

Safeguarding and Child Protection Policy and Procedure

Grove Villa Childcare

Here at Grove Villa Childcare, we fully recognise the importance of keeping children safe from harm, we recognise our responsibilities for safeguarding children under the current legal framework and the policies and procedures within this document will support us in meeting these requirements.

Safeguarding and promoting the welfare of children is defined as:

- Providing help and support to meet the needs of children as soon as problems emerge
- Protecting children from maltreatment, whether that is within or outside the home, including online.
- Preventing the impairment of children's mental and physical health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

Child protection is part of safeguarding and promoting welfare. It refers to activity that is undertaken to protect specific children who are suffering or are likely to suffer significant harm.

Policy Introduction

This policy has been written in line with the following legal frameworks:

- *Early years foundation stage (EYFS 2025) statutory framework*
- *Working together to safeguard children (2023)*
- *Keeping children safe in education (2025)*

This policy recognises Grove Villa Childcare must take all the necessary steps to keep children safe and well. This policy will explain what our setting will do to:

- Safeguard children
- Support and understand behaviour.
- Promote good health.
- Maintain records, policies, and procedures.
- Ensure the people who have contact with children are suitable.

At Grove Villa Childcare we are committed to keeping children safe and we do this by completing risk assessments, talking to parents and children about keeping them safe from harm and talking to staff to keep an open safeguarding culture.

We have two Designated Safeguarding Leads (DSL'S), their role is to lead on all safeguarding and child protection matters, provide advice and support to staff, parents and children, respond to safeguarding concerns, make referrals to relevant agencies where necessary, and ensure the setting fulfils its safeguarding responsibilities.

Beyond this, we also must consider Contextual Safeguarding which means the risks and vulnerabilities children face beyond their families. The risks children have making relationships in their neighbourhood, schools and online. We must be aware of risks children and their families face being drawn into County Lines and the cost-of-living crisis. Other risks include FGM, radicalisation and Domestic Abuse. Children that are subject to induced or fabricated illnesses, witchcraft, or criminal and sexual exploitation.

It is our responsibility to ensure policies are in place and staff remain knowledgeable by means of continual professional development to ensure we have a professional curiosity and recognise that is our role to keep children safe from these means of contextualised safeguarding.

Roles and Responsibilities

Safeguarding is everyone's responsibility and therefore a shared duty. Every staff member plays a vital role in ensuring children's safety and wellbeing by staying vigilant, recognising signs of abuse, and acting promptly.

We create a safe environment where children feel safe and supported. Therefore, all adults (staff, volunteers, and students) working at Grove Villa Childcare will:

- Take all necessary steps to keep children safe and well.
- Promote good health.
- Manage behaviour.
- Report non - attendance to the Nursery Manager by 10am each day.
- Be alert to any issues for concern in the child's life at home or elsewhere.
- Practice professional curiosity where appropriate.
- Record existing injuries accurately and efficiently.
- Meet the requirements of the Statutory Framework for the Early Years Foundation Stage (EYFS 2025)
- Follow the policies and procedures of the setting and notify the relevant person or agency without delay if concerns arise.
- Be aware of who their DSL's are and where to find information such as the Whistleblowing Policy and Managing Allegations policy.
- Keep appropriate and detailed records which are stored securely.
- Promote independence, resilience, and allowing children's voices to be heard and respected.
- Ensure risk assessments are completed.
- Staff are responsible for their own professional development, and this will be supported and facilitated by the Nursery Manager.
- Staff to complete a staff safeguarding quiz every 3 months, take part in safeguarding training and meetings.

