Safeguarding Policy and Procedures

Designated safeguarding lead is: Ciara Doyle

Deputy Designated safeguarding lead is: Abbie Corke

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Aim

Cherry Pie day nursery limited is committed to safeguarding children, young people and vulnerable adults and will do this by putting children, young people and vulnerable adult's rights to be '*strong, resilient and listened to* 'at the heart of all our activities and values.

We follow local procedures used within Brighton and Hove Safeguarding children partnerships (BHSCP) https://www.bhscp.org.uk/ alongside PAN Sussex Protection and safeguarding children's manual https://sussexchildprotection.procedures.org.uk/

Cherry Pie day nursery adoption of 'four commitments' are broad statements against which policies and procedures across the organisation will be drawn to provide a consistent and coherent strategy for safeguarding children young people and vulnerable adults in all services provided. The four key commitments are:

1. We are committed to empowering children, young people, and vulnerable adults, promoting their right to be '**strong, resilient, actively listened to, and heard'**.
2. We uphold a culture of safety in which children, young people and vulnerable adults are protected from abuse and harm in all areas of its curriculum and service delivery.

3. We are committed to preventing harm and responding promptly and appropriately to all incidents or concerns of abuse that may occur. Working with statutory agencies to achieve the best possible outcomes for every child, such as BHSCP, Ofsted, DBS, Front door for families (FDFF), Local Authority Designated Officer (LADO) and any other relevant agencies working along side children and families.
4. We are dedicated to increasing safeguarding confidence, knowledge and good practice throughout its training and learning programmes for adults, advocating support and representation for those in greatest need.

NB: A 'young person' is defined as 16–19-year-old however this also may refer to a young member of the staff team, student or a visitor.

A 'vulnerable adult' (see guidance to the Care Act 2014) as: *'a person aged 18 years or over, who is in receipt of or may need community care services by reason of 'mental or other disability, age or illness and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'*. In early years, this person may be a parents, carer, visitor, volunteer or staff member.

Legal references

Legal references

Working Together to Safeguard Children (HMG 2023)

Statutory Framework for the Early Years Foundation Stage 2025

What to Do if You're Worried a Child is Being Abused (HMG 2015)

Prevent duty guidance for England and Wales: guidance for specified authorities in England and Wales on the duty of schools and other providers in the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism' (HMG 2015)

Keeping Children Safe in Education 2022

Education Inspection Framework (Ofsted 2023)

Responding to safeguarding or child protection concerns

Designated safeguarding lead role and responsibility:

- We have a 'designated safeguarding lead', who is responsible for carrying out and keeping up to date child, young person, or adult protection procedures across all aspects of the settings operation.
- The designated safeguarding lead is responsible for overseeing all child, young person or adult protection matters.

- The ‘designated safeguarding lead’ ensures they have links with and cooperates with statutory and voluntary organisations regarding safeguarding children such as but not limited to social services, police, FDFF, parents, other professionals, Ofsted, LADO
- The ‘designated safeguarding lead’ ensures they have received appropriate training on child protection matters and that all staff are adequately informed and/or trained to recognise possible child abuse in the categories of physical, emotional and sexual abuse and neglect.
- The ‘designated safeguarding lead’ ensures all staff are aware of the additional vulnerabilities that affect children that arise from inequalities of race, gender, disability, language, religion, sexual orientation or culture and that these receive full consideration in child, young person or adult protection related matters.
- The ‘designated safeguarding lead ensures that staff are aware and receive training in social factors affecting children’s vulnerability including but not limited to
  - social exclusion
  - domestic violence and controlling or coercive behaviour
  - mental Illness
  - drug and alcohol abuse (substance misuse)
  - parental learning disability
  - radicalisation
  - family members in prison
  - homelessness
  - persistent absences
  - children with SEN
- The ‘designated safeguarding lead’ ensures that staff are aware and receive training in other ways that children may suffer significant harm and stay up to date with relevant contextual safeguarding matters:
  - abuse of disabled children
  - fabricated or induced illness
  - child abuse linked to faith or belief
  - sexually exploited children
  - children who are trafficked and/or exploited
  - female genital mutilation
  - extra-familial abuse and threats
  - children involved in violent offending, with gangs and county lines.

