



06 Safeguarding children, young people, and vulnerable adults' procedures

06.01 Responding to safeguarding or child protection concerns

Designated Safeguarding Leads are:

- Nikki Greenough (Childcare Manager)
- Lily Greenough (Deputy Manager)

Designated safeguarding persons are:

- Louise Hill (Senior Practitioner)

Designated Safeguarding Officer is:

- Julie Meintjes (Director)

The line manager of the Designated Safeguarding Lead (Childcare Manager) is the Designated Safeguarding Officer (Director). The line manager for the Deputy Manager is the Childcare Manager. The Designated Safeguarding Leads, the Designated Safeguarding Persons and the Designated Safeguarding Officer all form the Designated Safeguarding Team at Horns Drove Community Childcare.

Safeguarding Roles

The Designated Safeguarding Officer is responsible for:

- If there is an incident, which may require reporting, to immediately seek guidance from the other directors as appropriate. There continues to be a requirement that the Designated Safeguarding Officer (Director) follows legislative requirements in relation to reporting to RIDDOR. This is fully addressed in section 01 Health and Safety Procedures.

The Designated Safeguarding Lead (Childcare Manager/ Deputy Manager), and in their absence the Designated Safeguarding Person(s), are responsible for:

- Taking action to safeguard the child, and informing Designated Safeguarding Officer (Director) of the concern. If there are any doubts about the issue raised, further clarification is sought from the Designated Safeguarding Officer (Director), or in their absence, advice is sought from the remaining directors at Horns Drove Community Childcare.
- Co-ordinating action taken by the setting to safeguard vulnerable children and adults. The Designated Safeguarding Lead is also responsible for liaising with local statutory children's services and with the Local Safeguarding Children's Partnership.
- Issues which may require notifying to Ofsted are notified to the Designated Safeguarding Officer (Director) to make a decision regarding notification. The Designated Safeguarding Lead (Childcare Manager/ Deputy

Manager) and Designated Safeguarding Officer (Director) must remain up to date with Ofsted reporting and notification requirements.

- Ensuring all educators are alert to the indicators of abuse and neglect, and understand how to identify and respond to these.
- All staff recognise and know how to respond to signs and signals that may indicate a child is suffering from or likely to be suffering from harm. They understand that they have a responsibility to act **immediately** by discussing their concerns with the Designated Safeguarding Lead (Childcare Manager/ Deputy Manager) or the Designated Safeguarding Person(s) the day the incident occurs.
- The setting should not operate without an identified designated safeguarding lead at any time.

REPORTING CONCERNS – DAY ONE

Responding to marks or injuries observed

- If a member of staff at Horns Drove Community Childcare observes or is informed by a parent/carer of a mark or injury to a child that happened at home or elsewhere, the member of staff makes a record of the information given to them by the parent/carer in the child's personal file on Famly (Pre-existing accident/ incident form), which is signed by the parent/carer.
- The member of staff advises the Designated Safeguarding Lead as soon as possible if there are safeguarding concerns about the circumstance of the injury.
- If there are concerns about the circumstances or explanation given, by the parent/carer and/or child, the designated safeguarding lead decides the course of action to be taken after reviewing 06.1a Child welfare and protection summary and completing 06.1b Safeguarding incident reporting form.

Injuries noticed in the setting

- If the mark or injury is noticed later in the day and the parent is not present, this is raised with the Designated Safeguarding Lead.
- If there are concerns about the nature of the injury, and it is unlikely to have occurred at the setting, the Designated Safeguarding Lead decides the course of action required and 06.1b Safeguarding incident reporting form is completed as above, taking into consideration any explanation given by the child.
- If there is a likelihood that the injury is recent and occurred at the setting, this is raised with the Designated Safeguarding Lead.
- If there is no cause for further concern, a record is made in the individual child's chronology and Accident Record, with a note that the circumstances of the injury are not known.
- If the injury is unlikely to have occurred at the setting, this is raised with the Designated Safeguarding Lead who informs the Designated Safeguarding Officer.
- The parent/carer is advised at the earliest opportunity.
- If the parent/carer believes that the injury was caused at the setting this is still recorded in the Accident Record and an accurate record made of the discussion is made on the child's personal file.

