Safeguarding and Child Protection Policy

SEPTEMBER 2026

Designated Safeguarding Lead: **Roxane Twining** Director of Operations

In the event of her absence: **Sam Chinnick** Daycare Manager, **Anna Jenkins** Director of Partnership and Community Development Work and **Kerri Matthews** Director of Partnerships and Community Development Work

In the event of all being absent: **A member of the management team**

Safeguarding and Child Protection Trustee: **Erik Montgomery** (erik.montgomery@pm.me)

'Working Together to Safeguard Children' (2026) and Keeping Children Safe in Education 2026 as well as other relevant government documents are listed at the end of this document.

SAFEGUARDING AND CHILD PROTECTION POLICY

EveryFAMILY recognises that it has an explicit duty to Safeguard and protect and promote the welfare of all children, working in a preventative approach within an integrated service.

Safeguarding the welfare of the child is the paramount consideration in every situation and all staff, trustees, volunteers and partner organisations are required to share this commitment.

Definition of Safeguarding

EveryFAMILY adopts the definition used in the **Children and Social Work Act 2017** and the national statutory guidance: '***Working Together to Safeguard Children'* (2026) and 'Keeping Children Safe in Education' (2026),** which focuses on safeguarding and promoting children and young people's welfare and can be summarised as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care, and
- taking action to enable all children to have the best outcomes

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All action taken by **EveryFAMILY** will be in accordance with: **Statutory, national, and local guidance. Working Together to Safeguard Children (2026**), which sets out the multiagency working arrangements to safeguard and promote the welfare of children and young people and protect them from harm; in addition, it sets out the statutory roles and responsibilities of schools.

Keeping Children Safe in Education (2026) is statutory guidance issued by the Department for Education which all schools and colleges must have regard to when carrying out their duties to safeguard and promote the welfare of children.

Early Years Foundation Stage statutory framework (2026) is statutory guidance which sets standards that school and childcare providers must meet for the learning, development, and care of children from birth to 5.

Local Guidance from the Local Safeguarding Partnership: around particular safeguarding topics are available on the Keeping Bristol Safe Partnership Website.

Government guidance in relation to:

COVID19: The full collection is available on the government website. **EveryFAMILY** have created an addendum to this document to reflect changes made during lockdown or in the event of a further lockdown.

Specific topical safeguarding issues – a collection of up-to-date guidance can be found on the Safeguarding in Education Team's guidance page. https://www.bristolsafeguardingineducation.org/guidance/

This policy should be read in conjunction with the following policies:

- Safer Recruitment Policy
- Whistleblowing Policy
- Code of Conduct for Staff/ Staff Behaviour Policy
- Behaviour Management Policy
- Health and Safety

The management team will ensure that the above policies and procedures, adopted by the Board of Trustees, are accessible, understood and followed by all staff.

Introduction

1.1 Aims

At EveryFAMILY the safeguarding of our children, vulnerable adults, families, volunteers and staff is paramount in everything that we do.

We are extremely aware of the importance of prevention and this document outlines procedures in place related to this and directs the reader to many other policies that form part of our working framework. Other crucial parts of prevention are effective Multi Agency working, staff training and regularly reviewing practice all of which we prioritise.

Safeguarding is the responsibility of everyone and it is vital to recognise that we all have a part to play. At EveryFAMILY our aim is to provide a safe, nurturing child- centred environment and build excellent working relationships with families and colleagues both internally and externally. This then enables Safeguarding concerns and issues to be highlighted and challenged in an appropriate, timely and professional manner.

We are committed to embedding policies and procedures that underpin this work and this Safeguarding and Child Protection Policy is one aspect of this. The Policy covers key areas such as our responsibilities, prevention, early intervention and child protection procedures and useful contacts and references. Safeguarding is integral to all our work and it is therefore crucial to refer to other specific policies and government documents listed at the end of this document that inform this agenda, for further guidance and learning. All staff will read and understand Part 1 of statutory guidance Keeping Children Safe in Education (2026). Those working directly with children will also read Annex B.

1.2 Responsibilities and Leadership

This policy applies to trustees, staff, trainees, students, volunteers, visitors and parents/carers using or working at EveryFAMILY. We deliver services at various venues and this policy and procedure will apply in all these contexts. We expect services delivered by partner organisations to have Safeguarding and Child Protection procedures in place.

Safeguarding is a standing agenda item at every Trustees meeting. The Trustee responsible for Safeguarding and Child Protection, Erik Montgomery should be invited by the chair to give regular verbal updates concerning Safeguarding matters.

Safeguarding management meetings are held monthly with statistics and any relevant information reported to the Trustees.

Designated Safeguarding Lead, Roxane Twining is required to compile an Annual Safeguarding report to Trustees. This should highlight any changes to policies and procedures, training undertaken and required, the volume of incidents and associated work, and any outstanding issues with proposed actions.

The Safeguarding and Child Protection Policy will be reviewed annually. The Safeguarding Lead and Child Protection Officer and management team welcome any feedback on necessary updates or amendments. This is a vital part of our building a culture of learning and improvement.

Role of the Designated Safeguarding Lead (DSL)
Duties are further outlined in Keeping Children Safe in Education (2026)

Details of our DSL and Deputy DSL are available on the **EveryFAMILY** website, our newsletters, or the notice board in reception.

The DSL is a senior member of staff who undertakes lead responsibility for safeguarding and child protection within the setting.

- The DSL must attend an advanced inter-agency child protection training course, which must be updated at least every 2 years (in Bristol this is run by the Keeping Bristol Safe Partnership – KBSP).
- The DSL will provide advice and support to other staff on child welfare, safeguarding and child protection matters. This will be through staff meetings, inset day sessions, briefings, checking knowledge, information boards and professional discussions.

The DSL Manages early identification of vulnerability of children and their families from staff through cause for concerns or notifications. This will ensure detailed, accurate, secure written records of concerns and referrals.
Maintain oversight of early help and Family Help involvement, ensuring the setting contributes relevant information, analysis and challenge where required, and that records clearly evidence decisions, actions and impact.
The DSL also manages referrals to local safeguarding partners where learners with additional needs have been identified. These can include those –

- who need a social worker and may be experiencing abuse or neglect;
- who may benefit from early help;
- where there is a radicalisation concern;
- where a crime may have been committed.

If the DSL is uncertain about concerns about a child, they should contact Family Help.

The DSL will also:
Work with others – acting as a point of contact for outside agencies about safeguarding.
Support and advise other staff in making referrals to other agencies.
When required, liaise with the case manager and the Local Authority Designated Officer (LADO) in relation to child protection cases which concern a staff member.
Coordinate safeguarding training and raise awareness and understanding to the school community around policies and practice in relation to safeguarding.
All staff and volunteers are to undertake child protection training, which must be updated every 2 years. This training will be in line with EYFS requirements. There will also be an annual in-house update for all staff
Help promote educational outcomes by sharing information about vulnerable learners with relevant staff. This includes ensuring that staff:

- know who these children are,
- understand their academic progress and attainment and maintain a culture of high aspirations for this cohort.
- Are supported to identify the challenges that children in this group might face.
- Ensure the successful transfer of the Safeguarding/Child Protection File when a learner moves on to a new setting within 5 days for in year transfer or the first 5 days of the start of a new term.
- The DSL will take lead responsibility on online safety and filtering and monitoring of the internet and devices in the setting.

1.3 Role of all staff

· All staff will read and understand Part one of Keeping Children Safe in Education. The Part one overview may be used as a complementary quick reference, but it does not replace the requirement for staff to read Part one.

· In addition to this, all staff will be aware of the systems in place which support safeguarding, including reading this Safeguarding and Child Protection Policy, the Behaviour Policy, the Staff Behaviour Policy (code of conduct), the safeguarding response to children who go missing from education, and the role of the Designated Safeguarding Lead (DSL).

· Know who and how to contact the DSL and any deputies, the Chair of Trustees, and the Trustee responsible for safeguarding.

