



Safeguarding Policy

Safeguarding is everyone's responsibility, as a nursery we ensure all staff are trained appropriately and made aware of any significant changes. staff should work to achieve the best possible outcome by following protocol and working closely alongside the nursery's Designated Safeguarding Lead.

The aims of this policy are:

- To provide staff and families with relevant and current information that can be used to further their knowledge and understanding.
- To have a sound understanding of the settings policy & procedures when raising a concern about a child or making an allegation against a member of staff.
- To ensure consistent good practice across the nursery.
- To demonstrate our commitment to protecting children and their families.

Policy Statement:

Safeguarding determines the actions that we take to keep children safe and protect them from harm in all aspects of their nursery life. As a nursery, we are committed to safeguarding and promoting the welfare of all of our children, staff and visitors.

The actions that we take to prevent harm; to promote wellbeing; to create safe environments; to educate on rights, respect and responsibilities; to respond to specific issues and vulnerabilities all form part of the safeguarding responsibilities of the nursery.

All children deserve the opportunity to achieve their full potential. We follow the framework of the 'Every Child Matters' government green paper which is structured around five outcomes which are key to a child's well-being.

The five outcomes are:

- **Stay safe** – looking after the children's welfare and ensuring a safe environment
- **Be healthy** – safeguarding and promoting children's health and well-being
- **Enjoy and achieve** – supporting the children in their learning and development
- **Make a positive contribution** – working together with parents and encouraging children to play a beneficial part in their nursery and wider community
- **Organisation** – ensuring all government policies, procedures and practices are strictly followed

Areas of Safeguarding

Definitions

Safeguarding: *'is defined in the Children Act 2004 as protecting from maltreatment; preventing impairment of health and development; ensuring that children grow up with*

the provision of safe and effective care; and work in a way that gives the best life chances and transition to adult hood.’ Our safeguarding practice applies to every child.’

Staff applies to all those working for or on behalf of the nursery, full time or part time, in either a paid or voluntary capacity. This also includes parents.

Child refers to all young people who have not yet reached their 18th birthday.

Parent refers to birth parents or other adults in a parenting role for example adoptive parents, guardians, step parents and foster carers.

‘Keeping children safe in education’, Department for Education, 2018;
www.gov.uk/government/publications/keeping-children-safe-in-education--

‘Working together to safeguard children’, Department for Education, 2015;
www.gov.uk/government/publications/working-together-to-safeguard-children--

‘Prevent duty guidance’, Home Office, 2015;
www.gov.uk/government/publications/prevent-dutyguidance.

‘The prevent duty: for schools and childcare providers’, Department for Education, 2015;
www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty.
www.preventforfeandtraining.org.uk.

Education (Independent School Standards) Regulations 2014;
www.legislation.gov.uk/uksi/2014/3283/contents/made.

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Key contacts

The Designated Safeguarding lead for Wickham Montessori is:

Ashley Pitt

Tel: 07821 892 141

The Deputy Designated Safeguarding officer for Wickham Montessori is:

Evie Jefferies

Tel: 0777 1855 777

In the case that concerns need to be raised please call the numbers provided at anytime, or, if during school hours there will be someone in the school upstairs to the office. We hold an open door policy and are always available.

All immediate safeguarding concerns about a child should be made to the **Designated Safeguarding Lead**, this will then be passed on initially by telephone to the Children's Services Professional Helpline

Tel: 01329 225 375

The Inter Agency Referral Form should be completed and on hand, please click for a direct link to the form below

Inter Agency Referral form for Hampshire Childrens Services

Allegations made against an adult should be discussed with the **Designated Safeguarding Lead**.

Make a statement stating your concerns as soon as possible

This will then be passed onto the LADO, Mark Blackwell

Tel: 01962 876 364

Please note that if you feel you are unable to tell either the Designated Safeguarding lead or the Deputy Safeguarding officer, you will need to follow these steps and report your concern or allegation directly to the organisations above.

