

# North Somerset **Safeguarding Procedure**

for Early Years and Play Providers



# North Somerset Safeguarding Procedure for Early Years and Play Providers

The aim of this booklet is to provide guidance on safeguarding and child protection matters for Early Years and Play Providers.

This booklet should be kept in your setting and be easily accessible to parents/carers, staff and visitors.

Prepared in consultation with Children's Social Care and approved by North Somerset Safeguarding Children Board.

This booklet gives advice and guidance for:

- Childminders and Home Childcarers
- Leaders and staff of:
  - Pre-schools
  - Day Nurseries
  - Out of School Provision
  - Holiday Schemes
  - Breakfast, Lunch and After School Clubs
  - Crèches operated by Voluntary, Private and Independent organisations
  - Personnel working in family resource or Children's Centres
  - Other private providers who choose to adopt these procedures
  - Open Access Play Settings.



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# Essential Contact Numbers

## Professional Guidance and Referrals:

- **North Somerset Children's Services:**  
Single Point of Access (SPA):  
01275 888 808
- **North Somerset Out of Hours Service:**  
01454 615165
- **Designated Officer for Allegations (DOFA):**  
01275 888 808
- **Emergency:** 999
- **Local police non-emergency number:** 101

## For General Guidance only:

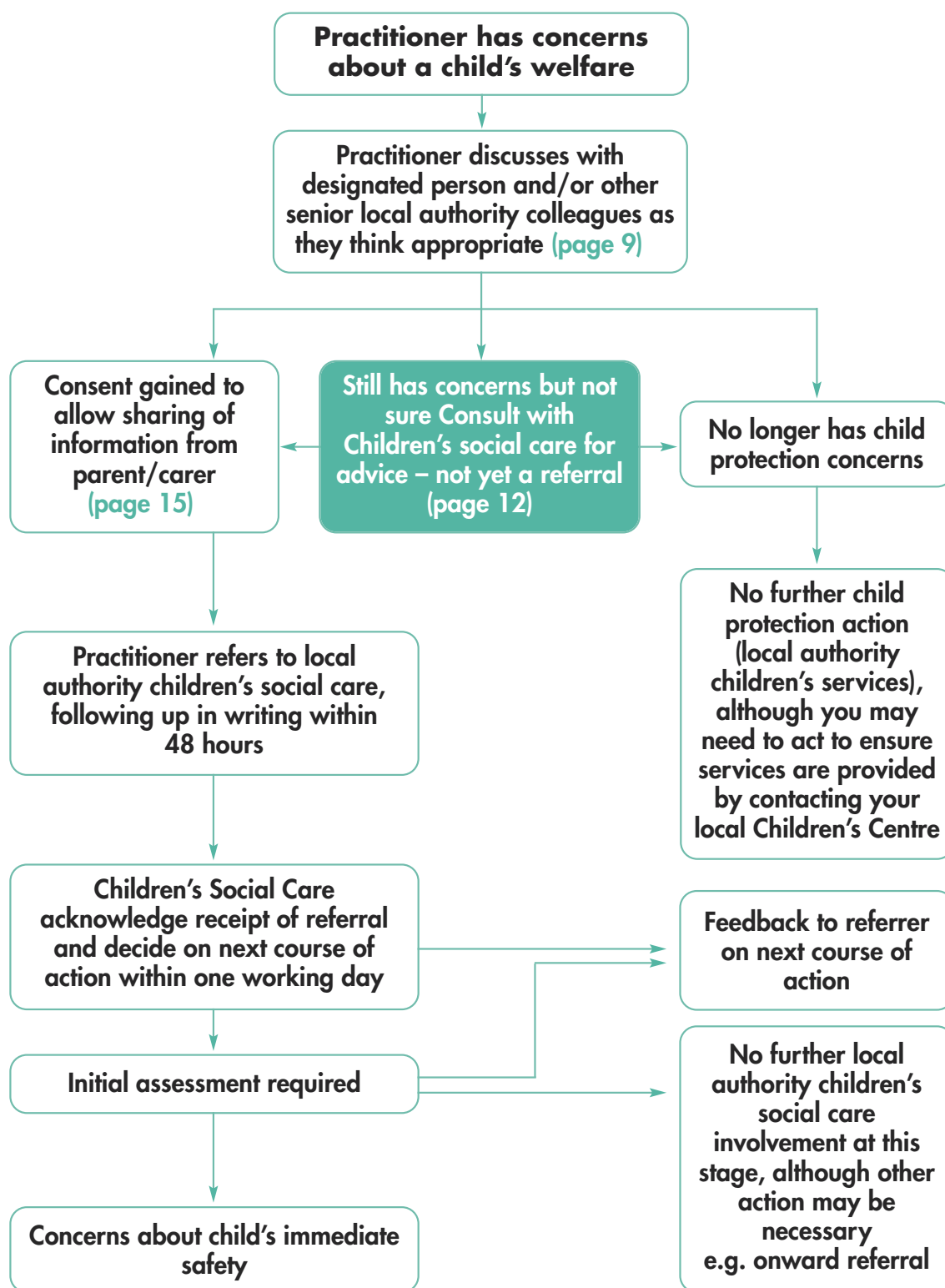
- **North Somerset Early Years Team:**  
Early Years Advisor – Safeguarding  
01275 884389 or 01275 888296  
Email: [early.years@n-somerset.gov.uk](mailto:early.years@n-somerset.gov.uk)

## Complaints to Ofsted

- **Ofsted**  
National Business Unit, Piccadilly Gate  
Store Street Manchester M1 2WD  
Telephone: 0300 123 1231  
Website: [www.ofsted.gov.uk](http://www.ofsted.gov.uk)



# Guidance for Early Years and Play Providers Referral Flowchart



# 1. Overview

## 1.1 Early Years and Childcare

The *Statutory Framework for the Early Years Foundation Stage* (DfE, 2017) sets out the safeguarding and welfare requirements that all registered childcare providers must adhere to.