- Private fostering arrangement (duty to inform FDFF if this is happening
- Peer on Peer abuse or cyberbullying

- The 'designated safeguarding lead' ensures they are adequately informed in vulnerable adult protection matters.
- Designated safeguarding lead ensures all relevant training is renewed at a minimum annually for DSL and all other staff.

Safeguarding roles for all staff and staff training

- All staff recognise and know how to respond to signs and symptoms that may indicate a child is suffering from or likely to be suffering from harm. They understand that they have a responsibility to act immediately by discussing their concerns with the DSL
- The designated safeguarding lead ensures that all educators are alert to the indicators of abuse and neglect and understand how to identify and respond to these.
- The setting should not operate without an identified designated safeguarding lead at any time.
- Issues which may require notifying to Ofsted are notified to the DSL to make a decision regarding notification. The designated safeguarding lead must remain up to date with Ofsted reporting and notification requirements.
- All staff are trained and commit to upholding safeguarding procedures using company devices to ensure that all children are signed in and out of the premises on arrival and departure, staff will record any absence of children on famly once absence is confirmed by management or parents/guardian.
- Working alongside DSL and management, all staff must insure that the learning environment and room layouts are appropriate for children's age and stage of development taking into consideration constant supervision of children and risk assessments of furniture, resources and design.
- All staff are trained and commit to following nursery procedure of visitors and external bodies onto the premises, if they have not received adequate training they will not allow any unidentified or unapproved visitors into the setting without approval from a manager. All visitors must show photo identification on arrival and report to the office where a manager will check identification and appointment. Once identified all visitors must sign into the visitors attendance book located in the entrance and be given a visitor lanyard. Visitors or external bodies must never be left unsupervised in the nursery where children are present.
- If there is an incident, which may require reporting to RIDDOR the DSL immediately follows legislative requirements in relation to reporting to RIDDOR.

- Cherry Pie day nursery limited commits to following statutory framework EYFS 3.6 “Detail of how safeguarding training is delivered and how practitioners are supported to put this into practice”
- .Using online training portal, noodle now, and regular in person house training and spot checks along with staff meeting and regular training refreshers staff members will clearly be able to identify possible abuse and neglect at the earliest opportunity, and understand how to respond in a timely and appropriate way. These may include:

  • significant changes in children's behaviour

  • deterioration in children’s general well-being

  • unexplained bruising, marks or signs of possible abuse or neglect

  • children’s comments which give cause for concern

  • any reasons to suspect neglect or abuse outside the setting, for example in the child’s home or that a girl may have been subjected to (or is at risk of) female genital mutilation.

  • Inappropriate behaviour displayed by other members of staff, or any other person working with the children, for example: inappropriate sexual comments; excessive one-to-one attention beyond the requirements of their usual role and responsibilities; or inappropriate sharing of images will be reported to DSL and management immediately and allegation against a staff member procedure will commence. (see below for further details)

Responding to marks or injuries observed

- If a member of staff observes or is informed by a parent/carer of a mark or injury to a child that happened at home or elsewhere, the member of staff makes a record of the information given to them by the parent/carer in the child’s personal file on famly, which is signed by the parent/carer.
- The member of staff advises the duty designated safeguarding lead as soon as possible if there are safeguarding concerns about the circumstance of the injury.
- If the mark or injury is noticed later in the day and the parent is not present, this is raised with the designated person.
- If there is a likelihood that the injury is recent and occurred at the setting, this is raised with the designated safeguarding lead and recorded on an accident/incident form on famly
- If there is no cause for further concern, a record is made in the Accident Record, with a note that the circumstances of the injury are not known.