· All staff will be able to identify vulnerable children and take action to keep them safe. Information or concerns about children will be shared with the DSL where it includes those: who may need help at an earlier stage, including where there are emerging concerns, indicators of exploitation, modern slavery, abusive, violent or harmful behaviour, or where a child may be at risk of extra-familial harm.

- who may need a social worker and may be experiencing abuse, neglect or exploitation.
- requiring mental health support.
- may benefit from early help.
- where there is a radicalisation concern.
- where a crime may have been committed.

· Be clear as to the setting's policy and procedures about child-on-child abuse, children missing from education and those requiring mental health support, and the impact of technology in relation to online safety.

· Be involved, where appropriate, in the implementation of individual plans to further safeguard vulnerable children.

· Record concerns appropriately and in a timely manner by using the setting's safeguarding systems.

· To be aware of the need to raise to the senior leadership team any concerns they have about safeguarding practices within the setting.

· All staff will understand that children may not feel ready or able to tell someone they are being abused, exploited or neglected, and that professional curiosity, respectful enquiry and timely information sharing are important to earn.

1.4 Role of the Trustees

Duties are further outlined in Keeping Children Safe in Education (Part 2)

There is a senior board-level lead who takes responsibility for ensuring that safeguarding and child protection practice, processes and policy (including online safety) are effective and compliant with legislation, statutory guidance and Local Safeguarding Partnership arrangements (Keeping Bristol Safe Partnership).

· The appointed Safeguarding Trustee will liaise with the Directors and the DSL to produce an annual report and complete the mandatory S. 175 (biennial safeguarding) audit for the Keeping Bristol Safe Partnership.

· Ensure that the charity remedies any deficiencies or weaknesses brought to its attention without delay.

· Ensure that this document is updated annually (or when there are significant updates).

· Ensure that the DSL is an appropriate senior member of setting's senior leadership team and ensure that they have adequate time, funding, training, resources, and support to carry out their role effectively.

· Ensure that the training and learning for the community is robust and effective.

· Ensure that learners are taught about safeguarding on the curriculum including online safety in compliance with statutory guidance Relationships and sex education (RSE) and and Early years foundation stage (EYFS) statutory framework · Review the Department for Education filtering and monitoring standards and make sure the setting is compliant with the requirements to meet these duties through discussions with IT staff and service providers.

· Ensure oversight of emerging technology risks, including artificial intelligence, deepfakes, image-based abuse, cyber-enabled coercion, and the effectiveness of filtering, monitoring, information security and access management arrangements.

· To ensure that staff, including supply staff, other staff, volunteers, and contractors have appropriate checks carried out in line with statutory guidance Keeping Children Safe in Education (Part 3).

· Ensure that there are procedures in place to manage safeguarding concerns or allegations against staff, including supply staff, other staff, volunteers, and contractors who may not be suitable to work with or pose a risk to learners, this includes having a process to manage low-level concerns.

· Ensure that systems are in place for learners to effectively share a concern about a safeguarding issue they are experiencing, express their views and give feedback.

· Ensure that the setting has systems in place to prevent, identify and respond to child-on-child harm (including sexual abuse and sexual harassment) and mental health concerns, and review the effectiveness of the setting's online safety practices.

· **Appoint a Designated Teacher to promote the educational achievement for children in care and other care arrangements**

Equalities Statement

With regards to safeguarding we will consider our duties under the Equality Act 2010 and our general and specific duties under the Public Sector Equality Duty. General duties include:

1. Eliminate discrimination, harassment, victimisation, and other conduct that is prohibited by the Equality Act 2010.
2. Advance equality of opportunity between people who share a protected characteristic and people who do not share it.
3. Foster good relations across all protected characteristics between people who share a protected characteristic and people who do not share it.

Details of our specific duties are published in our Equal Opportunities policy

We adhere to both the Bristol Equality Charter and Bristol Children's Charter with a view to contribute towards the One City Plan.

Staff are aware of the additional barriers to recognising abuse and neglect in children with Special Educational Needs and Disabilities (SEND). This will be in line with our Special Educational Needs and Disability Policy

Children who are questioning their gender may have additional vulnerabilities, including bullying, social isolation, mental health concerns, online harm or family stress. Staff will respond in a child-centred, respectful and safeguarding-led way, follow the setting's equalities duties, involve the DSL where there are concerns, and avoid making assumptions about risk or need based on gender questioning alone.

EveryFAMILY also adheres to the principals of and promotes anti-oppressive practice in line of the United Nations Convention of the Rights of the Child and the Human Rights Act 1998.

Prevention

A crucial element in Safeguarding is that of prevention by introducing and maintaining practices that maximise safety and minimise risk. **Guidance for Safer Working Practice for Adults who work with Children and Young People in Education (2019)**

2.1 Safer Recruitment

- At EveryFAMILY we are aware that paedophiles and those that pose a threat to children may be attracted to employment that allows them access to children and young people. As part of this and other policies and procedures we will take every possible precaution to ensure that people working with our children are safe to do so.

EveryFAMILY pays full regard to the safer recruitment practices detailed in 'Keeping Children Safe in Education' (2026)
This includes scrutinising applicants, verifying identity and academic or vocational qualifications, obtaining professional and character references, checking previous employment history, and ensuring that a candidate has the health and physical capacity for the job. References are always obtained, scrutinised and concerns resolved satisfactorily before appointment is confirmed.
It also includes undertaking appropriate checks through the Disclosure and Barring Service (DBS), the barred list checks and prohibition checks (and overseas checks if appropriate), dependent on the role and duties performed, including regulated and non-regulated activity.
All recruitment materials will include reference to **EveryFAMILY** commitment to safeguarding and promoting the wellbeing of children.

DBS checks will always be carried out on every member of staff, volunteers and trustees prior to commencing work within the Centre. Students will not be permitted to work with the children until satisfactory checks have been obtained. Two references will be taken up for all new staff and volunteers at the point of shortlisting and a medical reference may also be required. DBS checks will be required every 3 years or be signed up to the DBS update service. All safer recruitment information will be recorded on the settings single central record.

Further information giving detail on this can be found in EveryFAMILY **Safer Recruitment Policy**

2.2 Use of reasonable force

'Reasonable force' refers to the physical contact to restrain and control children using no more force than is needed.' The use of reasonable force is down to the professional judgement of the staff member concerned and will be determined by individual circumstances and the vulnerability of any child with Special Educational Needs or Disability (SEND) will be considered.

- The use of reasonable force will be minimised through positive and proactive behaviour support and de-escalation and will follow government guidance (Use of Reasonable Force in Schools 2013; Reducing the need for restraint and restrictive intervention, 2019).

- There is robust recording of any incident where positive handling or restraint has been used. Further review of the incident is carried out to reflect on how the incident could be avoided, this will involve the child and their family.

The process around how the setting manages concerns where a professional may pose a risk to children and our response to low level concerns can be accessed in section 2.8 Allegations of abuse made against professionals.

2.3 Effective Practice

We aim to establish and maintain an ethos where children feel secure and are encouraged to communicate and are responded to. We will ensure all children have effective means of communication with more than one adult and that we provide opportunities for individual or small group discussions about thoughts and feelings in an atmosphere of trust, acceptance and tolerance. Staff, students and volunteers should ensure that all children make good progress in our centre, recognising that ineffective Safeguarding can lead to underachievement.

2.4 Environment

The environment should always be planned in ways which minimise the risk to children e.g. physical layout and surroundings, clear roles for everyone supervising people. We will always take concerns about children's welfare very seriously. A Safeguarding Statement will be displayed in all areas to highlight this.

The safety of children, staff and all visitors to our sites are of paramount importance and all equipment, activities and rooms are risk assessed by staff and the health and safety officer. We encourage the children to explore risk in a safe enabling environment and staff to access training that supports them in this endeavour.

For further information see EveryFAMILY **Health and Safety, Health and Hygiene, Sleeping and Seating**.

