



## **Safeguarding Child Protection Procedure**

At Sunrise Kids Club (SKC) the safeguarding of all children is of paramount importance. Parents send their children to SKC each day with the expectation that we at SKC provide a secure and safe environment in which their children can flourish. SKC have to ensure therefore has to ensure that this expectation becomes reality. The SKC safeguarding advisor is the manager.

All staff are regularly updated with the newest policies in line with government guidelines through our website, with access to the latest versions of Keeping Children Safe in Education 2022 as well as Working Together to Safeguard Children 2018 and Prevent Duty Guidance 2021.

### **SKC Management Team**

The Manager / Owner of SKC is Mrs Jacqui Foote and in the event of her absence Ms Maria Lancaster will act as deputy manager.

If either member of staff is unable to attend, an additional staff member is available for support.

### **Safer Recruitment of staff**

All staff are government Disclosure & Barring Service (DBS) checked. Public liability insurance is available for parents / carers to view on our website and also in the club. See Recruitment procedure.

### **Child Protection**

Any concerns raised by a staff member should be recorded on the incident form. The matter will be reported to the designated child protection teacher at Mayfield school (**head teacher, deputy head, Claire Thomas (SENco)**) who may take advice from the LADO / Child Protection advice line or contact social services to do a referral. All staff and visitors have a moral and professional duty to refer concerns of a safeguarding or child protection nature the designated teacher.

### **Parents & Carers**

SKC will work closely with parents and carers of all its pupils. Parents are informed of any health and safety issues.

### **Health & Safety Policy**

SKC has a health & safety procedure, which is monitored and reviewed every two years by the manager. Staff are made aware of their responsibilities for health and safety of themselves and children in their care. Risk assessments / policies are regularly reviewed that cover procedures and activities in the club. The health & safety lead is the club manager.

### **Mental welfare of staff**

All staff to be asked on a regular basis if there are any problems or issues that we can help with. Due to the pandemic, staff and their families might be in a situation that can be quite stressful, if help or advice is needed we will support them and give them contact numbers of organisations that can help.

### **First Aid**

In SKC there will always be a paediatric first aid trained member of staff available. The qualified paediatric first aid staff members are the SKC Manager and four other staff members. A first aid kit will be situated within the SKC working area. See also Illness and Injury policy.

### **Fire drills & Emergency Evacuation Procedure**

Regular fire drills will be practised to ensure efficient and effective evacuation from the buildings. See Fire drill log form.

In an emergency, the fire alarm will sound (a continuous audible siren) and all children and staff will be accounted for and will leave SKC premises together through a designated fire exit route to the assembly point at the end lower playground. A SKC staff member will conduct a registration to account for all the children attending the club.

### **Site Security**

SKC provides a secure site, which is controlled by precise management directives, but the site is only as secure as the people who use it. Therefore all people on site have to adhere to the rules which govern it.

Laxity can cause potential problems to safeguarding therefore;

- Gates should be locked except at the start of and end of the day.
- Doors should be closed to prevent intrusion but to facilitate smooth entrance and exits for approved personnel.
- Visitors, parents/ carers and students must only enter through the main entrance. Visitors must sign in the visitors book. See supervision of no-vetted staff / visitor's procedure.

- Children will only be allowed home with adults with parental responsibility or confirmed permission.

### **Missing Child**

Should a child leave the club premises without permission then an available staff member will try and locate the missing child as soon as possible. If in the event the staff are unable to locate the missing child the police will be informed as well as the parent as soon as practicable after the event. Contact details of the parent/carer will be taken from the confidential child registration form. See also Missing Child Procedure.

### **Uncollected Child Procedure**

In the event that a child has not been collected from the after school club within the operating times, an SKC member of staff will make contact with the parent/carer using the details provided on the registration form.

In the event that contact is not made then a member of staff will remain with the child at SKC premises until the parent / carer arrives. Allowances will be made for the rare occasions that a parent / carer does not collect their child on time, however SKC would require advance warning from the parent / carer that they will be late. If this becomes a frequent event with the same parent / carer a penalty fee will apply.

### **Visitors**

It is assumed that visitors with a professional role or members of the police already have the relevant clearance. See supervision of non-vetted staff/visitor's procedure.