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Tel: 0300 123 1231

Health and Safety officer

Claire Stones

01329 609061

Wickham Montessori owner

Elizabeth Freemantle

Tel: 0737 740 5622

Stay Safe

We ensure the safety and security of the premises and equipment by the following means:

- All gates are locked at all times.
- Doors are kept locked to prevent intrusion or children leaving the premises.
- Visitors and volunteers entering must sign in and out in the visitors book.
- Children are only allowed home with adults/carers with parental responsibility or permission being given.
- All children arriving and leaving must have the times recorded for out and in.
- Empty classrooms have windows closed
- A member of staff will open and close the door after every parent.
- All equipment used is suitable and safe for the children.
- All toys and equipment are checked regularly for safety.
- All electrical equipment is 'PAT' tested by a qualified electrician hired by the School.
- Risk assessments are carried out in the morning, through out the day and on closing.
- A comprehensive fire risk assessment is in place.
- A risk assessment for all new and current activities is carried out by the staff. They will balance educational gains of an activity against any potential risks.

The safety of the children is maintained in the following ways:

- All children must be signed in on arrival and signed out when they leave.
- Children are checked in and out from the outdoor play area which ensures that a child is never left unattended. - There is a board for the garden to write numbers and an outings book to monitor the children's departure and return on any outings when leaving the school building .
- The use of mobile phones is prohibited in the nursery during session times.
- We have strict guidelines to control the administration of medication.
- We aim to have all staff paediatric first aid trained. A minimum of 2 first aid staff will be on the premises at all times.
- Infection control measures are in place and hand cleaning procedures are in place prior to eating.
- All staff are inducted prior to working with the children and recruited as per the guidelines set out in our Safer recruitment policy
- Staff are knowledgeable and trained to follow the staff code of conduct
- All Policies and Procedures are monitored and reviewed as and when required at least annually.
- All staff receive regular safeguarding training

Enjoy & Achieve:

We create an environment that is suitable for learning. Each child is assigned a Key Person who is responsible for their planning and developmental assessments. We support the children in their learning through active play and exploration by observing and assessing them and encouraging their creative thinking.

Make a Positive Contribution

We work together with parents to ensure children's individual needs are met. Social inclusion is promoted and children are encouraged to behave in a respectful way to others around them.

Recognising concerns, signs and indicators of abuse;

The witnessing of abuse can have a damaging affect on those who are party to it, as well as the child subjected to the actual abuse, and in itself will have a significant impact on the health and emotional well-being of the child. Abuse can take place in any family, institution or community setting, by telephone or on the internet. Abuse can often be difficult to recognise as children may behave differently or seem unhappy for many reasons, as they move through the stages of childhood or their family circumstances change. However, it is important to know the indicators of abuse and to be alert to the **need to consult further**.

Physical Abuse can involve hitting, shaking, throwing, poisoning, punching, kicking, scalding, burning, drowning and suffocating. It can also result when a parent or carer deliberately causes the ill health of a child in order to seek attention through fabricated or induced illness.

Emotional Abuse is where a child's need for love, security, recognition and praise is not met. It may involve seeing or hearing the ill-treatment of someone else such as in Domestic Violence or Domestic Abuse. A parent, carer or authority figure is considered emotionally abusive when they are consistently hostile, rejecting, threatening or undermining toward a child or other family member. It can also occur when children are prevented from having social contact with others or if inappropriate expectations are placed upon them. Symptoms that indicate emotional abuse include:

- Excessively clingy or attention seeking.
- Very low self-esteem or excessive self-criticism.
- Withdrawn behaviour or fearfulness.
- Lack of appropriate boundaries with strangers; too eager to please.
- Eating disorders or self-harm

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. This may include physical contact both penetrative and non-penetrative, or viewing pornographic material including through the use of the internet. Indicators of sexual abuse include: allegations or disclosures, genital soreness, injuries or disclosure, sexually transmitted diseases, inappropriate sexualised behaviour including words, play or drawing.

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs which can significantly harm their health and development. Neglect can include inadequate supervision (being left alone for long periods of time), lack of stimulation, social contact or education, lack of appropriate food, shelter, appropriate clothing for conditions and medical attention and treatment when necessary.

What to do if you are concerned

If a child makes a disclosure or allegation of abuse against an adult or other child or young person, it is important that you:

- Stay calm and listen carefully.