Maintaining safety in the buildings and car parks

Within our centres we aim to provide a secure and safe environment for our families and the children in our care. The main entrance and all daycare rooms within the Brentry site have a secure locked door which requires a staff only fob for access. Staff are responsible for these and any loss must be reported to the Business Manager or a member of the management team immediately. The fobs are not identifiable to the Centre.

Visitors are asked to sign in and out of the centre in the visitor's book and a visitor's label is given to them to wear whilst in the centre. When visitors and other professionals sign in we request that mobile phones are not used in day-care rooms or outdoor classrooms. Calls on mobile phones should be used at the front of the building.

At EveryFAMILY main site the car park is for use of school and centre staff and centre parents only. We have a strict 5 mph speed limit within the car park and any person seen speeding will be given a warning which could lead to a ban from the car park. The car park is a one-way system which we encourage all staff and parents to abide by. Any parent seen parking in a way that blocks an entrance or exit will be advised to move their car. Any parent using the disabled bay when not so entitled will be asked to move their car.

2.5 Children's security

We apply a password system in daycare if a child is being collected by someone other than their main carer. In incidents where no password has been given or we were not informed of a different person collecting, the main carer will be contacted. The child will remain in our care until permission for an alternative arrangement is granted. Should a parent/carer arrive at the Centre to collect a child and the staff team assess that they are intoxicated or exhibiting anti-social behaviour, such that this poses a risk to child safety, we will refuse to allow the child to go home with them and contact another suitable person on their contact list. In some cases, Police/First Response and /or CYPS may need to be called.
Further detail can be found in EVERYFAMILY **Arrivals and Departures Policy, Safety and Security of Children Policy, Smoking Drugs and Alcohol Policy.**
There are specific procedures in place to maintain security in emergencies e.g.
Emergency Lockdown Policy, Fire Procedure, Fire Marshalls.

2.6 Photographs and Social Media

Working with children will involve staff, students and volunteers taking photographs and film which will be used for the child's observations and displays around the Centre. When new families start they must fill out a full registration document. This includes the parents or carers giving consent for photographs to be taken of their child during activities and displayed within the Centre and for publicity purposes. Staff support parents/carers filling out these admission forms. The details of any person who doesn't give consent to having photos taken, will be shared within the team to ensure that we are complying with their wishes. Each room will have their own tablet which is locked in the managers' office at the end of every day. The use of personal cameras by all staff and parents/carers is prohibited in the Centre.

At times EveryFAMILY may wish to use photos or film for publicity purposes or in-house training. On these occasions' permission will be sought individually.

The centre strives to keep confidentiality when caring for **looked after children,** therefore photographs of these children will only be used for their personal observations and not for publicity purposes.
External agencies may want to record children for the child's personal development and for training purposes. The same procedure will be followed by external agencies with parent/carer consent being sought first.

In Community Groups parents are able to take photos of their own children only. Posters explaining this are displayed in our community group rooms.

Further detail can be found in EVERYFAMILY **online safety policy** regarding use of photos on the website and how we safeguard children and families with regard to use of the Internet.

2.7 Mobile Phones and Smart Watches

Mobile phone possession/use is not permitted in the Day-care rooms. All staff, student and volunteer personal belongings including phones are to be kept in lockers provided. Any staff awaiting a personal call are encouraged to give the Centre phone number. Staff, students or volunteers on outings or home visits use a Centre mobile phone.

The Community Support team have allocated work mobile phones for their personal safety when carrying out home visits. All phones are pin code locked for security in case the phones are lost or stolen.

Smart Watches that are capable of taking photographs are not permitted in the Daycare rooms. Also, staff are to remove Bluetooth connection from their watch to their phone whilst working in the centre to ensure that no external calls and messages can be taken.

2.8 Home Visits

EveryFAMILY staff may visit families at home. When home visiting staff or students fill in a log which is kept on reception at both sites. They will inform a member of management where they are going. There is an agreed 'danger phrase' to be used by staff if they need to phone to let the centre know they are in an unsafe environment. The staff member receiving the call will then follow agreed procedures which will determine the next course of action.
Further detail can be found in **EveryFAMILY Home Visiting Procedure and Lone Working Policy**

2.9 Online safety

At EveryFAMILY we are very aware of the benefits and risks of using new technology. Our **online policy** and procedures encompass Internet technologies and electronic communications such as mobile phones, wireless technology and e-mails. These must be applied in all communication to ensure the safety and well-being of Centre users, volunteers, students, staff, trustees and colleagues in partner agencies and to inform future learning.

2.9a Famly

EveryFAMILY is committed to communicating with parents regarding their children's progress and learning. Famly is an online learning journal system which both staff and parents can contribute to in order to show children's progress. All parents are asked to sign a consent form before children are added to Famly. The form will also outline terms and conditions to comply with data protection and the centres safeguarding policy. **See consent form for further information.**

For further information see e-safety Policy, Social Media Policy and Employee Handbook

2.10 Training and staff support

All staff will be given internal Safeguarding and Child Protection training at induction and retrained annually highlighting any significant changes in policy. Staff will be allocated time for training and research to support professional development.

Training and updates will include emerging safeguarding themes, including serious violence, financial exploitation, modern slavery indicators, misogyny, and technology-facilitated abuse.

All staff will read and understand Part one of Keeping Children Safe in Education. The Part one overview may be used as a complementary quick reference, but it does not replace the requirement for staff to read Part one.

All staff will be given FGM awareness training and will understand their legal duty under the Mandatory Reporting Duty.
All staff must complete PREVENT awareness training. This is to ensure that they can comply with the legal expectations under the PREVENT duty.

Staff training will include clear reference to internal whistleblowing policy and guidance for escalating concerns.

Staff will have additional opportunities to discuss Safeguarding concerns through their supervision sessions. EveryFAMILY leadership and management will ensure these sessions will provide a supportive environment in which confidential and sensitive issues can be explored and discussed. Safeguarding and concerns about other staff will be a standing agenda item for all supervision sessions.

The DSL and deputies will undertake Multi Agency Safeguarding Training in line with current guidelines and provision via the Keeping Bristol Safe Partnership. This will be renewed every two years. The DSL and any deputies will liaise with the Local Safeguarding Partnership to ensure that their knowledge and skills are updated via e-bulletins, attend DSL network meetings, and take time to read and digest safeguarding bulletins.

Other training considerations:

At least one person on any appointment panel will have undertaken safer recruitment training.
Members of the Senior Leadership Team will make themselves aware of and understand their role within the local safeguarding arrangements. This will ensure that those who have responsibility for the management of behaviour, inclusion, Special Educational Needs, and attendance will carry out their duties with a safeguarding consideration.
The Designated Person for Children in Care will undergo appropriate training to fulfil their role to promote the educational achievement of registered pupils who are in care.
Training around safeguarding topics in Annex B will be integrated, aligned, and considered as part of a whole centre safeguarding approach.
Appropriate colleagues have received appropriate training in relation to use of reasonable force and positive handling.

Staff will disseminate learning through team meetings and Staff Development Days.

Records of staff and trustee training will be kept in the **Centre Training Log.**

All staff personal data will be processed and stored in line with EveryFAMILY **Data Protection Policy**

Staff, students and volunteers who require medication on site must inform the management team so secure storage can be organised and if necessary a risk assessment carried out. Please refer to **EveryFAMILY Administration of Medicines Policy**

2.11 Partnership with Parents/Carers and outside agencies

EveryFAMILY is committed to have due regard to relevant data protection principles which allow for sharing (and withholding) personal information as provided for in the Data protection Act 2018 and UK General Data Protection Regulations. This includes how to store and share information for safeguarding purposes, including information which is sensitive and personal and should be treated as 'special category personal data'.
Staff at the setting are aware that:

- ‘Safeguarding’ and ‘individuals at risk’ is a processing condition that allows practitioners to share special category personal data.
- Practitioners will seek consent to share data where possible in line with Information Sharing for Safeguarding Practitioners 2018.