**All providers must also have regard to the following statutory guidance:**

- *Working Together to Safeguard Children*, 2015
- *Prevent Duty Guidance for England and Wales*, 2015
- *What to do if you're worried a child is being abused: Advice for practitioners*, 2015
- *Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers*, 2015
- *Guidance for Safer Working Practice*, 2015

### 1.1.1 Child Protection

The *Statutory Framework for the Early Years Foundation Stage* provides the following information outlining settings' responsibilities regarding safeguarding and child protection:

- 3.4 Providers must be alert to any issues for concern in the child's life at home or elsewhere. Providers must have and implement a policy, and procedures, to safeguard children. These should be in line with the guidance and procedures of the relevant Local Safeguarding Children Board (LSCB). The safeguarding policy and procedures must include an explanation of the action to be taken in the event of an allegation being made against a member of staff, and cover the use of mobile phones and cameras in the setting.
- 3.5 A practitioner must be designated to take lead responsibility for safeguarding children in every setting. Childminders must take the lead responsibility themselves. The lead practitioner is responsible for liaison with local statutory children's services agencies, and with the LSCB. They must provide support, advice and guidance to any other staff on an ongoing basis, and on any specific safeguarding issue as required. The lead practitioner must attend a child protection training course\* that enables them to identify, understand and respond appropriately to signs of possible abuse and neglect (as described at paragraph 3.6).

\* *Taking account of any advice from the North Somerset Safeguarding Children Board on appropriate training courses.*



- 3.6 Providers must train all staff to understand their safeguarding policy and procedures, and ensure that all staff have up to date knowledge of safeguarding issues. Training made available by the provider must enable staff to identify signs of possible abuse and neglect at the earliest opportunity, and to respond in a timely and appropriate way. These may include:
- significant changes in children's behaviour;
  - deterioration in children's general well-being;
  - unexplained bruising, marks or signs of possible abuse or neglect;
  - children's comments which give cause for concern;
  - any reasons to suspect neglect or abuse outside the setting, for example in the child's home; and/or
  - inappropriate behaviour displayed by other members of staff, or any other person working with the children. For example, inappropriate sexual comments; excessive one-to-one attention beyond the requirements of their usual role and responsibilities; or inappropriate sharing of images.

Providers may also find the *What to do if you're worried a child is being abused: Advice for practitioners* document helpful.

- 3.7 Providers must have regard to the government's statutory guidance *Working Together to Safeguard Children* and to the *Prevent duty guidance for England and Wales*. All schools are required to have regard to the government's *Keeping Children Safe in Education* statutory guidance. If providers have concerns about children's safety or welfare, they must notify agencies with statutory responsibilities without delay. This means the local children's social care services and, in emergencies, the police.
- 3.8 Registered providers must inform Ofsted of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere). Registered providers must also notify Ofsted of the action taken in respect of the allegations. These notifications must be made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made. A registered provider who, without reasonable excuse, fails to comply with this requirement, commits an offence.

*Working Together to Safeguard Children* identifies two key principles that underpin effective safeguarding:

- **Safeguarding is everyone's responsibility**  
For services to be effective each professional and organization should play their full part.
- **A child-centred approach**  
For services to be effective they should be based on a clear understanding of the needs and views of children.

### 1.1.2 Protecting children is important

Everyone who works with children and young people has a significant role in both the prevention of abuse and the protection of children from abuse.

Information about the signs and symptoms of abuse can be found later in this guidance but such information is rarely comprehensive and on occasions can be misleading. If you have a suspicion that a child you care for is being harmed, or is at risk of being harmed, follow the guidance in this booklet.

For some children, the provision at your childcare setting will be essential in providing opportunities for them to achieve their developmental milestones and to potentially reduce some of the stresses within their family as part of a plan that promotes and/or safeguards the child's welfare.

All children, whatever age, are vulnerable. They may need you to act on their behalf, by contacting appropriate agencies and by providing relevant information towards prompting an assessment to identify the child's needs.

Everyone working with children should be alert to signs of abuse and neglect, and should know to whom they should refer concerns or suspicions. Through day to day contact with children, and direct work with families, everyone working with children has a crucial role to play in noticing indicators of possible abuse or neglect and is well placed to give a view on the impact of intervention on the child's care and development.

Everyone working in childcare settings must keep themselves updated on child protection issues and procedures by accessing appropriate advice and training.

Each Early Years provider has the responsibility to ensure that:

- There is a child protection procedure in place and that it is in accordance with the North Somerset Safeguarding Children Board procedures.
- In group childcare settings, a senior member of staff is assigned as the 'Designated Person for Child Protection'.
- A member of the management committee is nominated to be responsible for liaising with the designated person over child protection matters

The Management committee should exercise their child protection responsibilities where:

- Allegations are made against a senior member of staff.
- A disciplinary action against a member of staff is necessary following a child protection investigation.
- An investigation of any complaint on noncompliance with child protection procedures is necessary.
- To ensure that appropriate checks are made on all new staff and any volunteers who may have unsupervised access to children.
- To ensure that the EYFS specific legal requirements under Safeguarding are followed.

*NB The responsibility for investigating suspected cases of abuse lies with Children's Social Care and the Police. In the event of an allegation against a member of staff, the management is responsible for liaising closely with the Designated Officer for Allegations (DOFA), Children's Social Care and the Police, including at strategy meetings when called.*

### 1.1.3 Designated Person

The designated person has a specific responsibility for coordination of child protection procedures within the setting and for liaison with Children's Social Care, and other agencies - Police, Health Service and Education Welfare Service. All staff need to be aware of who the Designated Person is, as all cases of suspected child abuse should be referred to him/her in the first instance.

The Designated Person must have appropriate, up to date training and should know and understand:

- How to identify and understand the signs and symptoms of abuse and when to make a referral.
- The role and responsibilities of the investigative agencies and how to liaise with them.
- The requirements of record keeping and sharing.

In addition, the Designated Person should:

- Ensure all relevant information about a child is disseminated to appropriate staff within the setting on a need to know basis and with regard to the child/family's right of confidentiality.
- Ensure that attendance, welfare and development of children whose names are on the Child Protection Register are monitored and inform the child's social worker promptly of any cause for concern.
- Liaise with the Inclusion Coordinator (INCCO) to identify children with special educational needs.



