking skills. These groups are also evaluated termly, showing the progression of our children's specific learning areas.

#### **22.4 How our setting works in partnership with parent/carers?**

As a setting, we ensure we work with parents/carers as effectively as possible. All key persons ensure that on the time of arrival or pick up, they to speak to their children's parents/carers. We believe it is the utmost importance to involve parents/carers throughout the whole of the child's early education, as they know their children best.

Other than speaking to parents daily, we facilitate termly parent's evenings. These consist of an allocated number of days and times on which the parent/carer and key person can discuss together. This gives the chance to have a one to one discussion about their child's learning and development and to discuss their child's next steps. Parents can also provide input and discuss other next steps as they feel necessary as well as any other queries or concerns you may have.

Parent/Carers can always speak to a member of staff, or SENCO or Management whenever they need. As a setting, we involve parents and carers in all aspects of decision making involving their children's learning and welfare, we value their wishes, thoughts and opinions and take this into account. If the primary carer did not collect their child on a day, then we would still inform the secondary carer about their child's day, however if it was confidential or private SENCO would ring you directly.

As well as key persons informing parent/carers about their child's overall development, parent/carers also have the opportunity to write down home observations. We highly encourage parents and carers to write down observations if they feel their children have achieved something. We also ask parents to write down home observations if key persons are struggling on a particular area of learning, as children learn and behave differently in other environments.



**22.5 How our setting supports the well-being of young children with SEND?**

In nursery, daily risk assessments are carried out in a morning and afternoon indoors and outdoors to ensure the safety of their learning environment is in order. All activities that nursery provides are assessed to ensure the safety of children and that risks are kept minimal, however all activities are supervised by a member of staff. Using risk assessments enables us to assess what potential risks may happen and what we would do to prevent this. As we are an inclusive nursery, all activities we provide are for all children to participate in, depending on the type of activity, practitioners will alter activities for all children to engage in. Children with special educational needs or disability have all the same experiences as other children do too. Encouraging children with special educational needs or disability to explore an activity can be a way of understanding if they are interested or dislike the activity. One to one support workers will observe the child's eye contact, body signs or facial expressions if there is no speech to determine if the child likes an activity or not.

If a child has a disability or any sort of health need (Illness, Allergy), a health care plan would be devised with our SENCO and the child's parents/carers. This document is so all members of staff within the nursery understand the individual care they need to provide to meet the child needs. We do also administrate medicine and ask parents to fill out a medicine form, however this has to be prescribed from the doctors. If the medicine is not prescribed we cannot give the child the medicine, these are kept away from the child in a safe place.

As a nursery we highly promote positive behaviour and use a range of techniques to support this. We verbally praise children on a daily basis as well as using stickers as a reward. We also have a 'WOW' board, and if a child carries out a good deed their name and what they have done goes on the board, these are then given to parents. Other techniques used have been Star of the Day, where the child receives a star and certificates.

## **22.6 Staff training and experience in supporting young children with SEND.**

Our nursery SENCO has undertaken a variety of training relevant to fulfil her job role. Sarah (SENCO) has initially completed the main role of the SENCO along with termly SENCO forums which include new requirements which may take place, such as transitioning and new policies or legislations that need to be implemented. These forums give Sarah the up to date knowledge she needs to be able to implement back in to practice. Sarah also undertakes other relevant training, which she feels will benefit her job role in understanding children with special educational needs or disabilities.

Our one to one support workers also require to uphold relevant training to adhere to working with children with special educational needs or training. Each support worker hold different types of training and qualifications. As well as Sarah, when relevant training is apparent support workers will attend these to broaden their knowledge and experience in to working with children with additional needs.

All practitioners within the nursery hold a safeguarding qualification as well as first aid training. All practitioners within nursery and the centre attend in house safeguarding training yearly to refresh own knowledge and practices within following our policies and procedures. All practitioners can attend any training which becomes available. We highly believe in self-improvement and encourage practitioners to further their knowledge and take part in any available training which they or I feel is beneficial towards them.