Responding to the signs and symptoms of abuse

- Concerns about the welfare of a child are discussed with the designated safeguarding lead without delay.
- A written record is made of the concern on safeguarding section on famly as soon as possible.
- Concerns that a child is in immediate danger or at risk of significant harm are responded to immediately and if a referral is necessary this is made on the same working day to Front Door For Families BHSCP and police along with Ofsted.
- Once a concern has been raised with DSL and management, a decision will be made using the "right support at the Right time" framework as to what the next step will be.
- Staff have a right and obligation to ensure that each concern has been taken seriously and address to the best ability and information regarding what steps have been taken are passed back to the staff member who have raised the concern, however will keep all matters to do with the child's/families circumstances confidential unless instructed otherwise to inform further parties or further concerns arise.
- If a staff member feels their concerns have not been taken seriously or address to the best ability, staff members can escalate their concern to the directors of the nursery, LADO and Ofsted.

Responding to a disclosure by a child

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

Decision making (all categories of abuse)

- The DSL makes a professional judgement about referring to other agencies, including Front door for families (BHSCP) or LADO using Brighton and Hove Family Help "Right support and the right time" document https://www.bhscp.org.uk/wp-content/uploads/sites/3/2024/10/Brighton-Hove-Family-Help-The-Right-Support-at-the-Right-Time-Sept-2024-FINAL_compressed.pdf

- All decisions will be discussed with parents or carers of the child unless in exceptional circumstances of causing significant risk to the child or family
- Parents are made aware of the setting's Privacy Notice which explains the circumstances under which information about their child will be shared with other agencies. When a referral for early help is necessary, the designated person must always seek consent from the child's parents to share information with the relevant agency.
- If consent is sought and withheld and there are concerns that a child may become at risk of significant harm without early intervention, there may be sufficient grounds to over-ride a parental decision to withhold consent.
- If a parent withholds consent, this information is included on any referral that is made to the local authority. In these circumstances a parent should still be told that the referral is being made beforehand (unless to do so may place a child at risk of harm).

Record Keeping at nursery:

We have a duty to report and save all records of concerns, conversation, disputes or conversations with staff, parents or external agencies related to any and all incidents around child protection. Incidents which may have took place at the nursery site or external to nursery hours and care.

All records must have

- The date of the incident and or conversations
- Location of the conversations or incident
- Who else was present at the time of the incident/conversation
- Information recoded is factual and exact to the incident or discussion points
- Signed or acknowledged by parties present
- Shared with parents and or relevant agencies, (see information sharing)
- Any next steps or other action to be taken

Informing parents when making a child protection referral

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

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

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

Information sharing and confidentiality

- In addition to Working Together to Safeguard Children, the GDPR provides a number of lawful bases that may be appropriate for sharing data in these circumstances. These include 'legal obligation' and 'public task'. Public task includes processing of personal information (including sharing) where the processing is necessary for you to perform a task in the public interest or as part of your official functions.
- It is good practice to work as collaboratively with families as possible. We commit open and honest communication with the parents or families from the outset as to why, what, how and with whom, their information will be shared. A record of what has been shared will be kept on the child's file.
- We will ensure that all information shared is necessary for the purpose for which we are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.

Working Together 2018 states that:

"All organisations and agencies should have arrangements in place that set out clearly the processes and the principles for sharing information. The arrangement should cover how information will be shared within their own organisation/agency; and with others who may be involved in a child's life.

At Cherry Pie all information that needs to be shared will be shared only after confirmation of the person sharing it is legitimate and necessary and will only be shared via secured encrypted mail or given directly to the relevant person or agency. Only DSL, DDSL, manager or directors will have authority to share information will record all details on the child's file.

- All practitioners should not assume that someone else will pass on information that they think may be critical to keeping a child safe. If a practitioner has concerns about a child's welfare and considers that they may be a child in need or that the child has suffered or is likely to suffer significant harm, then they should share the information with BHSCP, children's social care and/or the police. All practitioners should be particularly alert to the importance of sharing information when a child moves from one local authority into another, due to the risk that knowledge pertinent to keeping a child safe could be lost" For further guidance and information on information sharing see (PAN Sussex Nationals guidance on sharing information)

  https://sussexchildprotection.procedures.org.uk/qkyltl/information-sharing-and-confidentiality/information-sharing/#s6979