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In addition, the registered provider ensures that they:

- Have regard to the government's statutory guidance 'Working Together to Safeguard Children 2024' and to the 'Prevent duty guidance for England and Wales 2015 (updated March 2024)'
- Implement the requirements of the Early Years Foundation Stage (2025)
- Create a culture of vigilance where children's welfare is promoted and where appropriate and timely action is taken when necessary to safeguard children.
- Make specific arrangements for children's safety and wellbeing, including the requirements for first aid, policies, and procedures for responding to children who are ill or infectious and those for administering medicines.
- keeping a written record of accidents or injuries and first aid treatment and informing parents and/or carers of any accident or injury sustained by the child.
- Ensuring the premises are fit for purpose, compliance with health and safety legislation and appropriate risk assessment, having an evacuation procedure and suitable fire detection and control equipment.
- Ensuring staffing arrangement meet the needs of all children and ensure their safety and implementing a robust key person system.
- Notify local child protection agencies and Ofsted of any serious accident, illness, or injury to, or death of, any child while in their care, and of the action taken. •
- Only release children into the care of individuals who have been notified to the provider by the parent and ensure that children do not leave the premises unsupervised.
- Take all reasonable steps to prevent unauthorised persons entering the premises
- Record the required information about each child, name, date of birth, who has parental responsibility etc. and the required information about the registered provider and adults in regular contact with children. Have a complaints procedure and records.
- Keep attendance records.
- Notify Ofsted of any changes e.g. a new manager, the address of the premises, the name or address of the provider, any proposal to change the hours during which childcare is provided, etc.

The DSL'S (Designated Safeguard Lead) ensures that they:

- Take lead responsibility for safeguarding children in their setting.
- Liaise with local statutory children's services agencies.
- Provide support, advice, and guidance to other staff, on any specific safeguarding issues as required.
- Share child protection information with the DSL of any receiving setting or school when children leave the setting. These files will be delivered by hand or sent by post requiring a signature. The envelope must be marked "Private and Confidential – for the attention of the Designated Safeguarding Lead."
- A chronology is kept build a detailed log of events on a child where we have concerns. The DSL is responsible for ensuring all staff contribute to the child's chronology with support from the DSL.

- All DSLs are responsible for ensuring their training is up-to-date and they keep their knowledge fresh with regular professional development.
- The DSLs regularly communicate with each other.
- Keep staff knowledge up-to-date and consistent with regular professional development.
- Where it is appropriate ensuring safeguarding updates are shared with the staff and this remains confidential to the staff team on a need-to-know basis.
- Discuss safeguarding regularly with the team, such as in staff meetings and staff supervisions.
- Ensure the Safeguarding Vulnerability record is updated and records are maintained to the highest standard.
- Ensure attendance checks are carried out if a child does not arrive for their session by 10am - please refer to our Attendance Policy and Procedure. If the child is absent, we record this on our sickness and absence record.
- To carry out regular checks with accident forms and existing injuries
- It is the responsibility of a DSL to always be contactable during normal operating hours and to inform staff who to contact.

The Registered/Nursery Manager ensures:

- Will ensure an open safeguarding culture is maintained with staff.
- Will ensure the safer recruitment policy is followed when recruiting staff to ensure they are safe to work with children.
- To check new staff are on the update service for their DBS and carry out a check on the update service prior to their first day. Where new staff are not on the update service a new DBS must be carried out BEFORE the staff member starts work. Then the staff member is required to sign up to the update service within the 30-day period.
- Must take record of the new staff member DBS number, expiry date, issue date, and registered professional. We cannot keep photocopies of DBS certificates.
- Must record what form of identification for the new staff member has been seen to verify their identity before starting work.
- Will ensure all staff are confident with following the safeguarding procedures should they need to.
- Will ensure all staff are aware of what to do should a child make a safeguarding disclosure to them.
- Will ensure the duties expected of the DSL's are being carried out and audited on a regular basis.
- Will ensure risk assessments are carried out daily and audited on a regular basis.
- Will carry out staff supervisions every three months to ensure staff remain competent and safe to work with children, to check their understanding of safeguarding and to identify any training needs.
- Ensure all safeguarding records are maintained to the highest standard.
- Carry out attendance and welfare checks by contacting parents of children who have not attended that day by 10am where absence has not been explained. This will be recorded on the safeguarding vulnerability record.