### **Equal Opportunities**

SKC aims to reflect our commitment to equality of access and respect for each other. Every child at SKC, whatever their background or their circumstances, should have the support they need to;

- Enjoy and achieve
- Be healthy
- Stay safe
- Make a positive contribution
- Achieve economic well-being

Children with special educational needs (SEN) and /or disabilities must be able to take a full and active part in every lesson and every measure is taken to ensure this. Our building and our procedures are adapted to ensure equality of access for all pupils. See equal opportunities policy.

### **Internet Safety**

Although within our club we do not have use of the internet, if we do in the future children would be encouraged to use the internet in a safe way. Pupils must never be left unattended whilst online and staff should ensure that this

does not happen. If staff know of misuse, either by another member of staff or child the issue should be reported to the Manager without delay.

### **Behaviour**

Good behaviour is essential in any community and SKC have expectations of this. There will always be an emphasis on positive behaviour however there will be times when children have to have clear discipline in order maintain the safety and security of all children.

We are also clear that bullying is unacceptable and will not be tolerated. Pupils are reminded that adults must be informed immediately and action will be taken. See our behaviour management policy and procedure.

### **Extremism and radicalisation**

The club sees protection from radicalisation and extremist narratives as a safeguarding issue.

Staff are uniquely placed to observe the behaviour of large numbers of children and are likely to know what is 'normal' or 'usual' for a particular child. This is particularly important in light of the Prevent duties around extremism. Staff are well placed to notice behavioural changes in children who are at risk of radicalisation – the children may display a change in behaviour or seek to hide their views. “even very young children may be vulnerable to radicalisation by others, whether in the family or outside, and display concerning behaviour...teachers must take action when they observe behaviour of concern. If there are concerns about a child being exposed to radicalisation or extremist views then the CP procedures must be followed with a referral to social services.

Staff are given training on radicalisation.

### **Looked After Children**

Looked after children (LAC) are particularly vulnerable. The most common reasons for children becoming looked after is as a result of abuse and /or neglect.

Staff need to know:

- \* the legal status of each looked after child in the club,
- \* the contact arrangements with birth parents or those with parental responsibility,
- \* the child's care arraignments
- \* the levels of authority delegated to the carer by the LA,

\* details of the child's social worker

\* the name of the virtual school head in the LA that looks after the child.

All LAC must have a Personal Education Plan which staff at SKC have access to.

## **Female Genital Mutilation FGM**

All procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non – medical reasons.

Female genital mutilation is classified into four major types.

1. Clitoridectomy: partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris).
2. Excision: partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are "the lips" that surround the vagina).
3. Infibulation: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris.
4. Other: all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area.

FGM is child abuse

FGM is recognized by the United Nations as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors (between infancy and age 15) and is a violation of the

rights of children. It is illegal in the UK and it is child abuse. FGM is under reported in this country. Over 24,000 girls under the age of 15 years in England and Wales are at risk from undergoing FGM either in this country or abroad. The summer holiday's is the period when girls are mostly at risk of

FGM. With your help we can identify those at risk and together we can protect girls from undergoing FGM.

No health benefits, only harm

FGM has no health benefits, and it harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and interferes with the natural functions of girls' and women's bodies.

Immediate complications can include severe pain, shock, haemorrhage (bleeding), tetanus or sepsis (bacterial infection), urine

retention, open sores in the genital region

and injury to nearby genital tissue

Long term consequences can include:

- \* recurrent bladder and urinary tract infections;
- \* cysts;
- \* infertility;
- \* an increased risk of childbirth complications and newborn deaths;
- \* A need for further surgery. For example, the FGM procedure that seals or narrows a vaginal opening (type 3 above) needs to be cut open later to allow for sexual intercourse and childbirth. Sometimes it is stitched again several times, including after childbirth, hence the woman goes through repeated opening and closing procedures, further increasing and repeated both immediate and long-term risks.

Who is at risk of FGM ?

The communities in the UK that girls are most at risk of FGM include the Somali, Sudanese, Sierra Leone, Gambian, Liberian, Egyptian, Nigerian, Ethiopian and Eritrean communities. Non-African communities that practice FGM include Yemeni, Afghani, Kurdish, Indonesian, Malaysian and Pakistani Bohra Muslim communities.