There may be times when it is necessary to share information without consent such as:

- To gain consent would place the child at risk,
- by doing so will compromise a criminal investigation,
- It cannot be reasonably expected that a practitioner gains consent,
- or, if by sharing information it will enhance the safeguarding of a child in a timely manner, but it is not possible to gain consent.

There are also times when EveryFAMILY will not provide children’s personal data where the serious harm test under legislation is met, (by sharing the information the child may be at further risk). When in doubt EveryFAMILY will seek legal advice.

The Data Protection Act 2018 and UK GDPR do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children.

EARLY INTERVENTION

3.1 Aims

EveryFAMILY aims to provide both universal and targeted services to meet the various individual needs of families in the locality. We are committed to working in partnership with a range of local agencies in identify emerging problems and contributing to effective family assessments. We will ensure we are in a strong position to provide appropriate and timely support to families that improves outcomes for children and has an impact on parental well-being and confidence.

EveryFAMILY use a range of information and data to understand the needs of the community and recognise the importance of early intervention in keeping children and families safe.

As referred to in ‘Working Together to Safeguard Children’ (2026) we will seek to provide a continuum of help which includes evidence-based practice such as identified parenting courses.

3.2 Community Support

The Community Development Team will provide universal groups at which parents and carers have the opportunity to engage with staff to receive guidance on particular issues which may range from safety in the home to creative play. These services will continue to be prioritised at EveryFAMILY as they form a vital part of families accessing early preventive help and contributing to safeguarding.

Specific work is delivered in groups to address the needs of families such as those affected by domestic abuse, experiencing parenting difficulties or ante/ post-natal depression. The work in these groups is carried out within set guidelines and staff will refer on to other agencies where any safeguarding issues arise in line with EveryFAMILY Child Protection procedures in section 4.

Where outside agencies deliver services from EveryFAMILY there will be clear protocols agreed with regard to how any safeguarding and child protection matters will be dealt with. A signed Partnership Agreement or Service Level Agreement will be completed.

Staff that are working with Parents/Carers will have regular supervision with their line manager to ensure child protection issues are identified. Any information that is shared with them which indicates any such concerns must be discussed immediately with the Safeguarding Lead or deputising manager and if appropriate referred immediately using the Child Protection procedure below in section 4.

CHILD PROTECTION

4.1 Purpose

EveryFAMILY considers it the duty of staff, students and volunteers to protect children and young people who they come into contact with from abuse. The Trustees will work closely with staff to ensure effective implementation of this Safeguarding and Child Protection Policy and Procedures, thus ensuring the safety of children.

4.2 Definitions

Child Protection is defined as:

'Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.'

Working Together to Safeguard Children (2026)

We recognise that we have an explicit duty to safeguard children who are in need, or who may suffer significant harm as defined in the Children and Social Work Act 2017, and the Education Act 2002.

'Working Together to Safeguard Children' (2026) identifies 4 categories of abuse:

- Physical Abuse.
- Sexual Abuse.
- Emotional Abuse.
- Neglect

These are defined as:

(i) Physical abuse

May involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child, Fabricated and Induced Illness Syndrome (FIIS). Physical abuse includes Female Genital Mutilation (FGM)

(ii) Sexual Abuse

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

(iii) Emotional Abuse

The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal

social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

(iv) Neglect

The persistent failure to meet a child's basic physical needs and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

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

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

4.3 How to recognise child abuse – Signs and Symptoms

Recognising abuse is the most important duty that staff undertake to ensure that they are protecting children from abuse.

> As stated in Keeping Children Safe in Education (2026) "Knowing what to look for is vital to the early identification of abuse and neglect"

Staff are not responsible for diagnosing or investigating child abuse. However, we do have a clear responsibility to be aware of, and alert to signs that all is not well with a child using our services. Not all concerns about children relate to abuse; there may well be other explanations. It is important that staff at the Centre keep an open mind and consider what they know about the child and the child's circumstances.

Set out below are some of the possible signs which may help staff, students and volunteers recognise if a child is being abused. Although these signs do not necessarily indicate that a child has been abused, they may help adults recognise that something is wrong. The possibility of abuse should be investigated if a child shows a number of these symptoms, or any of them to a marked degree. If you are worried, it is not your responsibility to investigate and decide if it is abuse. It is your responsibility to act on your concerns and do something about it.

(i) Physical Abuse

- Unexplained recurrent injuries or burns
- Bruising and/or injury to non-mobile babies
- Improbable excuses or refusal to explain injuries
- Wearing clothes to cover injuries, even in hot weather
- Refusal to undress for a change of clothes
- Bald patches
- Chronic running away
- Fear of medical help or examination
- Self-destructive tendencies
- Aggression towards others
- Fear of physical contact – shrinking back if touched
- Admitting that they are punished, but the punishment is excessive (such as a child being beaten for being un co-operative)
- Fear of suspected abuser being contacted

(ii) Sexual Abuse

- Being overly affectionate or knowledgeable in a sexual way, inappropriate to the child's age
- Medical problems such as chronic itching, pain in the genital, venereal diseases
- Other extreme reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia
- Personality changes such as becoming insecure or clinging
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Sudden loss of appetite or compulsive eating
- Being isolated or withdrawn
- Inability to concentrate
- Lack of trust or fear of someone they know well, such as not wanting to be alone with a babysitter or child-minder
- Starting to wet again, day or night/nightmares
- Become worried about clothing being removed
- Suddenly drawing sexually explicit pictures
- Trying to be 'ultra-good' or perfect; overreacting to criticism

(iii) Emotional Abuse

- Physical, mental and emotional development lags
- Sudden speech disorders
- Continual self-deprecation (I'm stupid, ugly etc.)
- Overreaction to mistakes
- Extreme fear of new situations
- Inappropriate response to pain ('I deserve this')
- Neurotic behaviour (rocking, hair twisting, self-mutilation)
- Extremes of passivity or aggression

(iv) Neglect

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Untreated medical problems
- No social relationships
- Compulsive scavenging
- Destructive tendencies

A child may be subjected to a combination of different kinds of abuse. It is also possible that a child may show no outward signs and hide what is happening from everyone.

Staff, students and volunteers need to be sensitive to signs of abuse, particularly in children with limited or non-verbal communication. Statistically disabled children and children with behavioural difficulties are more vulnerable to significant harm. Staff should be especially vigilant regarding signs relating to disabled children and not automatically assume that any of the above relates to their impairment.

The quality of relationships staff develop with children is vital in helping to understand unexplained changes in behaviour and /or personality. Small as well as more obvious unexplained changes may indicate a cause for concern. Staff and students should be made aware of any children who have a social worker and be extra vigilant.

Historical Abuse
There may be occasions when a child will disclose abuse (sexual, physical, emotional or neglect) which occurred in the past. This information needs to be treated in the same way as a disclosure of current child abuse. The reason for this is that the abuser may still represent a risk to children now.

Vulnerability

Vulnerability considerations raised by the Equality Act 2010 and Keeping Children Safe in Education 2026

In relation to safeguarding and promoting the welfare of children, our setting will consider how we are supporting children regarding protected characteristics - including disability, sex, sexual orientation, gender reassignment and race

Some children may be more vulnerable to abuse for a range of reasons, so staff need to be alert to these.

· Disabled children. Staff should be vigilant regarding possible signs of abuse relating to disabled children and not automatically assume that signs relate to their impairment.

· Send/children with behaviour issues

· Looked after children/children in care

· Homelessness

· Children with allocated social worker or family support worker

· Privately fostered children

· Young carers

· Parents/carers in prison

· Parents/carers or children with alcohol, drug use or domestic abuse issues

· Mental Health issues in parents/carers or children

· Missing from home, care or education

· Is at risk of being radicalised or exploited

· Children isolated and unsupported for a range of reasons

This list is not exhaustive and vulnerability is a changing situation which

can affect any child. These children may benefit from Early Help.