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Recognising Abuse and Neglect

We have a duty of care under the section 40 of the Childcare Act 2006 to comply with the safeguarding and welfare requirements of the early years foundation stage (EYFS).

There are many factors which contribute to a child's well-being, and their development. The parenting capacity of carers and the family home environment are demonstrated to be interrelated, and childcare practitioners are often familiar with children's wider environment and the many factors which affect how children develop, learn, and respond. We are therefore in a unique position to observe any changes in a child's behaviour or appearance which might suggest that they may need support or at risk of harm.

Types of Abuse:

Physical abuse

Physical abuse is defined as deliberately hurting a child causing physical harm and may involve hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating, or otherwise causing any method of non-accidental injury to a child. Physical harm may also be caused when someone fabricates the symptoms of or can be where someone deliberately induces illness in a child.

Emotional abuse

Emotional abuse is any type of abuse that involves the continual emotional mistreatment of a child. It is sometimes called psychological abuse. Emotional abuse can involve deliberately trying to scare, humiliate, isolate, or ignore a child. It can include scapegoating, pushing a child too hard and not recognizing their limitations, exposing a child to upsetting events or situations. Failing to promote a child's social development, being absent, and/or not showing any emotions in interactions with a child can also constitute emotional abuse.

Emotional abuse is often a part of other kinds of abuse, which means it can be difficult to spot the signs or tell the difference, though it can also happen on its own.

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities. Activities may involve 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. It may also include non-contact, 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 (including online).

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

- Provide adequate food, clothing, and shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger.
- Ensure adequate supervision (including the use of inadequate caregivers)
- Ensure access to appropriate medical care or treatment.
- Neglect may also include unresponsiveness to a child's basic emotional needs.

Domestic abuse

Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence, or abuse from those aged 16 or over who are (or have been) intimate partners or family members, regardless of gender or sexuality.

The abuse can encompass but is not limited to:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Exposure to domestic abuse is child abuse and can have serious, long-lasting effect on children and young people.

Children in homes where there is domestic abuse are also at risk of other types of abuse and neglect.

Child exploitation

Child exploitation 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. This may be child sexual exploitation, which does not always involve physical contact.

It can also occur using technology and can still be abuse even if the sexual activity appears consensual.

It could also be child criminal exploitation, e.g., 'county lines,' which is a geographically widespread form of harm involving drug networks or gangs, who groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market, and seaside towns.

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Exploitation may also involve modern slavery and trafficking, which is not always from country to country, sometimes children are trafficked within the local area.

Signs of possible abuse or neglect

This includes, but is not limited to:

- Bruising on parts of the body which do not usually get bruised accidentally, e.g., around the eyes, behind the ears, back of the legs, stomach, chest, cheek, and mouth (especially in a young baby).
- Any bruising or injury to a very young, immobile baby.
- Burns, scald, or bite marks.
- Any injuries or swellings, which do not have a plausible explanation.
- Bruising or soreness to the genital area.
- Faltering growth, weight loss, and slow development.
- Unusual lethargy.
- Any sudden uncharacteristic change in behaviour, e.g., child becomes either very aggressive or withdrawn.
- A child whose play and language indicates a sexual knowledge beyond his/her years.
- A child who flinches away from sudden movement.
- A child who gives over rehearsed answers to explain how his/her injuries were caused.
- An accumulation of several minor injuries and/or concerns.
- A child whose attendance is erratic, or suddenly ceases, without any contact from the family.
- A parent's behaviour or presentation, e.g., evidence of possible alcohol or drug misuse, mental health difficulties, or domestic violence.
- Arrangements for the collection of the child give rise to concern.
- Hunger/thirst at the start of the day.
- Lack of attention to child's basic hygiene needs.
- A child who discloses he/she may be being abused.
- A child who talks about going on a special holiday, family celebration, a procedure/operation this can indicate FGM.
- A child who talks about another person or people staying at the house sleeping over or living in another bedroom this could indicate cuckooing (using the property to store, deal drugs or for sex work).