- Reassure them that they have done the right thing in telling you.
- Do not investigate or ask leading questions.
- Let them know that you will need to tell someone else.
- Do not promise to keep what they have told you a secret.
- Inform your Safeguarding Designated Lead as soon as possible.
- Make a written record of the allegation, disclosure or incident which you must sign, date and record your position using the setting safeguarding record log forms.

If you are concerned that a member of staff or adult in a position of trust poses a danger to a child or young person or that they might be abusing a child or young person you should report your concerns to the Safeguarding Designated Lead without delay. Where those concerns relate to the Manager this should be reported to the Deputy.

Preventing Radicalisation and Extremism:

The prevent duty.

The prevent duty requires that all staff are aware of the signs that a child maybe vulnerable to radicalisation. The risks will need to be considered for political, environmental, animal rights, or faith based extremism that may lead to a child becoming radicalised.

All staff must have prevent training in order that they can identify the signs of children/ families being radicalised.

As part of the preventative process, resilience to radicalisation will be built through the promotion of fundamental British values through the curriculum.

Any child who is considered vulnerable to radicalisation will be referred by the DSL to the Children's services professional helpline dept. 01329 225375 and an inter agency referral form will be completed. If the police prevent officer considers the information to be indicating a level of risk a "channel panel" will be convened and the nursery will attend and support this process.

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 for non-medical reasons. It has no health benefits and harms girls and women in many ways.

The age at which girls undergo FGM varies enormously according to the community. The procedure may be carried out when the girl is newborn, during childhood or adolescence, just before marriage or during the first pregnancy.

FGM is illegal in the UK.

All current staff have undergone FGM training, new staff members to the setting will also be required to carry out the same training. This is a very sensitive area and if staff members do not feel comfortable do this alone at home then time will be allocated time to do it on site.

Staff at Wickham Montessori will activate local safeguarding procedures if FGM is considered to be an issue with any child attending setting.

For cases where it is believed that a girl may be vulnerable to FGM or there is a concern that she may be about to undergo FGM then the staff will inform the DSL who will report it as with any other child protection issues.

Honour Based Violence

Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community.

It is often linked to family or community members who believe someone has brought shame to their family or community by doing something that is not in keeping with their unwritten rule of conduct. For example, honour based violence might be committed against people who:

- Become involved with a boyfriend or girlfriend from a different culture or religion
- Want to get out of an arranged marriage
- Want to get out of a forced marriage
- Wear clothes or take part in activities that might not be considered traditional within a particular culture
- Convert to a different faith from the family

Women and girls are the most common victims of honour based violence however it can also affect men and boys. Crimes of 'honour' do not always include violence. Crimes committed in the name of 'honour' might include:

- Domestic abuse
- Threats of violence
- Sexual or psychological abuse
- Forced marriage
- Being held against your will or taken somewhere you don't want to go
- Assault

If staff believe that a child is at risk from honour based violence the DSL will follow the usual safeguarding referral process, however, if it is clear that a crime has been committed or the child is at immediate risk the police will be contacted in the first place. It is important that if honour based violence is known or suspected that communities and family members are NOT spoken to prior to referral to the police or social care as this could increase risk to the child.

The Trigger Trio

The term 'Trigger Trio' has been used to describe the issues of domestic violence, mental health and substance misuse which have been identified as indicators of increased risk of harm to children and young people.

Domestic Abuse

Domestic abuse is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse. This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Research indicates that living within a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, wellbeing and understanding of what a normal relationship is.

Children witnessing domestic abuse are thought to be a high risk of 'significant harm'. These children may become aggressive; display anti-social behaviours; suffer from depression or anxiety; or fail to reach their educational potential.

Indicators that a child is living within a relationship with domestic abuse include:

- Withdrawn
- Suddenly behaves differently
- Anxious
- Clingy
- Depressed
- Aggressive
- Problems sleeping
- Eating disorders
- Wets the bed
- Soils clothes
- Takes risks
- Misses school/nursery
- Changes in eating habits
- Obsessive behaviour
- Nightmares
- Drugs
- Alcohol
- Self-harm
- Thoughts about suicide

These behaviours themselves do not indicate that a child is living with domestic abuse, but should be considered as indicators that this may be the case.

