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***'Supporting Children to Flourish, Respecting and Nurturing their Individuality and Developing Strengths in Preparations for their Unique Learning Journey.'***

# Safeguarding and Child Protection Policy -with indicators

Statement of Intent

We work with children, families and our local community to keep every child safe and to give them the very best start in life. We create an environment in which children are safe from harm, concerns are taken seriously, and professional curiosity is encouraged so that staff explore indicators of abuse or neglect and consider ‘what life is like’ for each child. Safeguarding is everyone’s responsibility.

Roles and Named Safeguarding Leads

• Designated Safeguarding Lead (DSL): Mollie Linley (Supervisor)• Deputy DSL: Jemma Walsh• Committee Safeguarding Lead: (Rachel B )All staff share responsibility for safeguarding and must follow this policy.

Definitions and Categories of Abuse

We recognise the four categories of abuse: physical, emotional, sexual and neglect. We also recognise specific forms of harm, including child-on-child abuse, domestic abuse, child sexual/criminal exploitation, female genital mutilation (FGM), fabricated or induced illness, modern slavery/trafficking, online abuse, and radicalisation.

Legal and Statutory Framework

This policy is informed by:• Working Together to Safeguard Children (2023)• Statutory Framework for the Early Years Foundation Stage (EYFS) (September 2025)• Prevent Duty Guidance (and local Prevent/Channel arrangements)• Information sharing: advice for practitioners (DfE, 2024)• Children Acts 1989 and 2004; Childcare Act 2006; Equality Act 2010; UK GDPR and Data Protection Act 2018• Warrington Safeguarding Partnership procedures

Aims

• Build a culture of safety in which children are protected from harm across all aspects of our provision.• Act quickly to safeguard children and seek Early Help when families face difficulties.• Respond promptly and appropriately to all incidents or concerns and work with statutory agencies.• Promote children’s right to be strong, resilient and listened to through our curriculum and daily practice.

Safer Recruitment and Ongoing Suitability

• Posts are exempt from the Rehabilitation of Offenders Act 1974; enhanced DBS checks are undertaken.• At least one safer-recruitment trained person is involved in hiring.• Staff complete annual suitability declarations (including relevant health/medication) and disclose any cautions/convictions.• Disqualification: We follow the Childcare (Disqualification) Regulations 2018. Disqualification by association does not apply to non‑domestic settings; however, we assess any risks disclosed and take proportionate action.

Induction, Training and Professional Curiosity

• All staff, students and volunteers receive safeguarding induction, including whistleblowing, low‑level concerns, Safe Use of Mobile Devices/Images, and how to make a referral.• Regular refreshers and updates are provided; training and supervision promote professional curiosity and respectful challenge.

Recognising and Responding to Concerns

Staff are alert to indicators of abuse/neglect and emerging needs. We:1) Listen and reassure; do not promise confidentiality or ask leading questions.2) Record concerns factually (child’s words, time/date, context) and inform the DSL.3) Take action without delay. If a child is at immediate risk, we contact the police (999).

Early Help, Thresholds and Local Pathways

We use Warrington’s thresholds and Early Help processes. With parental consent, we complete an Early Help Assessment and use the Multi‑Agency Request for Support (MARS) process for additional help. If needs escalate, we contact the MASH.

Making a Referral – Warrington Contacts

• Children’s Social Care (MASH): 01925 443322 (press 1 and say ‘MASH’) – office hours• Out of hours/Emergency Duty Team: 01925 444400• LADO (allegations about staff/volunteers): LADO@warrington.gov.uk | 01925 442079• Warrington Safeguarding Partnerships: www.warringtonsafeguardingpartnerships.org.uk

Allegations Against Staff and Volunteers

Any allegation that a person who works with children has:• behaved in a way that has harmed, or may have harmed, a child;• possibly committed a criminal offence against or related to a child; or• behaved towards a child in a way that indicates they may pose a risk to children,is reported to the DSL immediately. We consult the LADO without delay and follow their advice. Where appropriate, Ofsted is notified as soon as is reasonably practicable and within 14 days. Precautionary suspension may be used as a neutral, paid measure during enquiries.

Information Sharing and Confidentiality

We share information lawfully to safeguard children: it is not a breach of data protection to share information where there is a safeguarding concern. We follow the DfE Information Sharing advice (2024) and our Confidentiality/Data Protection policies.

Recording and Record Keeping

• We keep a secure chronology (worry log) of concerns and monitor patterns, including incoming injuries.• Records are factual, dated and signed; body maps used where appropriate.• We store and retain records in line with UK GDPR/DPA 2018 and share them with statutory partners as required.

Specific Risks and How We Respond

• FGM: Teachers and regulated professionals have a mandatory duty to report known cases to the police. We train staff to recognise indicators and seek advice immediately.• Child Sexual/Criminal Exploitation (CSE/CCE): Staff note indicators such as unexplained gifts, changes in behaviour, missing episodes; we refer to MASH.• Children Missing Education: Unexplained absence prompts same‑day checks and, where patterns emerge, a referral.• Online Safety: We supervise access, use filters/safe search, and work with parents on safe use at home.

Prevent Duty (Preventing Radicalisation)

We have due regard to the need to prevent people from being drawn into terrorism. Concerns are discussed with the DSL and, where appropriate, referred via the Prevent process/Channel. Warrington advises referrals to prevent@merseyside.police.uk with a copy to childreferral@warrington.gov.uk (for children) or servicereception@warrington.gov.uk (for adults).

Curriculum, British Values and Empowering Children

Through the EYFS we promote children’s personal, social and emotional development, body safety, respectful relationships, and British Values (democracy, rule of law, individual liberty, mutual respect and tolerance) in developmentally appropriate ways.