Peer on Peer abuse

Children can abuse other children. This is generally referred to as peer-on-peer abuse and can take many forms.

This can include, but is not limited to:

- Bullying (including cyberbullying).
- Sexual violence and sexual harassment.
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm.
- Sexting and initiating/hazing type violence and rituals.

In such circumstances it is important to consider the potential needs of the perpetrator as well as the victim.

Procedure for responding to concerns

Any adult working in the setting who is concerned about a child or who identifies that a child or family may need extra help and support, will discuss this with the DSL immediately.

They may also want to have a discussion with a colleague from another agency, i.e. Family Front Door to get a better understanding of the child and their family, and this will be with the family's consent (as long as it doesn't put the child at risk of further harm - if it will then consent is not required).

Emerging concerns

We may find that general concern begins to build up around a child's behaviour, demeanour, or presentation. Concerns may include what is seen or heard and may include the way family members relate to the child and/or the setting.

Such concerns may not seem to be very significant on their own but together may indicate a need for family support that should not be ignored. Therefore, concerns are always recorded factually and accurately along with any decisions or action taken to support the decision-making process. This should be recorded using a log of concern form which can be found on the safeguarding board or in the child's personal file if one has already been created. You should be speaking to a DSL before making this record.

Responding to a disclosure

A disclosure occurs when a child or young person indicates directly, or through play or drawings for example, that he or she has been or is being abused in some way.

Occasionally a disclosure may be very clear and contain specific details about whom or what was involved, or where and when apparent abuse took place. More commonly disclosure emerges as part of routine activity or conversation.

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If a child makes a disclosure we will:

- **Contain our reaction as far as possible** – try not to express shock or disbelief.
- **Listen** to the child, accept what they say and communicate to them that we accept it.
- **Not** make any promises to the child about not passing on the information – the child needs to know that someone who will be able to help them will be spoken to
- **Record** the information as accurately and quickly as possible, including the timing, setting and those present, as well as what was said.
- **Discuss with the DSL** to determine the most appropriate course of action.
- **Not interrogate the child**. We may ask for clarification but will not ask leading questions.
- We will use 'TED' questions, i.e. 'Tell me what happened', 'please explain what you mean when you say ...' and 'can you describe the person?' or 'can you describe the place?'

Voice of the child

It is important to understand the child's lived experience whether they can give a verbal account to professionals or not, ensuring that you understand what the child has communicated to you, and they understand (as far as possible) what you are saying to them.

When talking to children we as practitioners will try to remove barriers by thinking about the child's communication needs and preferences and about where conversations take place.

It is also important to triangulate what the child says with how they behave and react to others and how the parents/carers behave such as:

- Are they telling you what they have been told to say?
- Do they say everything is OK and then behave as though it is not?
- Do they say different things to different people?
- Do not assume that this is because they are lying, it may be because they are not able to say what they mean.

Sharing concerns with parents and carers

Concerns will generally be shared with the child's parents/carers. This can eliminate misunderstandings and can help us better understand the needs of the child and the family situation. It also ensures that our relationship with parents is built on trust and openness.

Parents are fully involved in decision making and we seek consent to share information, however, in some circumstances we would not share information with parents or seek consent to share others, for example if:

- Sexual abuse is suspected.
- It is considered that discussing the issue with parents may put the child at further risk of significant harm.
- A criminal offence may have been committed.
- Organised abuse is suspected.
- Fabricated illness is suspected.
- An explanation is given by parents/carers which is felt to be inconsistent or unacceptable.

Levels of need guidance and actions to take

We use the Cambridge Threshold Document for guidance to support our understanding of the child's needs and our decision making.