If staff believe that a child is living with domestic abuse, this will be reported to the DSL for referral to be considered by the children's Services.

Parental mental health

The term "mental health" is used to cover a wide range of conditions, from eating disorders, mild depression and anxiety to psychotic illnesses such as schizophrenia or bipolar disorder. Parental mental illness does not necessarily have an adverse impact on a child's developmental needs, but it is essential to always assess its implications for each child in the family. It is essential that the diagnosis of a parent/carer's mental health is not seen as defining the level of risk. Similarly, the absence of a diagnosis does not equate to there being little or no risk.

For children, the impact of parental mental health can include:

- The parent / carer's needs or illnesses taking precedence over the child's needs
- Child's physical and emotional needs neglected
- A child acting as a young carer for a parent or a sibling
- Child having restricted social and recreational activities
- Child finds it difficult to concentrate- impacting on educational achievement
- A child missing nursery regularly as (s)he is being kept home as a companion for a parent/carer
- Adopt paranoid or suspicious behaviour as they believe their parent's delusions.
- Witnessing self-harming behaviour and suicide attempts (including attempts that involve the child)
- Obsessional compulsive behaviours involving the child

If staff become aware of any of the above indicators, or others that suggest a child is suffering due to parental mental health, the information will be shared with the DSL to consider a referral to children's services.

Parental Substance misuse

Substance misuse applies to the misuse of alcohol as well as 'problem drug use', defined by the Advisory Council on the Misuse of Drugs as drug use which has: 'serious negative consequences of a physical, psychological, social and interpersonal, financial or legal nature for users and those around them.

Parental substance misuse of drugs or alcohol becomes relevant to child protection when substance misuse and personal circumstances indicate that their parenting capacity is likely to be seriously impaired or that undue caring responsibilities are likely to be falling on a child in the family.

For children, the impact of parental substance misuse can include:

- Inadequate food, heat and clothing for children (family finances used to fund adult's dependency)
- Lack of engagement or interest from parents in their development, education or wellbeing
- Behavioural difficulties- inappropriate display of sexual and/or aggressive behaviour.
- Bullying (including due to poor physical appearance)
- Isolation – finding it hard to socialise, make friends or invite them home
- Tiredness or lack of concentration

- Child talking or bringing into school drugs or related paraphernalia
- Injuries /accidents (due to inadequate adult supervision)
- Taking on a caring role
- Continued poor academic performance including difficulties completing homework on time
- Poor attendance or late arrival

These behaviours themselves do not indicate that a child's parent is misusing substances, but should be considered as indicators that this may be the case.

If staff believe that a child is living with parental substance misuse, this will be reported to the DSL for referral to be considered for children's services.

Missing, Exploited and Trafficked Children (MET)

Within Hampshire, the acronym MET is used to identify all children who are missing; believed to be at risk of or being sexually exploited; or who are at risk of or are being trafficked. Given the close links between all of these issues, there has been a considered response to join all three issues so that cross over of risk is not missed.

Children Missing from Education

Patterns of children missing sessions can be an indicator of either abuse or safeguarding risks. A relatively short length of time a child is missing does not reduce risk of harm to that child, and all absence or non-attendance should be considered with other known factors or concerns.

The DSLs and staff should consider:

Missing sessions:

- Are there patterns in the sessions that are being missed?
- Have they been directly or indirectly affected by substance misuse?
- Is the session being missed for bruising or injuries to become less visible?

Single missing days:

- Is there a pattern in the days missed?
- Is it before or after the weekend suggesting the child is away from the area?
- Is the parent informing the nursery of the absence on the day?

Continuous missing days:

- Has the nursery been able to make contact with the parent?
- Is medical evidence being provided?
- Are siblings attending school (either our or local schools)?
- Did we have any concerns about radicalisation, FGM, honour based violence or sexual exploitation?
- Have we had any concerns about physical or sexual abuse?