Working in Partnership with Parents and Support to Families

We build trusting relationships with families. We explain our duty to act, involve parents wherever safe to do so, and signpost support (Early Help, SEND Local Offer, health services). We continue to welcome and support the child and family during investigations.

Children in Care (Looked After Children)

We recognise the impact of care experience and work closely with social workers, carers and health professionals. The DSL acts as lead for looked after children to coordinate support and information sharing.

Low-Level Concerns and Whistleblowing

We encourage early reporting of any staff conduct that does not meet our standards (low‑level concerns). Staff can report concerns to the DSL, Supervisor or Committee Chair, or via our Whistleblowing Policy; concerns are recorded and reviewed.

Links to Other Policies

• Whistleblowing • Safer Recruitment • Behaviour • Mobile Devices/Images/Social Media • Confidentiality/Data Protection • Health & Safety • SEND/Local Offer

Review Statement

Updated September 2025. Reviewed annually, or sooner if national guidance or local procedures change.

Recognising Indicators of Abuse and Neglect (Detailed Guidance)

The indicators below are not exhaustive and are not proof on their own. One sign may not mean abuse; however, a pattern of concerns or a disclosure must always be taken seriously. Record factually and inform the DSL without delay.

Physical Abuse – Possible Indicators

• Bruises, marks or injuries in unusual places (soft tissue areas, ears, cheeks, neck, trunk), pattern or hand‑shaped marks, bite marks

• Injuries with inconsistent or implausible explanations, delay in seeking medical help

• Frequent or unexplained injuries (‘multiple minor accidents’), wearing long sleeves in hot weather to cover marks

• Child flinching, wary of adults, or running away from physical contact

• Changes in behaviour: aggression, withdrawal, fearfulness

Emotional Abuse – Possible Indicators

• Developmental delay or regression without medical reason; low self‑esteem, excessive clinginess or anxiety

• Over‑compliance or extreme behaviour (very passive or very aggressive)

• Frequent nightmares, sleep problems, wetting/soiling with no medical basis

• Parent/carer persistently belittling, rejecting or intimidating the child; exposure to domestic abuse

• Lack of appropriate boundaries or inconsistent, harsh parenting

Sexual Abuse – Possible Indicators

• Sexualised behaviour, language or knowledge that is not age‑appropriate

• Genital or anal soreness, itching, bleeding, unusual discharge, sexually transmitted infections

• Sudden behaviour changes: withdrawal, anxiety, depression, self‑injury talk or play themes

• Avoidance of a particular person; fear of bathrooms/toilets or nappy changing

• Disclosure (direct or indirect). Always take disclosures seriously and follow the policy.

Neglect – Possible Indicators

• Consistently poor hygiene (strong odour, unwashed, severe nappy rash), inappropriate or ill‑fitting clothing

• Frequent hunger; stealing/hoarding food; faltering growth/failure to thrive

• Untreated medical/dental issues; missed health appointments

• Lack of supervision; unsafe home environments reported by the child

• Persistent lateness/non‑attendance without reason; child repeatedly left late at collection

Child‑on‑Child Abuse (including harmful sexual behaviour) – Indicators

• Bullying (including online), coercion, controlling or exploitative behaviour towards other children

• Sexualised play or behaviour that is harmful, persistent, secretive or forces others to participate

• Physical violence between children beyond normal rough‑and‑tumble

Domestic Abuse – Indicators/Impact on Children

• Frequent absences, tiredness, attention/behaviour changes, hypervigilance/startle responses

• Reports of shouting, threats or violence at home; child worried about a non‑resident parent or handovers

• Injuries to parent/carer; isolation or control by a partner

Child Sexual/Criminal Exploitation (CSE/CCE) – Indicators

• Unexplained gifts, money, travel, food or a new phone; multiple SIMs

• Significant changes in appearance, friends or online activity; secrecy about whereabouts

• Being picked up/dropped off by unknown adults; going missing or returning late

• Child appears frightened, controlled or indebted

Female Genital Mutilation (FGM) – Indicators/Risk Factors

• Known family/community practice of FGM; older female siblings affected

• Holiday planned to a country with higher prevalence; talk of ‘special ceremony’

• Child has difficulty walking/sitting, spends longer in the bathroom, or has recurrent infections after travel

• Remember: regulated professionals have a \*\*mandatory duty\*\* to report known FGM in under‑18s to the police

Online Abuse and Grooming – Indicators

• Secretive use of devices; talking to ‘new online friends’; excessive time online; upset after using devices

• Access to inappropriate content; sexualised messages/images

• Receiving gifts/credit in online games/platforms from adults/older peers

Prevent (Risk of Radicalisation) – Indicators

• Fixation with extremist narratives, symbols or conspiracy content inappropriate for age

• Isolation from peers; intolerance or hateful language not typical for age/stage

• Influence from older individuals/groups online or offline

What Staff Must Do If They Notice Indicators

• Act on professional curiosity: if something doesn’t feel right, record it and speak to the DSL.• Listen, reassure, and avoid leading questions. Do not promise confidentiality.• Record promptly and factually (child’s words in quotes, date/time, body map if relevant) and pass to the DSL the same day.• If a child is at immediate risk, call 999. For advice or to refer, contact MASH (01925 443322) or Out of Hours (01925 444400).

Appendix A – Indicators Quick Reference for Staff Areas

This appendix may be printed and placed near staff phones. It summarises key signs under the four categories of abuse, plus specific risks (FGM, CSE/CCE, domestic abuse, online abuse, Prevent). Always follow the main policy for full guidance.