# 2 Procedures

## 2.1 Procedures for managing allegations of abuse by a member of staff or management

### General advice

All allegations of abuse of children by a professional or other staff member must be taken seriously. It is important that early action to establish the nature of the allegation should be undertaken in such a way that it does not prejudice any subsequent investigation by the Designated Officer for Allegations (DOFA) or the Police. There must be no interference with evidence.

Any staff who hear an allegation of abuse against another member of staff or management must refer the matter immediately to the Designated Person, unless that is the person against whom the allegation has been made. In which case the member of staff should refer to your 'Whistle Blowing Policy' to make a decision about who to refer the allegation to.

Allegations against members of staff must always be referred to the DOFA in the first instance. If this is not practical, or the child is at risk of significant harm and in need of protection, contact Children's Social Care.



## 2.2 If you have concerns about a child's welfare

The key task is to work together to understand the child's world and use this information to promote their welfare. This should be the guiding principle in deciding which service is best placed to respond. Rather than looking for reasons why a service should or should not be offered, first think about what is needed, why people are worried, and what this means.

Often referrers benefit from the experience of simply talking the situation through with others working with the child, or with an experienced social worker, so that they can be confident about what to do next.

### 2.2.1 Discuss with Designated Person

If you are worried about a child you should talk to the Designated Person within your own setting. This will probably be your line manager, though it could be another adult with child protection responsibility. Share your concerns and discuss any differences of opinion.

## 2.2.2 What to discuss

The following questions will help you and your manager decide what to do next:

- What is your concern?
- How long have you been concerned?
- Who else has concerns?
- What do you think could be happening to the child?
- List a range of possible things that could be happening, rather than jumping to one conclusion. How could you find out whether each of these possibilities is true?
- What information do you have already?
- What have you already done to address your concerns?
- Have you discussed your concerns with the parents and the child or young person?
  - If yes, what did they say?
  - If no, why not?
- What would be the possible impact on the child?
- Your manager should question you about the reasons for your concerns.

It may help to look at the supplementary guidance on signs and symptoms of possible child abuse, which can be found within the document *What to do if you're worried a child is being abused: Advice for practitioners* and includes information about the following:

- Physical abuse
- Emotional abuse
- Sexual abuse and exploitation
- Neglect

### Physical abuse

**Some of the following signs may be indicators of physical abuse:**

- Children with frequent injuries;
- Children with unexplained or unusual fractures or broken bones;
- Children with unexplained: bruises or cuts; burns or scalds; or bite marks.

### Emotional abuse

**Some of the following signs may be indicators of emotional abuse:**

- Children who are excessively withdrawn, fearful, or anxious about doing something wrong;
- Parents or carers who withdraw their attention from their child, giving the child the 'cold shoulder';
- Parents or carers blaming their problems on their child;
- Parents or carers who humiliate their child, for example, by name-calling or making negative comparisons.

## Sexual abuse

### **Some of the following signs may be indicators of sexual abuse:**

- Children who display knowledge or interest in sexual acts inappropriate to their age;
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have;
- Children who ask others to behave sexually or play sexual games;
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections.

## Neglect

### **Some of the following signs may be indicators of neglect:**

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care;
- Parents who fail to seek medical treatment when their children are ill or are injured.

## 2.3 'No-names' Consultation with Children's Social Care – prior to referral

### **If you still have concerns**

If you still have concerns but are not sure what action to take, you (or the Designated Person) could contact Children's Social Care for a formal consultation (without mentioning the child's name). This consultation process is designed to assist you to make a decision about whether to refer a child to Children's Social Care. At this stage you will not have gained the consent of the parents so the process relies on the child's details remaining confidential and not shared.

You should do this by telephone. Contact the Single Point of Access (SPA) number on 01275 888 808.

As a result of the consultation you will be advised to either:

- Make a formal referral of child protection concern.
- Gain consent from the parents to make a child in need referral.
- Undertake further work such as contacting another agency such as a Children's Centre.
- Seek further information.

Your consultation advice will be noted and a record sent to you within 48 hours. The consultation will be given an identifying reference number which can be used for any further consultations or referrals.

## 2.4 Sharing Information about Children

*Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (March 2015)* gives clear advice to support practitioners in the decisions they take when sharing information to reduce the risk of harm to children and young people.