The nursery will view absence as a potential safeguarding issue and will call the family by 10AM that day to find out reason for absence, this will be document and stored as

necessary on the electronic registers. We ask that all parents let us know in advance when they are going to take their children on holiday or for prior appointments.

Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity:

(a) in exchange for something the victim needs or wants
or

(b) for the financial advantage or increased status of the perpetrator or facilitator.

The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology (*Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation*, February 2017).

- Exploitation can be isolated (one-on-one) or organised group/criminal activity.
- There can be a big age gap between victim and perpetrator, but it can also be peer-on-peer.
- Boys can be targeted just as easily as girls – this is not gender specific.
- Perpetrators can be women and not just men.
- Exploitation can be between males and females or between the same genders.
- Children with learning difficulties can be particularly vulnerable to exploitation.
- As can children from particular groups, e.g. looked after children, young carers, children who have a history of physical, sexual emotional abuse or neglect or mental health problems.
- Children who use drugs or alcohol.
- Children who go missing from home or school.
- Children involved in crime.
- Children with parents/carers who have mental health problems, learning difficulties/ other issues.
- Children who associate with other children involved in exploitation.

However, it is important to recognise that any child can be targeted.

Indicators a child may be at risk of CSE include:

- Going missing for periods of time or regularly coming home late.
- Regularly missing school or education or not taking part in education.
- Appearing with unexplained gifts or new possessions.
- Associating with other young people involved in exploitation.
- Having older boyfriends or girlfriends.
- Suffering from sexually transmitted infections.
- Mood swings or changes in emotional wellbeing.
- Drug and alcohol misuse.
- Displaying inappropriate sexualised behaviour.

CSE can happen to a child of any age, gender, ability or social status. Often the victim of CSE is not aware that they are being exploited and do not see themselves as a victim.

As a nursery, we educate all staff in the signs and indicators of sexual exploitation. The DSL will share this information as appropriate with children's services.

Safer Recruitment

Wickham Montessori operates in accordance with the safer recruitment process. Safer recruitment training is mandatory for anyone in a position that may employ or interview potential candidates. The process checks the identity, criminal record (enhanced DBS), mental and physical capacity, right to work in the U.K, professional qualification and seeks confirmation of the applicant's experience and history through references.

Staff Induction

The DSL or deputy will provide all new staff with training to enable them to both fulfil their role and also to understand the child protection policy, the safeguarding policy, the staff behaviour policy/code of conduct, and part one of Keeping Children Safe in Education. This induction may be covered within the annual training if this falls at the same time; otherwise it will be carried out separately during the initial starting period.

Collection when not a parent

Parents must provide details of the appropriate adult who will be collecting their children in their absence. This will include a copy of identification and a password.

Visitors

Visitors to the setting will be asked to sign in and out, they will be asked to turn their mobile phones off.

Use of mobile phones

Mobile phones are not permitted to be used on the premises. We prefer all parents to either leave them in their car or in their pocket when picking up or dropping off. If a parent would like to show staff members something then they will be directed to the appropriate designated area (kitchen area).

Staff must put their phone in the office and sign it in and out. Under no circumstances should they be walking around the setting with it out. During lunch breaks they can either use it in the kitchen, office or outside of the nursery.

The school mobile will be used on outings or in an emergency situation. It is stored securely when not in use and a password protects it. It is never used in areas such as toilets, changing rooms, nappy changing areas and sleep areas. If it is used for taking photographs, the images are deleted regularly and written parent/carer permission obtained.

Confidentiality and data protection

The Nursery, and all members of staff at Wickham Montessori school, will ensure that all data about children, their families and staff are handled in accordance with the requirements of the law, and any national and local guidance.

Any member of staff who has access to sensitive information about a child, the child's family or other staff members must take all reasonable steps to ensure that such information is only disclosed to those people who need to know.

All child protection records will be kept separately in a locked file cabinet, separate from the child's main file. The Designated Safeguarding Lead will restrict access to those people who have a role to play in protecting the child. Child Protection information held electronically will only be held on individual designated officers H/drives which are password protected.

Photography and images

The vast majority of people who take or view photographs or videos of children do so for entirely innocent, understandable and acceptable reasons. However, due to cases of abuse to children through taking or using images, we must ensure that we have safeguards in place.