Responding to the signs and symptoms of abuse

- Concerns about the welfare of a child are discussed with the Designated Safeguarding Lead without delay.
- A written record is made of the concern on 06.1b Safeguarding incident reporting form as soon as possible.
- Concerns that a child is in immediate danger or at risk of significant harm are responded to immediately and if a referral is necessary this is made **on the same working day**.

Responding to a disclosure made by a child

- When responding to a disclosure from a child, the aim is to get just enough information to take appropriate action.
- The member of staff at Horns Drove Community Childcare listens carefully and calmly, allowing the child time to express what they want to say.
- Staff do not attempt to question the child but if they are not sure what the child said, or what they meant, they may prompt the child further by saying *'tell me more about that'* or *'show me again'*.
- After the initial disclosure, staff speak immediately to the Designated Safeguarding Lead. They do not further question or attempt to interview a child.
- If a child shows visible signs of abuse such as bruising or injury to any part of the body and it is age appropriate to do so, the key person will ask the child how it happened.
- When recording a child's disclosure on 06.1b Safeguarding incident reporting form, their exact words are used as well as the exact words with which the member of staff responded.
- If marks or injuries are observed, these are recorded on a body diagram.

REFERRALS (all categories of abuse) – DAY TWO

- The Designated Safeguarding Lead makes a professional judgement about referring to other agencies, including Social Care using the Local Safeguarding Partnership threshold document:
 - Level 1: Child's needs are being met. Universal support.
 - Level 2: Universal Plus. Additional professional support is needed to meet child's needs.
 - Level 3: Universal Partnership Plus. Targeted Early Help. Coordinated response needed to address multiple or complex problems.
 - Level 4: Specialist/Statutory intervention required. Children in acute need, likely to be experiencing, or at risk of experiencing significant harm.
- Staff at Horns Drove Community Childcare are alert to indicators that a family may benefit from early help services and should discuss this with the designated safeguarding lead, also completing 06.1b Safeguarding incident reporting form if they have not already done so.

Seeking consent from parents/carers to share information before making a referral for early help (Tier 2/3*)

Parents/carers are made aware of Horns Drove Community Childcare's Privacy Notice which explains the circumstances under which information about their child will be shared with other agencies. When a referral for early help is necessary, the Designated Safeguarding Lead must always seek consent from the child's parents/carers to share information with the relevant agency.

- If consent is sought and withheld and there are concerns that a child may become at risk of significant harm without early intervention, there may be sufficient grounds to over-ride a parental decision to withhold consent.

- If a parent/carer withholds consent, this information is included on any referral that is made to the local authority. In these circumstances a parent should still be told that the referral is being made beforehand (unless to do so may place a child at risk of harm).

**Tier 2: Children with additional needs, who may be vulnerable and showing early signs of abuse and/or neglect; their needs are not clear, not known or not being met. Tier 3: Children with complex multiple needs, requiring specialist services in order to achieve or maintain a satisfactory level of health or development or to prevent significant impairment of their health and development and/or who are disabled.*

Informing parents/carers when making a child protection referral

In most circumstances, consent will not be required to make a child protection referral, because even if consent is refused, there is still a professional duty to act upon concerns and make a referral. When a child protection referral has been made, the Designated Safeguarding Lead contacts the parents/carers (only if agreed with social care) to inform them that a referral has been made, indicating the concerns that have been raised, unless social care advises that the parent/carer should not be contacted until such time as their investigation, or the police investigation, is concluded. Parents/carers are not informed prior to making a referral if:

- there is a possibility that a child may be put at risk of harm by discussion with a parent/carer, or if a serious offence may have been committed, as it is important that any potential police investigation is not jeopardised
- there are potential concerns about sexual abuse, fabricated illness, FGM or forced marriage
- contacting the parent/carer puts another person at risk; situations where one parent may be at risk of harm, e.g. abuse; situations where it has not been possible to contact parents/carers to seek their consent may cause delay to the referral being made.