As well as training for self-improvement, practitioners have been trained in a variety of approaches to be able to adapt to different ranges of SEN. Some practitioners have been past trained in Makaton, Autism, One to One Interaction and Behaviour Management training as well as many others. This enables staff to be able to adapt resources for other great levels of support, making learning challenging for all children to achieve at their upmost best.

### **22.7 Specialist's services and expertise accessed by our setting?**

~~We access a variety of services dependant on the individual needs of the child. Our main source of contacts with other professionals are Area of SENCO, Speech and Language Therapists and Health Visitors.~~

If a child has been referred for a speech and language assessment, a professional will come to our setting observe the child and speak to Sarah (SENCO) and the child's key persons to talk about what they have observed and the next steps for the child. Speech and Language Therapist (SALT) will also speak to parents about their observations as well as conducting a report. As well as SALT making their own observations they also provide the key persons and parents with activities or ideas on how they can encourage the child's development too.

Area of SENCO (Equality and access officer) also attends the setting by appointment to observe the children under special educational needs and disability. The equality and access officer has a meeting with our SENCO as well as observing the children, advising us on how to cater for the individual child, using specific techniques.

We have worked with a variety of professionals as it depends on the specific need, past experiences have been with the physical and medical team for children with disability, Occupational health, Family Support and other services.

### **22.8 Our accessible environment.**

Our centre is wheelchair accessible in the sense that we have a ramp at the entrance which leads up to the main entrance of the centre. In nursery we will always try and lay out the nursery environment according to the mobility needs of the children. The quality and access officer can support us by assessing the environment, elaborating on ideas on how to make the nursery environment more accessible for special mobility needs.

Practitioners want to ensure that their provision matches the development and learning needs of all their children. When we have children with English as a second language, we ensure to work with their parents to establish what the child does and does not know. Sometimes parents can communicate or write down key words which their child knows. As well as this, practitioners learn key words in the child's primary language, to be able to gain minimal language between each other. When it is time to complete summative assessments, the child's key person would ask the parents/carers if they can complete this together, to be able to receive a bigger insight on how the child is at home, as the language barrier can be difficult. Children with English as a second language help practitioners by communicating through eye contact, facial expressions and pointing, until the child feels comfortable learning new words.

### **22.9 How our setting prepares and supports young children with SEND when joining the setting and when transferring to another setting or school?**

For all children and parents as well as children with special educational needs or disability we ensure we abide by our transition policy. Transitioning to nursery can be a big scary process for children and parents, and we want to make this transition as smooth as possible.

Before children start we would arrange a home visit. A home visit is the first initial visit for parents and children to meet two of our practitioners. One practitioner would be management and the other potentially their key person, dependant on session times and days.

At Wyke Community and Children's Centre, we want to make this process a positive experience, focussing on the child's individual needs. We make the initial transition at home as this is a comfortable environment for the child, in which they can feel confident and happy. One practitioner will speak with the parents and complete necessary forms and answer any questions they may have, the other will engage with child with the resources we have brought for the child to explore with and play. After the home visit is completed we would arrange a date and time for the child's first settling in session. At the first session we ask parents to stay with the child for the minimum time of one hour. This gives the child time to explore our nursery but with a familiar face by their side. The rest of the settling in sessions are dependent on the child's individual needs. The next process would be to arrange for a second settling in session, this would be the same process as the first however for a longer period of time. If children are happy and confident to venture off in to our nursery environment we would ask parents to wait in the reception area depending on how the child reacts. Transitions can be as long or short as you like, this solely depends on how the child settles. This is something which will be a step by step process communicated between parents and practitioners. We would never start the child's sessions until parents and practitioners felt the child was completely happy and confident to start nursery.

When the child becomes of age to start school we also abide by our school transitioning process. Together, I and our local school teachers arrange a number of meetings for them to meet the child and their key workers. Initially the teachers will attend and meet our children in the nursery environment. We decide to do this first as the children will feel comfortable and confident within the nursery environment. Teachers introduce themselves, communicate with the children and simply observe their play. The next process would be to conduct a small meeting with the key persons, or management to pass over children's summative assessments and a chance to look through their learning journals. This give the teachers the chance to get some insight on the children and to see if they have any individual needs or requires extras support.