In some circumstances we may be able to offer additional support ourselves. Sometimes we might need to work with another agency or possibly more than one. If possible, we will avoid a formal process, but when a child's situation becomes more complex or there appears to be increased risk, it may be necessary to draw up more formal plans with the family to coordinate the work.

If the child needs immediate protection, we contact the Police on 999, and if a child is brought to us with serious injuries we telephone for an ambulance.

If a child may be at risk of significant harm, the DSL makes a referral to the Cambridgeshire County Council Children's Services Emergency line without delay. The DSL will do this by telephoning the Cambridgeshire County Council Children's Services and then following up by completing an online referral to Children's Social Care. If all lines to the CCS are busy, the DSL will complete a Referral to Children's Social Care and indicate what time the child is likely to be collected from the setting.

The contact number for Cambridgeshire County Council Children's Services in an emergency is 01733 234724

[Make a professional referral to Cambridgeshire County Council Children's Services - Cambridgeshire County Council website - Instructions and Data Protection](#)

Referral forms are printed and saved in the child's safeguarding file.

If we are not in agreement with Cambridgeshire County Council children's services about the level of need and appropriate action, we will use the levels of need guidance to support a professional discussion with the decision maker, and if still unsatisfied we would use the Cambridgeshire County Council's resolving professional differences escalation policy. In the meantime, we would continue to observe the child and support them and their family. If necessary, we would make another referral.

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Open cases

If there is new information about a child who already has an allocated social worker, we share this directly with them.

Record Keeping

Documenting concerns

All records should be:

- A factual account of what was seen and heard, containing the child's own words where appropriate. The child should be identified by name and date of birth on each page.
- Clear and legible, with minimal abbreviations. Blank spaces or alterations should be scored through with a single line, and the original entry must be legible.
- A record must be written as soon as possible and always within 24 hours of an event or observation, (important if the record is needed for submission to court). The record should describe the care and condition of the child.
- Dated, timed, and signed.
- Written in permanent black ink (to support scanning if necessary)
- Stored confidentially and securely Clear records support decision making e.g., whether coordinated multi-agency support could be helpful, or a discussion with the Community Social Worker/referral to the Cambridgeshire children's social care is required. A professional opinion may be included in a record, but only if stated as such and the facts or observations upon which the opinion is based are made explicit.

Log of concern form:

This form will help ensure that important details of the concern are recorded clearly and consistently. Concerns should be recorded by the person identifying the concern and the completed record should be given to the DSL immediately, for consideration and/or action.

Safety and welfare concerns continuation form:

Following the recording of a concern, additional information may be recorded using a continuation sheet if necessary. Individual file chronology. A chronological summary of incidents, concerns, and actions, to support monitoring.

An individual **child protection** file is started for a child when:

- There are welfare and or safety concerns.

- The child has been referred to the Cambridgeshire County council children's services.
- There is Children's Services Social Care involvement with the child/family.
- We are participating in multi-agency support. If concerns relate to more than one child from the same family attending the setting a separate file for each child is created and cross referenced to the records of other family members. Common records e.g. child protection conference notes are referenced in each file. Other files relating to the child, for example SEN information, are also cross referenced. An individual child protection file includes:
 - Front sheet.
 - Individual chronology.
 - All safety and welfare concern forms relating to the child.
 - Any notes initially recorded.
 - Records of discussions, telephone calls, and meetings (with colleagues, other agencies or services, parents, and children/young people)
 - Professional consultations
 - Letters sent and received.
 - Referral forms
 - Minutes/notes of meetings (copies for each child as appropriate).
 - Formal plans linked to the child (e.g. Child Protection Plan).

Security, storage, and retention of records

Individual files are stored securely in the filing cabinet in the office, so that they are shared only on a need-to-know basis. The DSL reviews such records regularly prior to DSL meetings so that increasing concerns can be identified and action taken to ensure that needs are met.

Parents have the right to access information held about their child, so records are shared with them if they make this request, however there are some exceptions, namely those described previously in the section on sharing information with parents, for example when sharing the information would place the child at risk of significant harm.