The Designated Safeguarding Lead makes a professional judgment regarding whether consent (from a parent/carer) should be sought before making a child protection referral as described above. They record their decision about informing or not informing parents along with an explanation for this decision. Advice will be sought from the appropriate children's social work team if there is any doubt. Advice can also be sought from the Designated Safeguarding Officer.

Referring

- The designated safeguarding lead at Horns Drove Community Childcare or Designated Safeguarding Person(s) follows their Local Safeguarding Children Partnership procedures for making a referral.
- If the designated safeguarding lead or Designated Safeguarding Person(s) is not on site, the most senior member of staff present takes responsibility for making the referral to social care. If contact is not made, the staff member present takes responsibility for making the referral to social care.
- If a child is believed to be in immediate danger, or an incident occurs at the end of the session and staff are concerned about the child going home that day, then the Police and/or social care are contacted immediately.
- If the child is 'safe' because they are still in the setting, and there is time to do so, the senior member of staff contacts the setting's Designated Officer for support.
- Arrangements for cover (as above) when the Designated Safeguarding Lead and Designated Safeguarding Person(s) are not on-site are agreed in advance by the setting manager and clearly communicated to all staff.

Further recording

- Information is recorded using the setting's nursery management software (if used) or alternatively [06.1b Safeguarding incident reporting form](#), and a concise summary entered on [06.1a Child welfare and protection summary](#). Discussion with parents/carers and any further discussion with social care is recorded. If recording a conversation with parents/carers that is significant, regarding the incident or a related issue, parents/carers are asked to sign and date [06.01d Witness Statement form](#), it is a record of the conversation. It should be clearly recorded what action was taken, what the outcome was and any follow-up.

- If a referral was made, copies of all documents are kept and stored securely and confidentially (including copies) in the child's safeguarding file, or on the setting's management software
- Each member of staff/volunteer who has witnessed an incident or disclosure should also make a written statement on [06.1b Safeguarding incident reporting form](#), as above.
- The referral is recorded on [06.1a Child welfare and protection summary](#).
- Follow up phone calls to or from social care are recorded in the child's file; with date, time, the name of the social care worker and what was said.
- Safeguarding records are kept up to date and made available for confidential access by the Designated Safeguarding Officer to allow continuity of support during closures or holiday periods.

Reporting a serious child protection incident using 06.1c Confidential safeguarding incident report form

- The designated safeguarding lead is responsible for reporting to the designated officer and seeking advice if required prior to making a referral as described above.
- For child protection concerns at Tier 3 and 4** it will be necessary for the designated safeguarding lead to complete 06.1c Confidential safeguarding incident report form and send it to the designated officer.
- Further briefings are sent to the designated officer when updates are received until the issue is concluded.

** Tier 3: Children with complex multiple needs, requiring specialist services in order to achieve or maintain a satisfactory level of health or development or to prevent significant impairment of their health and development and/or who are disabled.

Tier 4: Children in acute need, who are suffering or are likely to suffer significant harm.

Professional disagreement/escalation process

- If a member of staff at Horns Drove Community Childcare disagrees with a decision made by the designated safeguarding lead not to make a referral to social care they must initially discuss and try to resolve it with them.
- If the disagreement cannot be resolved with the designated safeguarding lead and the member of staff continues to feel a safeguarding referral is required, then they discuss this with the designated officer.
- If issues cannot be resolved the whistle-blowing policy should be used, as set out below.
- Supervision sessions are also used to discuss concerns, but this must not delay making safeguarding referrals.

Refer to Appendix A (Process flow – Reporting Safeguarding Concern for a Child) and Appendix B (Process flow – Reporting Safeguarding Concern for an Adult).