If children require additional support through transitions, particularly children with special educational needs or disability we would arrange extra transition sessions. As well as the teacher observing the child in



## 23. Smoking Policy & Procedure



### 23.1 Statement

Wyke Community and Children's Centre is a no smoking designated area. This Policy has been developed to protect employees, children, visitors and other service users from exposure to second hand smoke. Exposure to second hand smoke increases the risk of lung cancer, heart disease and other illnesses.

### 23.2 Implementation & Procedure

Employees, visitors and service users are not permitted to smoke on the premises or related grounds.

### 23.3 Roles and Responsibilities

All employees, visitors and service users are responsible for adhering to this policy. We will offer help and support to those people wishing to stop smoking.

## 24. Suitable Premises and Security Policy & Procedure



### 24.1 Statement

Wyke Community and Children's Centre take the safety of our employees, visitors and service users who attend our Centre as a high priority. We have a number of strict systems and procedures in place to enable a safe, secure and suitable environment for everyone in our Centre.

### 24.2 Implementation & Procedure

#### Visitors

We will ensure that:

- All visitors sign in and out and are appropriately identified with a visitor pass.
- All visitors are aware of our housekeeping guidance and ground rules.

#### Supervision of Children

We will ensure that:

- Children are never left unsupervised during sessions or activities that take place at our Centre or an alternative setting that is being used to deliver our services.

#### Safe Premises

We will ensure that:

- Health and Safety Policy guidelines are followed by all employees.
- Our premises are cleaned regularly and that activity resources are put away (if appropriate) after each session.
- Rooms are an appropriate size for the work activity being delivered.
- The premises will be maintained at a comfortable temperature.
- Appropriate risk assessments are carried out before each session.

Employees, parents and carers adhere to the 'Child Pick up Pass System' Procedure (available in the Policies & Procedures File in Nursery, Fun-Care, Main Office, Staff Room and as an appendix in the Policies & Procedures Handbook for Employees).

#### Equal Opportunities

We will ensure that:

- We take every possible step to ensure that employees, visitors and service users have equal access to our Centre. Access to our premises will not be a barrier to any child or adult wishing to participate in life and work at our Centre.

- We will work with parents and carers of children with special needs and disabilities to ensure that the best equipment and facilities are provided for them.

### 24.3 Roles and Responsibilities

All employees have a responsibility for ensuring that this Policy is implemented, that their work area is kept clean and tidy and fit for purpose and that service users are supported to use the visitor and child pick up pass system.

## 25. Training and Development Policy



### 25.1 Statement

Wyke Community and Children's Centre is committed to providing high quality services to our service users. To achieve this we believe it is necessary to have a highly qualified workforce and we will support our employees with

### 25.2 Implementation & Procedure

To implement this policy we will follow the guidelines listed below:

- It is the responsibility of all staff to be aware of their own training needs and requirements and these will be reflected in their Personal Development Plan (PDP). The PDP will be informed through a training needs analysis which will be completed by each employee and their line manager. The PDP forms an important part of the regular supervisory and annual appraisal process.
- All decisions to offer financial support for training for employees must fall within the amount allocated to staff training.
- Whilst we recognise that individual development is very important, we must always consider the best interests of the Centre and its work (as identified in the Development Plan) when supporting employee's training in terms of finance requests and requests for time off.
- Any employee can make an application for support for training to the Centre Management. If this application involves a significant expense the Centre Management will take the request to the Board.
- For any employee wishing to leave the Centre after completing a training programme that the Centre has funded (part or whole) must repay the following amounts:
  - Within 1 year of completion - 100% of funds paid by the Centre
  - Within the first and second year of completion - 60% of funds paid by the Centre
  - Within the second and third year of completion - 33% of funds paid by the Centre
- The Board is committed to widening the base for Governance and funding will be made available for appropriate 'governance' training for Board members.
- Appropriate training for volunteers will be supported by our Centre.

### 25.3 Roles and Responsibilities

All employees have a responsibility to ensure that this policy is understood and followed.