Every vulnerable child will have a named Key Worker and

when needed they will work together with the DSL or Inclusion Lead to ensure the child is supported. If needed, a written support plan will be put in place.

Not all concerns about children or young people relate to abuse, there may well be other explanations. It is important to keep an open mind and consider what you know about the child and their circumstances.

If you are worried, it is not your responsibility to investigate and decide if it is abuse. It is your responsibility to act on your concerns and do something about it.

Key safeguarding areas

These topics are themes that can impact on children and families, there are specific areas of safeguarding that the setting has statutory responsibilities to address which are hyperlinked:

· Children in the court system – Guidance to support children is available GOV.UK (www.gov.uk)

· Children affected by parental offending/imprisonment. everyFAMILY are commissioned to deliver this work and facilitate the support for children across the South West.

· Children missing from education – including persistent absence. · Child Exploitation (including both Child Sexual Exploitation and Child Criminal Exploitation and county lines, modern day slavery and trafficking)

· Cybercrime

· Modern slavery, including trafficking, servitude, forced or compulsory labour, and indicators that a child may be controlled or moved for the purpose of exploitation. · Domestic Abuse

· Homelessness

· So-called Honour based Abuse (including Female Genital Mutilation and Forced Marriage), · Online Safety · Mental health · Child on child abuse:

Bullying (including cyberbullying, prejudice-based and discriminatory bullying).

Abuse in intimate personal relationships between children (also known as teenage relationship abuse).

Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse).

Sexual violence, such as rape, assault by penetration and sexual assault;(this may include an online element which facilitates, threatens and/or encourages sexual violence).

Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse.

Causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.

Consensual and non-consensual self-generated intimate images and/or videos, including AI-generated or manipulated content such as deepfakes.

Upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm; and

Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element). · Preventing Radicalisation (The Prevent Duty)

· Serious Youth Violence

· Substance Misuse · Private Fostering · Young Carers

· Forced Migration

· Financial exploitation, including where children are coerced, controlled or manipulated in relation to money, debt, benefits, gifts, transport or access to goods.

Additional information about key safeguarding areas can also be found in Keeping Children Safe in Education (Annex B); the NSPCC website - Types of Abuse; And for localised resources for education settings The Bristol Safeguarding in Education website.

Missing Child / Unexplained Absence

Children going missing from the setting when this is unexplained (through not attending when expected), particularly if this is a prolonged absence or if a child is unexpectedly removed from a setting, can act as a vital sign for a range of safeguarding possibilities. This may include abuse and neglect, sexual abuse or exploitation and criminal exploitation. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation, risk of forced marriage, family crisis or other issues that could affect the health and well-being of a child.

Although the children are not in compulsory education, we have a responsibility to follow up on unexplained absences to ensure that the child and family are safe and well, which forms part of our safeguarding commitment. We will expect that every child registered will have two emergency contacts and parents will be made aware that if their child is absent without a reason given that we will make contact to ascertain the reason. Particular care will be taken where there are known vulnerabilities and also when the family might otherwise be isolated (e.g.: summer holidays). The setting will risk assess and decide if any action involving external agencies is needed to safeguard children.

To manage this appropriately we have detailed information regarding children's absence without notification in our Attendance and Absence policy and Parental agreement.

Staff should follow procedure when children are absent from day care sessions by following protocol from **EveryFAMILY's Attendance Policy**.

4.4 Environmental factors

In addition to the signs above there are environmental factors to be aware of in relation to the safeguarding of children and adults some examples of which are;

- Domestic Abuse

Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate family partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to: psychological; physical; sexual; financial and emotional.
Exposure to domestic abuse and/or violence can have a serious, long lasting impact on children.

Staff may be working with children experiencing abusive relationships between the adults at home. Children experiencing this may demonstrate many of the symptoms described in para 4.3. Staff will need to treat them sensitively, record their concerns and consider a referral to First Response and specialist agencies. Designated staff should be conversant with the MARAC process and ensure the Centre contribute to information sharing when required.

- Parent/Carer Mental Health Issues

Staff at the Centre may become aware of families in which the main carer is experiencing mental health difficulties. It is to be expected that working with parents of young children there will be adults with Ante or Post Natal Depression. Where possible it is important to engage with the adult and encourage them to seek medical help and support from the Family Support Team. In some instances, it may become clear that the parent's capacity to care and respond to the child's needs are severely impaired such that he/she is suffering neglect and emotional abuse. It is then crucial that staff use the procedures below to refer to First Response.

For further information see;
'Protocol for joint working across mental health and children's services' and 'Joint Practice Guidance for Children's Services and Adult Substance Misuse Services' BSCB

- Female Genital Mutilation (FGM)

FGM has been a criminal offence in the UK since 1985. In 2003 it also became a criminal offence for UK nationals or permanent residents to take their child abroad to have female genital mutilation (Female Genital Mutilation Act 2003). Anyone found guilty of the offence faces a maximum penalty of 14 years in prison.

Section 73 of the Serious Crime Act 2015 amended the Female Genital Mutilation Act to include FGM protections orders (FGMPOs). An FGM protection order is a civil measure which can be applied for through a family court. The FGM protection order offers the means of protecting actual or potential victims from FGM under civil law.

It is helpful if you can have conversations at the earliest opportunity with parents and carers and provide information in leaflets about FGM from the KBSP website: KBSP Professional Resources

All agencies have a statutory responsibility to safeguard children in terms of preventing girls from FGM and identifying children who have already survived the procedure. It is important that staff are aware of what FGM is and the signs to look out for in girls at risk of the practice. For more information, please go to Bristol Resources on the SWCPP trix website: kbsp-fgm-policy-final.pdf

Being able to identify girls who are at risk needs a sensitive approach.

Consider whether any other indicators exist that suggest FGM may take place or has already taken place, for example:

· The child has changed in behaviour after a prolonged absence from the setting;

· The child has health problems, particularly bladder or menstrual problems;

· The child has difficulty walking, sitting or standing and may appear to be uncomfortable.

If a girl is at immediate risk of FGM taking place, it is a significant child protection issue and must be reported to the police and/or First Response.

You have a statutory duty to report if a girl under 18 informs you they have had FGM or if you see it. If FGM has taken place it is a significant child protection issue and must be documented and reported to First Response and/or the police.

When FGM has taken place, the Children's Social Care team will liaise with the health services so that a statutory safeguarding assessment takes place and to look at how the girl and family will be supported to access appropriate health care if needed. Legal action may be considered.

At any time, you may seek advice from BAND, Family Help or First Response

For more information on this topic, see the online South West Child Protection Procedures, NSPCC or, locally KBSP. Contact details are in the appendix.

- Child sexual exploitation

HM Government document 'Safeguarding children and young people from sexual exploitation' definition is as follows;

'Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example, being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.'

Centre staff, students and volunteers should be alert to these issues within families and the local community and discuss any concerns with the Safeguarding Lead and Child Protection Officer and follow child protection referral procedures if required.

For more information see 'Safeguarding children and young people at risk of sexual exploitation' BSCB.

- Radicalisation
- Staff will be trained to recognise possible signs. In line with our Online Safety Policy, appropriate controls for digital content will be in place.
- Our setting can also build pupils' resilience to radicalisation by promoting fundamental British values of: democracy; the rule of law; individual liberty; mutual respect for and tolerance of those

with different faiths and beliefs and for those without faith or by discussing human rights so enabling children to challenge extremist views.

