

# Child Protection and Safeguarding: Information for Early Years Practitioners

## What is Safeguarding?

Safeguarding and promoting the welfare of children is everyone's responsibility. It is defined as:

- Protecting children from maltreatment.
  - Preventing impairment of children's health or development.
  - Ensuring children grow up in circumstances consistent with the provision of safe and effective care
  - Taking action to enable all children to have the best outcomes.
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## Calderdale Safeguarding Children Partnership (CSCP)

The CSCP is responsible for coordinating and ensuring the effectiveness of safeguarding and promoting the welfare of children in the area. They provide policies, procedures, and training for professionals.

### Key Legal and Policy Frameworks (Updated for 2025/26)

- **The Early Years Foundation Stage (EYFS) Statutory Framework (Sept 2025):** Sets the national standards for learning, development, and care from birth to five. Update: Ensure you follow the specific "Group-based Provider" framework.
  - **Keeping Children Safe in Education (KCSIE) 2025:** Provides essential safeguarding information. Update: Includes new guidance on AI risks and attendance.
  - **Working Together to Safeguard Children 2023:** Statutory guidance on inter-agency working.
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## Reporting a Concern

Internal Procedure: All concerns should be reported to the Designated Safeguarding Lead (DSL) within your setting first.

- **Lead DSL:** Emma Ford.
- **Supervising DSL:** Lucy Pottinger.
- **Deputy DSL:** Caitlin Bray and Jess Bruce
- **In their absence:** Speak to another member of the senior management team

## External Contacts:

- **MAST (Multi-Agency Screening Team):** Call 01422 393336

- **Emma Firth Education Coordinator MAST:** Tel: 01422 393336 Mob: 07743190152
- **Emergency Duty Team (Out of hours):** For concerns outside business hours 01422 288000
- **Police:** Call 999 for immediate danger; 101 for non-emergencies

### Specific Areas of Concern

- **Whistleblowing:** If you have concerns about a colleague, contact the DSL. If the concern involves the DSL or manager, contact the Local Authority Designated Officer (LADO) at 01422 392897 Email: [ladoadmin@calderdale.gov.uk](mailto:ladoadmin@calderdale.gov.uk)
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## Professional Standards & Ethics

### Confidentiality

Safeguarding is the only exception to absolute confidentiality.

- **Need to Know:** Information is shared only with those who need it to keep the child safe.
- **Duty to Share:** Fears about sharing information must never stand in the way of protecting a child. You do not need parental consent to share concerns with the DSL or MAST if you believe a child is at risk of harm.

### Personal Bias & Professional Curiosity

- **Avoid Assumptions:** Never let your personal opinion of a parent (e.g., "They are so nice, they wouldn't do that") cloud your professional judgment.
- **Professional Curiosity:** Always look past the obvious. Ask yourself: "Does the parent's explanation match the child's injury/behavior?"
- **Cultural Sensitivity:** We respect all cultures, but cultural practice is never an excuse for abuse. If a practice harms a child, we must intervene.

### Working in Partnership

We work transparently with parents unless doing so puts the child at further risk. We collaborate with Calderdale's Multi-Agency partners (Social Work, Health Visitors, Police) to ensure a holistic "Team Around the Child" approach.

### CPD & Training Expectations

- **Induction:** All new staff receive safeguarding induction on Day 1 and complete Core Training
- **Updates:** You must attend a full safeguarding refresher every 2 years and receive "Level 1" updates annually.

- **Knowledge:** You are expected to read *Keeping Children Safe in Education (Part 1)* and the *EYFS Statutory Framework* annually.
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## The Critical Importance of Chronologies

A Chronology is a sequential, factual log of significant events, observations, and "minor" concerns in a child's life. In the Early Years, where children may not have the vocabulary to describe their experiences, the chronology acts as their "voice."

### Why Chronologies are Vital

- **Identifying "The Slow Burn":** Abuse and neglect are often not single, dramatic events. They are frequently a series of small, recurring incidents (e.g., a child arriving hungry three Mondays in a row). A chronology allows us to see the "big picture" that is easily missed when viewing incidents in isolation.
- **Professional Curiosity:** It acts as a tool for "Professional Curiosity." By looking back at the log, a practitioner might notice that a child's behavior always changes after a weekend at a specific relative's house or following a period of parental absence.
- **The Threshold of Need:** When we refer a child to Calderdale MAST, they will ask for evidence. A well-maintained chronology provides the "threshold" required for Social Work to intervene. It proves that our concerns are not based on a single "hunch" but on a documented pattern of lived experience.

### Using Chronologies as Evidence

- **Legal Standing:** Chronologies are frequently used in legal proceedings, Child Protection Conferences, and Children Looked After (CLA) reviews. They must be accurate enough to stand up in a court of law.
- **Multi-Agency Coordination:** When different agencies (Health Visitors, Police, Nursery) share their chronologies, it creates a 360-degree view of the child's safety.
- **Accountability:** It tracks the nursery's response. It shows not just what happened to the child, but what we did about it, ensuring no child "slips through the net."