Referring

- In the unlikely event that the designated safeguarding lead or Deputy is not on site, the most senior member of staff present takes responsibility for making the referral to social care.
- If a child is believed to be in immediate danger, or an incident occurs at the end of the session and staff are concerned about the child going home that day, then the Police and/or social care are contacted immediately.
- If the child is 'safe' because they are still in the setting, and there is time to do so, the senior member of staff contacts the setting's DSL for support. Contacting information is displayed across the nursery in staff room, policy, staff room and toilet areas.
- If a referral was made, copies of all documents are kept and stored securely and confidentially (including copies in the child's safeguarding file.
- Each member of staff/volunteer who has witnessed an incident or disclosure should also make a written statement on Safeguarding incident reporting form.

- Follow up phone calls to or from social care are recorded in the child's file; with date, time, the name of the social care worker and what was said.

Female genital mutilation (FGM)

Educators should be alert to symptoms that would indicate that FGM has occurred, or may be about to occur, and take appropriate safeguarding action. Designated safeguarding leads should contact the police immediately as well as refer to children's services local authority (FDFF) if they believe that FGM may be about to occur.

BHSCP procedure must be followed in relation to FGM by reporting all suspected cases to Front door for families and the designated safeguarding lead is informed regarding specific risks relating to the culture and ethnicity of children who may be attending their setting and shares this knowledge with staff.

Symptoms of FGM in very young girls may include:

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

Further guidance

NSPCC 24-hour FGM helpline: 0800 028 3550 or email fgmhelp@nspcc.org.uk

BHCSP : https://www.bhscp.org.uk/preventing-abuse-and-neglect/spotting-the-signs/signs-of-female-genital-mutilation-fgm/

Government help and advice: www.gov.uk/female-genital-mutilation

Children and young people vulnerable to extremism or radicalisation

Early years settings, schools and local authorities have a duty to identify and respond appropriately to concerns of any child or adult at risk of being drawn into terrorism. Using BHSCP and Cherry Pie day Nursery Limited safeguarding protocols to report to Front Door For Families must be followed if any suspicion of children or young people are exposed to extremist views or possible radicalisation.

There are potential safeguarding implications for children and young people who have close or extended family or friendship networks linked to involvement in extremism or terrorism which must also be taken into close consideration when assessing risk or potential exposure to extremist views. DSL must report all suspicious or concern behaviour to Front door for families the same day of suspicion.

- Channel Duty guidance: Protecting people vulnerable to being drawn into terrorism www.gov.uk/government/publications/channel-and-prevent-multi-agency-panel-pmap-guidance
- Prevent Strategy (HMG 2011) www.gov.uk/government/publications/prevent-strategy-2011

- The prevent duty: for schools and childcare providers www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty
- The designated safeguarding lead should also ensure that they and all other staff working with children and young people understand how to recognise that someone may be at risk of violent extremism.
- The designated safeguarding lead also ensures that all staff complete Prevent duty training via noodle now training platform and understand signs and symptoms related to potential exposure or risk of being drawn into terrorism.

Concerns about children affected by gang activity/serious youth violence

County lines

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

Reporting Concerns - BHSCP

All staff members will have training on the topic and practice due regard to potential signs and symptoms of county lines exposure and how to report concern, following the nursery procedure for reporting all concern regarding children welfare.

Concerns and allegations of serious harm or abuse against staff, volunteers or agency staff

Concerns may come from a parent, child, colleague, or the public. Allegations or concerns must be referred to the DSL without delay - even if the person making the allegation later withdraws it.

What is a low-level concern?

The NSPCC defines a low-level concern as 'any concern that an adult has acted in a way that:

- is inconsistent with the staff code of conduct, including inappropriate conduct outside of work
- doesn't meet the threshold of harm or is not considered serious enough…to refer to the local authority.

Low-level concerns are part of a spectrum of behaviour. This includes:

- inadvertent or thoughtless behaviour
- behaviour that might be considered inappropriate depending on the circumstances.
- behaviour which is intended to enable abuse.