- When considering visitors and speakers at our setting we will assess their suitability and their adherence to our Equalities policy.
- There is no single way of identifying an individual who is likely to be susceptible to a terrorist or extremist ideology. As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. We will risk assess and take action if staff observe behaviour of concern. The Police Prevent Team can give advice, contact 01278 647466 or ring 101 and ask for the Prevent team, explaining you are calling about extremism or radicalisation.
- Any concerns about a child will be referred through First Response or the police. The concern may then be dealt with through usual safeguarding procedures or referred to the Channel process. For information regarding the Channel process, an email address is in the
- appendix, along with other contacts.
- Another source of advice around preventing extremism in schools and children's services nationally is the Counter Extremism Group.
- If concerned about extremism in a school or organisation that works with children, or if you think a child might be at risk of extremism, contact the helpline. Telephone 020 7340 7264 or Email counter.extremism@education.gov.uk

4.5 If Abuse is Suspected

Recognising abuse is one of the first steps in protecting and safeguarding children and young people. Following guidance from **What to do if you're worried a child is being abused: advice for practitioners (2015)**

- Where staff suspect abuse, they should discuss this with the Safeguarding Lead or deputising manager. Signed and dated records should be made of all relevant information.

- An appropriate member of staff should then discuss any signs or behavioural changes (e.g. bullying, accidents) they have seen with the child's parents/carers at the earliest opportunity. There may be a known reason for this (e.g. a change in family make-up, death of a family member/pet).

- Any member of staff, student or volunteer can contact a relevant agency to discuss any concerns that they may have before reporting, they can give you guidance and support in how to deal with situations and confirm appropriate action to take.

- If you continue to be concerned about the welfare of the child, the information must be passed on to First Response as per centre procedures (see at para 4.10 and para 4.11.). It is important to remember that if you do report concerns, you are not reporting the parents or carers – you are reporting to protect the welfare of the child.

- Where possible, inform parents/carers that you are going to report your suspicions/concerns. This might not always be possible, and should not put the child or yourself at risk.

4.6 What to do if abuse is disclosed

When a child discloses abuse, the member of staff should take the following action:

- Stay calm.
- Listen to what the child / young person is actually saying.

- Do not promise the child that this can be kept secret, as subsequent disclosure could then lead to the child feeling betrayed. Explain that you are obliged to inform other people.
- Make a note of any conversations with the child, trying to make these as detailed as possible, including when and where the conversations took place. Draw a diagram, if appropriate, to show the position of any bruises or marks the child or young person shows you, trying to indicate the size, shape and colour.
- Record the same day and use the actual words used by the child. Sign and date the recording which must be countersigned by a manager.
- Keep all records factual. Be aware of not making assumptions or interpretations of what the child / young person is telling you. Store all records securely.
- Do not interrogate the child, or push for more information. Ensure that any questions asked are open, not leading closed questions. Do not ask the child / young person to repeat what they have told you, for another worker or Trustee.
- Victims of harm should **never** be given the impression that they are creating a problem by reporting abuse, sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.
- Discuss your concerns with the Safeguarding Lead or deputising manager/senior leader. If the allegations implicate the Centre Director or Safeguarding Lead, the concerns should be discussed with the next tier of line management – the named Trustee responsible for Child Protection.
- If necessary, report the disclosure yourself to First Response (see Referral below) and OFSTED.

There may be occasions when a child will disclose abuse which occurred in the past, termed historical abuse. This information needs to be treated in exactly the same way as a disclosure of current child abuse. The reason for this is that the abuser may still represent a risk to children now.

At EveryFAMILY we recognise the possibility that children could experience abuse from another child (peer on peer abuse) and are committed to investigating any instances in a sensitive, professional manner equally safeguarding both parties.

If you or the DSL are uncertain about whether the concern is reportable, call the Family Help for advice;

Child on child abuse

Children can abuse other children. This is generally referred to as child-on-child abuse and within intimate partner relationships; bullying (including cyberbullying); sexual violence and sexual harassment; harmful sexual behaviour, physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sharing nudes or semi nudes and initiation/hazing type violence and rituals. It is important that all victims are taken seriously and offered appropriate support.

All staff should recognise that children can abuse other children, including online. It is important that incidents of harm are addressed under safeguarding policy alongside the behaviour policy. Concerns about the welfare of children require appropriate processes to be followed and records to be kept on the child's safeguarding or child protection file.

This includes recognising harmful sexual behaviour, the role of misogyny in shaping abusive attitudes and behaviour, and the fact that technology can be used to facilitate, amplify or record abuse, including through self-generated intimate images, image-based abuse and AI-generated content.

Keeping Children Safe in Education 2026, part five, provides information and guidance on managing cases of child-on-child sexual violence and sexual harassment. Other areas of child-on-child abuse will be dealt with in line with existing policies e.g., anti-bullying or behaviour management.

Young people concerned about their own or other's sexual thoughts and behaviours may contact Lucy Faithfull Foundation's "Shore Space" confidential chat service.

Additional Safeguarding Terms

In addition, safeguarding action may be needed to protect children against:

(Please note that some of these terms are used to describe the same/similar harms and there are often overlaps: e.g. a child might get groomed or coerced into a gang where there is the risk of being a victim of serious violence and that gang might be involved in county lines drug selling.)

· Bullying, including online bullying (cyberbullying)and prejudice-based bullying

· Racist, disability and homophobic or transphobic abuse

· Gender-based violence/violence against women and girls

· Child Sexual Exploitation and trafficking -

· Modern slavery/trafficking/children from abroad

· Child Criminal Exploitation and County Lines (Serious violence)

· Gang activity or youth violence

· Risks linked to using technology and social media, including online bullying; the risks of being groomed online for exploitation or radicalisation; and risks of accessing and generating inappropriate content, e.g.: sharing nudes or semi nudes and accessing pornography

· Teenage relationship abuse

· Substance abuse

· Homelessness

· Forced marriage

· So-called "honour-based" abuse (this includes Forced Marriage, FGM and Breast Ironing)

4.7 Recording

Any member of staff, student or volunteer receiving a disclosure of abuse, or noticing possible abuse, must make an accurate record the same working day or the following morning, (if out of hours working), noting what was said or seen, putting the event into context, and giving the date, time and location.

Records should be: clear, use straightforward language, concise, accurate, contemporaneous, dated, presented chronologically, written to differentiate between facts, opinion, judgments and hypothesis,

written to show emphasis by underlining and with a mind that the subject of a record does have the right in law to request access to them at any stage. Judgments made, actions and decisions taken, and who agreed and who is responsible should be carefully recorded.

Records should cover these basic facts:

- What you saw: when and where (this includes the position of any bruises or marks that you have seen on the child, trying to indicate size, colour and shape)
- What you said: when, where and who to
- What was said to you: when, where and who by
- What you thought and why you thought it
- What you did;

And

- Any other relevant information

All hand-written records will be retained, even if they are subsequently typed up in a more formal report. Where necessary child protection notes made in workers notebooks should be photocopied from the notebook, signed, dated and placed in the file.

Written records of concerns about children should be kept, even when there is no need to make a referral immediately.

All records relating to Child Protection concerns will be kept on CPOMS a password protected computer system and will remain confidential. Confidentiality must be maintained and information relating to individual children/families will be shared with staff on a strictly need to know basis.

Recording should be reviewed as part of management monitoring and evaluation responsibilities.

Parents/carers must submit a written request to access their child's file/records.

The Data Protection Act 2018 and UK General Data Protection Regulations do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children.

Where information is shared, the setting will ensure decisions are necessary, proportionate, relevant, accurate, timely and secure, and that the rationale is clearly recorded.

4.9 Referring

Referral means sharing information about concerns with outside agencies. If staff are concerned about the welfare of the child, information must be passed on to the appropriate agency. It is important to remember that if you report concerns, you are not reporting the parents/carers – you are reporting to protect the welfare of the child. A child can be referred to the First Response Team, or the emergency services, or to other services.

- First Response will assess the call/webform contact and pass you onto an appropriate agency. This will be Social Care (Level 4 Specialist, Statutory Response) if it is a Child Protection issue or the child is in need of another specialist service or Family Help (Level 3 Intensive support) where the children and families have multiple complex needs requiring intensive and co-ordinated support.
- The DSL or First Response may also decide that support could be offered at Level 2 (Additional needs), from community-based services. An identified lead agency will be expected to continue providing or start providing support, according to this advice (this may be our provision). First Response may also make a "No Further Action" decision.