### Standards for Recording: "The Detail is the Difference"

A chronology is only as good as the data entered into it. Staff must ensure entries are:

- **Factual & Objective:** Use "The child had a 2cm blue bruise on their left cheek" instead of "The child looked like they had been hit."
- **Quoted Speech:** Use the child's exact words, including stutters, slang, or mistakes (e.g., "Mummy's friend made my tummy hurt").

- **Detailed & Contextual:** Record the date, the exact time, who was present, and the child's demeanor (e.g., "The child was whispering and avoided eye contact while speaking").
  - **Timely:** Entries must be made as soon as possible after the event. Memories fade, and "late entries" are less reliable as evidence.
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### Identifying Harm: Enhanced Descriptors

Category	Key Red Flags & Indicators
Neglect	Persistent hunger; unwashed hair/skin; clothes saturated in urine; untreated medical/dental pain; "wolfing" food.
Physical	Bruises on "soft" areas (cheeks, ears, stomach); grasp marks; cigarette burns; any bruise on a non-mobile baby.
Emotional	"Frozen watchfulness" (scanning for adult reactions); extreme cowering at minor mistakes; failure to thrive.
Sexual	Sexualised play/language beyond developmental age; bleeding or soreness in genital areas; fear of nappy changes.

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### The Prevent Duty:

You must remain alert to signs of radicalisation or extremist views

This is a statutory duty on all public sector organizations, including early years settings, to have due regard to the need to prevent people from being drawn into terrorism. This includes both violent and non-violent extremism.

**Your Role:** You are expected to be aware of the signs of radicalization, know how to refer to a concern, and have a good understanding of the risks of extremism.

### Signs to Look For:

- A child or family member expressing extremist views or beliefs.
- The child becomes withdrawn or secretive.
- The child starts to advocate for violence or aggression.
- Families expressing extreme views about other groups.

**How to Report:** Any Prevent-related concerns should be reported immediately to your DSL. If you are unable to contact your DSL, you can contact the police or the MAST team for advice.

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## **Female Genital Mutilation (FGM)**

FGM is a form of child abuse and is illegal. All regulated professionals (including early years practitioners) have a mandatory duty to report FGM to the police if a girl under 18 either discloses that she has had FGM or you observe physical signs.

**How to Report:** Contact the police on the non-emergency number 101.

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## **County Lines and Cuckooing**

**County Lines:** This is a form of criminal exploitation where urban gangs exploit children to transport and sell drugs in rural or suburban areas like Calderdale.

**Cuckooing:** This is when drug dealers take over the home of a vulnerable person to use it as a base for drug dealing. Children may be used as runners in this process.

### **Signs to Look For:**

- Sudden changes in a child's behaviour, appearance, or finances (e.g., new expensive clothes, phones).
- Unexplained injuries.
- Going missing or having unexplained absences from your setting.
- The child being secretive about their friends or activities.
- A significant increase in people or vehicles visiting a family's home.

**How to Report:** Contact the police on the non-emergency number 101.

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## **Child Abuse Linked to Faith or Belief**

This is a form of child abuse where children are harmed due to beliefs in witchcraft, spirit possession, or ritual abuse.

Signs of Child Abuse Linked to Faith or Belief (CALFB) often involve a single child being "scapegoated" while their siblings appear well-cared for.

- Physical indicators include unexplained bruises, burns, or restraint marks (often hidden by clothing), as well as signs of traditional "cleansing" or "exorcism" rituals.
- Behavioral red flags include the child appearing terrified of their carers, referring to themselves as "evil" or "possessed," or mentioning being "healed" or "delivered."
- Practitioners should be especially alert if a child with a disability, neurodiversity (such as autism or ADHD), or a perceived "difference" is singled out for targeted neglect or punishment due to the family's spiritual beliefs.

**How to Report:** Contact the police on the non-emergency number 101.

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## Witchcraft and Spirit Possession:

This can involve children being blamed for misfortunes, ostracized, or subjected to dangerous "exorcism" rituals.

### Signs to Look For:

- A child or family showing a belief in "kindoki," "juju," or "voodoo."
- Changes in a child's behaviour, such as becoming withdrawn or isolated.
- Unexplained injuries or burns.
- Threats of abandonment.
- Harmful Practices

**How to Report:** Contact the police on the non-emergency number 101.

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## Breast Ironing

This is a harmful practice where a girl's breasts are ironed or pounded to flatten them. It is a form of child abuse, often performed by a female family member.

**Signs to Look For:** A girl may be withdrawn, avoid medical examinations, or have difficulty lifting her arms

**How to Report:** Contact the police on the non-emergency number 101.

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## Upskirting

This is a criminal offence that involves taking a picture or video up a person's skirt without their consent. It is a form of sexual abuse and exploitation.