WHISTLEBLOWING

Horns Drove Community Childcare will ensure that all staff are familiar with the Whistle Blowing Procedure.

The Whistle Blowing Procedure must be followed in the first instance if:

- a criminal offence has been committed, is being committed or is likely to be committed
- behaved in a way that has harmed a child or may have harmed a child
- behaved towards a child or children in a way that indicates they may pose a risk of harm to children
- a person has failed, is failing or is likely to fail to comply with any legal obligation to which he or she is subject. This includes non-compliance with policies and procedures, breaches of EYFS and/or registration requirements
- a miscarriage of justice has occurred, is occurring or is likely to occur
- the health and safety of any individual has been, is being or is likely to be endangered
- the working environment has been, is being or is likely to be damaged

- that information tending to show any matter falling within any one of the preceding clauses has been, is being or is likely to be deliberately concealed.

There are 3 stages to raising concerns as follows:

1. If staff wish to raise or discuss any issues which might fall into the above categories, they should normally raise this issue with their Designated Safeguarding Lead (Childcare Manager/Deputy Manager)
2. Staff who are unable to raise the issue with their Designated Safeguarding Lead (Childcare Manager/Deputy Manager) should raise the issue with the Designated Safeguarding Officer (Director).
3. If staff are still concerned after the investigation, or the matter is so serious that they cannot discuss it with Designated Safeguarding Lead (Childcare Manager/Deputy Manager), they should raise the matter with the Designated Safeguarding Officer (Director).

After a concern has been raised, the Manager/Line Manager will decide how to respond in a reasonable and appropriate manner. Normally this will involve making internal enquiries first, but it may be necessary to carry out an investigation.

Whilst it is hoped that such disclosures will never be necessary, the setting management recognises that it may find itself in circumstances which are new to it. Each case will be treated on its own merits.

Managers' responsibilities

Managers/Line Managers notified of concerns under this policy are expected to:

- Ensure that all staff and volunteers are familiar with the policy
- Ensure that concerns raised are taken seriously

-treat the matter in confidence, within the parameters of the case:

-where appropriate, investigate properly and make an objective assessment of the concerns.

-keep the person raising the concern updated with progress, without breaching confidentiality.

-ensure that the action necessary to resolve a concern is taken.

-take appropriate steps to ensure that the employee's working environment and/or working relationship is/are not prejudiced by the fact of disclosure.

If an issue cannot be resolved and the member of staff believes a child remains at risk because the setting or the local authority have not responded appropriately, the NSPCC have introduced a whistle-blowing helpline 0800 028 0285 for professional who believe that:

- Their own or another employer will cover up the concern.
- They will be treated unfairly by their own employer for complaining.
- If they have already told their own employer and they have not responded, Horns Drove Community Childcare will ensure that all staff are aware of the NSPCC whistleblowing helpline.

Female genital mutilation (FGM)

Staff should be alert to symptoms that would indicate that FGM has occurred, or maybe about to occur, and take appropriate safeguarding action. Designated Safeguarding Lead (Childcare Manager/Deputy Manager) should contact the policy immediately as well as refer to children's services local authority social work if they believe that FGM may be about to occur.

It is illegal to undertake FGM or to assist anyone to enable them to practice FGM under the Female Genital Mutilations Act 2003. It is an offence for a UK national or permanent UK resident to perform FGM in the UK or overseas. The practice is medically unnecessary and poses serious health risks to girls. FGM is mostly carried out on girls between the ages of 0-15, statistics indicate that in half of countries who practise FGM girls were cut before the age of 5. LSP guidelines must be followed in relation to FGM, and the designated person is informed regarding

specific risks relating to the culture and ethnicity of children who may be attending their setting and shares this knowledge with staff.