All safeguarding records are retained until the child reaches the age of 25 years.

Transfer of Child Protection records at transition

Records are transferred at each stage of a child's education, when they move from one establishment to another, either at normal transfer stage such as moving from nursery to school, or as the result of a move such as a transfer to a different area.

They are transferred within 5 days, and are passed directly and securely to the safeguarding lead in the receiving establishment. They are transferred by hand if possible or signed for if posted. The envelope must be marked "Private and Confidential – for the attention of the Designated Safeguarding Lead." They are never sent by email. To safeguard children effectively, when a child moves to a new educational establishment, the receiving

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establishment is immediately made aware of any current child protection concerns, by telephone prior to the transfer of records.

Children in more than one setting

Where children are dual registered (e.g. on roll at a mainstream school, but receiving education in another establishment, such as a Short Stay School or the MET or attending more than one early year setting), any existing child protection records are shared with the new establishment prior to the child starting, to enable the new establishment to risk assess appropriately.

We keep a copy of the transfer form along with a copy of the chronology of events and any records pertaining to the establishment (e.g. completed 'Welfare Concern' forms).

Children subject to a Child Protection (CP) Plan

If a child is the subject of a Child Protection Plan at the time of transfer, we speak to the safeguarding lead of the receiving establishment giving details of the child's key Social Worker from Children's Social Care Services and ensuring the establishment is made aware of the requirements of the child protection plan.

Building a Safer Workforce

Recruiting

The provider checks the suitability and obtains an enhanced criminal records disclosure for anyone working directly with children. We keep a record of the date and the serial number of the DBS certificate. Applicants are also required to be subscribed to the Update Service.

Applicants are asked to complete an application form, and we obtain two employers' references, including the most recent employer. If this is not possible, for example if the applicant is applying for their first position, we will obtain professional references i.e. School they previously attended or college tutor.

The registered provider and the manager of the setting have completed safer recruitment training.

We keep a record of ID checks, right to work in the UK, qualifications (certificates are checked), references obtained and DBS certificate details.

The same processes are used for volunteers and student DBS certificates obtained by their training provider are checked and the details recorded.

Prior to offering a position to a new member of staff an online check will be carried out, this includes an internet search and search on social media platforms.

Induction, training, and continued supervision

All new staff, students and volunteers are shown where to find a copy of all policies and procedures which they are required to read fully. They also receive induction training which includes:

- An understanding of the settings safeguarding policies and procedure
- Behaviour management
- How and when mobile phones and cameras can be used in the setting.
- How to define and identify possible signs of harm, abuse, and neglect
- What to do if concerns arise
- What to do if concerned about the behaviour or conduct of another adult
- Who is the designated safeguarding lead in the setting

All staff complete collegiate level 2 safeguarding training at least every two years.

The DSL, manager and registered provider complete training through CPD an approved training provider and refresh every two years.

The quality and effectiveness of training is evaluated following each course and training provided by the approved provider and/or Noodle Now is used as we are confident that this meets the requirements of the different roles.

Safeguarding is discussed at every staff meeting; staff will complete a safeguarding quiz every 3 months and complete in-house safeguarding training twice a year.

Supervision meetings take place for all staff at least every three months alongside annual appraisal. The purpose of this is to foster a culture of mutual support and continuous improvement by providing support, coaching, and training for staff, and encouraging confidential discussion of sensitive issues.

The registered provider conducts supervision meetings with the manager.

Disqualification

Staff are required to disclose any convictions, cautions, court orders, or reprimands and warnings which might affect their suitability to work with children, whether these occur prior to, or during, their employment at the setting. They are asked to confirm this at each supervision meeting.

Whistleblowing

Grove Villa Childcare is committed to delivering high quality nursery care and prides itself in having an 'open door' policy. If staff have concerns about a colleague, they report them to the manager and or DSL as the issue occurs. If they feel unable to do so they can report their concern to Letang or Michael Wolstenholme (registered provider) or seek guidance using the Public Concern at Work website.