**Action:** If you see this happen, it should be treated as a serious safeguarding and criminal concern. Refer immediately to your DSL and the police.

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## Keeping Children Safe in the Setting

Your Role in Health and Safety

As a practitioner, you have a key role in ensuring the safety of children, staff, and visitors.

This is not just a management responsibility—it's part of your daily practice.

**Risk Assessments:** You should be aware of and follow the setting's risk assessments for both the indoor and outdoor environments. This includes identifying and reporting any new hazards.

**Reporting:** Promptly report any accidents, injuries, or near misses, even if they seem minor. All staff must be familiar with the RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences) regulations.

**Hygiene and Cleanliness:** Maintain high standards of personal hygiene and cleanliness in all areas, especially with food preparation and nappy changing.

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## The Calderdale Early Help Offer

Early Help is support that is given as soon as a problem emerges to prevent it from escalating. It's a "whole family" approach that aims to build resilience.

**When to Offer Early Help:** You should consider offering Early Help if you identify a child or family with multiple unmet needs that are not at a child protection level. This could include issues with parenting, housing, or a parent's mental health.

**The Process:** With the family's consent, you can begin the Early Help process. This involves completing an assessment to identify strengths and needs, and then working with other services (e.g., health visitors, housing support) to create a Child and Family Plan. This is a proactive step to support a family before their situation reaches crisis point.

**How to Refer:** Consent from the family is required for an Early Help referral unless there is an immediate safeguarding concern. You can consult with a senior colleague or the Early Help Guidance and Advice Service for support.

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## Online Safety & AI:

In our increasingly digital world, online safety is a critical pillar of early years safeguarding. At Grass Roots Nursery Group, we recognise that 85% of children aged 3–4 are active on platforms like YouTube, making them vulnerable to inappropriate content, grooming, or harmful "influencer" trends even at a young age. Furthermore, the 2025/26 updates to the EYFS and KCSIE frameworks require practitioners to be vigilant regarding the risks posed by Generative AI and "smart" toys. These technologies can collect sensitive data or produce realistic but harmful imagery. Our role is to ensure that digital play is strictly monitored, that nursery devices are used only for educational purposes, and that we provide parents with the knowledge to set robust filters and boundaries at home.

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## SEND Vulnerability

Children with Special Educational Needs and Disabilities (SEND) are statistically three times more likely to experience abuse than their peers, yet they are often the least able to report it. Their vulnerability is heightened by potential communication barriers, a higher reliance on multiple caregivers for personal care, and the "overshadowing" of symptoms where a suspicious mark or behavioral change is incorrectly dismissed as being "part of their disability." Practitioners must exercise extreme professional curiosity and "active listening," even with non-verbal children. We must never assume that a child with SEND is "safe" just because they are in a specialist environment; instead, we must be their voice and ensure that any change in their baseline demeanor or physical health is recorded with the same rigor as any other child.

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## Daily Safety and Professional Curiosity

- **The Voice of the Child:** When recording concerns, document the child's exact words and behaviors rather than your own interpretations.

- **Low-Level Concerns:** Report any behavior by a colleague that does not meet the harm threshold but seems inconsistent with our code of conduct.
  - **Attendance & Absence:** Proactively follow up on any unexplained absences, as poor attendance is now a key safeguarding indicator.
  - **Risk Assessments:** Follow all indoor and outdoor assessments and report new hazards immediately
  - **Hygiene:** Maintain strict standards during food preparation and nappy changes.
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## Referral Pathways (Calderdale Council)

### Pathway A: Concern about a Child (MAST)

*For concerns regarding home life or community.*

1. **Report:** Inform Emma Ford (DSL) immediately.
2. **Record:** Document facts, child's words, and demeanor.
3. **Refer:** DSL contacts Calderdale MAST (01422 393336).

### Pathway B: Concern about a Colleague (LADO)

*For allegations of professional misconduct.*

1. **Report:** Inform Emma Ford (Deputy Manager). If it involves the Manager, inform Lucy Pottinger.
  2. **Refer:** The Lead must contact the LADO (01422 393336) within 24 hours.
  3. **Action:** Do NOT investigate internally until LADO gives permission.
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## Resources & Legislation

Follow the links for the latest statutory guidance.

- Calderdale Safeguarding Children Partnership (CSCP): [www.calderdalesscb.org.uk](http://www.calderdalesscb.org.uk)
  - Working Together to Safeguard Children (2023): [Statutory Guidance Link](#)
  - EYFS Statutory Framework (2024): [Framework Link](#)
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## Emergency Contacts:

- **MAST / LADO:** 01422 393336
- **Out of Hours (EDT):** 01422 288000
- **Police:** 999 (Emergency) / 101 (Non-emergency)
- **NSPCC Whistleblowing:** 0800 028 0285

**If in Doubt, Always Report. You do not need proof; simply having a concern is enough to make a referral**