To protect children we will:

- Obtain parents' and carers' consent for photographs to be taken or published for example, on our website or tapestry.
- Once a photo has been used it will be deleted appropriately
- Ensure that children are appropriately dressed, and only use the child's first name with an image.
- Make sure names of other children are not used when writing observations.
- Ensure that personal cameras are not used to take photographs, video or audio recordings in our setting without prior explicit written consent from the setting, for example, for a special event, such as a Christmas play.
- Ensure that all images are stored securely and password protected.
- Ensure where professional photographers are used DBS's, references and parental consent will be obtained prior to photographs being taken.
- Ensure the use of cameras, is closely monitored and open to scrutiny.

Health and Safety

The site, the equipment and the activities carried out as part of the curriculum are all required to comply with the Health and Safety at Work act 1974 and regulations made under the act.

All risks are required to be assessed and recorded plans of how to manage the risk are in place (kept in folder in the office). The plans should always take a common sense and balanced approach to allow activities to be safe rather than preventing them from taking place.

All staff members will be made aware of the manual handling posters kept on the notice board in the office. This protects both the children and staff.

Off site visits

A particular strand of health and safety is looking at risks when undertaking off site visits. Some activities, especially those happening away from the nursery can involve higher levels of risk. If these are annual or infrequent activities, a review of an existing assessment may be all that is needed. If it is a new activity, then a specific assessment of significant risks must be carried out. Please refer to our outings policy.

First Aid

All staff are made aware of the first aid locations, one upstairs and one downstairs in the kitchen. We aim for all staff to hold an advanced paediatric first aid certificate which is updated every three years. Once new training becomes necessary staff are sent on training in order to comply with the children's needs. If their certificate runs out then they are not allowed to administer first aid until a renewal is complete.

Technologies

Technological hardware and software is developing continuously with an increase in functionality of devices that people use. The majority of children use online tools to communicate with others locally, nationally and internationally. Access to the Internet and other tools that technology provides is an invaluable way of finding, sharing and communicating information. While technology itself is not harmful, it can be used by others to make children vulnerable and to abuse them.

Online Safety

With the current speed of on-line change, some parents and carers have only a limited understanding of online risks and issues. Parents may underestimate how often their children come across potentially harmful and inappropriate material on the internet and may be unsure about how to respond.

Some of the risks could be:

- unwanted contact
- grooming
- online bullying including sexting
- digital footprint

The nursery will therefore seek to provide information and awareness to parents through:

- Information included in newsletters, Facebook page and email.
- Building awareness around information (leaflet on Safeguarding board)

Cyberbullying

Cyber-bullying is defined as:

“An aggressive, intentional act carried out by a group or individual using electronic forms of contact repeatedly over time against a victim who cannot easily defend himself/herself.”

By cyber-bullying, we mean bullying by electronic media:

- Bullying by texts or messages or calls on mobile phones.

- The use of mobile phone cameras to cause distress, fear or humiliation.
- Posting threatening, abusive, defamatory or humiliating material on websites, to include blogs, personal websites, social networking sites.
- Using e-mail to message others.
- Hijacking/cloning e-mail accounts.
- Making threatening, abusive, defamatory or humiliating remarks in on-line forums.

It is unlawful to distribute slanderous information in any media including internet sites.

Section 127 of the Communications Act 2003 makes it an offence to send, by public means of a public electronic communications network, a message or other matter that is grossly offensive or one of an indecent, obscene or menacing character. The Protection from Harassment Act 1997 makes it an offence to knowingly pursue any course of conduct amounting to harassment.

If we become aware of any incidents of cyberbullying, we will need to consider each case individually as to any criminal act that may have been committed. The nursery will pass on information to the police if it feels that it is appropriate or are required to do so.

Online reputation

Online reputation is the opinion others get of a person when they encounter them online. It is formed by posts, photos that have been uploaded and comments made by others on people's profiles. It is important that staff are aware that anything that is posted could influence their future professional reputation. The majority of organisations and work establishments now check digital footprint before considering applications for positions or places on courses. No member of staff is allowed to discuss or post anything on a social media sites relating to Wickham Montessori School, or its staff member, children or families of children in our care. We also ask staff not to post where they are working.