### 2.4.1 Seven key points about information sharing

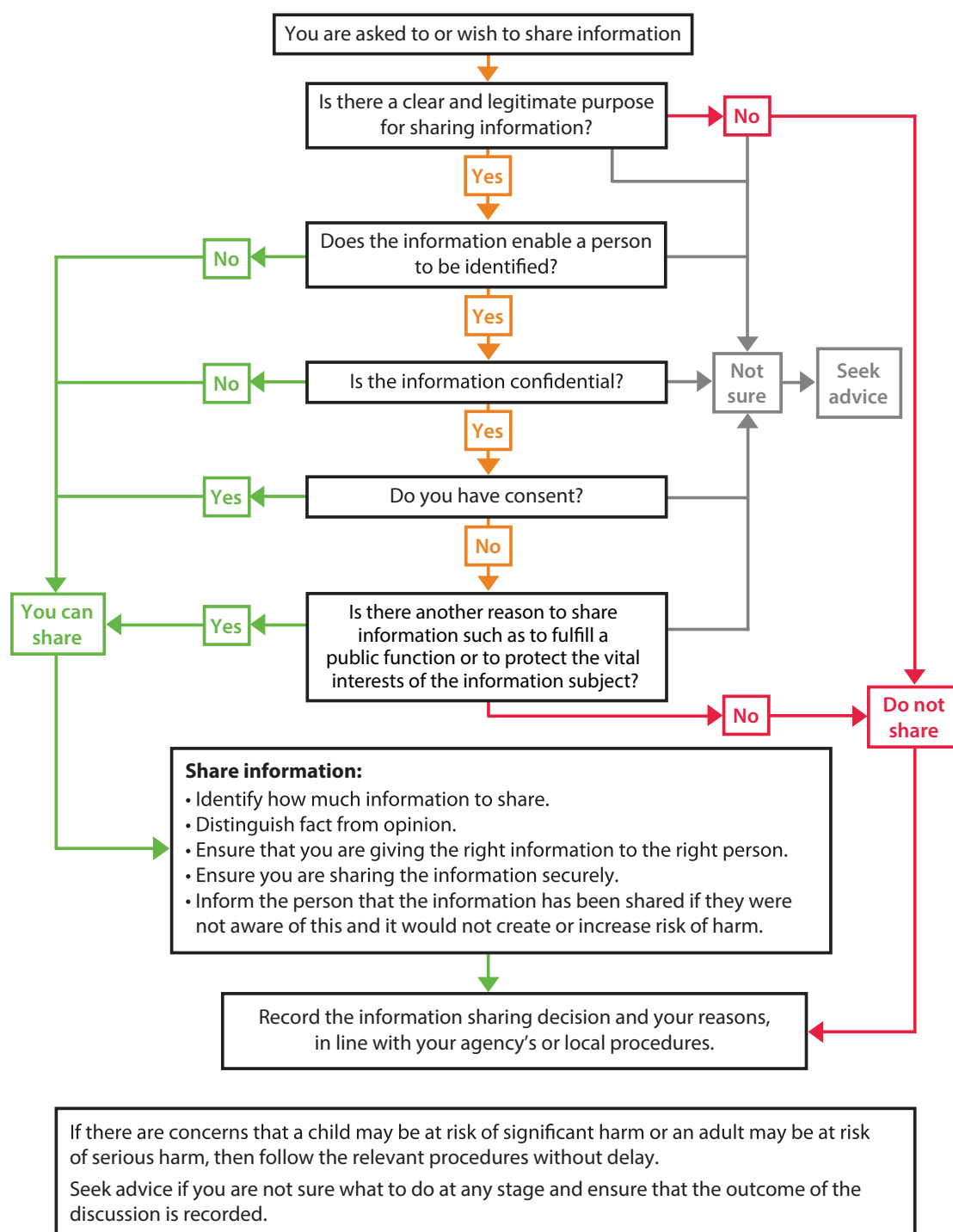
1. Remember that the Data Protection Act 1998 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4. Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be certain of the basis upon which you are doing so. Where you have consent, be mindful that an individual might not expect information to be shared.
5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

### 2.4.2 The importance of weighing up information

The decision about sharing information is not a simple yes or no decision but depends upon a number of factors.

- How at risk is the child?
- Is the risk imminent?
- How much safer will the child be if the information is shared?
- Will the relationship between professionals and the family be so damaged by sharing information against their wishes that it may be better to not share?
- Does the information need to be shared now? Could it wait until the family have changed their mind about agreement?
- Sometimes you will not be able to answer the questions above. In this case it is best to contact one professional and share information with them.

## 2.5 Flowchart of key questions for information sharing



Extract from HM Government Information Sharing: Guidance for practitioners and managers.

## 2.6 Consent

Whatever the nature of your concern, it is important that you are open and honest with both the parents and the child. In general, you should discuss matters with them before taking any action. You should explain openly and honestly what, how and why information will be shared. Sometimes you may think that the risk to the child is so great that it is better to contact Children's Social Care without informing the child and family. **This is where you judge there could be an immediate risk of harm to a child or adult. In this case you should discuss the best way forward with Children's Social Care.**

### 2.6.1 Understanding Consent

Consent must be informed which means that the person who has given consent understands:

- What will happen to the information
- Who will be told what.
- Who they will then tell.
- Why people are being told the information.

### 2.6.2 Communication

Although there is a lot of guidance about sharing information there is very little about communication; the process by which information is shared. The following tips may be helpful:

- Communicate effectively with other practitioners and professional by listening and ensuring that you are being listened to.
- Appreciate that others may not have the same understanding of professional terms and may interpret abbreviations such as acronyms differently.
- Be able to use clear language to communicate information unambiguously to others.
- Listen carefully to what is said and check understanding.
- Know that inference or interpretation can result in a difference between what is said and what is understood.

## 2.7 Making a referral to Children's Social Care

### 2.7.1 How to make a referral

Most children's needs are met by universal services such as Early Years settings, health visitors, schools or GPs. If you believe that a child's needs cannot be met by these universal services or additional family support, you should be concerned. You will then need to assess your level of concern, because this will determine how quickly you should make a referral and who to.

This section assumes that you are concerned enough about a child to want to make a referral to Children's Social Care, because you think they will be best placed to help.

### 2.7.2 Key Points

You should do this by telephone. Contact the Single Point of Access (SPA) number on 01275 888 808 and follow up by submitting the written referral form that will be sent to you.

Children's Social Care will want to decide with you whether:

- This is a child protection case requiring a strategy discussion, a core assessment or an initial assessment.
- You need to continue to monitor the situation.

It will help if you consider:

- Why you think the time is right to discuss the matter with Children's Social Care.
- What information you can give them about:
- The child's developmental needs and any concerns that you may have
- Parenting capacity and any work that you have already done with the family
- Social, environmental and historical factors
- How you will remain involved with the family
- Whether the parents know that you are making this referral
- Whether parents agree to you making this referral
- What you want Children's Social Care to do.

It is important that you make your referral as soon as you have decided that this is the best course of action.

At the end of any discussion about a child, the referrer and the social worker must be clear about what the proposed actions are, who will undertake them and what the timescale is;

or alternatively that no further action will be taken. The decision should be recorded by both the person making the referral and the worker in Children's Social Care.

Sometimes Children's Social Care may be unable to get involved. This could be because the situation is not serious enough, or because there is not yet enough information. In this case, you should continue to follow up your concerns, working with the family and collecting further information. Do not stop until you are sure that the child's needs are being met or that there is no need to be concerned.

## 2.8 Early Help and Early Help Assessment

Early Help means providing support as soon as a problem emerges at any point in a child's life.

The Early Help Assessment is one of the tools and processes which help practitioners to assess and address the needs of a child and coordinate the offer of support for them and the family. It aims to help identify, at the earliest opportunity, a child's additional multiple needs which are not able to be met by a single agency and to provide timely and co-ordinated multi-agency support to meet those needs.