- In all cases the referrer/DSL will be contacted using the contact details provided. Referrers/DSL must feedback the outcome of the referral to the child/family.
- Where a child has an existing social worker or Family Help worker, information on disclosures should be shared directly with the lead professional. First Response manages new referral and requests only.

Inform parents/carers that you are going to report your concerns (see above 4.10 reporting). This might not always be possible and should not put the child or yourself at risk. When you report an incident, agencies will ask you if the parent/carer has been informed. If they haven't, they will want to know the reasons why.

If the child has an allocated Social Worker (the details of which will be recorded on the child's registration form) the suspected abuse/information should be directed to them.

Where the referral focuses on disability issues, the Disabled Children Duty Social Worker should be contacted.

If the child is placed for adoption, all enquiries or new information should be directed to the child's allocated Social Worker and, in their absence, if the matter is urgent, to the Duty Social Worker for their team.

The First Response Team should be telephoned on the same day staff have the concern on 0117 9036444 if it is an emergency or use the first response online form if instructed to do so.

They should formally acknowledge the referral within 1 working day and let you know what they have decided to do as a result. If you have not heard anything after 3 working days, take the referral to a higher authority within the First Response Team and tell the First Response worker what you are doing.

Out of hours referrals should be made to the Emergency Duty Team on 01454 615165.

It may be appropriate to contact the Police directly.

4.10 Escalation

Where the referral to First Response has not been allocated for appropriate action and the worker has concerns that this may be leaving a child at risk the Safeguarding Lead should where appropriate take action in accordance with the Escalation process.

4.11 Multi Agency Working

EveryFAMILY are extremely aware of the importance of excellent partnership working with Social Care and Health in order to maintain the safety and well-being of families.

Staff and students will maintain frequent contact with social workers and health visitors of families that have a child protection plan and/or are subject to court proceedings. We will work to agreed plans and in partnership with parents and will update colleagues fully on both emerging concerns and progress. We will work with social workers and parents to compile relevant information regarding child development, progress and parenting capacity.

Staff must report to the Safeguarding Lead or deputising manager if children with a Child Protection Plan do not attend without a satisfactory explanation from their parent/carer. Staff will agree with social workers individualised reporting mechanisms related to Action Plans to ensure effective communication.

The Safeguarding Lead will ensure that Case Conferences and Strategy meetings are attended by suitably experienced staff. A written report, as shared with the parent/carer beforehand will be submitted to the conference.

EveryFAMILY staff and students will where required participate in core groups.

Where children are designated as Child in Need staff from the Centre will with the knowledge of the parent/carer maintain contact with the allocated social worker and share information as necessary always working to ensure the safety and well-being of the child is paramount.

The Safeguarding Lead keeps a record of all Child Protection, Child In Need, LAC and Families in Focus cases such that the organisation has a clear picture of current responsibilities and commitments.

The Safeguarding Lead will use information received from CYPS to ensure wherever possible the Centre are in contact with and providing services to the most vulnerable children in the reach area.

EveryFAMILY will co-operate fully in any Serious Case Reviews related to families accessing the Centre. The Safeguarding and Child Protection Lead will ensure that learning from Serious Case Reviews is disseminated to staff and used to inform and improve practice and procedures.

4.12 Support to Staff, volunteers or students

As a result of dealing with disclosure or reporting your concerns, you may feel angry or upset. It is important that you are able to work this through in supervision. The Trustees fully support all members of staff in following this procedure and if you wish, you should talk to the Trustee responsible for Safeguarding and Child Protection. In addition, any of the appropriate agencies listed will be able to provide support.

4.13 Allegations against a member of staff, volunteer or student

Whistleblowing procedures

Staff, volunteers or students may also be subject to allegations of abusing children. While support will be offered, the staff and Trustees will ensure that the investigating officer concerned is given all assistance in pursuing any investigation. The EveryFAMILY Disciplinary Procedure may be implemented.

Staff Allegations and Low-Level concerns

A low-level concern is a concern about behaviour or conduct

- Staff member notices a concern
- Staff member records their concerns about another staff member or volunteers conduct and reports this to the DSL
- The DSL must assess whether the reported behaviour meets the harm test:

Definition of harm test - Staff allegation

If it appears or has been reported (e.g.: by a parent/carer or another child) that a staff member or volunteer has:

* behaved in a way that has harmed a child, or may have harmed a child, or;

* possibly committed a criminal offence against or related to a child, or;

* behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children;

* behaved or may have behaved in a way that indicates they may not be suitable to work with children.

The following signs and symptoms may mean that staff, volunteers or students are involved in abuse or may cause as investigation for low level concern:

- Paying an excessive amount of attention to a child or groups of children
- Providing presents, money or having favourites
- Seeking out vulnerable children, e.g.: disabled children
- Trying to spend time alone with a particular child or group of children on a regular basis
- Making inappropriate sexual comments
- Sharing inappropriate images
- Being vague about where they have worked or when they have been employed
- Encouraging secretiveness

Staff Allegation: If the harm test is met or is possibly met:

· The DSL should take steps to ensure that during the remainder of the working day that particular member of staff is not left in sole charge of any child or children;

If it appears that a member of staff, volunteer or student has behaved in a way that has harmed a child, or may have harmed a child; or possibly committed a criminal offence against or related to a child; or behaved in an inappropriate way towards a child which may have indicated that he or she is unsuitable to work with children, then the following procedures must be followed:

Concerns must be recorded and reported to the Safeguarding Lead. They will then take steps to ensure that during the remainder of the working day the person concerned is not left in sole charge of the children or any child.

At the earliest opportunity, the Safeguarding Lead should contact the Trustee responsible for Safeguarding and Child Protection. The Safeguarding Lead should contact the Local Authority Designated Officer within Bristol City Council.

The Safeguarding Lead will ask the LADO for advice on how to proceed given the nature of the concerns. The Centre should then follow the Local Authority Designated Officer's advice on how to deal with allegations against staff.

The Safeguarding Lead should make a signed and dated written record of their concerns, observations and the information they have received.

They must maintain confidentiality and guard against publicity while an allegation is being considered or investigated and follow local information sharing protocols.

The Safeguarding Lead, Trustee for Safeguarding or Centre Director will contact the Designated Senior Officer within the Early Years and Childcare service to inform them about the situation and proposed actions.

OFSTED should be informed of any allegations of abuse against a member of staff, Trustees, or volunteer, or any abuse that is alleged to have taken place on the premises or during a visit or outing. While support should be offered to those involved, the staff and Trustees, will ensure that the agencies concerned are given all assistance in pursuing any investigation.

If it appears that the Centre Director, Safeguarding Lead or the Trustee responsible for Safeguarding and Child Protection, has behaved in a way that has harmed a child, or may have harmed a child; or possibly committed a criminal offence against or related to a child; or behaved in an inappropriate way towards a

child which may indicate that he or she is unsuitable to work with children, then staff should contact the Local Authority Designated Officer (LADO) and Designated Senior Officer for Early Years directly.

If appropriate, Social Services and/or the Police will be informed by the LADO. Relevant evidence and information will be given by the Centre if required. Proven allegations may be deemed as gross professional misconduct and in line with the everyFAMILY Employment Handbook and Disciplinary Procedures could lead to immediate termination of employment.

Should a member of staff, student or volunteer leave everyFAMILY employment following a proven allegation in respect of Safeguarding, OFSTED and the DBS will be informed.

EveryFAMILY will fully support all members of staff, student or volunteer in following this procedure following an allegation or investigation. While support will be offered to the person where an allegation has been made, the Leadership Team will ensure that the agencies concerned are given all assistance in pursuing any investigation.

Local Authority Designated Officer **(LADO)** for Bristol City Council are Alice Bennett, Nicola Laird and Richard Lingard.