Examples of such behaviour could include:

- being over friendly with children
- having favourites
- adults taking photographs of children on their mobile phone.
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door (At no point should a staff member/ visitor/ agency or any other adult be in this situation)
- using inappropriate sexualised, intimidating or offensive language'

(NSPCC Responding to low-level concerns about adults working in education)

Responding to low-level concerns

Any concerns about the conduct of staff, students or volunteers must be shared with the designated safeguarding lead and recorded. The designated safeguarding lead should be informed of all concerns, including those that may be considered 'low level' and make the final decision on how to respond. Where appropriate this can be done in consultation with their line manager/ HR representative and discussion with LADO.

Reporting concerns about the conduct of a colleague, student or volunteer contributes towards a safeguarding culture of openness and trust. It ensures that adults consistently model the setting's values and helps keep children safe. It protects adults from potential false allegations or misunderstandings.

If it is not clear that a concern meets the local authority threshold, the designated safeguarding lead should contact the LADO for clarification.

In most instances, low-level concerns about staff conduct can be addressed through supervision, training, or disciplinary processes where an internal investigation may take place.

Identifying

An allegation against a member of staff, volunteer or agency staff constitutes serious harm or abuse if they:

- behaved in a way that has harmed, or may have harmed a child
- possibly committed a criminal offence against, or related to, a child
- behaved towards a child in a way that indicates they 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

Informing

- All staff report allegations to the designated safeguarding lead as soon as possible to the alleged behaviour
- The designated safeguarding lead alerts the director for their setting immediately. Together they should form a view about what immediate actions are taken to ensure the safety of the children and staff in the setting, and what is acceptable in terms of fact-finding.
- It is essential that no investigation occurs until and unless the LADO has expressly given consent for this to occur, however, the person responding to the allegation does need to have an understanding of what explicitly is being alleged.
- The designated safeguarding lead must take steps to ensure the immediate safety of children, parents, and staff on that day within the setting.
- The LADO is contacted as soon as possible via email and if necessary via phone and within one working day.(Contact details on Contact information page below)
- A child protection referral is made if required. The LADO, line managers and local safeguarding children's services (FDFF) can advise on whether a child protection referral is required.
- The DSL asks for clarification from the LADO on the following areas:

- what actions they must take next and when and how the parents of the child are informed of the allegation
- whether or not the LADO thinks a criminal offence may have occurred and whether the police should be informed and if so who will inform them
- whether the LADO is happy for the setting to pursue an internal investigation without input from the LADO, or how the LADO wants to proceed
- whether the LADO thinks the person concerned should be suspended, and whether they have any other suggestions about the actions the designated person has taken to ensure the safety of the children and staff attending the setting

- The DSL records details of discussions and liaison with the LADO including dates, type of contact, advice given, actions agreed and updates on the child's file.
- Parents are not normally informed until discussion with the LADO has taken place, however in some circumstances the DSL and management may need to advise parents of an incident involving their child straight away, for example if the child has been injured and requires medical treatment.
- Staff do not investigate the matter unless the LADO has specifically advised them to investigate internally. Guidance should also be sought from the LADO regarding whether or not suspension should be considered. The person dealing with the allegation must take steps to ensure that the immediate safety of children, parents and staff is assured. It may be that in the short-term measures other than suspension, such as requiring a staff member to be office based for a day, or ensuring they do not work unsupervised, can be employed until contact is made with the LADO and advice given.
- The designated safeguarding lead ensures relevant staff fill in a witness statement reporting form if necessary.
- If after discussion with the DSL and management, the LADO decides that the allegation is not obviously false, and there is cause to suspect that the child/ren is suffering or likely to suffer significant harm, then the LADO will normally refer the allegation to BHCSP (FDFF).
- If notification to Ofsted is required the DSL will inform Ofsted as soon as possible, but no later than 14 days after the event has occurred. The designated safeguarding lead will liaise with the manager and nominated individual (Ciara Doyle) about notifying Ofsted.
- Avenues such as performance management or coaching and supervision of staff will also be used instead of disciplinary procedures where these are appropriate and proportionate. If an allegation is ultimately upheld the LADO may also offer a view about what would be a proportionate response in relation to the accused person.