Symptoms of FGM in very young girls may include difficulty walking, sitting or standing; painful urination and/or urinary tract infections; urinary retention; evidence of surgery; changes to nappy changing or toileting routines; injury to adjacent tissues; spends longer than normal in the bathroom or toilet; unusual and/or changed behaviour after an absence from the setting (including increased anxiety around adults or unwillingness to talk about home experiences or family holidays); parents are reluctant to allow child to undergo normal medical examinations; if an older sibling has undergone the procedure a younger sibling may be at risk; discussion about plans for an extended family holiday.

Further guidance

NSPCC 24-hour FGM helpline 0800 028 3550 or email fgmhelp@nspcc.org.uk
Government help and advice: www.gov.uk/femail-genital-mutilation

Children and young people vulnerable to extremism or radicalisation

Horns Drove Community Childcare has a duty to identify and respond appropriately to concerns of any child or adult at risk of being drawn into terrorism. Local Safeguarding Children Partnership have procedures which cover how professionals should respond to concerns that children or young people may be at risk of being influenced by or being made vulnerable by the risks of extremism.

There are potential safeguarding implications for children and young people who have close or extending family or friendship networks linked to involvement in extremism or terrorism.

- The Designated Safeguarding Lead (Childcare Manager/Deputy Manager) at Horns Drove Community Childcare is required to familiarise themselves with Local Safeguarding Children Partnership procedures, as well as online guidance including;
 - Channel Duty guidance: Protecting people vulnerable to being drawn into terrorism www.gov.uk/government/publications/channel-and-prevent-multi-agency-panel-pmap-guidance
 - Prevent Strategy (HMG 2011) www.gov.uk/government/publications/prevent-strategy-2011
- The prevent duty: for schools and childcare providers www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty
- The Designated Safeguarding Lead (Childcare Manager/Deputy Manager) at Horns Drove Community Childcare should follow Local Safeguarding Children Partnership guidance in relation to how to respond to concerns regarding extremism and ensure that staff know how to identify and raise any concerns in relation to this with them.
- The Designated Safeguarding Lead (Childcare Manager/Deputy Manager) at Horns Drove Community Childcare must know how to refer concerns about risks of extremism/radicalisation to their Local Safeguarding Children Partnership safeguarding team or the Channel panel, appropriate.
- The Designated Safeguarding Lead (Childcare Manager/Deputy Manager) should also ensure that they and all other staff at Horns Drove Community Childcare working with children and young people understand how to recognise that someone may be at risk of violent extremism.
- The Designated Safeguarding Lead (Childcare Manager/Deputy Manager) also ensure that all staff at Horns Drove Community Childcare are aware of their responsibilities with regard to equality and inclusion and children's *rights*. *Training is available from the Early Years Alliance if available in the area, the Designated Safeguarding Lead (Childcare Manager/Deputy Manager) should complete WRAP (or equivalent) training and support staff to access the training as offered by local authorities. WRAP training covers local arrangements for dealing with concerns that a child may be at risk of extremism and/or radicalisation.*
- The Designated Safeguarding Lead (Childcare Manager/Deputy Manager) should understand the perceived terrorism risks in relation to the area that they deliver services in.

Parental consent for radicalisation referrals

Local Safeguarding Children Partnership procedures are followed at Horns Drove Community Childcare in relation to whether parental consent is necessary prior to making a referral about a concern that a child or adult may be at risk of being drawn into terrorism. It is good practice to seek the consent of the person, or for a very young children, the consent of their parent/carer prior to making a referral, but it is not a requirement to seek consent before referring concern regarding possible involvement in extremism or terrorism if it may put a child at risk, or if an offence may have or may be committed.

Advice should be sought from line managers and local agencies responsible for safeguarding, as to whether or not consent should be sought on a case-by-case basis. Designated Safeguarding Lead(s) (Childcare Manager/Deputy Manager) at Horns Drove Community Childcare should be mindful that discussions regarding potential referral due to concerns may be upsetting for the subject of the referral and their family. Initial advice regarding whether an incident meets a threshold for referral can be sought from the relevant local agency without specific details such as names of the family being given in certain circumstances.