The Cambridgeshire County Councils allegations flow chart Poster is displayed in all rooms.

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All information relating to concerns would be handled in confidence, kept in a locked secure location, and only made available to those who have a right or professional need to see them.

Further information can be found in our Whistleblowing policy.

Allegations against someone working on the premises.

A complaint is an allegation of abuse if it indicates that someone:

- Has/may have acted in a way that has harmed a child.
- Acted in a way which has put a child at risk.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child or children in a way that indicates he/she is unsuitable to work with children.

If a complaint (from a parent, child, staff member, member of the public, etc) includes an allegation of abuse, whether made verbally or in writing, the incident would be noted in the record of complaints (with minimal detail to ensure confidentiality) and the registered provider informed. The registered provider will make a record of the allegation.

We will follow the advice of Children's Social Care and LADO team.

The registered provider will inform Ofsted of any allegations of serious harm or abuse whether the allegations relate to harm or abuse committed on the premises or elsewhere. The following applies:

- Confirmation of the allegation in writing would be sought from the person making the allegation, but action would not be delayed whilst awaiting written confirmation
- The recipient of the allegation would immediately inform the registered provider.
- The Registered Person may delegate responsibility for action to the setting manager but remains accountable for ensuring that the concern is shared immediately with the LADO on 01223 727 967.
- The manager would telephone the LADO and if this is not possible, the Cambridgeshire County council Children's services.
- If the allegation is against the DSL or the manager, it will be necessary to report the concern to the person's superior. If this is not possible staff should inform the LADO directly.
- If the allegation is against the Registered Person, the DSL should inform the LADO immediately and notify Ofsted (or any relevant childminder agency)
- A note would be made of any actions advised by the LADO or by Ofsted and of the date and time they are implemented.
- The provider would conduct a risk assessment to determine whether the staff member should be suspended.
- Parents/carers would be informed unless to do so could put the child in further danger.

- If no further action is recommended, we may still proceed with disciplinary procedures.

If there are concerns about the suitability of the member of staff to continue to work with children, we have a statutory duty to refer to the Disclosure and Barring Service (DBS).

In all cases where an allegation against a member of staff is made, we would review all policies and procedures, and address identified training/supervision needs.

Records of allegations would be retained until the alleged perpetrator reaches normal retirement age, plus 5 years.

Operation Encompass

Operation Encompass is a system which sends a notification from the Police to the child's school setting if they have witnessed Domestic Abuse.

This system is currently in the process of including Early Years settings. The Key Adult will be the setting DSL, and they will have received further training on Operation Encompass.

When a notification has been received it is the responsibility of the DSL to keep detailed records on the child's chronology and complete a Safety and Welfare form to identify what we need to do to support that child further.

Information regarding Operation Encompass is available for staff next to the safeguarding form at the top of the stairs, and available for parents and staff on our website.

Further information can also be found here <https://www.operationencompass.org/>

Important contacts

Designated Safeguarding Leads	Danielle Williams and Tricia Jones
Registered Provider	Grove Villa Childcare limited- Letang and Michael Wolstenholme
Nursery Manager	Danielle Williams
Deputy Manager	Tricia Jones
Cambridgeshire County Council Children's Services.	0345 045 5203 Office hours 01733 234724. Emergency Duty Team
Police	999 in an emergency Non-emergency 101
OFSTED	0300 123 4666
Local authority Designated officer (LADO)	01223 727 967 Mon-Fri Office hours 01733 234 724 Out of office
Domestic abuse helpline	0800 980 3331
NSPCC FGM helpline	0800 028 3550
NSPCC Helpline	0808 800 5000

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This policy will be updated and reviewed annually or if there a new local or national policies and procedures. The review process will be carried out by the nursery manager and the DSL and include all those working in the setting.

July 2026