Tel: 0117 9037795

LADO@Bristol.gov.uk

4.14 Confidentiality and appropriate disclosure of information

Confidentiality is crucial to all our relationships, but the welfare of the child is paramount. The law does not allow anyone to keep concerns relating to abuse to themselves. Therefore, confidentiality may not be maintained if the withholding of information will prejudice the welfare of the child.

All information that has been collected on any child will be kept locked and secure and confidential between those concerned. Access will be limited to the appropriate staff, management and relevant agencies. In the event of an investigation it is essential that no information on Child Protection concerns relating to a child are disclosed inappropriately. Any such leaks could have serious consequences for both the child concerned and any investigation.

Parents/carers have the right to see any records kept on their child. This might not always be possible, and should not put the child or staff at risk. It is very important that only those who need to know, actually know, to avoid rumour and gossip that could affect the child, parents/carers and the setting.

EveryFAMILY understands the importance of transferring family files to schools/daycare providers in order to ensure safeguarding information has been passed on. This transferring of documents is carried out by following the KBSP guidelines.

Staff, volunteers and students must maintain professional boundaries within their work in terms of confidentiality and managing working relationships with families at all times. This may prove a particular challenge for staff who live locally. Any connections with families that result in a conflict of interest or any other difficulty must be discussed immediately with a member of the Leadership and Management Team.

For further information refer to **EveryFAMILY Confidentiality Policy and the Employee Handbook**

4.15 Pandemic/Epidemic

In the case of a pandemic or epidemic and in a centre lockdown, a list of vulnerable families will be collated and referred to in order to ensure regular contact and monitoring with the family is carried out. This contact will be recorded on a log sheet and communication will continue with any other professionals involved.

Date of Policy: September 2026
Kerri Matthews
Roxane Twining

Trustee: Erik Montgomery

Date for review: September 2026

Further Information

South West Child Protection Procedures – provide detailed online information on all aspects of child protection, e.g. : Staff allegations Welcome to the South West Child Protection Procedures (trixonline.co.uk) Welcome to the South West Child Protection Procedures

Multi Agency Guidance for injuries in non-mobile babies non-mobile-baby-injury-policy-update-final-july-2023.pdf (bristolsafeguarding.org) non-mobile-baby-injury-policy-update-final-july-2023.pdf

Working Together to Safeguard Children 2026 Working together to safeguard children 2026

Making a referral to First Response online advice and link to practitioner booklet https://www.bristol.gov.uk/social-care-health/make-a-referral-to-first-response Make a safeguarding referral to First Response for professionals

Guidance for safer working practice for those working with children and young people in education settings https://saferrecruitmentconsortium.org/ Professional and Personnel Relationships (cimpress.io) Safer Recruitment Consortium training information Professional and Personnel Relationships

Information sharing. Advice for practitioners providing safeguarding services to children, young people, parents and carers, 2024 Information sharing advice for safeguarding practitioners - GOV.UK (www.gov.uk) Information sharing advice for safeguarding practitioners - GOV.UK

KBSP "Guidance on the transfer of a child protection safeguarding file to another educational setting" https://bristolsafeguarding.org/media/myopzmfj/transfer-of-cp-and-safeguarding-file-reviewed-may-2020.pdf Guidance on the transfer of a Child Protection Safeguarding File to another educational setting (bristolsafeguarding.org) Guidance on the transfer of a Child Protection Safeguarding File to another educational setting

Prevent Duty Guidance for England and Wales The Prevent duty: an introduction for those with safeguarding responsibilities - GOV.UK (www.gov.uk)

The Prevent duty: an introduction for those with safeguarding responsibilities - GOV.UK

KBSP Threshold Guidance 2023 "Effective Support for Children and Families in Bristol" Update 2026 Keeping Bristol Safe Partnership: Effective Support for Children and Families in Bristol Keeping Bristol Safe Partnership: Indicators of need Keeping Bristol Safe Partnership: Effective Support for Children and Families in Bristol Keeping Bristol Safe Partnership: Indicators of need

EYFS Safeguarding and Welfare Requirements – Child Protection Sept 2026 Early years foundation stage (EYFS) statutory framework - GOV.UK

Early years foundation stage (EYFS) statutory framework - GOV.UK

Early Years Inspection Toolkit Early years inspection: toolkit, operating guide and information - GOV.UK

Early years inspection: toolkit, operating guide and information - GOV.UK

Keeping children safe in education 2026 Keeping children safe in education - GOV.UK

Keeping children safe in education - GOV.UK

KBSP Protocol: Children who Display Harmful Sexual Behaviour kbsp-harmful-sexual-behaviour-guidance.pdf

kbsp-harmful-sexual-behaviour-guidance.pdf

Lucy Faithfull: Shore Space

A confidential chat service supporting young people concerned about their own or someone else's sexual thoughts and behaviours About Shore - Shore

Safeguarding children and protection professionals in early years settings online safety considerations https://www.gov.uk/government/publications/safeguarding-children-and-protecting-professionals-in-early-years-settings-online-safety-considerations

Safeguarding d/Deaf and disabled children and young people Safeguarding d/Deaf and disabled children and young people | NSPCC Learning

Safeguarding d/Deaf and disabled children and young people | NSPCC Learning

Appendix A – Useful contacts

1. Committee Members/Registered Person responsible for Child Protection (Child Protection Officer)

Name/s: Erik Montgomery erik.montgomery@gmail.com

2. Staff Designated Safeguarding Lead and Deputy Designated Safeguarding Lead

Name: Roxane Twining rox@everyfamily.org.uk

Name: Kerri Matthews, kerri@everyfamily.org.uk Samantha Chinnick, sam@everyfamily.org.uk Anna Jenkins anna@everyfamily.org.uk

3. Referral Agencies

· First Response T: 0117 9036444 (all Bristol)

· The place to call for all safeguarding and child protection referrals. Calls to First Response may result in direct referral to a Social Work Team. · Targeted support from Family Help, make request online: Make a request for targeted support

· Family Help: For guidance: North 0117 352 1499; East / Central 0117 3576460; South 0117 903 7770

· Disabled Children Team (all Bristol) - Tel: 0117 9038250

· Emergency Duty Team /Out of Office Hours T: 01454 615 165

· Police: Non-emergency – Tl: 101 Emergency – Tel: 999

· On-Call Consultant Paediatrician (via BRI Switchboard) T: 0117 923 0000 – non-mobile babies

For Staff Allegations Contact: · Online Lado referral form: lado-referral-form-2025-update.docx

· Local Area Designated Officer – T: 0117 903 7795, Work mobile: 07795 091020

· Registered providers must inform Ofsted of any allegations of serious harm or abuse as soon as reasonably practicable, but at the latest within 14 days of the allegations being made. Report a serious childcare incident - GOV.UK

5. Support and advice

· South West Child Protection Procedures (online guidance) https://swcpp.trixonline.co.uk/

· Childline -T: 0800 1111 (open 24 hours)

· National Association for the Prevention of Cruelty to Children (NSPCC) -T: 0808 800 5000

· NSPCC Whistleblowing hotline: T: 0800 028 0285 or email help@nspcc.org.uk · NSPCC FGM helpline: T: 0800 028 3550 or email fgmhelp@nspcc.org.uk. · Keeping Bristol Safe Partnership (guidance and training) KBSP Training

· Police Prevent Team: T: 01278 647466 PreventSW@avonandsomerset.police.uk

· Refuge National Domestic Abuse Helpline: T: 0808 2000 247

· Next Link (domestic abuse Bristol): T: 0800 470 0280/0117 925 0680 · Employers initiative on domestic abuse https://www.eida.org.uk/

· BAND Childcare Advisor - T:

Linked policies and procedures – review alongside this policy for consistency:

Attendance and Absence

Low Level Concerns

Mobile Phone and Electronic Devices

Online Safety

Parental Agreement

Safer Recruitment

Staff Code of Conduct/Behaviour

Supervision

Training

Whistleblowing