- The designated safeguarding lead must consider revising or writing a new risk assessment where appropriate, for example if the incident related to an instance where a member of staff has physically intervened to ensure a child's safety, or if an incident relates to a difficulty with the environment such as where parents and staff are coming and going and doors are left open.
- All allegations are investigated even if the person involved resigns or ceases to be a volunteer.

Allegations against agency staff

Any allegations against agency staff must be responded to as detailed in this procedure. In addition, the designated safeguarding lead must contact the agency following advice from the LADO.

Allegations against the designated safeguarding lead.

- If a member of staff has concerns that the designated safeguarding lead has behaved in a way that indicates they are not suitable to work with children as listed above, this is reported to the nursery directors and LADO
- Ofsted provides guidance on how to make complaints about a provider: Complaints procedure - Ofsted - GOV.UK (www.gov.uk).
- During the investigation, the directors will identify another suitably experienced person to take on the role of designated lead.
- If an allegation is made against the director, then the local authorities BHCSP and LADO must be informed.

Recording

- A record is made of an allegation/concern, along with supporting information**.** This is then entered on the file of the child.
- If the allegation refers to more than one child, this is recorded in each child's file
- If relevant, a child protection referral is made, with details held on the child's file.

Disclosure and Barring Service

- If a member of staff is dismissed because of a proven or strong likelihood of child abuse, inappropriate behaviour towards a child**,** or other behaviour that may indicate they are unsuitable to work with children such as drug or alcohol abuse, or other concerns raised during supervision when the staff suitability checks are done, a referral to the Disclosure and Barring Service is made.

Escalating concerns

- If a member of staff believes at any time that children may be in danger due to the actions or otherwise of a member of staff or volunteer, they must discuss their concerns immediately with the designated safeguarding lead.
- If after discussions with the lead**,** they still believe that appropriate action to protect children has not been taken they must speak to the manager/directors
- If there are still concerns then the whistle blowing procedure must be followed, as set out in Responding to safeguarding or child protection concerns.

Outcomes of investigations of allegations

During investigation DSL and management will work alongside LADO, parents and external agencies to fact find and hold investigation meetings. During this process the alleged staff member will be informed of the process and next steps. Once investigation has concluded there will be an outcome which could result in any of the following:

- Substantiated – there is sufficient evidence to prove the allegation/ staff conduct issue
- Malicious – sufficient evidence to disprove the allegation/ staff conduct issue and there is a deliberate act to deceive.
- False – sufficient evidence to disprove the allegation/staff conduct issue
- Unsubstantiated – insufficient evidence to either prove or disprove the allegation/ staff conduct issue. This term, therefore, does not imply guilt or innocence

Once an outcome has been established with guidance from LADO, the manager and DSL will potentially move onto disciplinary procedure depending on the seriousness of the outcome and allegation. Disciplinary procedure will be followed as outline in staff handbook and Cherry pie day nursery limited disciplinary procedure policy.

Important Contact Details

Designated Safeguarding lead : Ciara Doyle

07495131777

ciara@cherrypiedaynursery.co.uk

Deputy Designated safeguarding lead

Abbie Corke 07817295289

Third call point (Deputy designated safeguarding lead and director):

Amy Jones 07872506397

LADO

Nominated committee member for safeguarding LADO 01273 295643

LADOenquiries@brighton-hove.gov.uk

LADO Kay Whitcroft 07584 217271

Front Door for Families 01273 290400 (9am to 5pm Monday to Thursday, 9am to 4.30pm Friday)

Emergency out of hours 01273 335905 or 335906

Police 01273 665502 or 0845 6070999 or 101

Prevent Coordinator, Nahida Shaikh, Partnership Community Safety Team, Tel: 01273 290584; Mob: 07717303292 Nahida.Shaikh@brighton-hove.gcsx.gov.uk Prevent advice and referral Channel.Prevent@brighton-hove.gov.uk

Prevent Officer or non emergency police number 101 ask for ext 550543 or email Channel@sussex.pnn.police.uk

NSPCC Whistleblowing 0800 028 0285

Protect (previously Public Concern at Work) 020 3117 2520