The Assessment also aims to enable and support good practice in information sharing about the needs of children as part of preventative services.

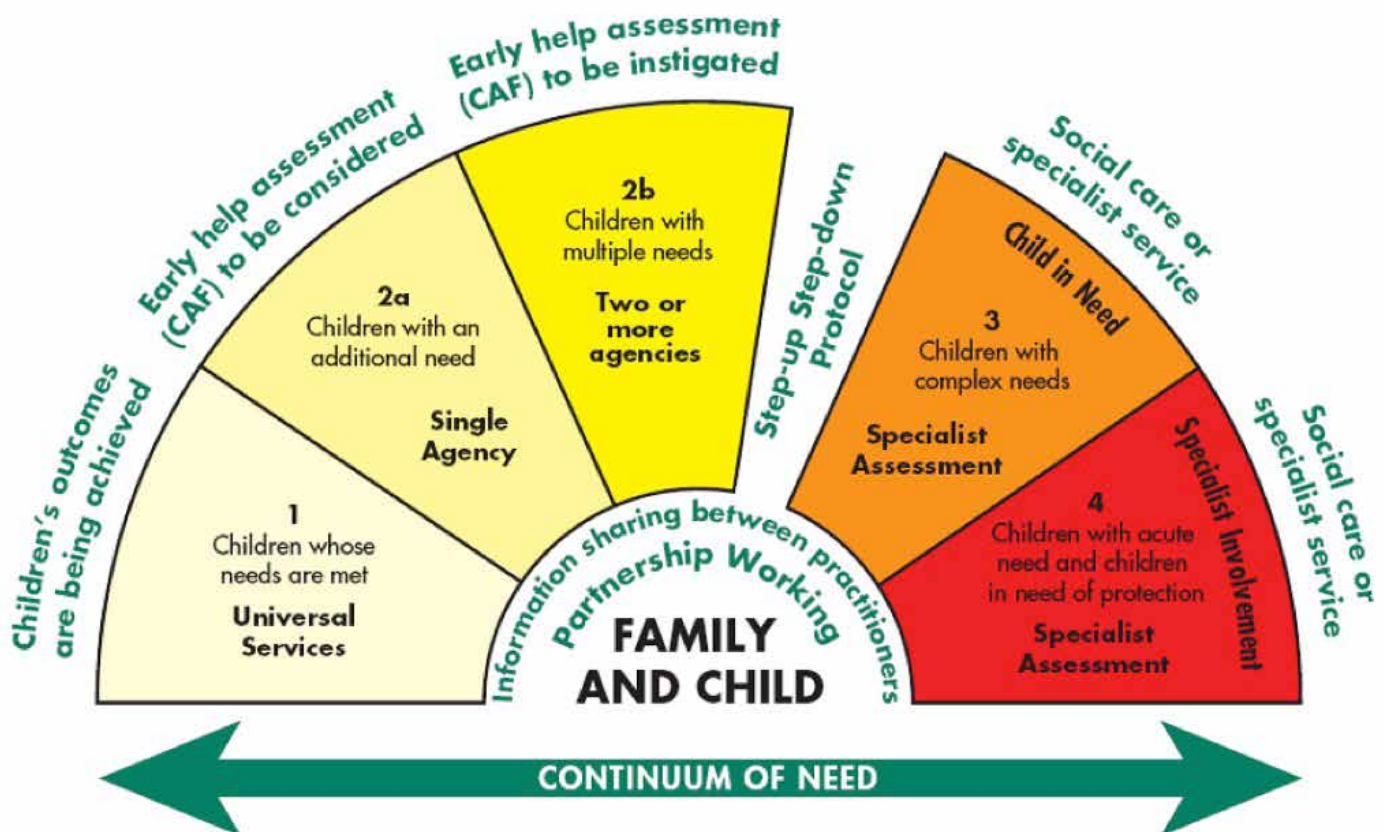
Early Help assessments normally happen when a child or young person would benefit from some additional help – either because their needs have become more complex or because the needs are more than can be met by one agency.

This information can be found within the *NSSCB Threshold Guidance 2017* document see 2a and 2b.

This will be where:

- Children have a multiple range of needs
- Children whose health, social development or educational attainment may be impaired without support
- Children who are vulnerable and living with considerable adversity
- There is a clear need for a co-ordinated multi-agency response.

It could be that the parent requests this or that a professional working with the child suggests that extra help may be useful. The earlier an Early Help Assessment is completed, the sooner extra support can be explored. The assessment can only be carried out with parental agreement.



## 2.9 Good Practice

### 2.9.1 Recording

You are required to keep a record of the observations of both the achievements and any concerns about the children in your care. Always keep a record of the observations that you make, particularly in the case of a gradual build up to a concern, noting the date and time, including any conversation you may have with a parent or other significant person. This will ensure that you will be able to pass on the information accurately during conversations with Children's Social Care and when you are completing the referral form.

Parents/Carers should be made aware that records will be kept on every child in your care, of their entitlement to view that record, and of the possibility that the information in that record may be shared with other professionals.

These records should be kept in a safe and secure location until you are able to destroy the record confidentially in the timescales identified in the registration requirements of the provision.

### 2.9.2 Relationships with Parents/Carers

Developing an open and honest relationship with the parents/carers of a child placed in your care and agreeing clear expectations at the outset will enable them to understand your wish to provide high quality care for their child, including making observations. Developing an open and honest approach will help the parent/carer to be involved in discussions about making a referral to Children's Social Care, to participate in the assessment process and to work in partnership to agree and receive services to meet the needs of their child and family.

Telling the parent/carer that you are going to refer your concern (or, in the case of an emergency, that you have referred your concern) to the Children's Social Care Department can be difficult, especially if you have a close relationship with the child's parent/carer. Remind them of the Registration requirements of the provision. These should clearly identify the expectations to adhere to the North Somerset Safeguarding Children Board's approved Child Protection Procedure. The child, especially a baby or a small child, is very vulnerable. In many incidents, parents, particularly young parents, need help with the many problems inherent in bringing up children. The injury, which you have found, may represent very vividly the parents'/carers' need for help. Consider if domestic abuse may be a factor in the parents'/carers' relationship and be sensitive to sharing information with both parents/carers if one may be abusive. Your telephone call to the Children's Social Care Department will be the means by which that help is arranged.