## 26. Transporting Children Policy & Procedure



WYKE COMMUNITY &  
CHILDREN'S CENTRE  
A Sure Start Children's Centre

### 26.1 Statement

Wyke Community and Children's Centre take the safety of the children who attend our Centre as a high priority. When transporting children as part of our work we will ensure their safety by following the guidance set out in this policy.

### 26.2 Implementation & Procedure

We will ensure that:

- Any vehicles that we hire are well maintained, suitable for and insured to carry children.
- Any employee who is using their own vehicle only do so if they hold appropriate business motor insurance covering themselves and their passengers.
- All passengers are securely seated and wearing a seat belt.
- Car seats appropriate to the child's age and weight are fitted and used.
- That the vehicle is driven safely.

### 26.3 Roles and Responsibilities

All employees who use their own vehicle for transporting children as part of their role must adhere to this policy.

## 27. Early Education and Charging Policy



WYKE COMMUNITY &  
CHILDREN'S CENTRE  
A Sure Start Children's Centre

### **27.1 Statement**

Wyke Community and Children's Centre remains committed to the implementation of a Charging Policy that is fair and provides access to affordable Early Education for all.

### **27.2 Implementation and Procedure:**

#### **We will ensure that:**

- Fees will be discussed and agreed prior to children starting the Setting.
- Parents will be supplied with an 'Estimated costs outline' where requested.
- Payments can be made via cash, card, child care vouchers, direct debit or standing order.
- Parents should ensure that payments are made promptly, difficulties with paying the fees should be discussed with the Centre manager at the earliest opportunity.

#### **Free entitlement**

Wyke Community and Children's Centre supports the entitlement to free 15 hours and 30 hours early years provision for 2, 3 and 4 year olds.

We provide sessional and all day care for children from the age of 3 months.

Up to 30 hours of free early years provision is available for families in receipt of certain benefits.

Confirmation of eligibility for free funding will be required before commencement for any funded places.

Universal free 15 hours provision is available from the term following a child's second or third birthday up until they reach compulsory school age, for every child, irrespective of background or family circumstances.

#### **Additional Charges**

Information about the Pricing structures and packages of Childcare available can be found on the Pricing structure information page within the Welcome pack.

### **27.3 Roles and Responsibilities**

Senior management are responsible for ensuring that this Policy is adhered to and that all parents have access to Nursery Provision regardless of personal circumstance.

## 28. Parents Code of conduct



WYKE COMMUNITY &  
CHILDREN'S CENTRE  
A Sure Start Children's Centre

### 28.1 Statement

Wyke Community and Children's Centre is committed to ensuring that we provide a friendly, safe and respectful environment for all children, staff and families. To achieve this we ask that all adults including parents follow basic procedures whilst within the building and on the premises.

### 28.2 Implementation and Procedure

#### Parents should ensure that:

- Ensure when within the setting they speak and behave in a civil manner at all times.
- Refrain from using explicit language whilst on site.
- Ensuring that they are not under the influence of alcohol or any other substance when in the Centre
- In line with the smoking Policy do not smoke anywhere on the site at any time.
- They refrain from bringing any domestic disputes onto the site, particularly within the building. Both parents, as stated on the child's birth certificate have the legal right to collect the child, unless otherwise stated through a court order (for which evidence must be produced and copy kept on site) and Centre staff cannot refuse this.
- They have several minutes at the end of the day, or upon collection to discuss any matters that have arisen throughout the day.

#### In addition:

Staff have the right to refuse any aggressive or confrontational adults entry onto the site. Should an instance occur where staff feel that an adult is posing a threat to any member of staff or child on the site, children should be moved to a safe space, away from the threat and the Police should be called immediately.

### 28.3 Roles and Responsibilities

All employees and service users have a responsibility to ensure that this policy is understood and followed. Employers should challenge adults that may be acting in a way that is not in line with the Parent's code of conduct.