FGM indicators

- \* The girl may confide that she is to have a "special procedure " which will make her a woman or talk of a ceremony taking place for her or other siblings. There may be talk of vaccinations or talk of absence from school. Girls are more at risk of FGM during school summer holidays

\* A girl or her family may talk about a long holiday to her country of origin or to a country where the practice is prevalent This is not enough on it's own but might be significant when added to other concerns.

\* A mother or an older sibling had already undergone FGM

Signs that FGM may have occurred

\* Prolonged absence from school with a noticeable change in behavior on return

\* Finding it difficult to sit still and appears to be experiencing discomfort or pain

\* Spending a long time away from class for toilet breaks

\* Asking to be excused from PE or swimming

\* Suddenly visiting the school nurse more frequently

\* A sudden change in dress

Prevention & Reporting

School staff can play a key role in protecting girls from FGM.

If you think a girl is at risk of FGM or that FGM may have taken place you must report it immediately as you would any other form of child abuse. It is mandatory that an incident or suspected incident of FGM is reported to the police – dial 101.

1) You must inform your Child Protection Advisor

2) A referral must be completed to children's social care

3) In urgent cases, contact children's social care or police direct.

It is essential that the young person's parents are not spoken to before a referral is sent to children's social care.

A full risk assessment will be conducted and any decision to contact the young

person's parents will be made jointly by children's social care and police.

It is essential that all professionals within education are aware of this heinous crime and follow the above safeguarding procedures.

### **Positive handling**

Staff are discouraged from handling children, however when they deem it is necessary guidance has been given on safe methods of restraining a child so that they do not harm either themselves or others. We follow up to date DfE guidelines which assert that physical restraint may be used if there is the possibility that a child may be about to cause harm to themselves or to another. It also asserts that on no occasion should such physical contact be used as a punishment. Our policy is that any form of restraint should be as a last resort and ideally avoided altogether. If physical handling is used, the details are recorded on the incident form.

### **Complaints / Allegations against staff and volunteers procedure**

All allegations of abuse by or complaints of a staff member or volunteer will be dealt with by the Designated Senior Person DSP / Manager. For any complaints of the manager the LADO and OFSTED should be contacted directly. Complaints against staff can be made, in person, in writing including emails, by phone and anonymously or via a third party. This will be recorded on the complaints record form. Any concerns identified by parents / carers can be reported by them directly to the LADO or any member of the Local Authority CPT on the key contacts list below. See Allegations Against Staff and volunteers procedure.

The person to whom an allegation or concern is first reported should treat the matter seriously and keep an open mind. They should not:

- Investigate or ask leading questions if seeking clarification
- Make assumptions or offer alternative explanations
- Promise confidentiality, but they can give assurance that the information will only be shared on a 'need to know basis'

They should:

- Make a written record of the information (where possible in the child's own words), including the time, date and place of incident/s, persons present and what was said;
- Sign and date the written record and immediately report the matter to the designated senior child protection manager

### **Initial action by the designated senior manager**



The procedures for dealing with allegations need to be applied with common sense and judgment. When informed of a concern or allegation, the designated manager should not initially investigate the matter or interview the member of staff, child concerned or potential witnesses. They should:

- Obtain written details of the concern / allegation, signed and dated by the person receiving (not the child / adult making the allegation);
- Record any information about times, dates and location of incident/s and names of any potential witnesses
- Record discussions about the child and/or member of staff, any decisions made, and the reasons for those decisions

The Local Authority Designated Officer (LADO), (which at the time of writing this document is Maggie Scarlett) should be informed within one working day when allegations appear to meet the criteria listed in section one. Referrals should not be delayed in order to gather information. In her absence you should contact one of the child protection advisors (see section fifteen - Key Contacts).

LADO for Ealing – Maggie Scarlett 0208 825 8930

[asv@ealing.gov.uk](mailto:asv@ealing.gov.uk)

For advice and guidance – Ealing children’s Integrated response service – 0208 825 5236

### **Monitoring & evaluation**

The policy and procedures are formally reviewed / monitored every two years, and regularly reviewed informally to evaluate effectiveness.

5<sup>th</sup> September 2022