Tell the parents/carers that you are concerned. Say that injuries to children, particularly small children, must be investigated. Say that there is a procedure that you must follow. Tell the parent/carer that the procedure is designed to provide protection for children and help to parents/carers.





### 2.9.3 Prevent Duty

Schools and Early Years settings are required to have 'due regard to the need to prevent people from being drawn into terrorism'. This is called the *Prevent* duty which relates to the Counter Terrorism and Security Act 2015.

*Prevent* is part of the Government's counter terrorism strategy. Its aim is to stop people from becoming terrorists or supporting terrorism in all its forms, domestic or international.

Protecting children from the risk of radicalisation should be seen as part of a setting's wider safeguarding duties, and is similar in nature to protecting children from other harms (e.g. abuse, neglect, sexual exploitation), whether they come from within their family or are the product of outside influences.

Settings must have clear procedures in place to safeguard children that includes protecting children at risk of radicalisation.

Staff should be alert to the signs that a child is becoming radicalised and inform the Designated Person without delay of any child or young person they are concerned about.

### 2.9.4 Female Genital Mutilation (FGM)

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.

Childcare settings have a statutory responsibility to report where they believe that girls have received or could be at risk of FGM.

# Appendix 1

## North Somerset Early Years Team Complaints Procedure (for dealing with allegations and complaints about Childcare Providers)

All complaints relating to any childcare provider will be taken seriously and processed according to North Somerset Early Years Team Complaints Procedure for dealing with allegations and complaints about Childcare Providers.

North Somerset Council has a Designated Officer for Allegations who is responsible for any allegations in respect of all cases in which it is alleged that a person who works with children has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child or;
- behaved towards a child or children in a way that indicates she/he is unsuitable to work with children.

### Use of this Procedure

This Procedure is to be used by the Early Years Team in relation to allegations and complaints made against childcare settings in the Private, Voluntary and Independent (PVI) sectors.

### Non-Council childcare settings – employment issues

For related employment issues in non-council childcare settings, including staff grievances, the setting manager, members of staff or designated committee officer must be referred to ACAS (Arbitration, Conciliation and Advice Service), the Pre-school Learning Alliance, the National Day Nurseries Association or the Professional Association for Childcare and Early Years (PACEY) as appropriate.

### Early Years Team Complaints Procedure

The following procedures must be followed in order to ensure all complaints are dealt with fairly.

- Ofsted are the monitoring body for Early Years and Childcare settings. Any information or concern that a provider is not meeting the requirements of their registration must be forwarded by the Early Years Team to Ofsted.
- If a complaint is received by any member of the Early Years Team, it will be referred to the Lead Advisor for Safeguarding within the Early Years Team who will reply within two working days to the complainant.
- All complaints/allegations will be recorded.
- The Lead Advisor for Safeguarding will contact the Early Years or Childcare setting and will give details of the complaint to the owner/manager. The setting will be advised of actions that North Somerset are required to make.
- All staff will deal with complaints in a professional and responsible manner.

# Appendix 2

## Body Maps

Body Maps should be used to document and illustrate visible signs of harm and physical injuries.

Do not remove clothing for the purpose of the examination unless the injury site is freely available because of treatment.

**\* At no time should an individual take photographic evidence of any injuries or marks to a child's person, the body map below should be used. Any concerns should be reported and recorded without delay to the appropriate safeguarding services, e.g. Children's Social Care direct or child's social worker if already an open case to social care.**

**When you notice an injury to a child, try to record the following information in respect of each mark identified e.g. red areas, swelling, bruising, cuts, lacerations and wounds, scalds and burns:**

- Exact site of injury on the body, e.g. upper outer arm/left cheek.
- Size of injury - in appropriate centimetres or inches.
- Approximate shape of injury, e.g. round/square or straight line.
- Colour of injury - if more than one colour, say so.
- Is the skin broken?
- Is there any swelling at the site of the injury, or elsewhere?
- Is there a scab/any blistering/any bleeding?
- Is the injury clean or is there grit/fluff etc.?
- Is mobility restricted as a result of the injury?
- Does the site of the injury feel hot?
- Does the child feel hot?
- Does the child feel pain?
- Has the child's body shape changed/are they holding themselves differently?
- Importantly the date and time of the recording must be stated as well as the name and designation of the person making the record. Add any further comments as required.



**Ensure First Aid is provided where required and record**

A copy of the body map should be kept on the child's concern/confidential file.

## Body Map – (This must be completed at time of observation)

Name of Child:

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Date of Birth:

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Name of Staff:

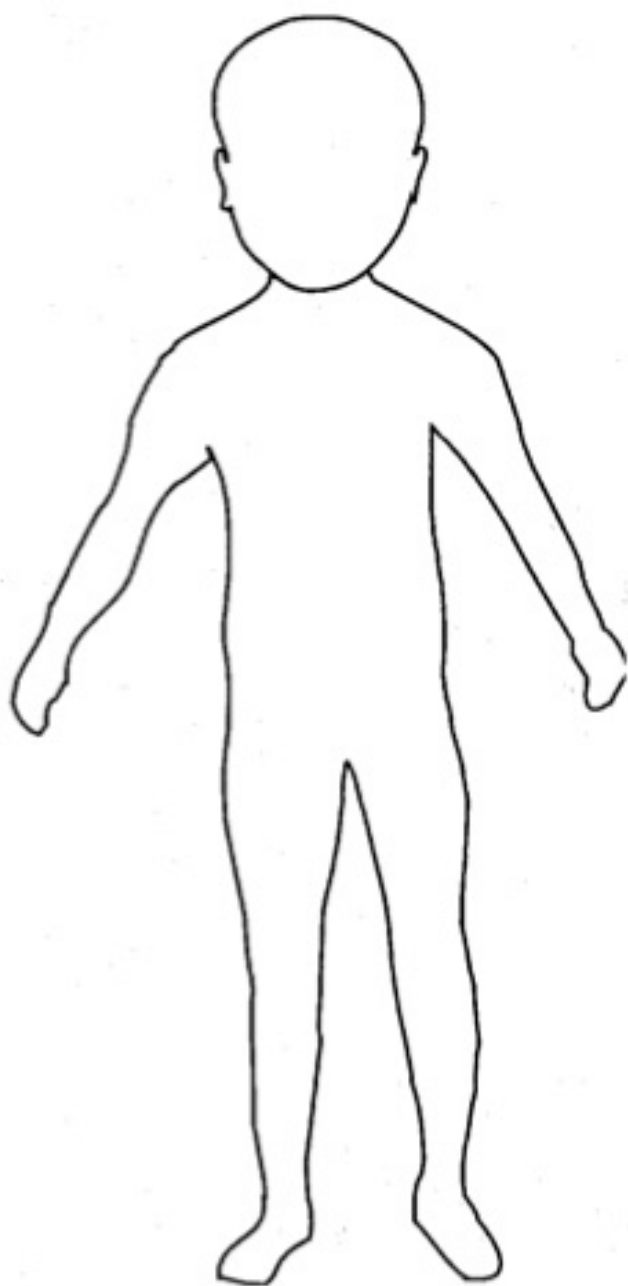
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Job title:

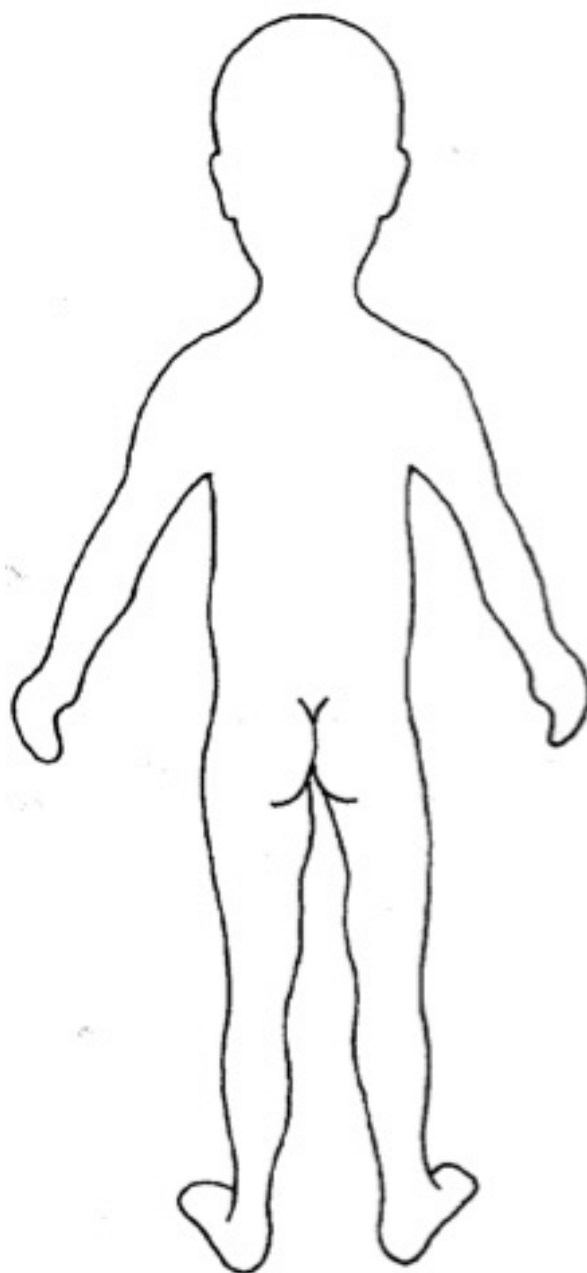
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Date and time of observation:

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Front



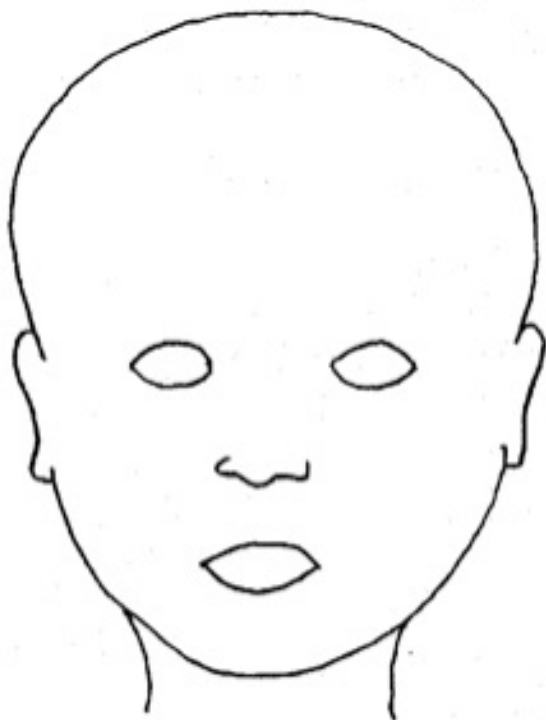
Back

Name of Child:

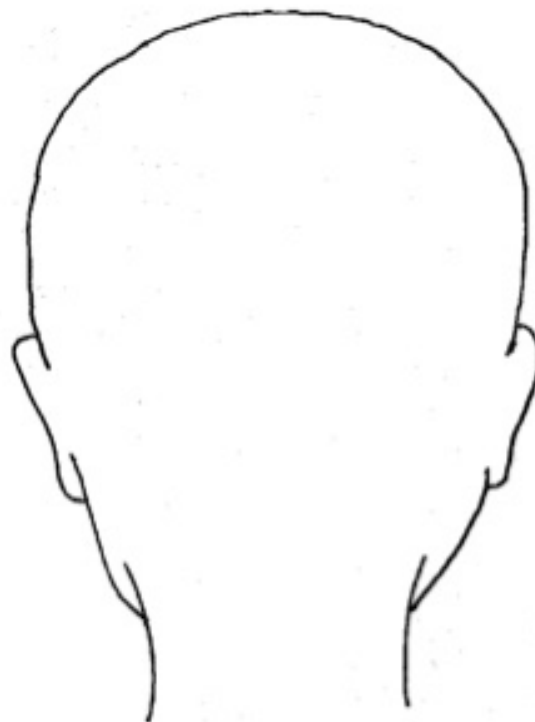
---

Date and time of observation:

---



Front



Back



Right



Left

Name of Child:

---

Date and time of observation:

---



Right

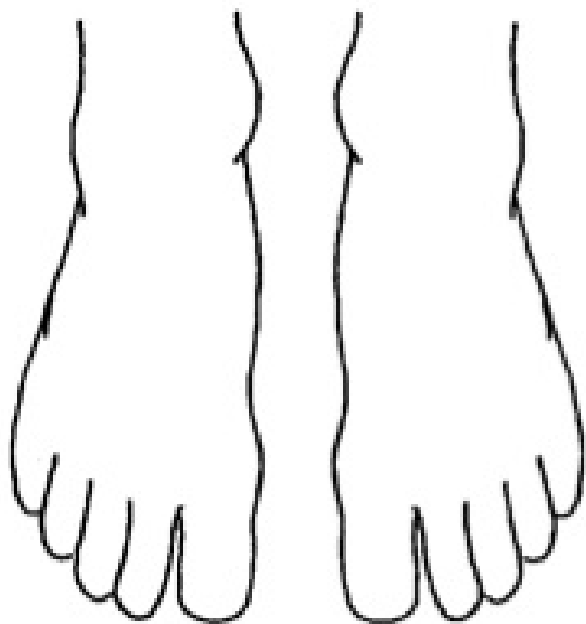


Left



Name of Child:

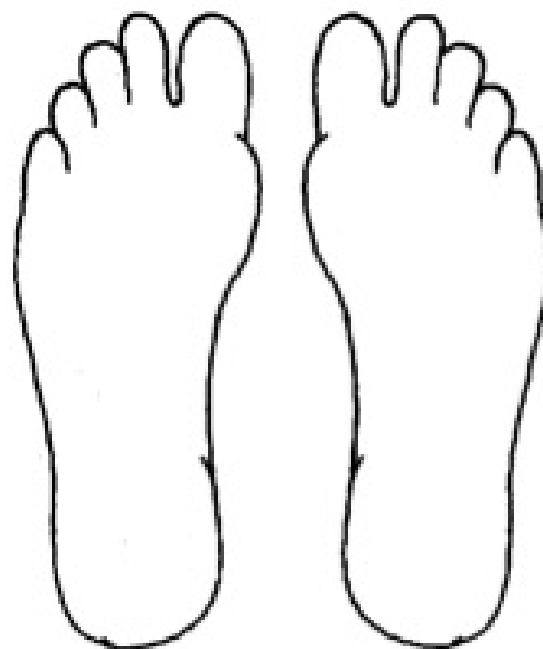
Date and time of observation:



Right

Top

Left



Right

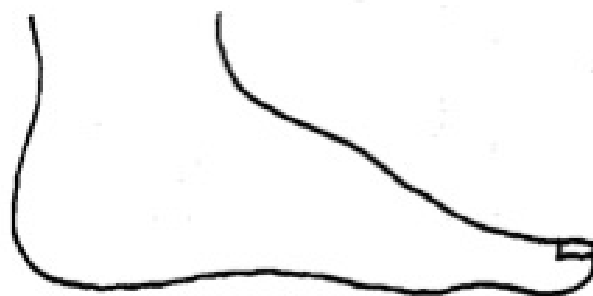
Bottom

Left



Right

Inner



Left



Right

Outer



Left

Print name:

Signature and Job title of staff:

# Appendix 3

## Useful Links:

### **Revised Prevent Duty Guidance 2015**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/445977/3799\\_Revised\\_Prevent\\_Duty\\_Guidance\\_England\\_Wales\\_V2-Interactive.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/445977/3799_Revised_Prevent_Duty_Guidance_England_Wales_V2-Interactive.pdf)

### **Mandatory reporting of female genital mutilation procedural information**

<https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information>

### **Working Together to Safeguard Children**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/592101/Working\\_Together\\_to\\_Safeguard\\_Children\\_20170213.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/592101/Working_Together_to_Safeguard_Children_20170213.pdf)

### **Ofsted – Inspecting safeguarding in Early Years, Education and Skills**

<https://www.gov.uk/government/publications/inspecting-safeguarding-in-early-years-education-and-skills-from-september-2015>

### **Information Sharing**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419628/Information\\_sharing\\_advice\\_safeguarding\\_practitioners.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419628/Information_sharing_advice_safeguarding_practitioners.pdf)

### **Guidance for Safer Working Practice**

<http://www.northsomersetlscb.org.uk/uploads/files/890.pdf>

### **What to do if you suspect a child is being abused**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419604/What\\_to\\_do\\_if\\_you\\_re\\_worried\\_a\\_child\\_is\\_being\\_abused.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

### **Keeping children safe in education 2016**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/550511/Keeping\\_children\\_safe\\_in\\_education.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550511/Keeping_children_safe_in_education.pdf)

### **North Somerset Safeguarding Children Board**

<http://www.northsomersetlscb.org.uk/>

# Appendix 4

*Please photocopy this form*

## Safeguarding Procedures – staff briefing record

Setting:

---

Designated Person:

---

Please ensure that all staff have been informed/updated on the contents of this booklet and have signed below.

We have been informed who the designated person is within the setting and are aware of the location of the Safeguarding Procedures – staff briefing record.

| No. | Name (BLOCK CAPITALS) | Signature | Date |
|-----|-----------------------|-----------|------|
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|     |                       |           |      |

Council documents can be made available in large print, audio, easy read and other formats. Documents on our website can also be emailed to you as plain text files.

Help is also available for people who require council information in languages other than English.

For more information contact: **01934 888 808** or  
**[early.years@n-somerset.gov.uk](mailto:early.years@n-somerset.gov.uk)**