## 29. Staff behaviour Policy



WYKE COMMUNITY &  
CHILDREN'S CENTRE  
A Sure Start Children's Centre

### 29.1 Statement

Wyke Community and Children's Centre is committed to ensuring that we provide a friendly, safe and respectful environment for all children, staff and families. To achieve this we ask that all staff must be familiar with, understand and adhere to all the settings' Policies and Procedures at all times.

Staff must also observe all the codes of conduct as laid out in the setting's Employee Handbook, a copy of which is provided to all staff on their induction into the Nursery. Further copies can be obtained from the Manager.

### 29.2 General Conduct

- Staff will wear the uniform provided and will otherwise wear appropriate length and fit shorts, skirts or trousers.
- Staff will wear sensible non slip shoes whilst on duty.
- Staff are requested to wear long hair tied back when working with the children and will wear it tied back at all times when working in the kitchen.
- Staff must make sure they are ready to start work at the time of their allocated shift for the day.
- Staff must maintain a professional manner at all times, ensuring that they appear tidy and clean.
- Staff must ensure that language used is always appropriate, respectful and conversations remain of a professional nature only.
- Staff must not behave or speak in a discriminatory manner under any circumstances.
- Staff must abide by the setting's confidentiality and information sharing policies and to only share information appropriately and when required.

### 29.3 Room Management

- Staff must be aware of child to staff ratios at all times and make sure these ratios are met before leaving the room.
- Staff must always ensure that they follow any staff deployment rotas within the rooms or outdoor area in which they are responsible for supervising.
- Staff on Early shifts must ensure Daily Risk assessments are completed and any hazards are addressed.
- Staff must ensure that children are always signed in and out of the setting on the register.
- Staff must ensure that a full sweep of any area is completed before exiting the area.

- Staff must not allow children to leave the premises with unauthorised personnel.

#### **29.4 Illness, Health & Medication**

- Staff must inform the Manager before 08:00 am if they are sick and unable to attend work.
- If a member of staff is taking regular or irregular medication or has a health issue that may prevent them from carrying out their duties to the best of their ability, they must share this information with the setting's Manager. All medication must be kept in the office during session time.
- If a staff member becomes unwell whilst at work they must inform their line manager immediately

#### **29.5 Safeguarding**

- All members of staff must report to the Designated Safeguarding Lead any safeguarding issues or safeguarding concerns which may occur at the setting. Should these issues or concerns not be addressed in a satisfactory manner by the Designated Safeguarding Lead, staff must report directly to the Social Services integrated assessment team on 01274 437500
- All members of staff must report to the Designated Safeguarding Lead any safeguarding issues which may occur in their homes as well as any allegations made against them or anyone living in their household on a permanent or temporary basis as well as against a partner who may not be living with them.
- Staff are not permitted to have a mobile phone in their possession whilst on duty at the setting. Phones must be switched onto silent and kept in the reception office. Staff are permitted to check phones during their lunch breaks. Staff should inform any interested party (children's schools, partners, etc) of the Nursery's telephone number, which they can call should the need arise. In emergency circumstances, staff may place their phones in the office under the care of the Manager to field calls.
- Staff must operate safe internet usage both on and off the premises. They are not permitted to make any reference whatsoever to the setting or to the children or staff, both past and present, on any social networking site. Staff may not befriend parents on social networking site. Staff may not socialise with parents outside of the setting unless they were friends previous to the child beginning childcare.
- Staff must prevent the abuse of younger or weaker children by older or stronger children through bullying, cruel or humiliating behaviour.
- Staff will not be permitted into the nursery if there is any indication that they are under the influence of alcohol or substance misuse.
- Staff must always inform a colleague when leaving to change a child's nappy or clothes.
- Because of their daily and sometimes intimate contact with children in a variety of situations, staff are vulnerable to accusations of abuse. Staff should take care not to put themselves into situations that may lead to allegations being made against them. It is advisable that at all times, or when possible, that staff ensures that they are not left alone with children. There should always be two staff members in view or hearing of children, when possible, in order to protect both staff and children.

#### **29.6 Roles and responsibilities**

All employees have a responsibility to ensure that this policy is understood and followed. Senior management have a responsibility to ensure that this policy is followed by all staff.