Consent is required prior to any individual engaging with a Channel intervention. Consent is usually sought by Channel partners, but LSP procedures should be followed regarding this.

If there is a concern that a person is already involved in terrorist activity this must be reported to the Anti-Terrorist Hot Line 0800789 321 – Text/phone 0800 0324 539. Police can be contacted on 101.

Concerns about children affected by gang activity/serious youth violence

Educators at Horns Drove Community Childcare should be aware that children can be put at risk by gang activity, both through participation in and as victims of gang violence. Whilst very young children will be very unlikely to become involved in gang activity they may potentially be put at risk by the involvement of others in their household in gangs, such as an adult sibling or a parent/carer. The Designated Safeguarding Lead (Childcare Manager/Deputy Manager) at Horns Drove Community Childcare should be familiar with their LSP guidance and procedures in relation to safeguarding children affected by gang activity and ensure this is followed where relevant.

Forced marriage/Honour based violence

Educators at Horns Drove Community Childcare are aware that forced marriage is a marriage in which one or both spouses do not consent to the marriage but are forced into it and will act accordingly as detailed below. Duress can include physical, psychological, financial, sexual, and emotional pressure. In the cases of some vulnerable adults who lack the capacity to consent coercion is not required for a marriage to be forced. A forced marriage is distinct from an arranged marriage. An arranged marriage may have family involvement in arranging the marriages, but crucially the choice of whether to accept the arrangement remains with the prospective spouses.

Forced marriages became criminalised in 2014. There are also civil powers for example a Forced Marriage Protection Order to protect both children and adults at risk of forced marriage and offers protection for those who have already been forced into marriage.

Risks in relation to forced marriage are high and it is important that educators ensure that anyone at risk of forced marriage is not put in further danger. If someone is believed to be at risk it is helpful to get as much practical information as possible, bearing in mind the need for absolute discretion, information that can be helpful will include things like, names, addresses, passport numbers, national insurance numbers, details of travel arrangements dates and location of any proposed wedding, names and dates of birth of prospective spouses, details of where and with whom they may be staying etc. Forced marriage can be linked to honour-based violence, which includes assault, imprisonment, and murder. Honour based violence can be used to punish an individual for undermining what the family or community believes to be the correct code of behaviour.

In an emergency police should be contacted on 999.

Forced Marriage Unit can be contacted either by professionals or by potential victims seeking advice in relation to their concerns. The contact details are below.

- Telephone: +44 (0) 20 7008 0151
- Email: fmu@fco.gov.uk
- Email for outreach work: fmuoutreach@fco.gov.uk

Further guidance

Accident Record (Alliance Publication)

Multi- agency practice guidelines: Handling cases of Forced Marriage (HMG 2014)

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/322307/HMG

[MULTI AGENCY PRACTICE GUIDELINES v1 180614 FINAL.PDF](#)

[Creating a culture of safeguarding \(Alliance Publications\)](#)

Document

Date adopted	11 th February 2026
Date last reviewed	11 th February 2026
Date to be reviewed	10 th February 2027
Signed	Nikki Greenough
Name of signatory	Nikki Greenough
Role of signatory	Childcare Manager

Version	Changes	Date Adopted	Name
1.00		24 th September 2024	Michelle Overton
2.00	Reflect changes in EYA policy – 4 key commitments	16 th October 2024	Michelle Overton
3.00	Reflect changes in EYA updated policies November 2024	3 rd December 2024	Michelle Overton
3.01	Removed S D’Sousa and added J Judd as Designated Safeguarding Person	29 th July 2025	Michelle Overton
4.00	Reflect changes in EYA policy (July 2025) and updated list of DSLs and DSPs.	20 th October 2025	Michelle Overton
5.00	Updated list of DSLs and DSPs, signed by new Childcare Manager	11 th February 2026	Nikki Greenough