Safeguarding issues relating to individual children's needs

Children with medical conditions

As a nursery, we will make sure that sufficient staff are trained to support any pupil with a medical condition. The majority of staff members hold an advance paediatric first aid certificate.

All staff will be made aware of any condition a child has and be aware of the medical needs and risks to that child. (all rooms have a list of dietary requirements and allergens).

An individual healthcare plan may be put in place to support the child and their medical needs.

Special educational needs and disabilities

SENCO coordinator: Ashley Pitt/ Courtnie Roberts

Disabled children and children with SEN have exactly the same human rights to be kept safe from abuse and neglect, to be protected from harm and achieve the Every Child Matters outcomes as non-disabled children. Disabled children do however, require additional action. This is because they experience greater risks and created vulnerability as a result of negative attitudes about disabled children and unequal access to services and

resources and because they may have additional needs relating to physical, sensory, cognitive and/or communication impairment (Safeguarding Children, DSCF, July 2009). Wickham Montessori will ensure that our disabled children are listened to and responded to appropriately where they have concerns regarding abuse. In order to do this we will ensure that our staff and volunteers receive the training to raise awareness and that children have access to specialist staff in the event that there may be concerns regarding abuse of a child.

Intimate care

Guidelines for good practice:

1. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and the situation. Privacy is an important issue. Much intimate care is carried out by one staff member alone with one child. Having people working alone does increase the opportunity for possible abuse. However, this is balanced by the loss of privacy and lack of trust implied if two people have to be present - quiet apart from the practical difficulties. It should also be noted that the presence of two people does not guarantee the safety of the child or young person - organised abuse by several perpetrators can, and does, take place.
2. Involve the child as far as possible in his or her own intimate care. Try to avoid doing things for a child that s/he can do alone, and if a child is able to help ensure that s/he is given the chance to do so. This is as important for tasks such as removing underclothes as it is for washing the private parts of a child's body. Support children in doing all that they can themselves. If a child is fully dependent on you, talk with her or him about what you are doing and give choices where possible.
3. If you are concerned that during the intimate care of a child:
 - You accidentally hurt the child.
 - The child seems sore or unusually tender in the genital area.
 - The child appears to be sexually aroused by your actions.
 - The child misunderstands or misinterprets something.
 - The child has a very emotional reaction without apparent cause (sudden crying or shouting).

Report any such incident as soon as possible to the DSL or deputy, make a brief written note of it. This is for two reasons: first, because some of these could be cause for concern, and secondly, because the child or another adult might possibly misconstrue something you have done.

4. Additionally, if you are a member of staff who has noticed that a child's demeanour has changed directly following intimate care, e.g. sudden distress or withdrawal, this should be noted in writing and discussed with your DSL.
 - Physical dependency in basic core needs, for example toileting, bathing, dressing, may increase the accessibility and opportunity for some carers to exploit being alone with and justify touching the child inappropriately.

- Repeated “invasion” of body space for physical or medical care may result in the child feeling ownership of their bodies has been taken from them
- Children with additional needs can be isolated from knowledge and information about alternative sources of care and residence. This means, for example, that a child who is physically dependent on daily care may be more reluctant to disclose abuse, since they fear the loss of these needs being met. Their fear may also include who might replace their abusive carer

Disqualification under the Childcare Act

The Childcare Act of 2006 was put in place to prevent adults who have been cautioned or convicted of a number of specific offences from working within childcare.

Staff (meaning individuals employed by the nursery or local authority, those undertaking training (both salaried and unsalaried), casual workers and volunteers) are covered by this legislation in the following circumstances:

They are employed or provide early years childcare (this covers the age range from birth until 1 September following a child’s fifth birthday). This includes education in nursery and reception classes

The legislation also applies to any staff directly concerned in the management of such early or later years’ provision.

As a nursery, we require all staff who may be impacted by this piece of legislation to complete a self declaration form and to inform the manager immediately if they become aware of any changes to their circumstances that would require us to be aware.